## March 08, 2010 Başyurt - Karakoçan (Elazığ) Earthquake : Psychosocial Evaluation Report

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## Introduction

This report is based on the observations of our team in the earthquake affected villages of Elazığ, interviews with authorities and survivors and focus groups with the survivors of the March, 8, 2010 Başyurt - Karakoçan (Elazığ) earthquake conducted in our field trip on the 3-5 April, 2010, nearly one month after the quake. This report is a briefer version focussing on the psychological impact of the quake. In our field trip we visited the Disaster and Crisis center located in Kovancılar, and the villages of Okçular, Yukarı Demirci, Kayalık and Göçmezler.

## Psychological impacts of the earthquake

Research into the psychological impacts of earthquakes revealed that survivors show various post-traumatic stres reactions, such as fear, anxiety, sadness, bereavement, anger, memory and concentration problems, irritability and hightened arousal, sleep and appetite problems, flashbacks related to the event, unwanted intrusive thoughts and images and avoidance of quake reminders (Karanci, 2005). These reactions are expected normal stres reactions to an unusually traumatic life event. The severity of these reactions usually subsides over time and the survivors go through various stages, such as the shock stage, the reaction stage, the processing and finally the reorientation stage. Since our visit was only a month after the quake we expected the survivors to be in the reaction stage characterised by a host of different emotional reactions, somatic complaints and avoidance of quake reminders. The most noticable psychological reaction seemed to be fear of earthquakes and staying in closed places. Various stumuli, like slight wind or shaking seemed to remind the survivors of the quake and made them very tense. It is very understandable that due to heavy damage they were reluctant to stay even in non-damaged buildings. Since formal damage assessment was not yet completed it is a rational decision for them to stay in tents even though some houses seemed undamaged. Some survivors reported problems in sleeping, memory problems, tension and irritability. Female survivors reported being burdened by child care and difficulties in taking care of their children and their families under very difficult physical conditions. Thus, on top of the devastation from the quake the post-quake living conditions seemed to further add to the psychological stress reactions.

As can be expected, those who lost their family members seemed to display more severe post traumatic reactions, like flashbacks from the quake, hearing again and again the screaming of those around them and the noises from the falling objects and buildings. Darkness, shaking, wind and noise startled them. Some of those who lost their loved ones received psychological support, either in the hospital or from the psychologists who worked in the area. Some were prescribed medications. It seems vital that those with severer reactions are followed and provided with necessary psychological care if their reactions do not subside.

For facilitating the mental health of disaster survivors, initially meeting their basic needs and providing necessary resources is very important. Security, shelter, food and clothing are the basic items needed. It seemed that the distribution of these basic necessities went very smoothly through the Kovancılar, Crisis Centre and the Turkish Red Crescent. The survivors expressed their gratitude to the state for the provision of tents, prefabric houses, stoves,

blankets, food and clothing. There seemed to be consensus on the adequacy and the effective distribution of aid, except for the first couple of days following the quake.

It is known that the provision of social support has a very important buffering effect for decreasing psychological distress in earthquake survivors (Sümer, Karancı, Kazak-Berument, and Günes, 2005). In the quake hit villages a very favourable condition for lessening the impact of trauma seemed to be the availability of social support and the close ties between the survivors. The villagers were all concerned for each other and reported that they take care of especially those who lost their relatives and family members. Although, such a concern seemed very sincere, the majority of those who were in the village suffered extreme material loss themselves. They lost their houses, belongings and animals and thus although they seemed to have the good will to help others they may not be very efficient in providing social support to the ones who really need it. Psychological support, in the form of normalization of psychological reactions by providing psychoeducation, screening for those with more severe reactions and following them up for more specialised psychological approaches is needed. This has been partly adressed by by three psychologists from the Elazig, Health Directorate and also from the psychosocial workers from the "Psychosocial Services in Disasters Association (APHB) (Afetlerde psikososyal Hizmetler Birliği). This association has been formed in 2006, by a protocol between Turkish Red Crescent, Turkish Psychology Association, Turkish Psychiatry Association, Turkish psychological Counselling and Guidance Association and Child Psychiatry Association. The APHB works in the aftermath of various disasters by first assessing needs and then providing psychological support to adults and to children. The situation in regards to the recognition of psychological reactions in survivors and organizing support is a very important development in the aftermath of disasters in Turkey. This need became visible following the Marmara and Düzce, 1999 earthquakes and services have been developed and planned accordingly. Thus, the short term psychological support seems to have operated in the area. However, these services need to be extended to cover the longer term needs of more affected survivors. Elazığ has a specialised mental health hospital with psychiatrists and psychologists, thus these services can be provided in the longer term with a suitable referral system.

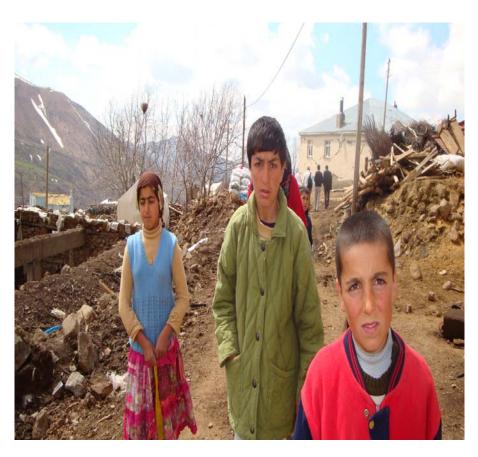
The survivors reported that everybody in the village knows each other thus they do not have problems with security which is another positive condition for the post disaster psychological state of the survivors. Thus, socially survivors feel quite safe and supported in the village. Although some survivors who have relatives in nearby settlements, like Kovancılar and Elazığ have left the area still there seemed to be an adequate number of survivors staying close to each other.

Thee physical conditions of the villages are full of reminders of the traumatic event. Children, especially in Kayalık and Yukarı Demirci villages were playing among the rubble, in danger of injuring themselves and being repeatedly exposed to traumatic reminders. This seemed like a very unfavourable condition for children.



Child among the rubble

Since the school buildings were heavily damaged children have to go to another village with minibuses. Returning to normal living routines is pscyhologically needed for all survivors including children. Thus, this seems to be a good solution for the school aged children. However, for younger children, pre-school children facilities are needed to facilitate the expression of their fears and emotions through various play and drawing activities. This arrangement was missing in the villages. Furthermore, children from Yukarı Demirci village were first sent to a district boarding school, however they reacted with anxiety and wanted to be with their parents and thus they stopped going to school. For the normalization of their lives and for allowing them to express their feelings a school needs to be operated in this village. This can be a large tent. However, we learned that the teacher left the village. Children need security and continuity in their lives to process the traumatic effects of the disaster. Thus, it is highly advisable to have their teachers back and to resume school activities.



Children from Yukarı Demirciler

It is known that the chronic hassles and stresses of the post-disaster environment also contributes to the psychological distress of survivors. Life in the aftermath of the quake in the prefabricated huts and tents carries its own hardships. At the time of our field trip the Turkish Red Crescent was still distributing cooked meals once a day and bread. When this activity ceases the survivors may have a more difficult time in trying to prepare all their food themselves. Mobile kitchens were not provided and certainly it will help in reducing the burden of especially woman.



Living arrangements in Kayalık village

Furthermore, having large tents for letting survivors gather and share their feelings will be valuble for giving a medium for the sharing of traumatic memories, normalization of reactions and learning of coping strategies.

The extensive media interest, especially in the Okçular village seemed to have led the survivors, especially children to get used to attention, especially attention when they talk about their suffering. This, may have created further traumatization among the children of Okçular, who seemed to be overly eager to talk about the horrible sights and dead bodies. In future disaster situations it is highly advisable to limit the contact of the media with children in order to protect them from unnecessary exposure to traumatic reminders.

## References

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