



## ORIGINAL ARTICLE

# Effects of COVID-19 on integration of women refugees into Turkish society

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## Abstract

The objective of this research is to determine how the COVID-19 pandemic influenced integration of women refugees into Turkish society. The study was designed as a qualitative study between March 2020 and June 2020. The notion of integration is redefined as an eight-dimensional model composed of education, sociocultural, health, economy, legal, shelter, family and security. Semi-structured interviews were conducted by telephone, with 50 women refugees in Turkey, about the impact of COVID-19 on integration. The results of the research indicate that most women refugees had both positive and negative experiences in economic, education and sociocultural dimensions of integration. The COVID-19 outbreak affected their integration in an unprecedented way, especially in daily and work life as well as access to health services. Similarly, language barriers faced by refugee women create significant challenges and obstacles, making the integration process more complex. Refugee women stated that COVID-19 positively influenced the security dimension of integration.

## INTRODUCTION

A refugee is someone who has to leave their country of origin and is unable or unwilling to return because of a serious threat to their life or freedom. The international legal definition of the term is stated in the 1951 Convention (UNCHR, 1951). The 1951 Convention relating to the Status of Refugees and its 1967 Protocol are the foundations of international refugee law which defines the term "refugee" and establishes the principle that refugees should not be forcibly returned to a territory – *the principle of non-refoulement* – where their lives or freedom would be threatened. The legislation also sets out the duties of refugees and responsibilities of states towards them and

calls on governments to cooperate with the United Nations High Commissioners for Refugees (UNHCR), respect rights of the people who have to flee their homes and provide protection.

According to the latest figures, there are 82.4 million forcibly displaced persons, 26.4 million of whom are recognized refugees (UNCHR, 2021). Large numbers of refugees, asylum seekers and internally displaced person (IDPs) live in refugee camps generally set up and run by governments, in cooperation with international organizations and NGOs within or near their country of origin (Janmyr, 2013). Throughout the years, this number has risen due to several reasons such as persecution, war, discrimination based on sexual orientation and gender identity, hunger and climate change (Rueckert, 2017). Even though the challenges faced by refugees might seem to be country or region specific, the root causes of forced displacement often go beyond country borders and need to be addressed by international solidarity and cooperation mechanisms. In order to provide a response, states and international organizations tend to focus primarily on asylum seeking and forced migration as urgent issues and aim to work on longer-term development programmes accordingly. From this perspective, integration of refugees remains one of the challenges to the established patterns of societies within the scope of this response, especially in the long run (Heckmann & Schnaper, 2016). In this respect, successful integration efforts can play a key role in overcoming challenges for refugees, which need to be addressed holistically. The Global Compact on Refugees adopted by the General Assembly of the United Nations in 2018 similarly highlights the significance of the local integration prospects by “taking into account the needs of both refugees and host communities” (UNHCR, 2018). Integration as a concept can be better understood when it is well defined and discussed together with its various dimensions.

One can suggest that gender is significant in any attempt to understand the concept of integration. Bringing in the gender perspective can play a key role for an efficient integration environment, paving the way to make “refugees thrive, not just survive” as vividly mentioned by the Under-Secretary-General for Global Communications of the United Nations, Melissa Fleming. In the literature, women and children are two of the most vulnerable groups among the immigrant and refugee communities (Martin, 2004). Refugee women generally face specific challenges and protection risks in transit, including family separation, psychosocial stress and trauma, health complications particularly for pregnant women, physical harm and injury, and risks of exploitation and gender-based violence (In Focus: Women refugees and migrants, 2020).

Turkey, with its unique geographical position bridging Europe, the Middle East and Asia, is both a transit and a destination country for refugees and asylum seekers. While the number of refugees has been steadily increasing globally, as of 2021, the country hosts the largest refugee population in the world. According to UNHCR data, Turkey hosts around 4 million refugees; 3.6 million are Syrians under temporary protection and the rest comprises other nationalities in need of international protection (UNHCR Operational Update, July 2021). This appears to be a rampant rise experienced only in a decade given that the number of people in need of protection in Turkey was only 58,000 in 2011. The main reason for this massive increase in numbers is the civil war that started in the same year in Syria. As a result, integration of refugees was one of the main priorities for Turkey immediately after the massive influx of Syrians (Akcapar & Simsek, 2018). With the outbreak of the COVID-19 pandemic, pre-existing challenges changed, evolved and led to a more complicated situation not only in Turkey but also in all countries of the world. The pandemic is an exogenous and unexpected factor, which deepened the vulnerability of refugees regardless of their country of origin. Thus, the objective of this research is to determine how the COVID-19 pandemic influenced integration prospects of refugee women in Turkey, and the study was designed as a qualitative study.

## THE CONCEPT OF INTEGRATION

Integration is a contested concept, which has various definitions and contains different approaches. Since the early ages, the concept of integration was related to population changes and contemporary challenges for societies

(Morén-Alegret, 2002). According to Berry et al. (1989), integration is an interaction strategy that enables migrants to adapt to society without losing their identity. Favell defines the concept of integration as an ideal goal for society as a whole (2016). The notion of integration has a different meaning in an environment where societies become closer and their interactions increase with the effect of globalization (Toprak, 2007). Some elements might have a facilitating effect on successful integration such as cultural components of the country of origin, mutual relationship of economics, geographical proximity of the host country to the country of origin, having a common identity and the same ethnic roots and the existence of a common enemy. Understanding the dynamics of integration is important because developing social policies can bring societies together around common ideas and values, as well as play a role in maintaining peace, creating a new image and identity and achieving greater goals. In other words, integration is incorporated into political, economic and social dimensions and needs to be examined with an interdisciplinary approach.

When we look at the definitions of integration, there is no single and inclusive definition which stems from the different approaches to integration and the changing nature of migration. As a result, different researchers employed various integration definitions and dimensions to understand and measure integration (Açikalin et al., 2020; Entzinger, 2000; Harder et al., 2018; Penninx, 2005; Phalet & Swyngedouw, 2003). In light of this reality, we aimed to employ the following eight dimensions of the integration process in order to analyse how COVID-19 affected the integration level of refugee women in Turkey; education, sociocultural, legal, economy, health, security, shelter and family. Figure 1 visualizes our eight-dimensional integration model.

*Education:* Education is vital to address the specific needs of refugees and empower them to become active participants in society. Education is one of the lynchpins of the integration process that is composed of access, participation and performance to gain the necessary skills (Erçetin et al., 2018).

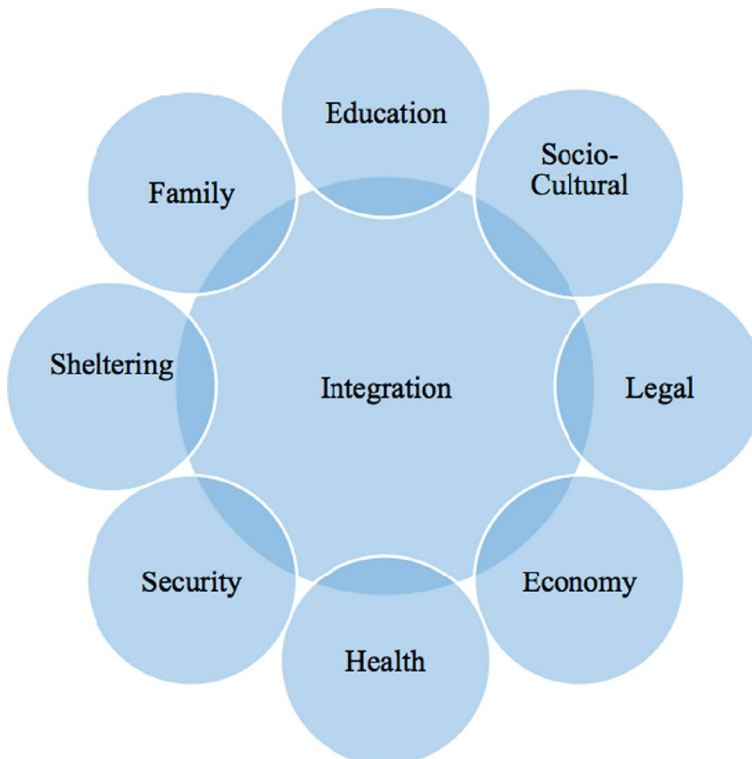


FIGURE 1 Eight dimensions of integration

*Sociocultural:* Sociocultural integration is generally measured by host country identification, proficiency in use of the host country language and interethnic social contacts (Ersanilli & Koopmans, 2010; Staton et al., 2007). This dimension also includes challenges of refugees that come into being as a result of cultural differences.

*Legal:* This dimension can be defined as guaranteeing certain core rights and obligations of refugees and immigrants (Aman & Rehrig, 2011; Entzinger & Biezeveld, 2003). It is also important whether, and to what extent, refugees are regarded as full-fledged members of the political and social community in terms of rights.

*Economy:* The economic dimension of integration measures participation in the job market, income level, satisfaction with employment situation and the ability to meet different levels of unexpected expenses (Fleischmann & Dronkers, 2007; Harder et al., 2018).

*Health:* Health status, healthcare and public health are core components for the integration of immigrants and refugees (Giannoni et al., 2016; Zimmerman et al., 2011). Equal access to various health services and quality can work to provide an assurance for refugees about survival and integration into society (Agudelo-Suárez et al., 2009).

*Security:* Security is one of the basic human needs in Maslow's hierarchy of needs (1954). Security and integration of refugees are intricately linked with each other (Cheung & Phillimore, 2013). Like other dimensions, security has also a mutual meaning for refugees and host communities, which can work to combat verbal and physical attacks, discrimination and xenophobia. In other words, security is an undeniable link between refugees and host society to build social peace.

*Shelter:* Permanent housing is one of the vital components for integration of immigrants, which is directly related to the other dimensions of integration as well as a prerequisite of living peacefully in society (Palidda, 1998). Finding solutions to permanent housing is also one of the main elements in sociocultural integration of immigrants (Tosi & Ranci, 1994; Hasgül and Özsoy, 2017).

*Family:* Family means the home environment, which is related to the existence of parents and the size of the family, and has undeniable impacts on economic and living conditions of refugees (Graham et al., 2016; OECD/European Union, 2015). This dimension provides useful information not only about immigrant experiences of integration but also about social trends in general (Kulu and Gonzalez-Ferrer, 2014).

## BEING A WOMEN REFUGEE

As mentioned above, women are one of the most vulnerable among the groups of refugees and migrants. According to the official statistics, 50 per cent of refugees and 48 per cent of migrants all around the world are women (IOM, 2020). In Turkey, women make up 44 per cent of Turkey's total refugee population (Kamiloğlu, 2019). Harzig states that women participate in refugee movements due to familial reasons, working conditions, conflicts and disasters such as war or famine (2003).

Much research was conducted on the theme of refugee women and determined that women are confronted with adversities such as gender-based violence, economic restrictions and human rights violations on their journey (Gündüz, 2011; Kaya, 2015; Miller et al., 2007; Özvarış et al., 2019; Thomas, 2003). In addition to the difficulties experienced on the journey, refugee women who start a new life in the country of asylum upon arrival might feel excluded due to barriers such as language and culture and may not fully benefit from the services available to them (Barin, 2015). Besides that, women might struggle against gender inequality and discriminatory approaches based on gender in areas such as work life, education, social security, health and politics (Arabacı et al., 2016). Following the start of the mass influx of refugees from Syria to Turkey, research conducted with Syrian women showed that women face housing problems, deficiency of basic needs, unemployment, gender-based violence and informal employment in disadvantaged sectors. These studies also revealed that Syrian refugee women experienced problems in accessing health services and provision of general health status (AFAD, 2014; Barin, 2015; Kaya, 2015; Kirişçi, 2014; MAZLUMDER, 2014). The difficulties that Syrian women in Turkey experience are likely to impact their integration prospects negatively. The problems that women face also have a direct impact on the other members of the household.

## COVID-19 PANDEMIC AS AN EXOGENOUS FACTOR

The COVID-19 pandemic has undeniable impact on integration process as a global health threat. In this context, it is quite important to examine the integration of women refugees into host societies with a multidimensional perspective and to reveal the challenges caused by the pandemic period. According to official reports, COVID-19 started in Wuhan city in China in January 2020 (Holshue et al., 2020). On the 11<sup>th</sup> of March, the World Health Organization (WHO) declared COVID-19 a pandemic that affected 114 countries (WHO, 2020). Although countries reacted to the COVID-19 pandemic in various ways, there are similarities regarding the measures taken. Nicola et al. summarized common consequences of COVID-19 pandemic prevention measures around the world as follows; social distancing, self-isolation and travel restrictions (2020). It further caused the closure of firms in different sectors causing massive damage to the economy, led to grave declines in global production and sales and increased unemployment worldwide. Furthermore, while the demand for consumer goods and services declined, the need for medical supplies increased significantly. The food industry also experienced rapid growth in demand due to panic and stocking trends.

As expected, under these circumstances, low socioeconomic groups in society can be deemed one of the most negatively affected groups during the COVID-19 pandemic. Refugees are at the core of these vulnerable groups who face problems in accessing basic services and formal and equal employment opportunities. Also, refugees are among the high-risk groups for contracting diseases, including COVID-19 itself, because they live in overcrowded conditions (Kluge et al., 2020). UNICEF Executive Director Henrietta Fore pointed out the reality as follows: "Refugees and migrants or internally displaced people – face immense barriers to accessing healthcare and preventative services like proper hand washing and sanitation facilities. So, when an infectious disease hits, their risk is compounded" (2020). UNHCR also carried out a social media campaign for global awareness raising by stating that *"everyone deserves to be protected from coronavirus. Refugees included"* (Live Blog: Refugees in the Covid-19 Crisis, 2021). In this respect, there were official calls for governments to urgently include migrants and refugees in their responses to the COVID-19 pandemic (Lancet Migration, 2020).

### Objective of the research

The purpose of this research is to determine how the COVID-19 pandemic influenced integration of refugee women into Turkish society. This study aimed to: (i) measure the effects of COVID-19 on integration of women refugees (in the dimensions of education, sociocultural, legal, economy, health, security, shelter and family); and (ii) in this context, determine whether the integration status of refugee women differs according to age, marital status, number of children in the family and number of individuals in the family. In this context, interviews with migrant women sought to address the following sub-problems:

1. How did the COVID-19 pandemic affect your daily life?
2. How did the COVID-19 pandemic impact health services provided to you as a refugee woman?
3. Did COVID-19 affect your relationships with other refugees?
4. How did the COVID-19 pandemic change your relationship with Turkish people?

### METHODOLOGY

This section provides information about the research model, participants, data collection tool, data collection and analysis. The study was designed as qualitative and interpretive research. Although definitions vary, the aims

of qualitative research are generally directed at providing an in-depth and interpreted understanding of the social world, by analysing people's social and material conditions, their experiences, perspectives and background (Ritchie et al., 2013). In interpretive research, the researcher aims to understand what a thing "is" by learning what it does and how particular people use it in particular contexts. In other words, interpretive research is centred on context-based meanings, rather than looking at generalized meaning abstracted from particular contexts (Schwartz-Shea & Yanow, 2013). Permission for field research with refugees was obtained from Republic of Turkey Ministry of Education on 10 May 2016. Table 1 provides demographic information about refugee women participating in the study.

As indicated in Table 1, 6 per cent of the participants were from Afghanistan, 12 per cent from Iraq, 14 per cent from Somalia and 68 per cent from Syria. Of the participants, 40 per cent were less than 20 years old, 28 per cent were between 20 and 29 years old, 12 per cent were between 30 and 39 years, 12 per cent were between 40 and 49 years and 8 per cent were 50 years and over. Of the refugee women, 38 per cent were single, 50 per cent were married, 8 per cent were divorced and 4 per cent were widowed. In terms of children, 48 per cent of the participants did not have children, 18 per cent had 1–3 children and 34 per cent had more than 3 children. When it comes to household size, 20 per cent of refugee women lived with 1–3 members and 80 per cent had more than 3 members in the household. For duration of residence in Turkey, 10 per cent of refugee women were living in Turkey for less than 1 year, 24 per cent between 1 and 3 years and 66 per cent for more than 3 years.

TABLE 1 Information about participants ( $n = 50$ )

Variables	Categories	<i>n</i>	%
Nationality	Afghanistan	3	6
	Iraq	6	12
	Somalia	7	14
	Syria	34	68
Age	20 years under	20	40
	Between 21 and 30 years	14	28
	Between 31 and 40 years	6	12
	Between 41 and 50 years	6	12
	50 years above	4	8
Marital status	Single	19	38
	Married	25	50
	Divorced	4	8
	Widow	2	4
Number of children	No children	24	48
	Between 1 and 3	9	18
	More than 3	17	34
Number of household	Between 1 and 3	10	20
	More than 3 persons	40	80
Residential time in Turkey	Less than 1 year	5	10
	Between 1 and 3 years	12	24
	More than 3 years	33	66
Total		50	100

## DATA COLLECTION AND ANALYSIS

Collecting data is one of the priorities for qualitative research. There are different tools to collect data such as focus groups, interviews, internet-based research and archival document research (Lamont, 2015). We chose to use interviews as the data collection tool in this research. A total of 50 respondents participated in the study voluntarily. The research was conducted between March 2020 and June 2020 when the official lockdown restrictions were in place. We communicated with refugee women who could speak the language in Turkish and received interpreter assistance for those who could not speak Turkish. In total, 50 participants were reached via telephone and teleconferences. Each of these sessions lasted an average of 20 minutes. In these interviews, four research questions were asked and the answers of the respondents were categorized in accordance with the relevant content. These questions were formulated to cover the eight sub-dimensions of the integration process, which are visualized in Figure 1.

In the first part of the interview, demographic questions were asked, followed by four other questions related to the global pandemic of coronavirus disease 2019 and integration. We were aware that there would be multiple perceived and/or experienced social "realities" concerning what happened, rather than a singular truth or narrative. Therefore, we assumed that the narratives could vary based on the perspective and background of persons being interviewed (Schwartz-Shea & Yanow, 2013).

In this respect, responses of the participants were categorized depending on the four interview questions and the percentages of the answers given based on the eight dimensions of integration. The descriptive analysis method was used in order to present the views of the participants as a whole in a systematic and thorough manner. The researchers then analysed the findings and interpreted them objectively.

## FINDINGS

### Findings related to the first sub-problem

The first sub-problem in the interview was *"How did the COVID-19 pandemic affect your daily life?"* and 86 per cent ( $n = 43$ ) of the participants stated that their daily life was negatively affected by the COVID-19 pandemic. The distribution of the views of refugee women according to the themes is as follows: family (25%), education (35%) and economy (26%). The answers of the participants about how their daily life was negatively affected by the pandemic in Turkey can be listed as follows:

- "Yes, the pandemic affected us too much, I couldn't go to the public education center especially." (Syrian-17 Years-Single)
- "The pandemic affected us, our education had to stop." (Iraqi-19 Years-Single)
- "The pandemic definitely changed our life. We couldn't go outside, we always have to stay at home, our workload at home got heavier." (Afghan-19-Years-Married)
- "The pandemic affected us especially economically. Everything stopped and businesses closed; our economic conditions suffered." (Syrian-34 Years-Married)
- "Our children completed primary education without any interruption but due to the pandemic, they cannot go to school physically now." (Syrian-28-year-Married)
- "My husband lost his job during the pandemic. That's why his attitude towards me has deteriorated. He became more aggressive due to economic problems." (Syrian-25 Years-Married)
- "Our children's education was interrupted and classes moved online; however, I have more than two children and we do not have enough computers and TVs to let them follow the classes." (Iraqi-30 Years-Married)

- “Turks give great importance to hygiene and sanitation. This experience also helped me pay attention to hygiene as a priority. When we were in Syria, hygiene was taken for granted by the government. With the pandemic, hygiene has become a top issue for my family.” (Syrian-18 Years-Single)

Although the vast majority of refugee women in Turkey affirmed that the pandemic highly affected their daily life, 14 per cent ( $n = 7$ ) of the refugee women expressed that the pandemic did not change their daily life. Some of the comments of refugee women are as follows:

- “In Turkey, we are supported financially by municipalities and by NGOs. Some of our neighbors also provided financial support to us despite the hardship of the pandemic conditions which affected them equally. Therefore, nothing changed in our life.” (Somali-32 Years-Married)
- “Refugee women cannot easily find work in Turkey. For example, my cousin who speaks four languages cannot find a job here because he has neither work experience nor a work permit. The pandemic did not change this reality.” (Iraqi-29 Years-Married)
- “We generally live in slums and rents have always been high. After the pandemic, rents continued to increase. So, nothing changed for us in terms of financial difficulty.” (Somali-17 years-single).
- “In Turkey, we feel very safe. Once again, with the pandemic, I saw that Turkey is the best country to stay in because all social services we get are still free.” (Syrian-16 year-Single)

## Findings related to second sub-problem

The second sub-problem in the interview was “*How did the COVID-19 pandemic influence access to healthcare services as a refugee woman?*” The experience of refugee women was examined under the theme of health. It can be said that 70 per cent ( $n = 35$ ) of the participants felt access to healthcare services was negatively affected by the outbreak of the pandemic;

- “We have always had problems with going to hospitals because of the language barrier. Now, the problem of getting an appointment at the hospitals is getting worse because of the pandemic.” (Syrian-42 Years-Married)
- “I had been feeling very comfortable going to hospitals in Turkey. However, due to the coronavirus outbreak, everything changed and I could not go to hospitals easily anymore.” (Syrian-16 years-Single)
- “The pandemic deeply affected our ability to reach healthcare services, as we can now only go to hospital to have our children vaccinated or to receive cancer treatment.” (Syrian-40-years-Married)
- “In the first months of the coronavirus disease, we could not go to hospitals even though my husband has serious health issues. This situation makes him nervous and creates tensions within the family.” (Syrian-25 Years-Married)
- “I was pregnant when this pandemic started. Even though the hospitals were open, I was afraid to go there due to the risk of infection.” (Somali-24-year-Married)

Contrary to a high number of respondents (70%) who claimed that COVID-19 impacted their ability to access healthcare services negatively, 30 per cent ( $n = 15$ ) of refugee women stated that they were not negatively affected or the pandemic did not affect their situation.

- “My family and I never had problems benefitting from the healthcare system in Turkey. Following the outbreak of the pandemic, we continued to have access to healthcare services like before.” (Syrian-28 Years-Married)
- “I am very happy to be in Turkey because our medical needs have been met by the Turkish government from



the first day of the pandemic. I watched on TV that even the richest countries did not have enough masks and gloves to distribute among its citizens. But we have everything here. I feel like I am valued here, like a Turkish citizen without a difference.” (Syrian-42-year-Widow)

### Findings Related to Third Sub-Problem of the research

In the third sub-problem of the research, the question “*Did COVID-19 affect your relationship with other refugees?*” was asked. The answers of the refugee women can be categorized under the following themes: sociocultural 41 per cent ( $n = 25$ ), shelter 33 per cent ( $n = 20$ ) and economy 26 per cent ( $n = 16$ ).

- “This pandemic is the worst thing in my life. We cannot see our relatives and have to stay at home for a long time.” (Syrian-17 Years-Single)
- “Normally, most of the refugee families live together in same neighborhood; however, we were not close to one another. Now, the pandemic made us closer as we see that support is vital in this period.” (Syrian-52 Years-Widow)
- “I don’t work and have three children. Because of the pandemic, our relatives moved in with us, which increased the intensity of my housework. I am so tired because of this.” (Syrian-29 Years-Married)
- “Normally, we, 10-15 women, used to gather to pray in one of our houses; however, because of COVID-19, we cannot meet anymore and I feel sorry that I can’t pray enough.” (Iraqi-29 Years-Divorced)
- “Our neighborhood is mostly inhabited by refugees. From time to time, we used to meet and have dinner together but after the pandemic no one wants to go out.” (Syrian-54 Years-Married)
- “As refugee women, we only socialize with other Somalis but because of this pandemic, we cannot see each other and spend time together.” (Somali-24 Years-Married)
- “Five of us (other refugee women) often gathered together to make some handcrafts to sell as a contribution to our family budget; however, because of the pandemic, we are unable to meet and I cannot bring extra money to my house anymore.” (Afghanistan-17 Years-Single)
- “My sister and her husband live in Konya and it has been 3 months that I have not seen them because of the pandemic.” (Syrian-24 Years-Divorced)

### Findings related to fourth sub-problem

The fourth sub-problem in the study was “*How did the COVID-19 pandemic change your relationship with Turkish people?*” The majority of refugee women answered this question based on the following themes; sociocultural 53 per cent ( $n = 30$ ), economy 25 per cent ( $n = 14$ ) and legal and security dimensions 23 per cent ( $n = 13$ ). It should be noted that some answers are multiple responses given by the same participants. Some of the views of the participants on the topic are as follows:

- “Before the pandemic, the language difference was the major obstacle in our relationship with Turkish people. I’m now trying to learn Turkish. After the outbreak of the pandemic, my Turkish neighbor started to behave in a more tolerant way as I speak Turkish.” (Somali-25 Years-Married)
- “Although the pandemic made our life difficult, it feels good to live in Turkey. I want to become a Turkish citizen and live here peacefully.” (Syrian-30 Years-Divorced)
- “We generally experience language problems. Sometimes, there are even misunderstandings between the two communities; however, after COVID-19, when they see us talking in Arabic, they treat us better and ask us whether we need masks or not.” (Syrian-17 Years-Single)

- “This global virus increased solidarity between the two communities. I observe my neighborhood where Turkish and Syrian people live together. Even though we cannot visit each other because of health reasons, Turkish people ask if we need anything when they see us on the street.” (Syrian-42 Years-Married)
- “We feel that Turkish people are uncomfortable because of employment competition. They say that our children and spouses increase the unemployment rate. It became worse after the pandemic. Turks are now more afraid of the increasing unemployment rate.” (Syrian-29 Years-Married)
- “I never had problems with Turkish people and this pandemic made me think more positively. For example, during this time Turkish teachers in our children's school started to call us more often to ask if are we okay and need anything.” (Afghan-30 Years-Married)
- “When Turkey declared the curfew, we did not hear because our TV was not working. I went out during one of the declared curfews and luckily my Turkish neighbors warned me to go back home in a serious way.” (Somali-19 Years-Married).

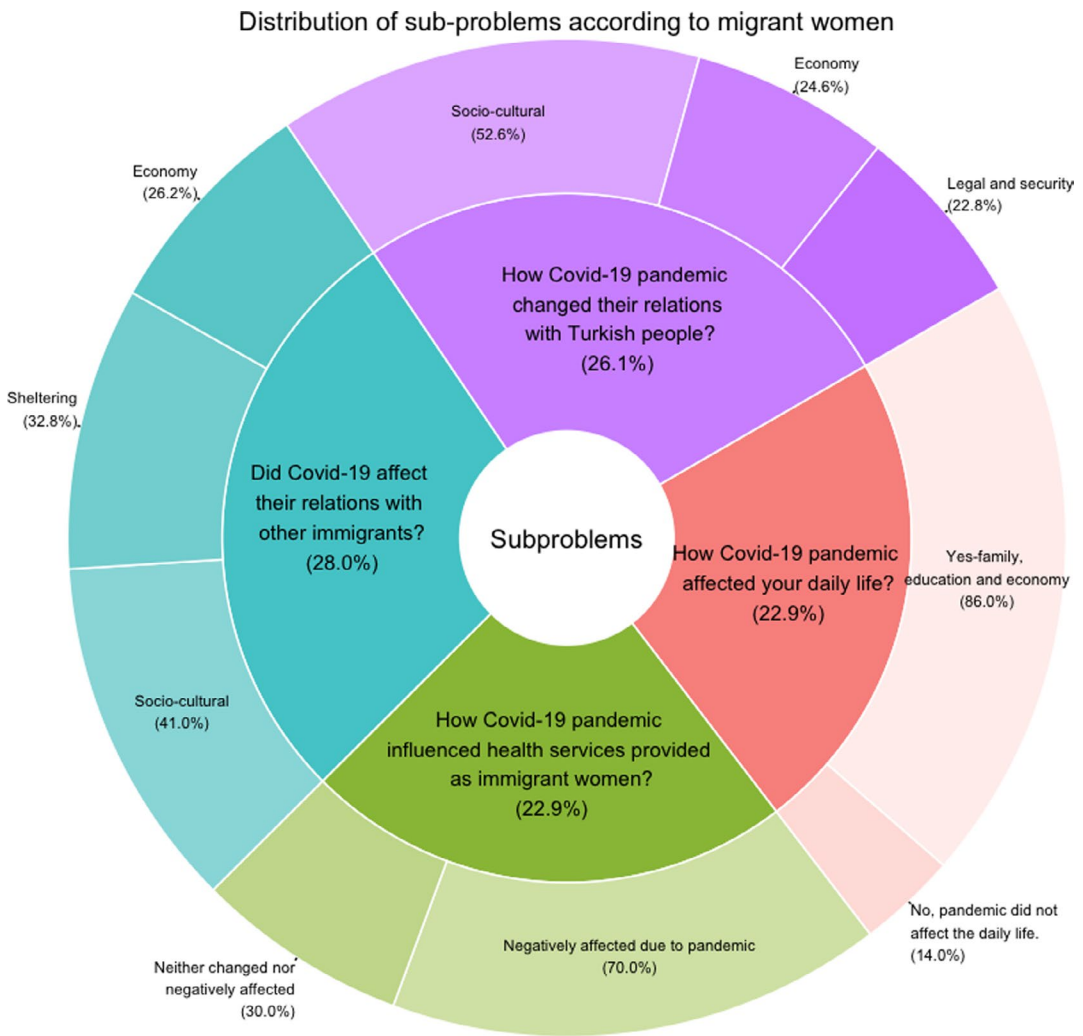
## RESULTS AND DISCUSSION

Figure 2 visualizes percentages of answers of women refugee for each sub-questions in the above. The first question aimed to discover the effects of the COVID-19 outbreak on the daily lives of refugee women. Answers to the question were evaluated depending on “Yes” or “No” answers. The vast majority of participants (86%) answered “Yes,” affirming that COVID-19 changed their daily lives. Among this vast majority, answers mostly clustered under the education (35%), economy (26%) and family (25%) dimensions of integration. All participants expressed that all kinds of educational institutions were temporarily closed where refugee women and children were receiving education due to the COVID-19 pandemic. Second, the majority of respondents suggested that their economic conditions were diminished by the pandemic. The same majority also mentioned that most of their spouses lost their jobs due to government-imposed measures and lockdowns. Refugee women had to stay at home more, which increased their workload at home. Only a minor group of refugee women responded “No” meaning that the pandemic did not affect their daily life. Some participants also explained that they continued to receive aid from municipalities and various NGOs during the COVID-19 pandemic.

The second question was designed to understand the influence of the COVID-19 pandemic on the ability of refugee women to access healthcare services. Depending on the answers of refugee women, 70 per cent of participants clearly stated that the coronavirus negatively affected their healthcare access in Turkey. Many women participating in this study – including those with health issues – could not go to hospitals because of curfews and official measures, resulting in delayed medical services.

The third question aimed to explore the influence of the COVID-19 pandemic on the relationship of refugee women with other refugees. Answers of the participants were evaluated under sociocultural (40%), shelter (28%) and economy (32%) themes. The majority of the respondents stated that the measures against the coronavirus and curfews affected their social life, as they could not go outside and see their relatives in different neighbourhoods and cities. A remarkable number of participants mentioned that they could not complete their religious duties due to the COVID-19 pandemic as places of worship were closed during the curfew hours and it was not possible to gather and perform their worship routines like they used to do before, together with other refugees. Also, a small number of refugee women in the study suggested that their livelihood activities conducted in cooperation with other refugees were negatively impacted.

The last question investigated the impact of COVID-19 on the relationship between refugee women and the host community, which is vital to understand the multidimensional nature of integration. The answers of the respondents were concentrated on language differences, competition in work life and changing perceptions towards refugees in a positive way after the COVID-19 outbreak. Half of the participants highlighted that the language barrier is still a major obstacle in their relationship with the host community members and COVID-19 did



**FIGURE 2** Distribution of answers to questions

not change this reality. Moreover, similar to the answers given to the other questions, refugee women indicated that the COVID-19 pandemic affected their livelihoods and work environment negatively. This also creates competition and tensions between the refugee and host communities, as the former is found to be the scapegoat for the deteriorating economic conditions in the country. Contrarily, some participants suggested that the attitude of Turkish people became more positive after COVID-19 as a result of the health emergency situation and they felt more welcomed by the host society.

## CONCLUSION

Immigration and refugee movements are often complex processes, which have multidimensional effects on the lives of both refugees and host communities. As the number of the forcibly displaced increases all around the world, social, economic and political aspects of integration continue to be a hot topic for both sides. Integration is not a process that will end in an instant. It should rather be considered a long-term process, which has different dimensions. Different factors matter throughout the integration process of refugees, which include gender. Women

refugees are one of the most vulnerable groups together with children all over the world. This paper employs an eight-dimensional integration model composed of education, sociocultural, legal, economy, health, security and shelter in order to investigate the effect of COVID-19 on integration of women refugees in Turkey.

Regarding the analysis of responses in terms of each dimension of the integration model in this article, refugee women stated that education and health dimensions are the most negatively affected dimensions within integration due to the COVID-19 outbreak. After education and health, the economic dimension follows which indicates the high level of negative impact on refugee women. In this period, married women suffered more due to the loss of their spouses' jobs in the time of COVID-19. Economic conditions of refugee women deteriorated intensely compared to the pre-COVID-19 period and they could not sustain their social life as before. Moreover, the social life of women refugees was negatively affected by COVID-19 as a result of the official curfews, lockdowns and inter-city travel restrictions. Language barriers became more visible during the pandemic, which led to less social ties with Turkish society. However, some women refugees clearly mentioned that Turkish people approached them in a positive way to help during the pandemic.

Compared to other dimensions, the security dimension of integration provided more surprising results, as this research reveals that COVID-19 had a positive contribution to the feeling of security of refugee women in Turkey. Refugee women suggested that they felt safe despite the negative outcomes of the pandemic. Likewise, the pandemic had a positive impact on the legal dimension of integration, as women participating in this study underlined that they benefitted from available aid programmes and they felt equal to Turkish citizens in terms of the hygiene materials and health services provided. Last but not least, our research also indicates that family size matters in relation to integration of women refugees during pandemic. Our study shows that single refugee women were less affected by the implications of COVID-19, while widows and divorced women are among the more negatively impacted groups.

Overall, the main findings of this research show that integration of women refugees in Turkey reflected negative trends in education, sociocultural, economy and sheltering dimensions of integration during COVID-19. Interruption of physical education and face-to-face interaction due to lockdowns and official measures further contributed to the negative trend. Moreover, economic challenges causing loss of jobs had a deteriorating impact on the economic integration of women refugees and their families into Turkish society. A positive trend was noted for the legal, security and health dimensions of integration of women refugees throughout the period in which this study was conducted. Similarly, continuation of aid programmes and health services provided by the government can be listed among the supports which had a positive impact on the integration of women refugees following the outbreak of the pandemic.

This study reveals that the difficulties experienced by women refugees in Turkey include language barriers, lack of information and digital equipment. In light of these data, to overcome these difficulties, suggested solutions include:

- First, elimination of language barriers is vital, especially in pandemic times, which can help refugees and host community members communicate in an organic way. There should be a community information mechanism in different refugee languages about the government-imposed measures for COVID-19, which is broadcasted by the government and the Ministry of Health. This mechanism should target traditional and online media channels for maximum outreach.
- Second, various digital platforms should be established for sharing reliable information about the services available in the time of COVID-19. Similar platforms can bring refugee representatives and refugee communities together to find timely solutions to problems while increasing the access to available services and protection mechanisms in general (Kaurin, 2020).
- Third, international organizations, NGOs, municipalities and government institutions should work together to provide enough technological equipment such as laptops and tablet computers to refugee women to overcome the barriers in accessing educational materials during the COVID-19 pandemic. In the meantime, mobile

education centres for children supported by the Ministry of National Education and UNHCR should accept adult women refugees throughout Turkey who are enrolled in online training programmes but unable to attend due to technical scarcity.

- Lastly, additional online activities, psycho-social support sessions and workshops to empower women and maintain their mental health and well-being in the time of COVID-19 should be introduced by the above-mentioned institutions. Well-designed online activities about livelihoods and social cohesion with the participation of host community members could also provide a lifeline for women refugees and establish closer ties between the communities. Refugee neighbourhoods can further be empowered by mobilizing the economic dimension of integration, which can be strengthened through economic inclusion (Dempster et al., 2020). Therefore, the government of Turkey and local administrations should facilitate work permit issuance, create various job opportunities through relevant quotas for refugee women and increase cash-based solutions whenever needed during the COVID-19 pandemic. In addition to this, these solutions can further help achieve the United Nations Sustainable Development Goals, especially the goals of ending poverty, supporting healthy lives and well-being, ensuring inclusive and equitable quality education, gender equality and reducing the inequalities between the communities as well as integration of refugees.

## PEER REVIEW

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## DATA AVAILABILITY STATEMENT

Data available on request due to privacy/ethical restrictions.

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