

WHO flash appeal

Earthquake response in Türkiye and Whole of Syria



Earthquake damage in Afrin, Syrian Arab Republic, 6 February 2023.
Photo: Ugur Yildirim / DIA via Getty Images



**World Health
Organization**

AT A GLANCE

People affected: 26 million (approximately)

- **15 million** people affected in Türkiye
- **10.87 million** people affected in Whole of Syria

People in need

- Almost **26 million** people exposed, of whom **5.08 million** are considered vulnerable (>345 000 older individuals, >1.4 million children)

Number of deaths: 23 367

- **18 342** deaths in Türkiye
- **5025** deaths in Whole of Syria

(data as of 10 February 2023)

Number of injured: 83 752

- **74 242** in Türkiye
- **9501** in Whole of Syria

(data as of 10 February 2023)

Health facilities damaged

- **15 hospitals in Türkiye** have suffered partial or heavy damage, assessments ongoing; field hospitals established
- **48 health facilities affected in northwest Syria**
- **At least 20 health facilities**, including 4 hospitals, have sustained damage (assessment ongoing)

Number of health cluster/sector partners

- **185 health** partners in Whole of Syria including 44 partners in the northwest operating from Gaziantep

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WHO'S IMMEDIATE RESPONSE PRIORITIES

- Ensuring access to the most vulnerable and affected populations
- Immediate trauma care for injured patients and post-trauma rehabilitative care
- Provision of essential medicines, emergency kits and supplies to fill urgent gaps
- Prevention and control of disease outbreaks, including through strengthening disease surveillance
- Access to mental health and psychosocial support
- Coordination of the international health response, including Emergency Medical Teams (EMTs) where requested
- Ensuring access to essential health services, particularly for women, children, the elderly and those living with noncommunicable diseases

WHO'S IMMEDIATE FUNDING REQUIREMENT

US\$ 42.79 million



A man and woman look at a collapsed building in Islahya, Türkiye, on 7 February 2023. ©WHO / Ibrahim Al Shikh Ali / Arete

Current situation and impact on health

A 7.7 magnitude earthquake struck at 04:17 local time on 6 February 2023, with its epicentre located in Pazarcık district in Kahramanmaraş province, Türkiye. Over 1200 aftershocks have since been reported. These are Türkiye's most powerful earthquakes since 1939.

The earthquakes have affected an area of about 400 km² including the big Turkish industrial cities of Gaziantep, Adana and the surrounding cities of Hatay, Malatya, Kilis, Diyarbakir and Adiyaman where approximately 15 million people (2021 census) live, with an additional approximately 2 million Syrian refugees. The earthquakes also affected northern governorates in Syria, including Aleppo, Hama, Latakia, Tartous and Idlib. These areas have been experiencing complex and protracted emergencies for nearly 12 years, with conflict and displacement, complicated by recent outbreaks of cholera, measles, and COVID-19, on top of the already overwhelmed health system.

These earthquakes are extraordinary both in terms of scale and immediate impact. Secondary impacts such as lack of shelter, exposure to severe winter weather conditions, overcrowded living conditions, shortages in power supply and disrupted water networks will exacerbate pre-existing health risks in the area — including disease outbreaks — and will contribute to increased mortality and morbidity. Continued aftershocks, poor weather conditions, fuel shortages, and damage to roads, power supply and communication infrastructure continue to hamper access and search and rescue efforts.

More than 23 300 deaths were reported across Türkiye and across all areas of Syria as of 09:00 CET on 10 February 2023 (numbers are rising by the hour) with more than 83 700 injured. A total of almost 26 million people may have been affected by the earthquakes, of which 5.08 million are considered vulnerable, more than 345 000 older individuals and more than 1.4 million children.

More than 4000 buildings collapsed in Türkiye. At least 15 hospitals have suffered partial or heavy damage. Those with risk of collapse have all been evacuated by emergency services with patients referred to facilities across the country and field hospitals established to provide continuity of care. The runway of Hatay airport was split and uplifted.

In Syria, many buildings have collapsed and many more were rendered unsafe for habitation due to damage. People were trapped in the cities of Aleppo, Latakia and Hama, initial reports indicate at least 20 health facilities, including 4 hospitals, have sustained damage (health facility assessments in northwest Syria are ongoing). Heavy snow and rain in the region are further exacerbating the situation, making it harder for refugees and IDPs living in tents, as well as those who are displaced from their homes due to damage and safety concerns. Fuel shortages and disrupted communications have already affected the capacity of civil defence teams to rapidly respond and risk delaying support provided by WHO and partners. Cross-border modalities into northwest Syria through the Bab-Al-Hawa border crossing were disrupted due to earthquake damage in the area, and partially restored on 8 February.

The Government of Türkiye has declared a 'level four alert' and appealed immediately for international aid, subsequently declaring a 3-month state of emergency in the 10 most affected provinces. Emergency services in Türkiye have rushed to search for survivors trapped under many collapsed buildings, but the scale of the disaster and the poor weather has challenged all response efforts.

The Government of Syrian Arab Republic has also declared a state of emergency. The Ministry of Foreign Affairs (MoFA) of Syrian Arab Republic has pledged unhindered approvals for UN missions to Aleppo, Hama, Latakia, and

Tartous to conduct assessments and to provide the necessary support for smooth entry of emergency goods, medicines and equipment into the country. Health partners in northwest Syria have described catastrophic damage with thousands of homes destroyed, leaving people homeless where there are 3 million vulnerable people in need (of whom 1.9 million, many of them women and children, were already living in camp settings). Many health partners and responders have suffered significant losses among their front-line workforce.

Casualties and injuries are expected to increase. Emergency medical services are overwhelmed with trauma patients. Essential health services have been severely disrupted, thereby increasing the risk of COVID-19, other respiratory infections, cholera and other waterborne diseases, measles and chronic/noncommunicable diseases.

Equally, there is a huge immediate and increasing need for mental health and psychosocial support services, as well as continued access to sexual, reproductive and maternal health care, ante-natal care, child health and assistance to people with disabilities. The health consequences of this disaster are unprecedented in both Türkiye and Whole of Syria, and will last well beyond the initial phase of the emergency.



Resilient family in Syrian Arab Republic. ©WHO

Main health threats/impacts

- Trauma-related deaths, injuries and disability from building collapse
- Hypothermia due to exposure, as well as diseases exacerbated by extreme winter conditions including cardiovascular, respiratory disease, and musculoskeletal disorders
- Increased mental health and psychosocial support needs
- Increased risk of infectious diseases:
 - Cholera (ongoing outbreak already in Syrian Arab Republic) and other waterborne diseases, due to disrupted access to safe water, sanitation, poor shelter and overcrowding
 - Measles (ongoing outbreak already in Syrian Arab Republic)
 - Infectious respiratory diseases, including COVID-19 and influenza, particularly in areas affected by overcrowding
- Damage and destruction of health facilities, limiting access to health care
- Increased morbidity and risk of complications related to pregnancy and childbirth due to interrupted obstetric and neonatal services
- Increasing levels of malnutrition
- Incidents of gender-based violence (GBV) which is normally exacerbated in emergency contexts
- Interruption of essential medical services due to an overwhelmed health system and damaged infrastructure

WHO response to date

In response to the devastating earthquakes impacting Türkiye and the Syrian Arab Republic, WHO is mobilized across the three levels of the organization, coordinating and working with UN agencies and partners. WHO has delivered 72 metric tons of trauma and emergency surgery supplies, including treatments, to both countries to support ongoing response efforts.

A first charter flight departed to Türkiye on 9 February carrying 37 metric tons of life-saving supplies, followed by a second flight to deliver 35 metric tons of supplies to the Syrian Arab Republic on 10 February. These life-saving supplies will be used to treat and care for 100 000 people as well as for 120 000 urgent surgical interventions in both countries. A third flight is scheduled to reach the Syrian Arab Republic on 12 February and expected to carry 37 metric tons of emergency health supplies to reach an additional 300 000 people.

WHO has released more than US\$ 16 million from the Contingency Funding for Emergencies, including US\$ 3 million within hours of the disaster, including for these chartered flights.

WHO is supporting the response with mental health and trauma response, preparedness and service provision for sanitation, disease surveillance and outbreak prevention and readiness, and ensuring continuity of essential health services.

WHO is also supporting its staff and their families in this challenging time, especially personnel in WHO's field office in Gaziantep, providing shelter whilst maintaining critical response functions in place.

Türkiye

- WHO Türkiye is chairing the UN-wide Emergency Response and Preparedness (ERP) Working Group for coordination of emergency response efforts, and WHO is in close coordination with the Disaster and Emergency Management Authority (AFAD) and the Ministry of Health.
- WHO's Emergency Medical Teams initiative has been activated to provide essential health care for the injured and most vulnerable affected by the disaster, in response to a request for international assistance issued by the Government of Türkiye on 6 February 2023. Twenty-one have been approved for deployment to affected areas in the country.¹

WHO's goal is to save lives in the immediate aftermath of the disaster, to minimize its downstream health consequences, including mental health, and to rapidly restore essential health services across all earthquake-affected populations. WHO will prioritize actions towards areas and communities with the greatest unmet health needs.



Rescue workers conduct search and rescue operations in Diyarbakir, Türkiye on 6 February 2023. Photo: Omer Yasin Ergin/Anadolu Agency via Getty Images

¹ USA Type 3, Egypt Type 2, India 2, Belgium Type 2, UAE Type 2, Uzbekistan Type 1+, Indonesia Type 2, Italy Type 2, Israel Type 3, Spain Type 2, Azerbaijan Type 1, Poland Type 1, Russia Type 3, Japan Type 2, Qatar Type 2, UAE, Type 2, England Type 2, Iran Type 2, Malaysia Type 2, France Type 2, Philippines Type 1

Whole of Syria

- WHO dispatched essential medicines and supplies to health facilities in Aleppo, Hama, Homs, Latakia and Tartous, in addition to the Syrian Arab Red Crescent (SARC). Supplies will enable the provision of 102 415 treatments, 300 trauma cases, in addition to 550 000 water disinfection tablets. Surgical and trauma kits weighing 0.6 tons were delivered to Aleppo Department of Health, while 11 700 and 13 433 items of medical supplies and equipment have been shipped to Latakia and Tartous respectively.
- Trauma emergency and surgical supplies have been distributed to 16 hospitals in northwest Syria on 6 February. Further supplies were readied to cross the Bab-al Hawa crossing point on 8 February.
- WHO is leading the Türkiye Cross-border Health Clusters, with 44 partners to assess critical needs and coordinate the acute earthquake response.
- As a first step, a trauma specialist has been deployed to Aleppo to provide support with assessing immediate surgical needs, strengthening existing services, advising on an effective referral system, and supporting Medevacs. Given the magnitude, additional experts are being deployed to support the trauma response ongoing in northwest Syria. Specialist deployments are also planned to support the response in Türkiye.
- Working closely with local health authorities in the Whole of Syria context, WHO is providing first-line support to affected communities, through mobile teams and at health facilities. The priority is to ensure that people in need have access to adequate medical care and essential medicines.

WHO's Türkiye response priorities

- In Türkiye, WHO is supporting the government-led response and working in close coordination with the Türkiye Ministry of Health (MoH) and the Disaster and Emergency Management Authority (AFAD).
- In close coordination with the Ministry of Health, continue to coordinate the deployment of emergency medical teams (EMTs).
- Provision of emergency medicines and supplies, including trauma kits to response teams across affected areas.
- Basic support to primary health care workers to ensure continuity of health service delivery including through the provision of tents, blankets, mattresses and other equipment.
- Expand access to Mental Health and Psychosocial Support (MPHSS) services through establishing mobile teams and facilities for service provision and refresher trainings for MoH staff on psychological first aid and MPHSS.
- Support re-establishment of essential services, management of respiratory and water-borne diseases.
- Provide trauma rehabilitation for affected populations and training of health care workers on rehabilitation.
- Support the deployment of mobile clinics and field type clinics to ensure continuity of essential health services including noncommunicable diseases (NCDs), HIV and Tuberculosis (TB).
- Expand access to sexual and reproductive health services, including response to sexual and gender-based violence.
- Establish women's and girls crisis centers in affected areas.
- Scale-up of early warning alert and response, surveillance and diagnostic capacity to mitigate the impact of infectious diseases.
- Strengthen infection prevention and control at health facilities treating affected populations.
- Deployment of mobile laboratories to support essential diagnostic services and infectious disease diagnosis
- Procurement of reagents, kits and consumables for specimen collection and diagnosis of water-borne diseases, respiratory diseases, skin infections for an expected surge of infectious disease cases in the areas hit by the earthquake.
- Rehabilitation of critical infrastructure in health facilities affected by the earthquake.
- Support MoH's Health Promotion Department and Press Office in the area of risk communication and community engagement.



WHO logisticians in Latakia dispatch medical supplies to earthquake-affected areas. ©WHO

WHO's Whole of Syria response priorities

- WHO will use all modalities possible to reach unmet needs through the most direct and effective means.
- In Aleppo, Hama, Lattakia and Tartous, as well as other affected areas, WHO will:
 - Support life-saving trauma care, including through provision of trauma and surgical kits
 - Ensure coordination and leadership of the health response, inclusive of technical support to the Public Health Emergency Operations Centre at Ministry of Health (MoH)
 - Bolster early warning and disease surveillance, Rapid Response Teams and case investigation for early detection, investigation and timely response to disease outbreaks, particularly in high-risk settings
 - Administer oral cholera vaccine (OCV) to hotspot areas demonstrating resurgence of cholera
 - Provide timely, strategic health information for evidence-based decision-making
 - Support access to clean water through provision of disinfection tablets and water quality monitoring
 - Ensure infection prevention and control within emergency response operations, and continuing essential health services, inclusive of waste management
 - Support the management of severe acute malnutrition with medical complications
 - Expand access to Mental Health and Psychosocial Support (MHPSS) services through establishing an MHPSS hotline, mobile teams, strengthened referral pathways, rapid refresher trainings on psychological first aid
 - Strengthen risk communication and community engagement (RCCE), particularly regarding topics such as mental health, infection prevention and control and disease outbreaks
 - Expand logistics and procurement capacity, including expanded crossline shipments
 - Replace damaged specialized medical equipment and ambulances
 - Support continuity of essential health services, particularly reproductive health care, expanded programme on immunization (EPI); and treatment of noncommunicable diseases
 - Implement WHO's core commitments to prevention of sexual exploitation and abuse
 - Ensure safety and well-being of staff
- In northwest Syria, WHO will expand cross-border operations to cover:
 - Expansion of health partner presence and expertise to affected areas
 - Provision of emergency medical supplies, including trauma and emergency surgery kits (TESK), Interagency Emergency Health Kits (IEHK), cholera kits and noncommunicable diseases, anaesthesia and essential medicines, to cover the earthquake-related needs for 3 months, and support continuity of health-care delivery in northwest Syria, considering the increased health service needs
 - Enhanced surveillance and deployment of rapid response teams for early detection, prevention and containment of ongoing outbreaks of cholera, measles, COVID-19, leishmaniasis, hepatitis A
 - Ensure access to mental health and psychosocial support (MHPSS) services
 - Support critical gaps in health facilities, including the blood banks
 - Mobilize mobile clinics, keeping in mind that there will be new displacements of population in need of health services
 - Support operation of the emergency referral network including human resources, operational support and logistics, and fuel for ambulances
 - Rehabilitation of critical infrastructure in health facilities affected by the earthquake
 - Support rehabilitation units for people affected or disabled by the earthquake, including the provision of prosthetics
 - Strengthen health facilities' WASH-related activities, including the distribution of chlorine tablets and increased focus on a possible worsening of the ongoing cholera outbreak across the country



Infrastructure damaged by the earthquake. ©WHO

Preliminary estimated funding requirement for immediate and urgent health needs as of 10 February 2023, based on initial needs assessments (US\$)

Strategic Priorities/Activities	Türkiye	Syrian Arab Republic: WHO response led in Damascus	northwest Syria cross-border response
Provision of essential medicines and supplies (trauma emergency surgical kits (TESK), interagency emergency health kits (IEHK), noncommunicable diseases (NCDs) and ICU kits, anesthesia medicine, cholera drug and lab diagnostic kits)	9 500 000	4 270 500	5 417 000
Assessment and rehabilitation of health facilities affected by the earthquake	1 000 000	52 650	963 000
Replace damaged specialized medical equipment and ambulances		4 680 000	
Meeting urgent trauma care needs and emergency health care via deployment and coordination of Emergency Medical Teams and mobile clinics	1 600 000	772 200	891 000
Mental health and psychosocial support, including mental health supplies	1 200 000	1 126 128	508 000
Support continuity of essential health services and health operations, including management of severe acute malnutrition (SAM) with complications	1 500 000	883 350	1 072 000
Surveillance, early warning, alert and response and health information management, including oral cholera vaccines	500 000	1 955 655	535 000
Critical infection prevention and control and water, sanitation and hygiene-related activities, water chlorine	600 000	387 270	214 000
Emergency coordination, duty of care, deployment of staff and enabling functions	1 000 000	1 352 520	107 000
Risk communication and community engagement	200 000	127 998	212 000
Prevention of sexual exploitation and abuse	50 000	58 500	54 000
Sub-total	17 150 000	15 666 771	9 973 000
Total WHO funding requirement	42 789 771		



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