

Türkiye/Syria Earthquake (February 2023)

Key MHPSS Considerations

Impact of emergency on older people's mental health & psychosocial wellbeing

Surviving an emergency or disaster, such as the recent earthquake, can significantly impact the mental health and psychosocial well-being of older people and their families/communities. Exposure to such a disaster, including loss of, or separation from family members and friends, displacement and deterioration in living conditions, inability to provide for oneself and one's family, inability to take care of oneself and/or dependents, and lack of access to services can all have immediate, as well as long-term consequences for survivors' overall wellbeing and health. With the right support, including mental health and psychosocial support, most people will be in a better position to manage and cope with their difficult and challenging situation. Given that older people play important and diverse roles in their families and communities, ensuring their mental health & psychosocial wellbeing not only safeguards their fundamental rights, but also supports the overall wellbeing of others who rely on them.

The ways in which humanitarian assistance is managed and distributed can also have a significant psychosocial impact that may either support or cause harm to those affected by the disaster. Humanitarian action is strongest if affected populations, including older people, are included in guiding, and supporting the response. Assistance should be delivered in a compassionate manner that promotes dignity, empowers older people and their communities' self-belief and resilience through meaningful participation, respects the importance of religious and cultural practices, and strengthens community-based ways of protecting & supporting each other.

The mental health & psychosocial impacts of the recent earthquake/aftershocks for older people with and without disabilities may include the following reactions and/or emotions which are normal given what they've experienced:

- Feelings of concern, worry, and uncertainty about the future.
- Heightened anxiety about further earthquakes and aftershocks and what to do.
- Those with chronic illnesses may be frightened about being unable to get their medicine and or health care which can impact their overall health & wellbeing.
- Worries about financial and economic hardship now and in the future and how they will meet their basic needs.
- Increased stress due to displacement/multiple displacements and further changes in daily routine along with increase in responsibilities (e.g., caring for children
- Heightened stress and worry about the possible increase in violence and abuse due to family/household tensions because of displacement, lack of access to basic needs and livelihoods.

Key MHPSS Considerations for supporting older people with and without disabilities:

- **Assessment (Sex, Age, Disability, Disaggregated Data):** Assess the situation of older people with and without disabilities and their caregiver/families to understand the different impacts, barriers and risks they face following the earthquake. Also, consider their different capacities and ways of coping or managing their situation and how that can be strengthened.
- **Some older people will experience increased psychosocial distress¹ in response to the earthquake.** Those with underlying mental or physical health conditions, who live alone, who are isolated, have chronic health issues, caring responsibilities, who have lost family/friends, are displaced may be especially impacted. However, this initial psychosocial distress is a normal response to an emergency. It's important that staff know how to provide basic psychosocial skills and/or psychological first aid so that they can provide sensitive and compassionate support to older people who are distressed. Basic PSS² and PFA³ involves helping older people to feel safe, connected to others, listened to, feel calm and reassured. PSS can also link older people to additional social, physical, and emotional support which can help them feel better able to manage their situation and emotions.
- **Consult older people, including older people with disabilities to ensure their needs and views are included and make consultation as inclusive as possible by considering issues of language, accessibility, timing, method etc.:** Everyone deserves to be treated with respect, dignity and understanding, especially in times of distress when a person may be sharing their concerns and worries about what has happened to them/their family and the future. In many situations, older people are brushed off assuming they do not have anything to offer or what they are saying is incoherent. It is important that the humanitarian response does not neglect older people's needs or discriminate based on age (e.g., denying or limiting older adults' access to screening or care based on their chronological age), gender, disability, or ethnicity.
- **Be sensitive to the many losses older people may have faced:** The death of family members or close friends due to the earthquake may lead to a wide range of emotions for older people, including sadness, anger, guilt, difficulty sleeping, fatigue and lower levels of energy. It is important to note that these feelings are normal reactions in this situation. Assist as much as possible, access to appropriate cultural, spiritual, and religious practices and rituals can ease distress and enable mourning and grief.
- Remember that **many older people have been displacement multiple times.** Facing displacement and loss can be difficult, however for many older people who have experienced this before, these accumulated losses and displacements can really impact their mental & physical health and wellbeing. Therefore, its important to keep this in mind when providing mental and psychosocial support for displaced older people.
- **Develop holistic MHPSS support that has a strong emphasis on the strength and resourcefulness of older people, their caregivers, and communities:** Restore and/or strengthen community and family support systems that can help promote ways of coping and rebuild community links of affected older people and their families (e.g., through community volunteers, spiritual support, building intergenerational links etc.).

¹ anxiety, worry, distress, despair, hopelessness etc.

² a. taking time to listen/active listening; b. talking with the older person and reassuring them; c. knowing when to refer or link older person to another organisation who could provide more specialised psychosocial support; d. identifying and mobilising community volunteers/peer supporters

³ Look, listen and link -IFRC

- **Remember that older people are a diverse group:** Sex, age, ethnicity, language, literacy, legal status, and other aspects of each individual older person impacts their potential vulnerability and capacity after a disaster. Given that older people represent a very diverse population group, avoid labelling them all as frail and vulnerable. Often, older people are capable of coping with and adapting to such emergency situations and contribute to their families and communities in various ways, and often play key roles in emergencies - for example taking on childcare responsibilities. Older people can have strong community ties and are well placed to communicate messages and provide psychosocial support to their peers and families.
- **Social connections are important for health & psychosocial wellbeing:** Being socially connected can help maintain older people's emotional, cognitive, psychological, and physical health & wellbeing. Home visits by volunteers, peer support from other older people, group support, intergenerational links, can create a sense of safety and responsibility for older people, help them connect with other people who have been through the same experience, give assurance that there is someone who will listen to them and support them and who they in turn can also support and therefore feel needed.
- **Provide opportunities for older people to volunteer and/or take on roles as peer supporters:** It is important to highlight the resilience and positive contributions that many older people can and do make in emergency situations. Providing opportunities for them to support others and their community is an important way of promoting their sense of dignity and responsibility.
- **Ensure that older people have access to reliable and accessible information from trusted sources:** It is important that older people and their caregivers/families have access to reliable information from trusted sources. Information on where they can access support and from whom, updates on the situation and safety of their location, simple facts about the earthquake, possible aftershocks and what to do, where to find accurate and reliable facts.
- **Ensure information is shared in different ways:** All messages need to be disseminated in accessible formats through communication channels that are familiar to, and used by, older people, considering those with sensory and/or cognitive impairment and dementia and/or who may be illiterate. Therefore, it's important that different modes of communication are used (e.g., written, audio, visual, Braille, sign language, pictures, sketches, or audio recordings).
- **Remember the important support provided by caregivers to older family members:** The impact of the earthquake will have caused additional stress to family members and/or caregivers, particularly with displacement of families, possible loss family members, loss of livelihoods and uncertainty about the future. Caregivers may feel more anxious, worried, agitated, irritated or angry than usual and sometimes in such situations an increase in conflicts and disagreements can occur. Staff should share with caregivers information on where and how they can access additional support they may need. Also provide them with psychosocial support including ideas on how they can take care of themselves and where possible, consider linking them to others (peer to peer support; group support) that can help them manage their situation.
- **Recognise when an older person needs additional or specialised MHPSS support:** It is important that staff can recognise when an older person and/or their caregiver may need additional specialised support and how they can access this support. There should be established links with other organisations/specialised service providers and an agreed referral process and follow up support.

- **Be aware of the stigma that is often attached to mental health & wellbeing and/or those seeking such support:** It is important to understand how stigma may impact an older person's ability or willingness to talk about their mental health and psychosocial wellbeing (or that of family members). Sensitize staff and volunteers to the issues around stigma and mental health and the possible impact on older people and their family/community.
- **Recognise that older people, particularly older women, may be at higher risk of violence, abuse/elder abuse, neglect, or overprotection⁴ when families have been displaced:** Abuse can occur in many forms – financial, physical, verbal and neglect. In such situations, the abuse is by someone close to them, such as a partner, relative, friend or caregiver. As with any abuse the older person may be unwilling or unable to report it for reasons such as isolation, dependency, fear, control. Therefore, it is important that staff are aware of the sensitive issues around such abuse and can recognise the signs and know the steps they need to take to provide them with the appropriate support (including mental health & psychosocial support) they need. Follow up is essential to ensure the older person is receiving the support they need.

Additional resources:

- [MHPSS Emergency Briefing Kit Turkiye/Syria Earthquake \(2023\) \(available in Arabic\)](#)
- IFRC – PS Centre - [Talking about mental health and psychosocial support in emergencies \(Arabic\)](#)
- [Infographics: Talking about MHPSS in emergencies \(Arabic\)](#)
- IFRC-PS Centre [Common reactions to distressing situations and extreme stress](#)
- [HelpAge International \(2020\) - Psychosocial support for older people in the context of COVID-19](#)
- [IASC \(2020\) Basic Psychosocial Skills \(Arabic\)](#) – *adaptable for current context*
- [Earthquake Survival Tips](#)
- [IASC \(2020\) Operational Considerations for Multisectoral MHPSS programmes during COVID-19 Pandemic \(Chapter 4 – Older Adults\) \(Arabic\)](#)
- [IASC \(2007\) Mental Health & Psychosocial Support in Emergencies \(Arabic\)](#)

⁴ "Overprotection" refers to situations where caregivers or family members insist on doing everything for the older adult, even activities that they could do for themselves. Overprotection may occur when a family member or caregiver perceives that it is "easier" for them, rather than for the older person, to carry out the activity. Overprotection is disempowering and can lead to increased disability, as well as feelings of loss of control and helplessness.