



PSYCHIATRIC ASSOCIATION OF TURKEY

EARTHQUAKE ON FEBRUARY 6

HATAY - KAHRAMANMARAŞ - ADIYAMAN

FIRST MONTH

AREA ASSESSMENT REPORT

MARCH 2023

This report was prepared by the Disaster Preparedness Intervention Unit between March 10, 2023, and March 13, 2023, by a team established to determine the effects of the earthquake in Hatay, Adıyaman, and Kahramanmaraş provinces, the state of the health system, the organization of mental health services, and the need for psychosocial support services.

The status, nature, and adequacy of the services provided after the first month of the earthquake were evaluated, and the needs were determined based on field and resource analysis conducted for each province. Short-term emergency measures were defined. This report includes an assessment of the status of mental health services in the affected areas, a needs assessment conducted after the earthquake for each province, and an analysis of the situation in the centers where services were provided following the field assessments undertaken and published during the first two weeks. The report also discusses the current status of institutions and representatives that require collaboration to provide psychosocial services, such as the Ministry of Health, the Ministry of Family and Social Services, the Turkish Medical Association, and the Istanbul Metropolitan Municipality. Additionally, the report covers the status of community-based mental health services and psychosocial activities in new settlements resulting from migrations.

The report will be updated based on changes in the disaster situation, demographic effects, and service plans.

Respectfully submitted to the public by the Disaster Crisis Management of the Turkish Psychiatry Association.



Psychiatric Association of Turkey

The establishment date is June 17, 1995

The Turkish Psychiatry Association is a medical specialty association representing the field of psychiatry in our country with approximately 5000 members, more than 90% of whom are psychiatry specialists. It took the name of the Turkish Psychiatry Association with the decision numbered 99/12774 of the Council of Ministers on April 15, 1999. The association, which has 22 branches, has its headquarters in Ankara.

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Psychiatric Association of Turkey
Earthquakes on February 6, 2023
Hatay - Kahramanmaraş - Adıyaman
First Month
Area Assessment Report

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HATAY PROVINCE ASSESSMENT

In both our week 1 (<https://psikiyatri.org.tr/3704/tpd-hatay-ve-adana-ilk-hafta-alan-degerlendirmesi-raporu>) and week 2 (<https://psikiyatri.org.tr/3713/turkiye-psikiyatri-dernegi-hatay-merkez-iskenderun-kahramanmaras-merkez-narl>) reports, we highlighted that the destruction caused by the earthquake in the central district of Hatay province is severe, hindering the reconstruction of life. Numerous existing structures are damaged beyond repair, making it impossible to create settlements or temporary shelter areas for people in this region. Social areas essential for starting a new life are unavailable, and all shops, stores, and buildings that provide basic food and social interaction are also damaged.



Given the severity of the destruction in Hatay central district and Defne district, affecting almost all social living areas compared to other cities, rebuilding city life is crucial in psychosocial rehabilitation. Therefore, it is essential to prioritize a social and architectural study in this region more than in other cities. It is also imperative to create new living spaces that are suitable for the city's culture and texture, which are vital for mental health of affected residents. The earthquake on March 20, 2023, with a magnitude of 6.4, was a turning point in the recovery process for the region.

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HATAY CITY CENTER AND DEFNE DISTRICT

Although debris has been cleared to some extent on the main roads to facilitate transportation in Defne, one of the central districts of Hatay, there is still a significant amount of debris in Hatay Center, Defne, Harbiye, and Samandag. The dust and particulate matter produced during debris removal operations are at a level that could negatively affect the health of the residents and healthcare workers in the region.

General Health and Mental Health Services

As of 03.03.2023, the infirmary and tents set up by the Turkish Medical Association (TMA) and the Psychiatric Association of Turkey (PAT) in Sevgi Park, which had become a significant health center in the region, have been moved to the park next to the shrine for security reasons. Like in Sevgi Park, the TMA infirmary, Istanbul Metropolitan Municipality (IMM),

veterinary service unit, dental unit, and the Health and Social Service Workers Union (HSSWU) have been established in this new area as well as additional sites. Our psychiatry clinic tent has been positioned in the middle of the park, with a private waiting area arranged in the courtyard in front of it. For accommodation purposes, our caravan has been placed between the park and the TMA logistics section. The new center is now suitable for primary medical services, and we have ensured sufficient accommodation and cleaning areas for service provision by collaborating with the TMA and Istanbul Medical Chamber.



We had discussions with Dr. Ali Kanatlı, the health service coordinator for volunteer psychiatrists and the Hatay Medical Chamber, regarding the current situation and density of tent cities, as well as suitable areas for weekly fixed clinic work in large tent cities and Samandag.

During conversations with Dr. Görkem Yılmaz and Dr. Aynur Nabi, who are located in the region and will work at the psychiatric clinic established in Defne, we learned that the clinic



receives an average of 15-20 patients per day. Most of the admitted patients had psychiatric illnesses before the earthquake and were seeking medication. Additionally, residents of the region and volunteers seek treatment for symptoms related to traumatic stress caused by the earthquake and its aftermath.

It was observed that there was a partial decrease in the number of clinics after the refugee center in Defne Park was relocated to the tent cities and partially away from Sevgi Park. However, with the help of TMA's mobile services to reach different regions and promote the new service point, the number of patients increased again.

Mustafa Kemal University

Assoc. Prof. Dr. Hanefi Kokaçya, a faculty member and deputy chief physician at the Department of Psychiatry at Mustafa Kemal University Faculty of Medicine, stated that following the earthquake, services in tents and containers were set up in the hospital garden to provide medical interventions primarily for patients with general medical problems. The demand for these services decreased relatively after volunteers started providing aid. He emphasized the need to plan for shelter and basic needs through containers and prefabricated houses in the hospital during this period and to organize the work accordingly. In addition, efforts were made to provide psychological support services.

As of March 10, 2023, Dr. Irmak Polat, a faculty member at Istanbul University, has been appointed to support the psychiatry services at Mustafa Kemal University Faculty of Medicine, and will conduct studies in this field. Information was provided about PAT's activities related to the education and scientific research of current residents and faculty members.

Training and Research Hospital

The hospital has suffered significant damage from the earthquake, and healthcare services are currently being provided in a field hospital located in the garden. However, there aren't any



psychiatry services available there. Temporary settlements have been set up in the surrounding area, but some roads leading to the hospital should be more suitable for vehicle traffic. As part of the mandatory services, a psychiatry specialist has been assigned to this hospital.

It would be advantageous if the psychiatry specialist working here were a volunteer physician in the region for a long time.

Psychosocial Services:

On March 11, 2023, officials from the Ministry of Family and Social Services (ASHB) in Hatay held a meeting at a nursing home located near Mustafa Kemal University Hospital in the Serinyol district. The coordination center is located at this site, and the building is in a sturdy and logistically suitable location. During the meeting, information was obtained on the current status of psychosocial services in Hatay, the location and continuity of tent cities, and institutions providing psychosocial services in the area. The team also discussed in detail their collaborative work with the PAT to continue identifying needs, finding solutions to problems, and addressing the conditions and requirements of the tent cities.

According to the information obtained, personnel living in the region affected by the earthquake are unable to work, and instead, ministry personnel from other provinces work in the area on a rotating basis. Since the assignments are for seven days (from Saturday to Saturday), personnel must leave the region before they can observe the new contacts they have established and the psychosocial support process they have implemented. This creates challenges in ensuring service continuity which the Ministry of Family and Social Services personnel also recognize. ASHB has assigned 170 personnel to the region, with 114 in the previous week and the rest in the week of the evaluation.

According to the information obtained, Disaster and Emergency Management Presidency (AFAD) has mapped the city's tent cities and affiliated districts. Family and Social Services personnel have received this information from AFAD. However, there are still many scattered tent clusters that need to be recorded. ASHB personnel were requested to provide logistic and transportation support to send volunteer psychiatrists to deprived areas, particularly to the scattered settlements. Furthermore, a cooperation meeting was held regarding the organization of tent cities.

Assessment

On February 20, 2023, a 6.4 magnitude earthquake centered in Samandag caused significant damage to the city, and many psychosocial services were disrupted. Field data and personnel working in the field have indicated that numerous areas require resumption of psychosocial services.

It is important to improve the psychosocial support services in the Hatay center and Defne districts. Although the personnel from ASHB are diligent in their psychosocial support arrangements in the Hatay region, they aim to reach a larger audience, which requires the involvement of multiple personnel and professional groups to coordinate activities in the area. Inter-institutional cooperation and support should be strengthened in psychosocial service activities.

It has been suggested that joint efforts between the Psychiatric Association of Turkey (PAT) and the Ministry of Family and Social Services could increase the benefit provided in the region due to the lack of sufficient training in trauma for personnel who will be involved in the Ministry of Family and Social Services's psychosocial support units and activities. The high number of "heavy grief and loss stories" in the earthquake region has resulted in an increase in applications due to grief and a lack of competence in determining which patients should be referred to where and how to manage them. To address this, it has been recommended Ministry of Family and Social Services personnel and PAT Hatay volunteer psychiatrists come together at least once a week in evening meetings, starting from Tuesday, March 13, 2023. This will increase familiarity with the region, provide staff solidarity and education and lead to a quicker response to individuals in need of psychiatric and psychosocial support. To meet the demand for cooperation in providing training, especially in case management and trauma, for personnel involved in psychosocial support activities, **the first session was held on March 13, 2023. Feedback on this interaction's much-needed benefit was received.**

It has been observed that conditions have been created to provide psychosocial services in one-third of the tent cities in the field, and needs assessments have been conducted several times. However, it has also been noted that there is still a need for an increase in demand for mental support sessions to be conducted by psychologists.

The Defne Municipality and Confederation of Progressive Trade Unions of Turkey have undertaken a project to construct a living and psychosocial support center that will provide support to Hatay Center and Defne districts. The location of the building has been examined in consultation with the Defne Municipality Planning Authority and the Confederation of Progressive Trade Unions of Turkey General Work Branch President. They have determined that the location and available space in front of it are highly suitable for a living and psychosocial support center.

In conclusion, there is still much work to be done and a long way to go in addressing the needs of Hatay province.

SAMANDAG DISTRICT

Samandag district, located on the Syrian border, is one of the districts of Hatay that has been significantly affected by the earthquake. It has been observed that those affected by the earthquake who did not migrate outside the district are staying in small tent camps, with scattered tent clusters primarily observed in many villages and neighborhoods. Social city life has not started except for the close relatives and neighbor solidarity in front of the houses. The Istanbul Metropolitan Municipality has set up one tent city and three medium-sized tent cities. However, it was learned that one of the tent cities will be removed/moved due to its proximity to the areas where excavation waste was dumped. It was observed that the Istanbul Metropolitan Municipality created the settlement area, which is located near the Deniz Hospital and can be evaluated as relatively central and the most effective tent city in the region. There is a health unit with TMA, HSSWU, and IMR.

Mental Health and Psychosocial Services

Despite being one month after the earthquake, the district has not provided regular mental health services. The psychosocial support units are insufficient, and require coordination. In addition to the severe destruction caused by the earthquake, the post-earthquake aid needs to



be revised compared to other regions. Despite being mentioned in our first-week and second-week reports, this inadequacy continues similarly at the end of the first month. The low-income level of local people also makes social recovery more complex.

In the tent city established by Istanbul Metropolitan Municipality (IMM), there are various health and social service units. These include a coordination point of the Turkish Medical Association (TMA), a women's health unit, and a health unit by the Health and Social Service Workers Union (HSSWU), as well as a psychosocial service container and an event tent provided by the IMM Social Services Department.

During the interview conducted with Psychologist Cansu, who was appointed by the Istanbul Metropolitan Municipality (IMM), it was revealed that psychological first aid applications are being conducted in the IMM Women's Health tent. The IMM tent city also has a psychosocial support team consisting of 3 people, including two psychologists, who mainly provide psychological support to women. One of the psychologists will start providing art and play therapy, while the other will start EMDR therapy. However, it was learned that the primary responsibility of the appointed psychosocial support team is to provide more food support and organizational duties, as the region's immediate needs are not yet met. In the current conditions, where basic needs such as shelter have not yet been fully met, and coordination is lacking, the workload of the organization and expectations from the appointed personnel are high. Furthermore, the number of working staff is insufficient, which makes it impossible to start full-fledged psychosocial support activities except for single-session psychological first aid based counseling sessions and two group sessions. It was also learned in the interviews that there is a critical need for psychiatric services.



In the same region, IMM has appointed a psychologist. However, it was noticed that the service provided was limited to identifying basic needs, despite the availability of infrastructure. The appointment period was lengthy, and there was a need for more clarity regarding its continuity. Thus, it was decided to ensure better coordination in future organizations with the same purpose.

To better evaluate the individuals receiving psychosocial support from personnel working in Samandag, it was deemed necessary to organize a weekly event with volunteers from The Psychiatric Association of Turkey (PAT) in Defne and the central district of Hatay. In addition,



it was suggested that cooperating with PAT could also be beneficial for the training of IMM's psychosocial support staff. Psychologist Mehmet Can, the founder of Özel Engelsiz Yaşam Merkezi (Special Barrier-Free Life Center) located within walking distance of the tent city in Samandag, and psychologist Yunus, who works there, were interviewed. During the interview, it was learned that the center had served as a particu-

lar center under the Ministry of National Education even before the earthquakes, with an inventory of all children with special needs in the region. In the first days after the earthquakes, support was provided to meet essential needs in the undamaged building, and preparations were subsequently made for psychosocial support activities. Outdoor cinema screenings have also begun for families with children in the region. The need for a child and adolescent psychiatrist, as well as an adult psychiatrist, in the region was emphasized. It was also noted that the center is open to collaboration with PAT volunteers to provide logistical support for psychosocial services. The entire building, its facilities, and its proximity to the IMM tent city were cited as reasons for the possibility of joint efforts. The need for doctors and psychosocial support teams who speak Arabic was emphasized, due to the language predominantly spoken in the area. It was observed that even those who stayed in their homes' gardens participated in the activities in the tent cities. The center's critical role in providing transportation for registered individuals with special needs and community-based work highlights the need for advanced planning.

Assessment:

Based on the evaluation, it has been found that Samandag is one of the areas where aid, organization, and current healthcare services could be improved compared to other earthquake zones. Although there are small-scale psychosocial support teams present in the region, coordination among them has not been established yet. Prior to March 11, 2023, irregular groups providing mobile services only provided psychiatric services in the district. As of March 13, 2023, Dr. Ali Asgar, who was also affected by the earthquake and had losses, will start providing outpatient services at Samandag State Hospital, accompanying our field team. Although the institutional presence and psychosocial support of IMM in the region are essential for sustainability, it has been observed that the personnel assigned by IMM for 15 days need to be directed and supported, and contact with other institutions needs to be improved.

The team at Özel Engelsiz Yaşam Merkezi can create highly effective psychosocial support services with sufficient resources and coordination, thanks to their building with assured safety, logistical facilities, and location.

There is a clear need for a child and adolescent psychiatrist in Samandag. Adult psychiatrists provide a significant portion of the service. Providing such a service predominantly through online applications does not comply with the reality of the earthquake.

The PAT Hatay Center psychiatric team will provide psychiatric support services within Samandag two days a week. Having a professional who speaks Arabic in the region will improve the quality of the service.

ISKENDERUN DISTRICT

Some people who were affected by the earthquake in Iskenderun have relocated to the Arsuz district where buildings have fewer stories. Others have migrated to villages and other cities. As housing problems are being resolved, living spaces are starting to emerge in İskenderun where people can interact socially, and a slow revival can be observed. On the other hand, infrastructure issues, particularly the drinking water and wastewater systems, pose a threat to public health.

Mental Health and Psychosocial Services



The psychiatric clinics established within the Iskenderun National Park, which are still in operation have been visited, and meetings have been held with PAT volunteer doctors Dr. Sümeyye Sereyim and Dr. Mevhibe Tummuklu, who provide psychiatric services in the region. It was observed that tent city life is still ongoing in the National Park, and the arrangements within the tent city have improved and become more settled. People can interact in communal living areas, and the tent,

container areas, and service units are sufficient.

An average of 20 people have been reported to receive psychiatric services daily at the PAT psychiatric polyclinic established in İskenderun Millet Park. Even people without mental health problems sometimes apply to the polyclinic and consider its existence as a guarantee, which is an important finding for all temporary settlement areas. It has been learned that psychologists appointed by the Ministry of Family and Social Services, in coordination with our volunteers, maintain close contact with the polyclinic and refer the necessary patients to our clinic after screening the field. Different cases among the applicants, including grief, have been reported, and obtaining essential medications before the visit is still the primary reason for application.

Family physicians appointed by the Ministry of Health are also available in the region. Family physicians and psychologists appointed by the Ministry of Family and Social Services are staying in the closed sports hall. It is also stated that our volunteers occasionally hold meetings with these family physicians, and it is suggested to provide short training sessions for them regarding cognitive interventions and necessary referrals.

Our colleagues who provide medical services in their practices and private hospitals in the district sometimes face issues prescribing medication through the Medulla system, which is a substantial burden for the district and a problem that needs to be resolved.

Assessment:

The psychosocial services in the region are more functional compared to other areas, but this achievement has been the result of the efforts of mental health professionals and volunteers working in the region, especially the PAT volunteers who have played a significant role in establishing this system. Although hospital systems are being established, it is crucial to take immediate action to improve the housing conditions and support our colleagues in delivering healthcare services. The decision not to support and force the departure of the Indian Military Field Hospital and its personnel, who provided organized and selfless services that created a strong sense of trust among the people in the first week after the earthquake, has had a negative impact on both trust and solidarity, as well as the provision of high-quality health services, causing severe reactions among the people.

ASSESSMENT OF ADIYAMAN PROVINCE

Adiyaman, with a population of 624,513, is the 66th most developed province in Turkey. The city center has a wider area than the centers of Hatay and Iskenderun, but significant destruction is observed along the Gölbaşı-Adiyaman line after the Pazarcık district limits. It has been observed that the intense dust and particles caused by the debris are affecting the areas close to the debris removal efforts. The healthcare infrastructure, except for the Adiyaman Education and Research Hospital, is significantly affected. There are on-site service delivery problems related to healthcare services.

Field Assessment:

During the field evaluation, Dr. Suna Onal and Dr. Saime Esra Çol Teker, who volunteered to provide psychiatric services in Adiyaman on behalf of the PAT, met with the team who had taken over the previous day and exchanged their views on the situation in the province. It was learned that they stayed in containers organized by the Istanbul Medical Chamber, Adiyaman Medical Chamber, and Turkish Medical Association in the center of Adiyaman, and tents set up in the surrounding areas. However, not many people had started to stay there yet. With logistical support from the Istanbul Medical Chamber, our volunteer colleagues visited patients in need for help in nearby districts and tent cities.



During the field assessment, it was discovered that our volunteer colleagues suffered losses were not only in Adiyaman but also in the surrounding districts, with some areas affected as severely as the Adiyaman city center. At the meeting, it was expressed that our colleagues



were well-received in the tent cities. However, some personnel working in the tent cities and earthquake-affected areas were tired due to being forced to work without being allowed to take leave by some ministries and institutions, leading to exhaustion. Our volunteer colleagues also spoke with other healthcare and support personnel in the field. In the current conditions, it has been determined that a fixed telephone line needs to be established in Antakya and the Adiyaman region to ensure coordination and continuity of service. Information obtained from our volunteers revealed a need for child and adolescent mental health experts in the city as almost no child and adolescent mental health experts exist in the region. Therefore, it would be appropriate to work towards

providing supervisory support by specialists in this field to our volunteers in case of necessary referrals by children and adolescents.

It would be appropriate to plan meetings with the relevant ministries to make necessary arrangements to address the decrease in field hospital applications, which caused difficulties in obtaining medications that are written with the stamps of our colleagues who volunteered to



come to Adiyaman to work in private hospitals or their own offices. Similar problems also exist in Iskenderun, which are expected to become more widespread.

Psychosocial Services:

Contact has been made with the coordinators of the Adiyaman Ministry of Family and Social Policies, and information has been obtained regarding field applications. The psychosocial services are being implemented and coordinated from a center in Adiyaman, which is affiliated with the Ministry of Family and Social Policies. The coordination center was visited to discuss cooperation, identification, and resolution of needs. Information and opinions regarding solutions for the reimbursement of prescriptions written by our colleagues working in the region, especially those who are volunteers for the PAT and can be considered on administrative leave, as well as the ability of patients to obtain

them, were exchanged. According to officials from the Ministry of Family and Social Policies, the number of cases of grief is increasing in the earthquake zone. The psychosocial support staff is insufficient, and collaborating on training staff in this regard is essential. To this end, it was emphasized that it could be effective for our volunteer colleagues and the psychosocial support staff of the Ministry of Family and Social Policies to meet once a week in Adıyaman, as planned in Hatay, for coordination and solidarity. The first meeting was organized on Monday, March 13, 2023, at 18.00 at the 80th-anniversary building of the Ministry of Family and Social Policies.

According to ASHB authorities, it has been reported that almost all tent cities in Adıyaman have been reached. However, due to the constantly changing population and conditions in the tent cities, it is important to maintain continuity of service. It has been observed that not all tent settlements have an ASHB station due to the dynamic nature of the area, the presence of tent clusters of different sizes and locations, as well as large tent cities, and tent/container cities belonging to various organizations. Personnel have prioritized their services, especially in crowded tent cities and areas with a relatively high need. On average, psychosocial support services are provided in at least 20 tent cities.

Some of the personnel assigned by the ministry have high operational skills and experience in Elazığ-Malatya, while a significant portion consists of social workers and psychologists with limited practical experience in implementing psychological first aid, despite receiving limited theoretical psychological first aid training during their vocational or undergraduate education. Their structure lacks clinical psychologists, or they only have a limited number of them. Due to their insufficient training and experience in the field, they cannot regulate the situation with the desired efficiency. Therefore, the importance of cooperation with PAT on education has been emphasized. A collaboration has been established to enable personnel to become familiar with the tent cities, participate in ASHB's psychosocial support activities, identify those who need psychiatric consultation, facilitate easy access to information for colleagues, and provide logistic support when required.

Officials have also expressed that some rumors within Adıyaman increase the anxiety of the people living there.

Adıyaman Education and Research Hospital

During an interview with Dr. Atila Tekin, a faculty member at the Psychiatry Clinic, and two resident physicians working in the same clinic, it was learned that mental health services are provided by a team consisting of one faculty member, one specialist, and one resident physician, who rotate working three-day shifts. The working systems of other hospital departments are similar to that of psychiatry. It was also noted that all outpatient clinics of each department are operational in the hospital.

During a visit to this university-affiliated hospital by our colleagues, it was observed that the building remained largely intact with only minor damage, primarily in non-load-bearing areas, which have been repaired. It was also noted that the hospital staff mostly resides in the hospital. Before the earthquake, the psychiatry department provided 16 beds in an open ward. In contrast, psychiatry specialists at the hospital mainly offer healthcare services in outpatient clinics, and faculty members and resident physicians work primarily in the community. It was also learned that a child and adolescent psychiatrist from Giresun had been appointed.



After the earthquake, no patients were admitted to the inpatient ward. Instead, officials from the Ministry of Justice have been using the psychiatric service, and prosecutors and forensic medicine personnel are being accommodated there. Due to the lack of other open hospitals in Adıyaman after the earthquake, there has been an increase in psychiatric consultations, with around 40-50 patients, including emergency and outpatient cases, being seen daily. It has been stated that patients

requiring inpatient treatment are being referred to Adana and Elazığ since the inpatient ward is not open. It has been learned that many physicians working in clinics have heavily damaged homes, and many specialists have applied for the appointment calendar opened by the Ministry of Health. However, not enough work is being done to solve the accommodation problems of working physicians. It has also been observed that containers without furniture, heating, or electricity have been provided, and it is unknown whether solutions have been found for the accommodation problems of physicians and other personnel working at the hospital. Much effort is being made to establish a container city at the hospital's emergency department entrance.

It has been reported that an additional 300-bed capacity will be opened in the hospital's garden due to the lack of another usable hospital in Adıyaman after the earthquake.

Assessment:

The city's housing, hygiene, and toilet needs must still be fully met. Although the city is recovering, debris removal work is still ongoing. Resident physicians in Adıyaman are concerned about their psychiatric specialty training. It has been observed that the PAT's education support plan, which includes preparing a curriculum for 94 resident physicians living and studying in various earthquake-affected cities, providing support through a mentorship system, and hosting resident physicians in education centers located in non-earthquake zones for specific periods, has been well received. However, the clinic still lacks the infrastructure to provide specialized training due to the earthquake.



Although the psychosocial service units are experienced, the PAT plans to carry out work to provide basic information training to the staff before they go to the field and make direct correspondence with the Ministry of Health, in addition to the regional coordinators, to increase efficiency and continuity. It is pleasing to see that ASHB regional coordinators are collaborating with our association to increase efficiency and continuity.

There are rumors circulating that some religious groups are taking children in the city. Urgent intervention is required from the authorities to quickly investigate and determine if any children are missing. Additionally, it has been observed that people from Adıyaman who have been affected by the earthquake or their relatives are being employed. To avoid exhaustion, it is necessary to allow personnel to rest.

ASSESSMENT OF KAHRAMANMARAŞ PROVINCE

Kahramanmaraş has a population of 1,177,436, with the total population of the central districts estimated at approximately 680,000.



Kahramanmaraş ranks 58th in terms of development. It is a seismic zone, and the city center and its districts have suffered significant damage following earthquakes.

There is a health and coordination center in the region responsible for providing services, under the supervision of the İzmir Medical Chamber. The center is also supported by teams from the Istanbul Medical Chamber and Turkish Medical Association. The TMA Central Council

members had a meeting with the Kahramanmaraş Medical Chamber President, and the region was evaluated with the help of Dr. Nihat Şahbaz from TMA and Mustafa Vatansever, who is the İzmir Medical Chamber's representative in Kahramanmaraş and a member of the TMA Health Service Branch under Extraordinary Conditions. A meeting was held with voluntary physicians from the Turkish Psychiatric Association, Doç. Dr. Halis Ulaş and Dr. Hatice Enginar, regarding what could be done in the province.

Field Assessment:

Associate professor Dr. Halis Ulaş stated that temporary settlement areas in Kahramanmaraş are as follows: Avşar 1-5 (estimated population 4000), July 15 National Garden Tent City (estimated population 4000), KAFUM Tent City (estimated population 7500), Saim Çotur Tent City (estimated population 3000), TüvTürk Tent City (estimated population 1000), West Park Tent City (estimated population 600), Kılavuzlu Tent City (estimated population 1000), Karaziyaret Tent City (estimated population 1000), and Eastern City Tent City (estimated population 500). The TüvTürk and July 15 National Garden Tent Cities primarily house Syrian refugees who have experienced earthquakes and have a more socioeconomically deprived population. Additionally, Dr. Halis Ulaş informed that a container city is being established in the Karacasu region, which is about 10 kilometers away from the city center of Kahramanmaraş, and three phases have been opened, each containing about 150-200 containers.





Although the Necip Fazıl City Hospital and the university hospital are the two primary healthcare facilities providing services in the city, the accommodation problem for staff negatively affects the scope and quality of the service.

Mental Health and Psychosocial Services:

A joint meeting was held with the coordinator of the Ministry of Family and Social Policies, the field team responsible for psychosocial services, the head of the Department

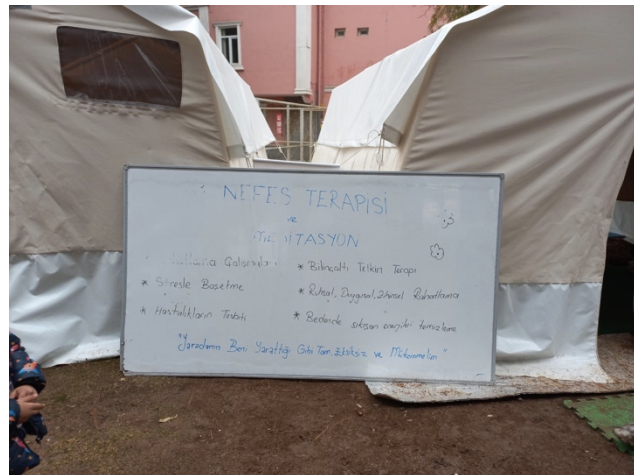
of Psychiatry at KSU Medical Faculty, and the volunteer psychiatry team of PAT. According to the information obtained from the Ministry of Family and Social Policies team, the teams working in the field perform their duties in groups in the tent and container cities. They reach the tent and container units by filling out existing forms and asking about their needs. However, it was learned that there is no clinical psychologist among these teams, and needs aren't being evaluated sufficiently. In the city, it is observed that there is no coordination among the teams of the Ministry of National Education, the Ministry of Family and Social Policies, and the Ministry of Health, as well as various associations and trauma unit teams, as is the case everywhere.

The Medical Faculty Hospital of KSU in the province appears to be sturdy and capable of providing services. However, many physicians there still need help with housing issues.

Assessment:

The coordination problem persists here as well, just like in other regions. Although the organization of services in the center of Kahramanmaraş seems relatively manageable, it is observed that difficulties persist in districts such as Elbistan and Pazarcık. There is still a problem with accommodating psychiatry and other specialties.

It is vital to prevent unsuitable professions or organizations from providing psychosocial support in the field in Kahramanmaraş, and to address the perception among the public that they do not receive adequate support in some districts or tent cities. It is unclear why, even though the first month of the earthquake has passed, support services such as food and other assistance are still being provided by foundations and religious communities rather than the Red Crescent or government agencies. Urgent coordination among all ministries and professional associations is necessary to effectively coordinate psychosocial services.



SPECIALIST TRAINING IN PSYCHIATRY IN THE REGION

The situation of the psychiatry assistant doctors and specialist training in the region is a problem that urgently needs to be solved. Many bed units in current hospitals are being used for different units or housing purposes. The accommodation problem of the teaching staff is evident. From the perspective of assistant doctors, the uncertainty of the future and the interruptions and losses they will experience during their specialist training affects their educational expectations and indicate that they will have difficulty practicing their profession.

To address this issue, university administrations must take urgent action and provide rotation opportunities for assistants outside the region for at least one year until urban life is restored. The report found that there are 43 assistants in the three provinces visited, out of a total of 94 assistants receiving training in the entire earthquake zone. Given this situation, it is highly unlikely for regional universities and hospitals to provide adequate specialist training. It is imperative that the problem of these assistants is resolved urgently, and an approach that prioritizes their welfare should be adopted. The right to education of individuals should not be restricted by factors that cannot be compared with the quality of specialist training, such as the city's density.

PLACE WHERE SPECIALIZATION TRAINING IS PROVIDED	Education Staff			
	Resident Physician	Specialist	Associate Professor	Professor
Mustafa Kemal University Faculty of Medicine Psychiatry Department (Hatay)	11	1	0	2
Sütçü İmam University Faculty of Medicine Psychiatry Department (Kahramanmaraş)	20	0	1	2
Adıyaman University Faculty of Medicine Psychiatry Department and Training and Research Hospital	12	7 (Training and Research Hospital)	3	0
Gaziantep University Faculty of Medicine Psychiatry Department	28	0	3	1
İnönü University Faculty of Medicine Psychiatry Department (Malatya)	16	2	2	4

MANDATORY SERVICE POSITIONS

The future of mental health services in the region depends on the healthy working and living conditions of the physicians who are sent there. This situation is essential not only for them but also for the patients and the people of the region.

There are 30 total open positions, with approximately 20 of them located in three cities and districts.

The benefit for the region's people is that the physicians who come here should be volunteers and their housing and security concerns should be addressed.

As recommended in our first-week report, the mandatory service period must be shortened.

The hospital and physician numbers for the mandatory service team in each province:

	The Hospital and Physician Numbers for the Mandatory Service Team in Each Province
HATAY	1151 Hatay Hassa State Hospital: 1 physician 1154 Hatay Altınözü State Hospital: 1 physician 454 Hatay Education and Research Hospital: 1 physician 467 Hatay Education and Research Hospital: 1 physician 480 Hatay Arsuz State Hospital: 1 physician 538 Hatay İskenderun State Hospital: 1 physician 546 Hatay Kırıkhan State Hospital: 2 physicians 575 Hatay Reyhanlı State Hospital: 2 physicians 588 Hatay Samandag State Hospital: 1 physician
ADİYAMAN	122 Adıyaman Kahta State Hospital: 1 physician 131 Adıyaman Education and Research Hospital: 1 physician 92 Adıyaman Besni State Hospital: 1 physician
KAHRA- MANMARAŞ	667 Kahramanmaraş Elbistan State Hospital: 3 physicians 697 Kahramanmaraş Pazarcık State Hospital: 1 physician 704 Kahramanmaraş Türkoğlu Dr. Kemal Beyazıt State Hospital: 1 physician 646 Kahramanmaraş Necip Fazıl City Hospital: 1 physician

PROBLEMS AND RECOMMENDATIONS

a) The magnitude of the earthquake, the difficulties experienced afterward, the extent of the destruction, and the size of the affected population indicate that the current disaster response plans, teams and psychosocial services must be adequately provided.

b) The service should be combined with a new strategy.

c) Psychosocial service and mental health are not independent concepts. According to the United Nations Inter-Agency Standing Committee Guidelines on Mental Health and Psychosocial Support, these areas fall under the same service delivery and team. The fact that mental health is also about preserving and improving the well-being of individuals makes the Ministry of Health a key stakeholder in this service in collaboration with the Ministry of Family and Social Services. Therefore, it is recommended that a coordination network between the Ministry of Health and the Ministry of Family and Social Services be established, with the Ministry of Health being one of the key stakeholders in this service.

a) The psychiatric services that the Ministry of Health aims to provide mainly involve a limited application based on hospital and outpatient services. However, the demand for mental health services created after the earthquake cannot be met solely by a hospital-based approach in terms of quality and scope.

b) A hospital-centered approach to mental health service should be abandoned. Recommendation: In addition to hospital-based services, field services should be quickly provided. A structure should be established with personnel from the Ministry of Family and Social Services to provide services in the field. Psychiatric service units should be established close to or within temporary settlements, especially tent and container cities.

a) It is observed that the psychosocial services provided in the field operate in a linear process that gradually incorporates other organizations or professions. This approach is not appropriate for post-disaster psychosocial support.

b) More cooperation and teamwork are needed among mental health services. This situation arises due to the management plan that limits the service areas defined by the Disaster and Emergency Management Authority. However, it is also related to the fact that psychosocial support service needs to be described with a collective service approach. This mistake should be corrected quickly. Recommendation: An action plan and strategy for mental health should be created in collaboration with the Ministry of Health, the Ministry of Family and Social Services, the Turkish Psychiatric Association, the Turkish Psychological Association, and the Association of Social Workers. A service network should be established accordingly. This service should be organized so that the whole team works together and is in constant contact. The service delivery process should be managed to maintain linear and cohesive levels of service delivery.

a) Although it is observed that the current personnel of the Ministry of Family and Social Services work diligently with their current resources and capabilities, their psychological first-aid training needs to be updated. b) Although other professionals can provide psychological first aid, trained professionals should primarily provide it. Recommendation: Psychological first aid training should be provided to all personnel involved in field services, including

the Ministry of Family and Social Policies staff. This training should be updated regularly to ensure the provision of effective services.

a) Although the personnel from the Ministry of Family and Social Policies in the field are assigned for seven or ten day periods, there needs to be more continuity. b) It is recommended to re-evaluate the personnel assignment system for the intervention personnel in psychosocial support service to assess the impact of the service they provide, form a field memory, and meet the continuing needs of the service recipients, which is of utmost importance. Proposal: The personnel assigned to the region should be encouraged to volunteer again in the same place by rewarding them with leave. Upon their return, they should be given one week of administrative leave to rest, work for one week in their current location, and be sent back for another week. This approach will prevent interruptions and repetitions in service provision and provide continuity for the service recipient, thereby increasing the quality of support provided.

a) The latest Mandatory Service assignments will send psychiatrists to the region. Twenty physicians will be assigned to Hatay, Kahramanmaraş, and Adıyaman provinces. Although the number of assignments is sufficient, the service environments have not yet been fully established. b) The housing problem persists. c) DHY periods do not include additional qualifications to increase motivation. Recommendation: As stated in our first-week report, Mandatory Service periods in the region must be shortened to ensure the motivation of the personnel and make the service in the region more attractive. Sustainable living spaces should be created for the personnel working in the region. Furthermore, places and conditions for physicians' information and physical renewal need should be provided urgently.

a) It is a severe and non-delayable problem for the students that the universities and research hospitals providing exceptional education in the region cannot return to this education for a while. b) This issue cannot be left to the discretion of educational institutions.

Recommendation: The transfer processes should be facilitated. The rotation process of specialization students who request rotation should not require approval and acceptance from both their current universities and the university they will attend. A significant decision should be made, prioritizing the trainee's benefit. Their universities should take initiative to address this issue.

The call for healthcare professionals and physicians who have experienced the earthquake to return to duty creates additional stress. Some individuals have had to relocate their children's schools and are now trying to find a new place to live. However, the rental problem in the area makes it challenging to find suitable accommodation.

Recommendation: The current workforce planning must consider the mental and physical losses of healthcare professionals and physicians caused by the earthquake. To resume life in the city, it is crucial to provide a place where those on duty can stay with their families. For this purpose, containers, prefabricated houses, and living areas should be provided.

The main concerns for our colleagues who will collaborate with the Ministry of Family and Social Policies in the region are their leave status and inability to prescribe medications. As mentioned above, since physicians in hospitals affiliated with the Ministry of Health do not

directly interact with the field teams, the prescriptions written by the volunteer physicians in the psychosocial support team are crucial.

Recommendation: To ensure continuity of service, it is necessary to allow our psychiatrist colleagues who are PAT volunteers and collaborate with the Ministry of Family and Social Policies to prescribe medications by providing their diploma registration numbers to the relevant authorities. Furthermore, these PAT volunteers and cooperating psychiatrist colleagues of Ministry of Family and Social Policies should be granted administrative leave during their service to maintain continuity of care.

TURKISH PSYCHIATRY ASSOCIATION FIELD AND ACTIVITY REPORTS

- PAT Hatay Adana First Week Field Assessment Report: <https://psikiyatri.org.tr/3704/tpd-hatay-ve-adana-ilk-hafta-alan-degerlendirmesi-raporu> (Note: This link leads to a report on the initial field assessment in Hatay and Adana by the Turkish Psychiatry Association)
- PAT Hatay Center, Iskenderun, Kahramanmaras Center Narli Second Week Field Assessment Report: <https://psikiyatri.org.tr/3713/turkiye-psikiyatri-derneği-hatay-merkez-iskenderun-kahramanmaras-merkez-narli> (Note: This link leads to a report on the second week field assessment in Hatay Center, Iskenderun, Kahramanmaras Center Narli by the Turkish Psychiatry Association)

- PAT First Week Area Report:



- PAT Second Week Area Report:



- PAT First Month Activity Report:

