# ANNUAL REPORT ON THE USE OF CERF GRANTS IN TURKEY 2011 FOR VAN EARTHQUAKE

<table>
<thead>
<tr>
<th>COUNTRY</th>
<th>TURKEY</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESIDENT/HUMANITARIAN COORDINATOR</td>
<td>Shahid Najam</td>
</tr>
</tbody>
</table>

## I. SUMMARY OF FUNDING IN 2011 – US$ 

<table>
<thead>
<tr>
<th>Funding</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Total amount required for the humanitarian response</td>
<td>25,000,000</td>
</tr>
<tr>
<td>2. Breakdown of total response funding received by source</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>2.1 CERF</td>
<td>3,484,733</td>
</tr>
<tr>
<td>2.2 COMMON HUMANITARIAN FUND/EMERGENCY RESPONSE FUND (if applicable)</td>
<td>N/A</td>
</tr>
<tr>
<td>2.3 OTHER (Bilateral/Multilateral)</td>
<td>N/A</td>
</tr>
<tr>
<td>2.4 TOTAL</td>
<td>N/A</td>
</tr>
<tr>
<td>3. Breakdown of funds received by window</td>
<td></td>
</tr>
<tr>
<td>1. First Round</td>
<td>N/A</td>
</tr>
<tr>
<td>2. Second Round</td>
<td>N/A</td>
</tr>
<tr>
<td>✔ Rapid Response</td>
<td>3,484,733</td>
</tr>
<tr>
<td>4. Please provide the breakdown of CERF funds by type of partner</td>
<td></td>
</tr>
<tr>
<td>4.1 Direct UN agencies/IOM implementation</td>
<td>3,384,583</td>
</tr>
<tr>
<td>4.2 Funds forwarded to NGOs for implementation</td>
<td>107,000</td>
</tr>
<tr>
<td>4.3 Funds forwarded to government partners</td>
<td>N/A</td>
</tr>
<tr>
<td>4.4 TOTAL</td>
<td>3,484,733</td>
</tr>
</tbody>
</table>
II. SUMMARY OF BENEFICIARIES PER EMERGENCY

<table>
<thead>
<tr>
<th>Total number of individuals affected by the crisis</th>
<th>Individuals</th>
<th>1,035,418</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female (IOM, WHO, UNICEF)</td>
<td>440,873</td>
<td></td>
</tr>
<tr>
<td>Male (IOM, WHO, UNICEF)</td>
<td>478,167</td>
<td></td>
</tr>
<tr>
<td>Total individuals (Female and male) (UNHCR,IOM,WHO,UNICEF)</td>
<td>1,103,883</td>
<td></td>
</tr>
<tr>
<td>Of total, children under 5</td>
<td>164,843¹</td>
<td></td>
</tr>
</tbody>
</table>

III. GEOGRAPHICAL AREAS OF IMPLEMENTATION

Earthquake area i.e. Van Province, Ercis and Muradiye District. The UN Country Team provided support to displaced populations in 20 cities throughout Turkey (including Istanbul, Antalya, Mersin, Sanliurfa, Mugla and Erzurum).

IV. PROCESS AND CONSULTATION SUMMARY

1) Was the CERF report discussed in the Humanitarian and/or UN Country Team and by cluster/sector coordinators?
   YES ☒ NO ☐

   Remarks:

2) Was the final CERF report shared for review with in-country stakeholders (i.e. the CERF recipient agencies, cluster/sector coordinators and members and relevant government counterparts)?
   YES ☒ NO ☐

   Ministry of Foreign Affairs, Ministry of Health, Ministry of Interior, Ministry of Education

¹ The total number of beneficiaries and children under 5 who were assisted still do not compute accurately.
V. ANALYSIS

1. The humanitarian context

On October 23 and November 9, 2011, two earthquakes struck in the eastern province of Van, measuring 7.2 and 5.7, respectively. According to the Disaster and Emergency Situations Directorate of Turkey (AFAD), the earthquake killed 644 and left more than 4,000 people injured. Ercis, a town near Van, was hit hardest by the violent shaking. The earthquakes coincided with the advent of harsh winter weather conditions. More than 15,000 families were confirmed to not have housing and lacked a basic winter kit for the fast approaching winter. With heavy snowfall and temperatures reaching 10 – 15 degrees below zero, provision of winter kits was essential to saving lives and providing comfort in the months when the harsh climate would make conditions even worse for thousands of earthquake-affected families in Ercis district, Central Van and surrounding villages in Eastern Turkey.

The earthquakes left most of the population of an area inhabited by some 500,000 people – almost half of them children – homeless, as several aftershocks prevented people to use damaged or possibly damaged buildings. In all, 296,175 school-aged children (including 164,843 under-five) were affected. A reported 30 percent of the population left the affected area, at least temporarily. Economic and social life was seriously interrupted. As a result of the earthquake, the Ministry of National Education (MoNE) announced the closure of all schools and the university until November 14, 2011.

With homes destroyed, schools severely damaged, and friends and family members killed, missing or injured, the familiar comforts, daily routines and protection mechanisms that were once a part of the lives of children were disrupted. In addition, reports surfaced of children experiencing psychological distress.

The mental health of the affected population required attention as well. Psychosocial support services were to be provided for different age groups. The Turkish Red Crescent (TRC) deployed its psychologists and psychosocial support volunteers to VAN. The staff came from different provinces of Turkey and were identified and mobilized by the specialists of the Society of Turkish Psychologists, Society of Social Service Specialists, The Psychiatric Association of Turkey, Turkish Psychological Counselling and Guidance Association and Youth Mental Health Association of Turkey which are all members of the “Union of Disaster Psychosocial Services” that acts under the TRC.

As per TRC reports, the reconstruction activities in the affected areas started in November: the preparations of the foundations for the permanent concrete houses are currently taking place and reconstruction is foreseen to be completed within a year – all funded by the national sources. The municipalities are repairing the damaged roads from their own funds.

As of 8 February 2012, work has intensely continued in order to relocate the affected population into container cities. Based on this framework, 28,971 containers have been ordered for manufacturing, 26,291 of them have been transferred, and 22,253 have been deployed to affected area. 133,762 citizens have been relocated into these containers as reported by AFAD.

Twenty-nine points in Van City centre and five points in Ercis District have been identified as container areas with self-sufficient services. The protection and assistance needs of displaced persons living in these containers have been addressed mainly by providing education, health, electricity, water, heating, clothing and food (three meals per day).

The UN Country Team participated in rapid response and recovery efforts following the earthquake. Although Turkey – a middle-income country with substantial skills, resources and experience in handling emergency response, especially earthquakes, initially responded without outside assistance. The Government later approached selected organizations, including the UN, some days after the initial event. In close cooperation with government, UN agencies have been providing shelter, health, NFI, and psychosocial support.
2. Provide brief overview of CERF’s role in the country

The CERF package was designed based on information collected from the Turkish government and the Turkish Red Crescent Agency and on rapid assessment missions which the agencies were able to join with government-line ministries. Humanitarian needs were prioritized based on these sources and also on specific government requests for assistance. The following priority sectors were identified: emergency and transitional shelter, education and mental health and psychosocial support.

This CERF grant request aimed to fulfill the following objective: Provide time-critical assistance to the earthquake-affected population, focusing on their shelter, educational and mental health and psychosocial support.

CERF also allowed agencies to provide timely support to the government response and paved the way for additional mobilization of resources from the donor community to enlarge UN agency programmes.

Some UN agencies undertook considerable efforts to redirect funds from their regular programmes towards the emergency response and to mobilize donor resources directly. In this respect, UNHCR, UNFPA, UNICEF, OCHA and IOM were able to re-allocate some in-kind supplies and funds to cost-share interventions of different humanitarian assistance, mostly in the shelter domain. CERF helped UNICEF, WHO and IOM to provide psychosocial, health and education support targeting different groups; similarly, CERF helped UNHCR to provide shelter support.

3. What was accomplished with CERF funding

The UNHCR Project “Rapid Relief Assistance and Psycho-social Support to Earthquake Displaced Households in Eastern Turkey” contributed to the protection, and health needs of the affected population.

NFI (Non-Food items)

Working in coordination with the Prime Ministry’s Disaster and Emergency Management Agency (AFAD), the Turkish Red Crescent Agency issued an appeal on 25 October 2011, inviting the international community and partners to assist them with the following in alleviating the suffering of the victims:

- Winterized family-type tents 40,000 units
- Transitional shelter units 40,000 units
- Blankets 200,000 units
- Sleeping bags 50,000 units

In addition to this appeal, the Government of Turkey formally made an appeal through diplomatic channels for international support and assistance.

UNHCR in Turkey mobilized efforts in order to respond to the formal assistance appeals by providing NFIs to reinforce the Kizilay stockpiles in helping the earthquake-affected population, including the persons of concern to UNHCR.

After examination of the situation in Van, Turkey, UNHCR established a formal agreement with the Turkish Red Crescent Agency (TRCS) to immediately provide 2,000 family tents and 40,000 blankets to TRCS through an airlift – with the use of CERF funds. These NFIs were handed over in four lots as of 2 November 2011 – 10 days after the earthquake.

In addition, UNHCR provided the formal agreement to TRCS for using the previously handed-over 2,000 family tents, 10,000 blankets and 10,000 sleeping mats in replenishment of the stockpiles of TRCS which were utilized heavily by the Government of Turkey, in donating to Somalia, to North African emergencies and to Syrian nationals coming to Turkey.
In coordination with the Turkish Red Crescent (TRC) and AFAD, who were the lead response coordinators, and based on findings and key observations in the area, IOM supported the response from the onset of the crisis with the provision of non-food-items and by refurbishing the containers in the tent cities. The NFIs were mainly blankets, camp beds and kitchen sets for 2,500 families, protecting them from the extreme weather conditions.

CERF funding allowed IOM to provide assistance to 2,500 families (17,500 individuals) from Van displaced population through the provision of NFIs. IOM with its partner, Turkish Red Crescent (TRC) refurbished the containers for more than 2,500 families through the distribution of:

- 2,500 camp beds procured and distributed in camp cities,
- 5,000 blankets procured and distributed in the containers, and
- kitchen sets for 1,000 families to refurbish their shelters

The beneficiaries were identified by TRC in close coordination with governorate and in accordance with the vulnerability selection criteria applied by TRC. The distribution equally benefited men, women, boys, girls and elderly.

To provide the above-mentioned NFIs, IOM signed an agreement with TRC (Turkish Red Crescent) on 30 November for the distribution of the items since TRC had direct involvement in the humanitarian assistance in Van and was the lead actor. Items were bought from private companies in Istanbul, Izmir and Kayseri based on IOM internal procurement procedures. The above mentioned items were delivered in Van between the period of 9-16 December 2011 noting that the trip to Van took between two and three days. IOM staff was present at both sites to monitor the loading of the goods at the warehouse and follow closely with TRC the distribution of the items.

**Psychosocial component**

Originally, IOM had selected HRDF (Human Resources Development Foundation) as implementing partner of its CERF-funded psychosocial response activities. HRDF have been operating in Van for over five years, providing counselling, educational and psychosocial activities, and had an agreement with IOM for previous different projects. It was agreed, prior to the submission of CERF, that HRDF would be responsible for providing direct psychosocial support to the affected populations through mobile teams deployed in Van. However, HRDF withdrew its collaboration on November 26, 2011, soon after the allocation of CERF contribution, for logistical reasons and problems of capacities.²

Therefore, IOM initiated a tripartite coordination with the Ministry of Family and Social Policies – who would be responsible for psychosocial activities on central level, the Governorate of VAN – who would serve as local coordinator of earthquake intervention activities, and the Union of Disaster for Psychosocial Services (UDPS) – who would be the official association working in close cooperation with different Ministries and stakeholders already involved in providing assistance to affected population.

This coordination resulted in the identification of the Van-displaced population in more than 20 cities throughout Turkey (including Istanbul, Antalya, Mersin, Sanliurfa, Mugla and Erzurum) which required assistance. Consequently, an agreement was signed with EVSAD, a partner association for the Ministry of Family and Social Policies, to provide social support to vulnerable people.

In collaboration with UDPS and EVSAD, IOM has been supporting the government in providing psychosocial support through family visits to more than 4,500 displaced families. The psychosocial needs of these families are assessed during the family visits.

² The CERF should have been notified about a change in implementing partner - . CERF guidelines were followed carefully and we regret that this information reached CERF only during interim report. The fact that the change was effecting less than 15 per cent of the budget we did not consider to notify CERF about it. However, it is good to mention that any change in activities (partner or geographical info) was shared with RC office during coordination meeting. …of exiting CERF budgets are considered acceptable, and budget modifications that involve a cumulative shift of less than 15 per cent of the direct project costs (i.e. the project total less project support costs) will not require the prior approval of the ERC…
Despite the delay in the agreement’s signature, activities undertaken for the psychosocial component will be achieved within the timeline of the CERF project.

The UNICEF Project, “Providing Safe Educational and Recreational and Psycho-social Care for Children Affected by the Van Earthquake”, contributed to the protection of children and adolescents in the post-disaster context. The rapid allocation of funding helped to get children and youth back into school rapidly, and facilitated the normalization of their lives.

In this context, UNICEF procured specialized containers to serve as child-friendly temporary classrooms and appropriate learning environments for the earthquake-affected school-age children. Initially, UNICEF provided 80 containers adapted for use as 40 classroom units, plus 11 containers designed as toilet and washroom units. Classroom units have been installed in the yards of two schools.

UNICEF also supported the psychosocial support programmes of MoNE and the Ministry for the Family and Social Policies (MFSP). Four of the containers procured by UNICEF have been made available to the Ministry of National Education to provide psychosocial support in the region. These are now in place on MoNE’s Guidance and Research centre premises in Van. UNICEF has also procured and delivered eight container-based living units for 24 guidance teachers/guidance centre staff. Two of the eight containers, which serve as living units, have been delivered and installed in Ercis, and the remaining six in Van. UNICEF has also delivered 201 ECD kits and 200 Recreational Kits, each containing sufficient materials for 50 and 90 children, respectively. Currently, these kits are used for programmes run by both MoNE and MFSP.

Two series of trainings for 186 Psycho-Social Support experts of both MoNE and MFSP were conducted in Ankara in order to prepare the experts for their mission to Van. In Van they will train teachers in psychosocial support as well as to provide psychosocial counselling. Another batch of 95 psychosocial experts from MFSP was trained in mid-January 2012.

The two areas of intervention will have an impact far beyond the completion of the earthquake rehabilitation phase. The container classrooms, properly maintained, have a long shelf life that can provide auxiliary or overflow classrooms for schools. The psychosocial training-of-trainers will have created a corps of professionals that can be deployed in future emergencies. The intervention has also helped institutionalize further the concept of psychosocial support for children in Turkey and among decision-makers and emergency response organs: this could already be seen in the presentations of key agencies connected to the GoT in February 2012 (i.e. Turkish Red Cross, etc.)

The WHO Project, “Immediate Mental Health and Psycho-social Support for Affected People in Van Earthquake, contributed to the immediate mental health and welfare of the affected people in Van earthquake in Turkey” (total amount of $178,861).

The project proposal was initially discussed with the Ministry of Health (MoH) to avoid duplication and overlapping. On 16 November 2011, WHO received a total contribution of $178,861 for this project, which was endorsed by the MoH on 2 December 2011.

This project enhanced the mental health and psychological support through improved coordination, counselling and treatment capacities of local health/social workers as well as the temporary deployed mental health specialists from all over Turkey.

During the project period the following key activities were undertaken by WHO in close collaboration with the MoH:

Rapid needs assessment mission/s to Van and Ercis were carried out to identify existing training needs and gaps of local health care staff. Mission participants were, besides WHO experts, also representatives of MoH, of the provincial health directorate, local healthcare staff and professional organizations including NGO’s. As result, three categories of health care workers were identified and were involved in the trainings on emergency psychiatric and psychological care:
- Psychiatrists and psychologists,
- Family physicians, general practitioners
- Nurses and social workers

Rapid needs assessment missions to Van and Ercis were carried out to identify existing training needs and gaps of local health care staff. Mission participants were, besides WHO experts, also representatives of MoH, provincial health directorate, local healthcare staff and professionals’ organizations including NGO’s. As result three categories of health care and social workers were identified which had to be involved in the training on emergency psychiatric and psychological care?

- Psychiatrists and psychologists,
- Family physicians/general practitioners
- Nurses and social workers

WHO identified the trainers from different universities and from the Union of Psychosocial Support in Disasters, an umbrella NGO, one of the most active in Van earthquake area. Training material, using WHO standards and recommendations, was elaborated by the Turkish Psychiatric Association which is one of the six associations under the umbrella of the Union.

WHO oversaw the technical organization including decision on the training content, identification of trainers and conducting of preparatory meetings with partners and stakeholders. WHO also was responsible for the coordination of the mental health assistance to avoid gaps and overlapping with other partners.

The training material was adjusted to local needs and the training sessions started on 3 February 2012. Due to the limited number of available staff, local health authorities decided to provide psychological support service not through mobile teams (as planned originally) but through active outreach but through the existing primary health care system. Therefore family physicians and nurses were included in the trainings.

In the original plan, CERF activities on mental health and psychological support were supposed to be organized directly by WHO directly with Ministry of Health building on the existing capacity of the provincial health directorate as well as upon the temporary deployed mental health specialists from all over Turkey.

Due to security restrictions imposed by UNDSS regarding the use of buildings in the earthquake zone, the venue of the trainings had to be changed on short notice. Thanks to the cooperative approach of the local municipality the trainings could be carried out using the tents of the Turkish Red Crescent.

However, after a few weeks, WHO was informed by the provincial health directorate that due to the bad weather conditions it was unacceptable to continue the trainings in tents – particularly as those tents were for temporary use and would be removed. Therefore, on 22 February 2012, in agreement with the Ministry of Health it was decided to outsource the organization of training activities.

Therefore, considering the security situation in Van and very few partners available to work in this sector, in agreement with the Ministry of Health, on 12 March 2012 the Turkish Psychiatric Association, according to the planned schedule, was contracted by WHO to organize and conduct the remaining the training activities according to the planned schedule.

Those challenges slightly delayed the implementation of the project, however, activities by WHO for the mental health and psychosocial component were finalized within the timeline of the CERF project.

A final closing event was jointly organized with WHO, UNICEF, IOM and UNHCR.

4. **An analysis of the added value of CERF to the humanitarian response**

**Added value of CERF**

NFIs (tents, blankets and sleeping mats) were delivered 10 days after the earthquake and formal agreement reached to divert the use of stock-piled NFIs from the Turkish Red Crescent Agency (TRCS). These both contributed to the emergency assistance provided by the Turkish Red Crescent Agency and coordinated by
the Prime Ministry’s Disaster and Emergency Management Agency. As a result of the CERF’s funds, 20,000 persons affected by the earthquake were provided shelter.

The number of beneficiaries was more than envisaged; almost 17,500 persons benefited from CERF funds. The NFIs reached the beneficiaries in around 20 days from the signature of the agreement with TRC. The provision of NFIs helped the affected population. The provision of psycho-social services helped to improve the health conditions of the affected population, increasing their resilience and chances of survival. The crucial benefit of the CERF was the rapid allocation of the funds, which allowed a quick response and helped meet the most critical needs of the affected population. CERF funds helped improve the timely implementation of interventions and provided essential humanitarian services and assistance, ensuring that the physical and social needs of the earthquake survivors were addressed.

**Coordination**

Coordination meetings were organized among UN agencies involved in the CERF projects: planning of the activities, receipt of funds and project implementation. Weekly meetings were organized in close cooperation with government entities on both local and central levels to identify gaps and to find the appropriate way to respond to the needs.

In addition, technical meetings took place between the agencies to synergize and complement interventions and to avoid overlap.

**Monitoring**

UNHCR NFIs were delivered to TRCS under an agreement. UNHCR received detailed information and feedback on the transport, delivery and distribution of the NFIs to the persons in need.

Regular monitoring of the project implementation had been carried out by IOM staff members from the various units (Operations, Projects and Psychosocial). Staff members monitored the provision of the services implemented through TRC. This enabled IOM to ensure that NFI items were provided to people in a timely manner. The distribution of relief items was implemented quickly and within 20 days from the signature of agreement with TRC.

In addition, IOM-Ankara regularly sent staff to the sites and organized four monitoring visits to the area. One such visit was conducted by IOM’s HQ Senior representatives, an emergency and a technical expert in mental health and psychosocial support.

**a) Did CERF funds lead to a fast delivery of assistance to beneficiaries? If so how?**

YES ☑ NO ☐

While the initial response was almost entirely handled by the GoT, external agencies were requested to meet medium-to long-term needs. CERF funded allowed for timely implementation of these activities.

**b) Did CERF funds help respond to time critical needs?**

YES ☑ NO ☐

**Shelter**

CERF funding supported UNHCR’s immediate response to the appeal by the Turkish Red Crescent Agency in order to provide shelter to 20,000 persons affected by the earthquake. Winterized tents have helped increase chances of survival.
CERF funding allowed UNICEF to respond to Turkish Government requests for assistance in two areas: rehabilitation of the education infrastructure and strengthening of psychosocial support for children. Affected children’s mental health was ensured through psychosocial support and their resilience increased. Provision of educational structure helped them to sustain their lives normally in an environment that is healthy and capable of coping with dire weather conditions.

CERF funding that was approved on November 8, 2011 and disbursed shortly thereafter provided critically-needed assistance to earthquake relief and rehabilitation efforts in eastern Turkey. CERF-funded supplies helped narrow gaps in the areas of education and child protection. UNICEF’s efforts were integrated into the on-going, medium-term rehabilitation work and did not create additional coordination burdens for the government.

**Education**

CERF funding was used primarily in this sector to procure specialized containers, which serve as temporary classrooms for the earthquake-affected children, thereby allowing them to resume their schooling in a timely, warm and safe manner. Notably, the government decided to use specialised containers as opposed to other structures like tents to serve as temporary classrooms.

**Child Protection**

CERF funding was also used to provide psychosocial support to all children affected by the emergency, including those who lost family members and friends. In view of the psychological impact of the earthquake, MoNE prioritized psychosocial care for distressed children and their caregivers. Within this framework, UNICEF, in close collaboration with MoNE and Psycho-Social Services Unions, adapted the existing emergency psychosocial support package, which was jointly developed prior to the earthquake. Teachers are being trained to provide psychosocial support and counselling to the affected children. In addition, UNICEF printed and distributed psychosocial materials, and covered transportation and logistics costs to the beneficiaries. Finally, 200 Early Child Development (ECD) kits and 201 Recreational Kits were procured and delivered to Kizilay, MoNE and MFSP.

**Health**

CERF funding allowed WHO to respond to Turkish Government requests for assistance in strengthening of mental health and psycho-social support for health/social care workers to provide immediate protection and recovery services to the earthquake-affected population.

This timely and effective intervention aimed to provide on-the-spot assistance and to reduce the number of long-term and serious psychological problems of the affected population by immediate action to strengthen the reach-out of mental health services in this area. It also allowed a considerable expansion of the reach-out immediate mental health services to the affected population and to the whole population living in the area by training family doctors, nurses, social workers in psychosocial support in addition to the psychiatrists and the psychologists.

As the Ministry of Health and the Ministry of Family and Social Policy provide most of the mental health services and psychosocial support services in earthquake area, the rapid allocation of funding through this project provided emergency-tailored training of local health/social care workers about early recognition of mental disorders related to earthquake trauma. It also supported the recognition and rehabilitation of psychological disorders and to strengthen and expand workers’ capacities in providing psychosocial emergency services to the local affected population.

Since health/social care workers reported that trainings helped them for identifying psychological distress and for helping other people with psychological distress, peer support meetings were also arranged for PHC doctors and mental health professionals in order to prevent burnout and improve their own psychological well-being. WHO continued to provide technical assistance to the Ministry of Health and the Ministry of Family and Social Policy on reforming services for people living with mental health disorders and disabilities. Therefore, this set of emergency-tailored training activities have alleviated immediate suffering and supported health/social care workers affected by the earthquake. It also has yielded a longer-term impact with the considerable expansion of
mental health services to affected populations and their communities by providing trained family doctors, nurses, social workers, psychiatrists and psychologists.

c) Did CERF funds result in other funds being mobilized?
YES ☒ NO ☐

Additional funding was received by UNICEF Turkey by the Dutch National Committee for UNICEF and the governments of Brazil. The government of Kuwait provided funding to UNDP.

d) Did CERF improve coordination amongst the humanitarian community?
YES ☒ NO ☐

CERF funds strengthened partnerships for emergency response and boosted UN’s relationships and image with implementing partners.

CERF projects on mental health and psychosocial support contributed to improve the coordination of the Ministry of Health and the Ministry of Family and Social Policy with UN agencies and NGOs at the local level. Coordination meetings were organized among UN agencies involved in the CERF projects. Weekly meetings were organized in close cooperation with government entities on both local and central levels in order to identify gaps and find appropriate ways to respond to needs and to find common solutions to overcome obstacles.

Coordination of psychosocial support activities took place among CERF partners and especially IOM and UNICEF. Due to UNDSS security concerns, some partners used the Union of Psychosocial Support in Disasters for conducting training activities. Beneficiaries were different as both IOM (families) and UNICEF (children) worked with Ministry of Family and Social Policy and WHO (health/social workers) with Ministry of Health and the Ministry of Family and Social Policy. A final closing event was jointly-organized with WHO, UNICEF, IOM and UNHCR to present the final result achieved from the mental health/psychosocial projects.

VI. LESSONS LEARNED

<table>
<thead>
<tr>
<th>LESSONS LEARNED</th>
<th>SUGGESTION FOR FOLLOW-UP/IMPROVEMENT</th>
<th>RESPONSIBLE ENTITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>TRC remains an efficient, transparent implementing partner in emergency settings</td>
<td>Enhance the agreement between UN agencies/IOM with Red Cross/ Red Crescent due to the timely and effective response this INGO can provide in emergencies.</td>
<td>UN agencies/IOM</td>
</tr>
<tr>
<td>CERF has added value in middle- income countries with high-risk of natural disasters.</td>
<td>Advocate for CERF projects in middle income-countries that are in high-risk of natural disasters.</td>
<td>UN agencies/IOM</td>
</tr>
<tr>
<td>Due to potential occurrence of disaster, the activation of cluster approach may lead to better coordination</td>
<td>Advocate for the cluster approach among ministries and in coordination with AFAD</td>
<td>UN agencies/IOM</td>
</tr>
<tr>
<td>Necessity to publish a comprehensive report of the Van earthquake situation</td>
<td>Launch a comprehensive report on identified needs, activities (with visuals) and lessons learnt undertaken and share it with all stakeholders</td>
<td>AFAD/Line ministries/UN</td>
</tr>
<tr>
<td>Coordination between local and central government and NGO/UN agencies was quiet complex.</td>
<td>Establish an efficient coordination mechanism between all stakeholders involved in emergency response</td>
<td>AFAD/Line Ministries/Governorate/UN agencies/IOM/NGO</td>
</tr>
<tr>
<td>Change strategies during project implementation</td>
<td>Project activities were reviewed and adjusted according to local authorities’ needs to reach out beneficiaries and ensure project feasibility in the earthquake area.</td>
<td>Government, local authorities, WHO</td>
</tr>
<tr>
<td>Container Installation</td>
<td>Power shortages and cold weather caused pipes to freeze and a lack of heating in some container classrooms. In future emergencies, it may be necessary to explore alternative power sources, such as solar</td>
<td>UNICEF</td>
</tr>
<tr>
<td>------------------------</td>
<td>------------------------------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Monitoring and Evaluation arrangements</td>
<td>UNDSS Security clearance procedures as of March 2012 did not allow for overnight stays in the affected area, meaning that Monitoring and Evaluation documentation visits were limited to one day. Proper arrangements to outfit a container or other secure accommodation space should be arranged early in the implementation phase given the current environment.</td>
<td>UNICEF</td>
</tr>
</tbody>
</table>
## ANNEX I. INDIVIDUAL PROJECT RESULTS BY AGENCY

<table>
<thead>
<tr>
<th>CERF PROJECT NUMBER</th>
<th>Total Project Budget</th>
<th>Beneficiaries</th>
<th>Gender Equity</th>
</tr>
</thead>
<tbody>
<tr>
<td>11-IOM-045</td>
<td>$503,542</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PROJECT TITLE</strong></td>
<td></td>
<td><strong>Targeted</strong></td>
<td>Assistance was delivered in accordance with the vulnerability selection criteria applied by TRC. The distribution equally benefited men, women, boys, girls and elderly.</td>
</tr>
<tr>
<td>Rapid Relief Assistance and Psychosocial Support to Earthquake Displaced Households in Eastern Turkey</td>
<td><strong>Total Funding Received for Project</strong> $503,542</td>
<td><strong>Reached</strong></td>
<td></td>
</tr>
<tr>
<td><strong>STATUS OF CERF GRANT</strong></td>
<td><strong>Amount disbursed from CERF</strong> $503,542</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ongoing</td>
<td></td>
<td><strong>Individuals</strong> 5,500</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Female</strong> 3000</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Male</strong> 2500</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Total individuals (Female and male)</strong> 5,500</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Of total, children under 5</strong> Info not available</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>TOTAL</strong> Info not available</td>
<td></td>
</tr>
</tbody>
</table>

### OBJECTIVES AS STATED IN FINAL CERF PROPOSAL

To provide non-food-items winter kits to protect particularly vulnerable earthquake-affected families from severe winter temperatures and to provide direct psychosocial support, psychological first aid and counselling to individuals and families in the earthquake-affected areas in order to prevent avoidable morbidity, mortality and disability.

### ACTUAL OUTCOMES

To provide non-food-items winter kits to protect particularly vulnerable earthquake-affected families from severe winter temperatures and to provide direct psychosocial support, psychological first aid and counselling to individuals and families in the earthquake-affected areas in order to prevent avoidable morbidity, mortality and disability.

Supply of NFI to families in the tents cities in Van and Erzincan:
- 2,500 camp beds procured and distributed in camp cities
- 5,000 blankets procured and distributed in the containers
- 1,000 families provided with kitchen sets to refurbish their shelters
- 2,500 families (17,500 individuals) benefited from the NFI items provided by IOM in collaboration with TRC. The number reached by CERF funds exceeded the number envisaged by the project proposal.

Assessment of the psychosocial needs of displaced persons and provision of psychosocial support through family visits:
- Assessment and psychosocial support through family visit is provided by EVSAD through professionals from UDPSS under the general coordination of Ministry of Family and Social Policies in constant relation with VAN Governorates.3
- Family visits are provided to displaced people in order to assess their psychosocial needs and address them accordingly.
- Funds initially planned to provide psychosocial support in the affected areas were redirected to provide psychosocial support to the affected population displaced in cities around Turkey (see details explanation in analysis section)4

**TO NOTE:** The project will be completed by April 20, 2012.

### MONITORING AND EVALUATION MECHANISMS

Three field visits carried out in affected places and regions. This includes: Joint-field trip with all the stakeholders working together towards achieving the goals of the projects; and one field visit aimed to monitor that distribution of NFI was accomplished targeting the most vulnerable.

Coordination meetings with implementing partners mainly TRC

Coordination with national and local authorities

Weekly progress report shared by TRC.

IOM field staff was present at leading sites in Istanbul and Izmir and documented purchases with photographs.

---

3 The government was coordinating all humanitarian efforts. However, the implementing agency was EVSAD association. Kindly refer to above comment concerning notifying CERF. They were encouraged to maximize the interaction and collaboration with governments and national and international non-government organizations in order to effectively respond to emergencies and to ensure that the basic principles and priorities of the CERF are followed and effectively applied.

4 Again, we considered that any change that is affecting the budget by less than 15 per cent should not seek prior approval from CERF. Despite the change in geographic area, the target population remains the same and the activity came as response to the identified need. The total per cent of this activity from the whole CERF project is 11 per cent.
**WHO - HEALTH**

<table>
<thead>
<tr>
<th>CERF PROJECT NUMBER</th>
<th>11-WHO-072</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Project Budget</td>
<td>$ 700,000</td>
</tr>
<tr>
<td>Total Funding Received for Project</td>
<td>$ 178,861</td>
</tr>
<tr>
<td>Amount disbursed from CERF</td>
<td>$ 178,861</td>
</tr>
</tbody>
</table>

**Beneficiaries**

<table>
<thead>
<tr>
<th>Category</th>
<th>Targeted</th>
<th>Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individuals</td>
<td>605,365</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>294,244</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>311,121</td>
<td></td>
</tr>
<tr>
<td>Total individuals (Female and male)</td>
<td>605,365</td>
<td></td>
</tr>
<tr>
<td>Of total, children under 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>605,365</td>
<td></td>
</tr>
</tbody>
</table>

**Gender Equity**

The health and social care professionals benefitted from the project. Gender balance of beneficiaries was strongly related with the gender situation of beneficiaries in the earthquake region.

---

**OBJECTIVES AS STATED IN FINAL CERF PROPOSAL**

Objective of this project is to support the local primary health care units to provide urgent basic psychiatric services to the earthquake’s affected population so as to provide emergency live saving traumatic care.

**ACTUAL OUTCOMES**

By including in the training most of the health/social care workers the project aimed at reaching all population living in the earthquake affected. Therefore, this population will have an opportunity to access qualified health care services on mental health and psychosocial support. Therefore the number of beneficiaries is reflecting approximately what was planned.

Availability of free-of-charge and quality emergency counselling to all affected population has been ensured:

- Emergency counselling in Van and Erzurum provided by the health care staff of Ministry of Health (MoH) and universities, and social workers of Ministry of Family and Social Policies (MoFPS). The project is focussing on training in mental health in emergencies for local health care workers. This will strengthen and expand the capacities of state organizations in providing free-of-charge quality psychosocial emergency services to the local population.
- A needs assessment for the training of local healthcare staff was conducted through interviews with representatives of MoH, provincial health directorate and local healthcare staff and professionals’ organizations including NGOs. As a result, training activities in emergency psychiatric and psychological care were designed for:
  - Psychiatrists and psychologists,
  - Family physicians, general practitioners, and
  - Nurses and social workers.
- Methodology of the trainings was designed. Content of the training programme and training materials were developed on the basis of:
  - Consultations with both national and international experts, institutions and organisations such as

---

5 CERF: It is unclear how many persons have so far benefitted from these services/psychosocial counselling. No information has been provided despite asking for clarification after reviewing the project.
WHO, Kocaeli University, Bilkent University, Turkish Psychiatric Association, Union of Psychosocial Support in Disasters, experts of MoH and MoFSP).

- Training topics were developed according to categories of profession. Training topics and programme according to profession groups are listed below:

- Training Programme for psychiatrists and psychologists:

<table>
<thead>
<tr>
<th>Session</th>
<th>Training Topics</th>
</tr>
</thead>
</table>
| 1. Session | Concepts and psychopathology of traumatic distress  
Support to health-care givers |
| 2. Session | Theories on Psychological Trauma: Neurobiological Theories  
Psychosocial Theories |
| 3. Session | Incidence of psychological trauma, Occurrence after trauma  
Women in Disasters: Group approaches for post-disaster period |
| 4. Session | Psychological trauma and dissociation |
| 5. Session | Psychological trauma and risk factors for traumatic stress  
Methods of psychological help after disasters |
| 6. Session | Traumatic stress and basic EMDR:  
Approach to difficult cases |
| 7. Session | Mental health of children and adolescents in post-disaster period  
Evaluation of traumatic stress |
| 8. Session | Psychopharmacology for traumatic distress |
| 9. Session | Psychological trauma and cognitive approaches |
| 10. Session | Use of cognitive behavioural therapies in psychological trauma  
Approaches to psychological trauma in primary care (“TREP”) |

- Training Programme for family physicians and general practitioners:

<table>
<thead>
<tr>
<th>Session</th>
<th>Training Topics</th>
</tr>
</thead>
</table>
| 1. Session  (1 and a half Day) | Approaches to Psychological Trauma in Primary Health Care  
Psychological First Aid  
Support to Staff |
| 2. Session  (1 Day) | Case Presentations  
Support to Staff |

- Training Programme for nurses and social workers:

<table>
<thead>
<tr>
<th>Session</th>
<th>Training Topics</th>
</tr>
</thead>
</table>
| 1. Session  (1 and a half Day) | Basic Concepts of Psychopathology in Disasters  
Psychological First Aid  
Support to Staff |
| 2. Session  (1 Day) | Case Presentations  
Support to Staff |

Training materials had been prepared between December 2011 and January 2012.

- Increasing accessibility to psychological support through active outreach. This was one of the targets of the project. Due to unfavourable geographical and weather conditions and the limited number of staff, MoH decided to give psychological support through active outreach using family physicians and nurses. The project is supporting both family physicians and nurses located in Van and Erzinc districts by trainings and by “support to staff” sessions:

- In Erzinc district, 39 family physicians and 32 nurses participated to the trainings and support groups for avoiding burnout syndrome between 14-16 February 2012.

- Training of local mental health staff and family physicians for PTSD provided. In order to increase identification of stress-related disorders and to ensure that individual treatment and care plans are put in place, the project provides training activities to local health care staff:
- A training programme consisting of ten two-day sessions for 40 mental health staff from MoH and MoFSP started on 3 February 2012. The first training activity was held on 3-4 February 2012. The second training activity was held on 17-18 February 2012. Training activities are planned to be completed by the end of April 2012.
- As mentioned above, training of local family physicians and nurses started in the district of Ercis on February 14, 2012.
### UNICEF - EDUCATION

<table>
<thead>
<tr>
<th>CERF PROJECT NUMBER</th>
<th>TOTAL PROJECT BUDGET</th>
<th>BENEFICIARIES</th>
<th>Targeted</th>
<th>Reached&lt;sup&gt;6&lt;/sup&gt;</th>
<th>REACH</th>
<th>STATUS OF CERF GRANT</th>
</tr>
</thead>
<tbody>
<tr>
<td>11-CEF-065</td>
<td>$2,125,000</td>
<td>INDIVIDUALS</td>
<td>296,175</td>
<td>296,175</td>
<td></td>
<td>Ongoing (As of 15 March 2012)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FEMALE</td>
<td></td>
<td>46.3%</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>MALE</td>
<td></td>
<td>53.7%</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>TOTAL INDIVIDUALS (FEMALE AND MALE)</td>
<td>296,175</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>TOTAL CHILDREN UNDER 5</td>
<td>164,843</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>TOTAL</td>
<td>296,175</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OBJECTIVES AS STATED IN FINAL CERF PROPOSAL</th>
<th>ACTUAL OUTCOMES</th>
<th>MONITORING AND EVALUATION MECHANISMS</th>
</tr>
</thead>
</table>
| Access to education restored in a timely manner so that children are able to resume their studies in a safe learning environment. | - Access to Education restored: Up to 1,680 children (or 3,360 in double shifts), out of the total 43,329 children whose classrooms were damaged or destroyed in the earthquake, were able to resume their studies in a timely manner and in safe and warm learning environments. This was achieved through the provision of:  
  o 40 weather-proofed container classrooms  
  o 11 weather-proofed containers with lavatory facilities  
- Containers fitted with floor/foundation insulation, winter roofing and drains. Utility connections provided by government entities.  
- All 296,175 schoolchildren (and 164,843 children aged 0-5) have access to psychosocial support and/or counselling. Training sessions and meetings with psychosocial professionals, managers, technical personnel, psychosocial counsellors. Provision of 200 ECD kits, 201 Recreational Kits and printed materials. Four container units provided for psychosocial support activities and eight units for accommodation.  
- Total number of individuals trained:  
  o Professionals: 251  
  o Local Managers: 134  
  o Teaching Professionals: 60  
  o Counsellors: 220  
- Advocacy sessions with government officials (up to Deputy Governor level) to push build-back-better standards. | - The UNICEF country office had regular communication with relevant Turkish Government ministries and provincial officials to assess the damage and situation and to monitor the progress of goods delivery to local beneficiaries.  
- Several situation reports were issued and circulated. Trip reports by UNICEF staff.  
- UNICEF monitored the procurement process via regular contacts with the procurement supplier.  
- UNICEF Education and Supply staff ensured the distribution and proper utilization of supplies, and supported the installation of the container classrooms.  
- Six separate monitoring, evaluation and documentation visits took place, including production of human interest stories and media interviews. UNICEF Representative undertook two separate visits, and a UNICEF Turkey Goodwill Ambassador undertook one visit. |

- Earthquake affected children, with an almost equal number of boys and girls. The total number of individuals is 296,175 school-aged children + 164,843 children under-5. This group consists of female (46.3 per cent) and male (53.7 per cent). |

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<sup>6</sup> CERF: It is unclear how many persons have so far benefitted from these services/psychosocial counselling. No information has been provided despite asking for clarification after reviewing the project.
## UNHCR - SHELTER AND NON-FOOD ITEMS

<table>
<thead>
<tr>
<th>CERF PROJECT NUMBER</th>
<th>Total Project Budget</th>
<th>Beneficiaries</th>
<th>Targeted</th>
<th>Reached</th>
<th>Gender Equity</th>
</tr>
</thead>
<tbody>
<tr>
<td>11-HCR-052</td>
<td>$4,110,000</td>
<td>Individuals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Female</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Male</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PROJECT TITLE</td>
<td></td>
<td>Total individuals (Female and male)</td>
<td>20,000</td>
<td>20,000</td>
<td></td>
</tr>
<tr>
<td>Emergency Assistance to Earthquake Victims in Van</td>
<td>Total Funding Received for Project</td>
<td>$4,110,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>STATUS OF CERF GRANT</td>
<td>Amount disbursed from CERF</td>
<td>$1,692,740</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Completed</td>
<td></td>
<td>Of total, children under 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>TOTAL</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### OBJECTIVES AS STATED IN FINAL CERF PROPOSAL

Quick response provided to the international appeal by the Government of Turkey for the earthquake destruction in Van in order to ensure assistance to the affected local displaced.

### ACTUAL OUTCOMES

The overall project outcomes were as follows:

- Non Food Items (NFIs) provided to the Turkish Red Crescent Agency for immediate distribution among earthquake survivors (Turkish Nationals and asylum-seekers and refugees)
  - 4,000 Family tents
  - 50,000 Blankets
  - 10,000 Sleeping mats
- Relocation of affected asylum-seeker and refugee population assisted
  - Some 1,800 persons of concern have been relocated in an authorized and organized manner to their new satellite cities
- Under the auspices of the funding from CERF, UNHCR realized the provision of NFIs to the Turkish Red Crescent Agency for up to 10,000 persons affected from the earthquake. This included provision of 2,000 family tents and 40,140 blankets airlifted from Dubai to Erzurum.

### Monitoring and Evaluation Mechanisms

As well as the close communication and cooperation with the Turkish Red Crescent Society, a report has been received on the distribution of donated NFIs.

UNHCR support teams were deployed to assist the Field Office Van, to facilitate and monitor relocation of persons of concern to their satellite cities. In their new locations, UNHCR’s Implementing Partner staff has been monitoring the situation and providing necessary support and counselling.

Asylum-seekers and refugees remaining in Van assisted by UNHCR’s Implementing Partner staff.

Counselling and outreach maintained through implementing and operational partners to some 300 persons of concern to UNHCR in Van.

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7 CERF notes that while the narrative indicates these figures to be achieved, the budget only charged 2,000 family tents and 40,000 blankets as well as their transportation from Dubai.
## ANNEX 2. CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS – NATIONAL AND INTERNATIONAL NGOS AND GOVERNMENT PARTNERS

<table>
<thead>
<tr>
<th>CERF PROJECT CODE</th>
<th>CLUSTER/SECTOR</th>
<th>AGENCY</th>
<th>IMPLEMENTING PARTNER NAME</th>
<th>PARTNER TYPE</th>
<th>TOTAL CERF FUNDS TRANSFERRED TO PARTNER US$</th>
<th>DATE FIRST INSTALLMENT TRANSFERRED</th>
<th>START DATE OF CERF FUNDED ACTIVITIES BY PARTNER</th>
<th>Comments/Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>11-HCR-052</td>
<td>Shelter</td>
<td>UNHCR</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>11-WHO-072</td>
<td>Health</td>
<td>WHO</td>
<td>Turkish Psychiatric Association</td>
<td>NGO</td>
<td>52,000</td>
<td>Not yet</td>
<td>12 March 2012</td>
<td>WHO started implementing the project in Nov 2011. On Feb 22, UNDSS informed WHO that the venue of the training did not conform with the e UN security standards and advised that implementation was transferred to a local partner. 8</td>
</tr>
<tr>
<td>11-IOM-045</td>
<td>NFI</td>
<td>IOM</td>
<td>Turkish Red Crescent (TRC)</td>
<td>INGO</td>
<td>N/A</td>
<td>30 Nov 2011</td>
<td>Use of different implementing partner and increase of amount.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Psychosocial</td>
<td>IOM</td>
<td>Association of Home Health Services (EVSAD)</td>
<td>NGO</td>
<td>55,000</td>
<td>24 Feb 2012</td>
<td>27 Feb 2012</td>
<td>In order to reach highest number of the displaced population, the amount was increased. This amount was saved from the purchase of NFIs without negatively affecting the distribution of NFI activity as the Turkish Red Crescent provided the transportation of some of the purchased items by</td>
</tr>
</tbody>
</table>

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8 Correct: original and final proposal did not have implementing partner in its budget. Budget modification however, was not requested.
| 11-CEF-065 | Education | UNICEF | N/A | N/A | N/A | N/A | N/A |
| 11-CEF-065 | Protection (psycho-social support) | UNICEF | N/A | N/A | N/A | N/A | N/A |
| 11-CEF-065 | Early Child Development | UNICEF | N/A | N/A | N/A | N/A | N/A |

IOM (that made the cost of items less than what was budgeted) delay. 

Use of different Implementing Partner (originally HRDF) and increase of amount.
**ANNEX 3: ACRONYMS AND ABBREVIATIONS (Alphabetical)**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>MoFSP</td>
<td>Ministry of Family and Social Policies</td>
</tr>
<tr>
<td>MoH</td>
<td>Ministry of Health</td>
</tr>
<tr>
<td>EVSAD</td>
<td>Association of Home Health Care services</td>
</tr>
<tr>
<td>HRDF</td>
<td>Human Resource Development Foundation</td>
</tr>
<tr>
<td>NFI</td>
<td>Non Food Items</td>
</tr>
<tr>
<td>TRC</td>
<td>Turkish Red Crescent</td>
</tr>
<tr>
<td>UDPs</td>
<td>Union of Disaster Psychosocial Services</td>
</tr>
<tr>
<td>AFAD</td>
<td>Disaster and Emergency Management Presidency of Turkey (Afet ve Acil Durum Yönetimi Başkanlığı)</td>
</tr>
<tr>
<td>MoFSP</td>
<td>Ministry for the Family and Social Policies</td>
</tr>
<tr>
<td>MoNE</td>
<td>Ministry of National Education</td>
</tr>
</tbody>
</table>
By UNICEF Turkey, Michael Bociurkiw

As he stands outside his earthquake-damaged secondary school, you cannot help but be impressed by the stoicism of Ismail Gurbuz.

Within weeks of a 7.2 magnitude earthquake and a subsequent 5.7 magnitude quake, striking the regional centre of Van, Turkey, Gurbuz and his staff were able to relocate some 2,000 students into 44 containers (21 classrooms) on an adjacent field – and a safe distance from the mammoth, structurally-damaged school known as Mehmet Akif Ersoy High School.

The containers – manufactured entirely in Turkey and provided by UNICEF at the request of the Turkish Government – accommodate up to 40 students. The students say that, for the moment, they prefer the containers to real classrooms as they are still getting over the distress from the earthquake, as well as the subsequent aftershocks that still occur to this day.

Hence, aside from providing a warm and safe place to learn, the containers are playing a role in helping the students to get over their fears from the earthquakes.

“We are still scared to go into buildings,” said Murat, a student studying chemistry in one of the container classrooms. “We are scared that they are all damaged.”

To accommodate the thousands of students, schools officials were forced to implement a double shift system, extend the hours of the school day and make other school week and holiday adjustments so that students don’t fall behind, Gurbuz said.

He added that even though the replacement container school is running at full capacity, students who left with their families for other villages – about one-third of the population departed the affected area, at least temporarily - are coming back. “We have 21 classrooms and they are all full. But when the departed students hear from their friends about the containers they want to come back. We have received 100 returning students, and there are more to come.”

The containers are among the more than 80 procured by UNICEF in the aftermath of the disaster. Additional containers were provided for lavatories – and in other locations – for psychosocial training of trainers. The containers are typically doubled-up, creating 40 classrooms in total.

Mehmet Akif Ersoy was among 92 of 390 schools in the region damaged from the earthquake, which struck on October 23 and November 9 of last year. Of the 644 fatalities, more than 70 teachers were lost, in addition to an unknown number of children who either perished or moved away with their families. The damaged schools accounted for about 43,000 children.

The earthquakes left most of the population of an area inhabited by some half-a-million people – almost half of them children – homeless, at least temporarily: many feared living in buildings that were structurally damaged, especially after so many aftershocks.

Gurbuz said it will take some time for his students to overcome their fears; many hear rumours that another earthquake may occur.

On a tour of the container cities, Deputy Van Governor Hüseyin Demirbaş said that the quick progress made since the earthquake to put shelter of the homeless can mask the instability still happening in young people’s lives. “As families moves from tent settlements to container cities and elsewhere the children of those families will have to switch schools. So still there is not normal life going on.”

A UNICEF Turkey staff member in charge of procurement said that, since the containers were to be used in harsh winter conditions, they were reinforced with special floor insulation, drainage systems, and slanted roofs to ward off heavy snow accumulation.

Asked about the containers, Gurbuz said: “We weren’t expecting such high quality containers, but when we saw them we were very, very pleased.” He added that the only problem is that local power supplies are insufficient and that translates into cuts at the school too. Cold weather can also play havoc with exposed water pipes.
The damaged, multi-storey school building – a grizzly reminder of the earthquakes and ominously cordoned off by a red string - will be demolished and a new one will be built on the site with 32 classrooms, Gurbuz said. He added the containers could then still play a role for years to come as overflow classrooms or offices.

Yet, amid the scars from the earthquake, signs of normalcy are visible on the sprawling school grounds – fringed by snow banks. Students congregate around a make-shift canteen to catch up on gossip, and sports games have resumed.

Support for UNICEF interventions in the earthquake zone has come from the Government of Brazil, the Dutch National Committee for UNICEF, Kuwait and the Central Emergency Response Fund (CERF) of the United Nations.
Sükran Sevim sense of relief is palpable. The thirty-three-year-old mother of three children has just been relocated from a three-month stay in a tent city to a heated container house in the eastern Turkish city of Van. Her twin boys and young daughter – all five years old - scuttle about, hugging their mother as they become accustomed to their new surroundings.

The family lost all of their belongings when their house collapsed in the earthquake of fall 2011. One of the twins almost got crushed in the disaster but was saved with the help of neighbours. Most questions about the event bring tears to Sevim’s eyes. “It was very scary and we are still trying to get over it, especially the children.” In most disasters, children suffer much more than adults – with their education, play and normal routines interrupted. Sevim’s son’s leg has almost completely healed, but as with many young victims of this earthquake, he is still healing inside.

Experts say the psychosocial distress children suffer have some tell-tale signs: lack of concentration, nightmares, an inability to study.

To address the needs of affected children in the earthquake-ravaged region, UNICEF works with the Ministry of National Education and the Ministry for the Family and Social Policies to support the training of professional psycho-social trainers. It supports the provision of school-based and “tent-to-tent” psychosocial support programmes, through technical support for the adaptation and roll-out of existing support programmes and associated hardware – such as container classrooms, living and lavatory containers and UNICEF-manufactured Early Child Development (ECD) and Recreation Kits.

UNICEF’s well-known interventions in previous earthquakes in Turkey placed it in a frontline position to play a role in the 2011 Van earthquake response.

On a recent visit to Van, a large group of psychosocial trainees could be seen sitting in one of the large container units. Because they come from many different parts of this sprawling region, some containers were converted for accommodation, allowing overnight stays at the training facility.

Metin Kaya, the manager, couldn’t hide his joy at being able to use part of one container for all the administration tasks at hand. “Everything to do with the psycho-social activities is very well organized this time, involving many different parties, and the workers are still in the field working very hard,” said Kaya.

With aftershocks still hitting the region, children are understandably on edge. One teacher at a local school using UNICEF-supplied container classrooms said small aftershocks are enough to make his students very anxious. Fresh drawings by the students – created during psycho-social support programmes supported by UNICEF - showing memories or thoughts of the earthquake attest to the need for these types of interventions.

In some container or tent cities it is not difficult to find young children who have been out of school for months: even though man undamaged schools are operating normally, parents are afraid to let go of their children for fear of aftershocks and more collapse. “Even if we go the school will collapse on us,” said one child.

Fortunately, youth centres provide many activities to help keep displaced families engaged.

For the training sessions on psychosocial support, which are aimed to reach all boys and girls in the earthquake zone from pre-school to secondary grades, UNICEF and the ministries involved an NGO platform, the Union for Psychosocial Services in Emergencies (APHB) – composed of Kizilay (Turkish Red Cross) and the association for Psychologists, Psychiatrists, Social Workers and Psychological Counsellors.

Support for UNICEF earthquake response – which also includes the provision of container classroom units for selected schools - has come from the United Nations Central Emergency Response Fund (CERF), the Dutch National Committee for UNICEF and the governments of Brazil and Kuwait.