AFFECTED POPULATION IN NUMBERS

**15.8 million**
Population in the 11 affected provinces including 1.7M refugees and 2.6M youth (15-24 age)

**4.1 million**
Women of reproductive age (estimate)

**226,000**
Currently pregnant women (estimate)

**25,000**
Expected births to happen within a month (estimate, under normal circumstances)

HIGHLIGHTS

- UNFPA is scaling up its services to reach those in dire need by engaging more mobile teams in earthquake response activities.
- Around 12,000\(^1\) individuals were reached with life-saving sexual and reproductive health (SRH) and gender-based violence (GBV) support, including dignity and maternity kits in Türkiye's earthquake-affected areas.
- UNFPA’s appeal for the earthquake response requests $19.7 million and aims to reach 1.5 million individuals needing life-saving humanitarian support. Only 39 per cent of the appeal has been funded so far.

SITUATION UPDATE

- Since the two devastating earthquakes on 6 February, almost 14,000 aftershocks have been recorded in south-eastern Türkiye, keeping the affected population under stress and fear.
- 11 provinces were affected by the earthquakes in southeastern Türkiye, including Kahramanmaraş, Adana, Adıyaman, Diyarbakır, Elazığ, Gaziantep, Hatay, Kilis, Malatya, Osmaniye and Şanlıurfa, with about 15.8 million inhabitants, including 1.7 million refugees. Of these, 9.1 million people have been directly affected.
- Over 3.3 million people\(^2\) are estimated to have left the affected provinces, including through personal means. Over 300 tent city areas (including almost 370,000 tents) and 209 container areas\(^3\) (with over 15,000 containers) have been set up by the authorities to meet shelter needs in the affected provinces.

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\(^1\) The number of individuals reached includes (i) around 9,000 individuals reached with SRH and GBV services at UNFPA supported service units, that was complemented by kits or RH commodities distribution and (ii) 3,000 individuals reached with dignity kits at reception centres distributed by Presidency Migration Management in collaboration with UNFPA.

\(^2\) Emergency response - Status review after Kahramanmaraş earthquakes, February 2023, INGEV

\(^3\) AFAD Press release as of 5 March 2023
The earthquakes caused severe destruction of health facilities and SRH supplies. According to an initial assessment by the Ministry of Health, in the 11 affected provinces, a quarter of hospitals (a total of 28) are heavily or moderately damaged, and 15 per cent of primary healthcare facilities (a total of 236) are not operational. According to WHO initial assessments, in the most affected districts of four provinces, over 40 per cent of the district health directorates, more than 70 per cent of family health centres and 50 per cent of migrant health centres are damaged. Moreover, around 60 per cent of OBGYN services are non-functional.

Only about 30 per cent of the pre-earthquake number of doctors and nurses are currently operational.

**EMERGENCY RESPONSE NEEDS**

- **Sexual and reproductive health needs**: Emergency response efforts must prioritise the urgent sexual and reproductive health needs of affected communities. The destruction of medical supplies has left healthcare providers ill-equipped to manage life-threatening conditions, especially emergency obstetric and newborn care. Additionally, based on estimations 300,000 people may require medication for sexually transmitted infections, and in such emergencies there will be need for sexual and reproductive health services to manage cases of gender-based violence, including clinical management of rape and access to emergency contraceptives.

- **GBV service provision and protection needs**: Addressing gender based violence is a crucial component of emergency response efforts. Women and girls are at heightened risk of violence, including domestic violence, sexual violence, and sexual exploitation, and reporting mechanisms are severely disrupted. Awareness raising sessions, education about rights and entitlements, and gender equality initiatives are necessary to support women in coping with increased caregiving responsibilities and limited access to basic needs. GBV Risk mitigation is crucial across all interventions to ensure that services do not put women and girls at further risk.

- **Key populations**: Addressing the needs and challenges of key populations from Turkish and refugee communities is critical. These groups are particularly at risk of facing discrimination and gender based violence while accessing life-saving services, further exacerbating their vulnerabilities. Failure to provide inclusive access can result in preventable injuries, illnesses and sometimes deaths. It is essential to engage with key populations to identify and address their unique needs and provide appropriate services.

- **Basic needs for hygiene and dignity supplies**: Access to basic necessities and dignity supplies is a significant concern in the earthquake-affected provinces. Private and safe toilet facilities, and menstrual hygiene products are crucial, particularly for women, for maintaining health and dignity. In the aftermath of the earthquake, the number of people who cannot afford to buy these products increased, further exacerbating the already severe problem of access to basic menstrual necessities

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4 UNFPA, [Menstrual Hygiene Management Among Refugee Women and Girls in Türkiye Research Report, 2022](https://www.unfpa.org.).
Prevention of Sexual Exploitation and Abuse: Sexual exploitation and abuse (SEA) is a critical concern during emergencies. The risk of SEA increases substantially, necessitating the establishment of clear structures and procedures to ensure compliance with a zero-tolerance policy. It is vital to inform affected communities about the risks of SEA and provide them with reporting mechanisms to ensure accountability and prevent impunity. This approach requires a comprehensive awareness-raising programme, including training for all response personnel, volunteers and partners. A transparent and safe reporting system that ensures confidentiality and protection for survivors and whistleblowers must be put in place, as well as an effective system to monitor and respond to allegations.

UNFPA RESPONSE

3,900 individuals reached with SRH services and counselling
5,100 individuals reached with GBV services and counselling
8,500 individuals reached with dignity and maternity kits distributed

5 UNFPA-supported static service units deliver SRH and GBV services
9 mobile outreach teams provide SRH and GBV services
1,350 reproductive health commodities distributed

Strengthening SRH & GBV service provision and coordination: UNFPA works closely with the Turkish Ministry of Health to ensure that SRH services remain available to all earthquake survivors. UNFPA procured and donated 10 tents to the Provincial Health Directorates for the establishment of health services coordination structures.

UNFPA-supported service delivery units: UNFPA and its implementing partners support the delivery of SRH and protection services for the most vulnerable group through 5 static service units in Adana (1), Diyarbakir (2), and Şanlıurfa (2). In addition, UNFPA supported 12 static service units around the country, namely in Mersin (1), Ankara (3), Eskişehir (2), Yalova (1), İzmir (2), Denizli (1), and Istanbul (2), where large numbers of people displaced from the earthquake area live. The service units are scaling up SRH and GBV services to accommodate the emergent needs of displaced populations.

Mobile outreach teams: UNFPA supports 9 mobile teams in Adana (1), Diyarbakir (1), Hatay (2), Şanlıurfa (2), Adıyaman (1), Kahramanmaraş (1) and Gaziantep (1) to provide SRH and GBV information and services, including dignity and maternity kit distribution in remote areas.

UNFPA provides SRH services and maternity kits at a temporary camp in Diyarbakir, Türkiye.
Photo: UNFPA Türkiye/Eren Korkmaz 2023
UNFPA with its static service units and mobile outreach teams ensures access to SRH and protection services and information for survivors in 7 out of the 11 affected provinces and another 7 provinces throughout the country.

**Scaling up the cash based interventions:** UNFPA started to provide cash for protection support for the vulnerable populations from both refugee and local community members who have been affected by the earthquake.

**Life-saving reproductive health commodities:** UNFPA works to ensure that SRH services and supplies are accessible in service delivery units and carefully monitors their stocks to guarantee uninterrupted delivery of services. 1,350 reproductive health supplies were provided to affected communities. The first part of the Inter-Agency Emergency Reproductive Health Kits shipment arrived in Türkiye and is under customs clearance.

**Dignity and maternity kits:** UNFPA reached out to over 5,500 individuals (including women, girls, young people and other vulnerable groups) with dignity and maternity kits that were distributed complementary to the provided services through UNFPA supported service units. In addition 3,000 individuals were reached with dignity kits in collaboration with the Provincial Migration Management. An additional 15,000 dignity kits arrived in Türkiye this week and UNFPA is working on a distribution plan in accordance with the Multi-sector Initial Rapid Needs Assessment (MIRA) findings.

**IN THE PIPELINE**

- **5,000 maternity kits** to reach 5,000 women and girls are on the way.
- **315 Inter-agency Emergency Reproductive Health Kits** covering the needs of a population of 1 million people, including 250,000 women of reproductive age, are being delivered.

**COORDINATION**

- UNFPA operates under the **Health and Protection sectors** of the UN Earthquake Response Coordination Mechanism. Currently the sectors are working on finalising the operational plans and the results frameworks in line with the Flash Appeal.
- **UNFPA leads the GBV Sub-Sector**, which operates under the protection sector, and is looking to identify an NGO as co-lead. The first meeting of the GBV Sub-Sector was attended by more than 70 participants from different organisations. The main discussion topics were related to the MIRA findings on protection and Accountability to Affected Populations. The GBV Sub-Sector is currently analysing the MIRA findings to identify the most vulnerable groups in the affected provinces and identify the areas for further assessments, e.g. special considerations for children, key populations, refugees, female-headed households, older people living alone and people with disabilities.
FUNDING UPDATE

$19.7 M required

$7.6 million, including UNFPA emergency funds, has been raised for the initial rapid response to cover life-saving SRH and GBV services, including Inter-Agency emergency RH Kits, dignity kits and maternity kits. That represents 39 per cent of UNFPA’s appeal for $19.7 million for the UNFPA earthquake response in Türkiye. UNFPA has initiated global and national donation campaigns targeting individuals and private sector donors that would like to support women and girls affected by the earthquake in Türkiye and the region.

The important gap in funding could have devastating consequences, with potentially significant impacts on the affected communities.

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