1. Background and Context

In the early morning of February 6, 2023, a major earthquake of 7.8 magnitude on the Richter Scale struck southeast Turkey and north Syria. As of February 10, over 21,000 people have died across both countries. The earthquake came as the Middle East began experiencing a snowstorm, which has exacerbated suffering.

Within Syria, the areas most affected are Aleppo, Hama, Lattakia, and Idlib. The earthquake was also strongly felt in Damascus. In Turkey, the areas of Gaziantep, Kilis, Hatay, and Kahramanmaras are the worst affected. In both countries, there is widespread destruction, with buildings collapsed and infrastructure such as railways, airports, and roads badly damaged.

2. Network Members and Partners

Network members:

- **Hope Revival**: Small organization that can target especially vulnerable groups. Based in Turkey, and with operations in Syria. They are also partners with IRC, MDM, IMC, and others, such as UN agencies and the Canadian and German Governments.
- **Syrian Expatriate Medical Association (SEMA)**: Current and well-known implementing partner. Main focus is on Health and Nutrition, but they also have done emergency work with us in recent years for smaller emergencies (winterization and cholera projects in NW Syria). As for now, they operate in Syria only.

Other mapped organizations working in/for Syria:

- **Syrian Network League (SNL)**: Focused on advocacy and acting as a network of organizations working in/for Syria. They are in the process of becoming a HelpAge Network Member.
- **Syria Relief/Action for Humanity** (AfH): Founded in 2011 in the UK by a group of doctors whose sole focus was to provide assistance and aid to those devastated by conflict. AfH has built expertise in responding to humanitarian needs to benefit the most vulnerable people affected by conflict, disasters, and extreme poverty. This is a new partner with whom we will start operations for this response.

3. Operational Approach

Given the nature of the disaster, it is apparent that the basic needs of **safe shelter, fuel for heating, hot ready-to-eat meals, and non-food items, especially winterization items**, will be our focus initially. Providing these basic items will be the base on which we build other services.

The modality of choice will be **Multipurpose Cash Assistance (MPCA)**, and once markets are deemed to be functioning, we will transition to this way of working, away from in-kind food and NFIs. This is dependent on the supply of basic items into the local market and the available liquidity of cash.

In line with our humanitarian approach, HelpAge and our partners will look to provide a holistic response while ensuring the safety, dignity, and well-being of those impacted by the emergency/earthquake. This will link mobile health clinics with home-based care for older women and men, especially those with disabilities. It will also make it possible to provide protection and mental health and psychosocial support alongside clinical medical assistance.
A cornerstone of our humanitarian approach will be to **invest resources in influencing coordination mechanisms like the cluster system**. We will resource the **Age and Disability Working Group**, part of the Protection Cluster, in order to build knowledge and capacity in the area of inclusion.

## 4. Response Plan

### Overall Goal:
Older people, including older people with disabilities, have their rights respected and their overall well-being improved.

### Outcomes:
1. Older people and their families are able to meet their basic needs through the provision of lifesaving items and multi-purpose cash assistance (MPCA)
2. Older people and their families have their protection, MHPSS and health needs met through integrated health and social care provision (health mobile clinics, link with wider healthcare, and home-based care)
3. Older people and their families have their needs met by the wider humanitarian response due to HelpAge International influencing coordination mechanisms.

### Locations:

**Syria:**
- Aleppo Governorate: Afrin, Azaz
- Idlib Governorate: Harim, Idlib City, Dana, Salqeen

**Türkiye:**
- Gaziantep, Maras, Hatay

### Indicative 6-month budget: $6,000,000

## 5. Advocacy

### Older people in Turkey and Syria

According to the Turkish Statistical Institute (TurkStat), in 2021, older people (65+) made up 9.7% of the population in Turkey; 44.3% of older people were male and 55.7% were female.

The percentage of older people in Syria is reported to be considerably smaller at approximately 4% over 65 years old [TBC].

### Prioritization of older people

All humanitarian actors in this response must ensure that older people are provided with essential life-saving humanitarian support and tailored, prioritized assistance. It is critical that older affected people can access full basic services, including food and water, healthcare—including for NCDs—and mental health support, and safe and adequate shelter. Cash and voucher assistance is also a vital element of this response.

Older people’s rights must be upheld, including by ensuring access and a dignified reception at emergency shelters and relief points, and prioritization of protection for those facing additional risks, such as older people with disabilities and older women.

With temperatures plummeting, the situation for people in southern Turkey and northern Syria is extremely challenging. This is particularly the case for older people, who face greater health risks associated with the onset of colder weather. They should be prioritized for winter-specific aid items, such as thermal blankets, winter clothing, and heating appliances.

### Humanitarian Access
Safe, full, and unimpeded humanitarian access is critical to ensuring that all affected people, including older people and people with disabilities, can be reached and access essential life-saving humanitarian support.

In January 2023, the UN Security Council mandated the Syria cross-border resolution for 6 months. To allow responding organizations to plan ahead for longer than 6 months, a 12-month mandate is needed. This would enable humanitarian organizations to scale up and provide predictable, long-term support to respond to the earthquake.

6. Funding

It is critical that funding levels for the humanitarian response are sufficient to address the scale of this crisis, and donors must provide assistance that will benefit those most in need. In this context, particularly in northern Syria, people have been dramatically impacted by the long-term crisis related to the conflict and are therefore particularly vulnerable to shocks.

In such a rapidly evolving crisis, it is vital that as much humanitarian funding reaches the frontline as quickly as possible through a mix of funding channels. While support to the UN system is welcome, pass-through rates remain problematic and direct support to NGOs is needed—particularly to local organizations and their networks of community volunteers, who are working to deliver aid and protection.

With multiple crises around the world—including in Afghanistan, Yemen, the Horn of Africa, and elsewhere—it is critical that the urgently needed support to this response does not divert funds from elsewhere. These crises have a potentially devastating effect on older people in some of the world’s most vulnerable countries and should continue to be a focus of the international community.

Donors should ensure that the funding they provide to the crisis includes older people as a priority target group; that the entire project cycle is informed by age, sex, and disability disaggregated data; and that funded partners are accountable. Organizations who have expertise in the delivery of humanitarian support to older people should be directly funded.

In order for aid agencies to operate and humanitarian funds to be effectively utilized, it is vital that the process of transferring money to Northern Syria is eased.

7. Leadership and coordination

The speed and scale of the crisis will likely result in a scramble of organizations moving into the region to respond. Recognizing that scaling up the coordination and leadership of a humanitarian response takes considerable time and resources, international assistance efforts must work with local aid groups and civil society to increase effectiveness and to build capacity for local emergency and relief response. For the sustainability of the humanitarian response, it is crucial to strengthen local crisis response leadership and accountability of aid efforts to crisis-affected communities.

For the humanitarian response to the crisis, it is important that there is leadership and coordination on the issue of older people’s inclusion from the UN system and from donor governments. Accurate sex, age, and disability disaggregated data about those affected must be collected, analysed, and reported on, and older people should be included in humanitarian assessments and program activities to ensure that they are provided with appropriate humanitarian protection and assistance.