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# SSN

THE SOCIAL SAFETY NET  
*Programme*



## Inter-Sectoral Vulnerability Study (IVS)

2<sup>nd</sup> Edition

2026



**KIZILAYKART**  
Cash Based Assistance  
*Programmes*



# **Inter-Sectoral Vulnerability Study (IVS)**

2<sup>nd</sup> Edition

2026



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## LIST OF ABBREVIATIONS

<b>C-ESSN</b>	Complementary Emergency Social Safety Net
<b>DGPCA</b>	Directorate General of Population and Citizenship Affairs
<b>ECRE</b>	European Council on Refugees and Exiles
<b>ESSN</b>	Emergency Social Safety Net
<b>FCS</b>	Food Consumption Score
<b>GDP</b>	Gross Domestic Product
<b>HH</b>	Household
<b>IVS</b>	Intersectoral Vulnerability Study
<b>LCSI</b>	Livelihood Coping Strategy Index
<b>MEB</b>	Minimum Expenditure Basket
<b>MoFSS</b>	Ministry of Family and Social Services
<b>MoNE</b>	Ministry of National Education
<b>OECD</b>	Organisation for Economic Co-operation and Development
<b>PDM</b>	Post-Distribution Monitoring
<b>PMM</b>	The Presidency of Migration Management
<b>rCSI</b>	Reduced Coping Strategy Index
<b>SAT</b>	Structured Analytical Technique
<b>TRC</b>	Türk Kızılay (Turkish Red Crescent)
<b>TRY</b>	Turkish Lira
<b>TurkStat</b>	Turkish Statistical Institute
<b>WHO</b>	World Health Organization

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## EXECUTIVE SUMMARY

The Social Safety Net (SSN) Programme stands as a pioneering humanitarian initiative funded by the European Union, specifically designed to support the most vulnerable households under temporary or international protection in Türkiye. Consisting of two main pillars, the Emergency Social Safety Net (ESSN) and the Complementary Emergency Social Safety Net (C-ESSN), the Programme represents the largest cash-based intervention globally. Its primary objective is to provide dignified assistance through monthly unconditional cash transfers, enabling refugee households to meet their basic needs and mitigate the risks associated with poverty.

The 2<sup>nd</sup> Inter-Sectoral Vulnerability Study (IVS) provides an in-depth, evidence-based analysis by comparing the multi-dimensional vulnerabilities of ESSN, C-ESSN, and non-recipient households, the report identifies critical sectoral gaps and informs strategic decision-making for future humanitarian programming. The findings indicate that the refugee population is operating in a state of high economic vulnerability, with 97 per cent of households reporting significant difficulties in meeting their daily essential needs. Economic conditions have affected the purchasing power of the Minimum Expenditure Basket (MEB), with only 3 per cent of the population able to comfortably meet their basic requirements. While the SSN Programme remains a crucial safeguard against poverty, the findings point toward a growing socio-economic vulnerability that necessitates a transition for integrated, multi-sectoral support models beyond cash assistance in order to support the self-sufficiency of refugee populations in Türkiye.



## Analysis Component I: Socio-Economic Structure of the Population



The socio-economic profile of the surveyed population reveals a predominant Syrian majority, followed by Iraqi, Afghan, and Iranian nationals. Household composition varies significantly by assistance type; ESSN households tend to be larger, with an average of four children, compared to three in C-ESSN households and two in non-recipient households. Although 68 per cent of the respondents were female, the majority of households remain male-headed, with the average age of household heads ranging between 40 and 46 years.

The educational profile indicates a concentration of primary and lower-secondary education levels across the refugee population. Over 70 per cent of adults in recipient households lack a formal diploma or recognized vocational certification, which serves as a primary barrier to accessing the formal labour market. While Turkish language proficiency among adults stands at 74 per cent, the significantly higher rate among children (92 per cent) underscores the positive impact of school enrollment on social integration and the potential for long-term inclusion.

Employment data highlights a heavy reliance on the informal economy, with 87 per cent to 90 per cent of employed individuals in recipient households working without any social security coverage. It is important to note that this situation is indicative of prevailing labour market dynamics rather than the effects of social assistance. Additionally, female labour force participation remains critically low, recorded at just 13.7 per cent for Syrian women, largely due to childcare responsibilities, language barriers, and a lack of marketable skills. Household income levels are typically close to minimum wage, but the lack of stable job opportunities is cited as the most pervasive obstacle to achieving economic self-reliance.

## Analysis Component II: Living Standards

The analysis of living standards reveals that 75 per cent of total household expenditure is consumed by three main categories: food, rent, and utility bills. This concentration of spending on survival needs leaves minimal room for investments in long-term wellbeing, such as education or health. The financial burden is further exacerbated during the winter months, when rising energy costs for heating put additional strain on already depleted household budgets.

Housing remains a sector of high vulnerability for the refugee population, as 97 per cent of households are tenants and 51 per cent report living in substandard housing conditions. In high-density areas like İstanbul, 20 per cent of households are forced to share their living spaces with other families, leading to significant overcrowding and associated protection risks. While access to basic services like electricity and water is nearly universal (above 90 per cent), the physical quality of the housing stock remains a major concern for household safety and health.

Financial resilience is remarkably low, with 95 per cent of households reporting no savings whatsoever. Indebtedness has become a systemic issue, affecting 87 per cent of vulnerable households, with most loans being taken out to cover immediate needs such as food and rent. The median debt level was highest in the İstanbul region reaching 20,000 TRY and creating a “debt cycle” where households are unable to repay existing loans while simultaneously needing to borrow more to survive.

### **Analysis Component III: Coping Mechanisms Applied by the Population**

To bridge the gap between their income and the cost of living, households are frequently forced to adopt reduced coping strategies. The most common tactics include consuming cheaper and less-preferred food items, reducing the number of meals per day, and limiting portion sizes. While these strategies may provide short-term relief, they lead to a significant decline in nutritional quality and increase the risk of long-term health complications, particularly among children and the elderly.

In terms of livelihood coping strategies, more than 60 per cent of households rely on borrowing money or buying food on credit from local shops. In extreme cases, households have been observed selling productive assets or withdrawing children from school, which permanently impairs their future earning potential. These “emergency” strategies are most prevalent among non-beneficiaries or those whose assistance has been insufficient to keep pace with the rising cost of the MEB.

The most concerning indicator of economic distress is the prevalence of child labour, which accounts for 5 per cent of the total employed refugee population. Financial pressure often forces families to overlook protection risks and send children to work in the informal sector to supplement household income. Child labour not only threatens the physical and psychological development of the youth but also fuels a cycle of intergenerational poverty by severing their connection to the formal education system.

### **Analysis Component IV: Physical and Mental Well-Being**

Regarding physical health, 23 per cent of households have at least one-member suffering from a physical or mental disability. The C-ESSN group is particularly vulnerable, with 38.9 per cent of households containing an individual with a chronic illness with medical report. Disability and chronic health issues act as major inhibitors to labour market participation, often trapping these households in a state of long-term dependency on social assistance while increasing out-of-pocket medical expenditures.

While access to health services is high at 97 per cent, structural barriers still impede the quality of care received. For the small percentage unable to access services, the primary obstacles are the costs associated with medication and transportation, as well as the language barrier when communicating with healthcare providers. These factors can disrupt the continuity of care for those with chronic conditions, leading to preventable health crises and further economic strain.

Mental health remains one of the most fragile dimensions of refugee wellbeing; 45 per cent of children and 32 per cent of women show indicators of high mental health risk. The cumulative effects of protracted displacement, persistent economic anxiety, and social isolation have placed an immense psychological burden on these populations. The findings suggest that while cash assistance addresses material needs, it cannot substitute for the comprehensive Mental Health and Psychosocial Support (MHPSS) required to address trauma and distress.

## Analysis Component V: Severity Analysis and Multidimensional Vulnerability

The IVS Severity Index provides a holistic evaluation of household vulnerability by synthesizing data on living standards, coping mechanisms, and overall wellbeing. Comprised of nine core indicators, the index categorizes households into severity levels to ensure that humanitarian resources are directed to those who need it the most. The analysis confirms that vulnerability is not merely a function of income but is deeply influenced by household structure, dependency ratios, and external shocks.

The approach of this study builds on an intersectoral perspective which intertwines with issues such as emergency, crises and, most of all, vulnerability, which can be defined as “the characteristics and circumstances of a community, system or asset that make it susceptible to the damaging effects of a hazard”<sup>1</sup>. Adopting an intersectoral perspective means to move beyond looking at power relations through one-dimensional categorizations, which lead to the establishment of homogenous groups, since social construction of identities, are not homogenous<sup>2</sup>. As such, an intersectoral perspective captures differences in outcomes of these interactions in terms of three pillar of vulnerability<sup>3</sup>, through the acknowledgment of different spheres of influence, perceptions, and actions across environmental, social, and economic dimensions.

According to the severity classification, 90 per cent of households are categorized as vulnerable (24 per cent severely and 66 per cent are classified as “mildly” vulnerable), only 10 per cent of households that applied for assistance fall outside the vulnerability threshold. ESSN beneficiaries, characterized by larger families and higher dependency ratios, generally exhibit higher levels of multi-dimensional vulnerability compared to C-ESSN households.

1 United Nations International Strategy for Disaster Reduction (UNISDR). (2009). Terminology on Disaster Risk Reduction

2 Buckingham-Hatfield, S. (2001). Gender and environment.; Fletcher, A. J. (2017). More than women and men: A framework for gender and intersectionality research on environmental crisis and conflict. In *Water security across the gender divide* (pp. 35-58). Cham: Springer International Publishing. [https://doi.org/10.1007/978-3-319-64046-4\\_3](https://doi.org/10.1007/978-3-319-64046-4_3)

3 Davis, K. (2008). Intersectionality as buzzword: A sociology of science perspective on what makes a feminist theory successful. *Feminist theory*, 9(1), 67-85. <https://doi.org/10.1177/1464700108086364>

## INTRODUCTION

### About the Social Safety Net Programme (SSN)

The Social Safety Net (SSN) Programme is a cash-based assistance initiative supporting the most vulnerable households in Türkiye under Temporary Protection, International Protection, or with Humanitarian Residence Permit. Launched on 17 July 2023, the SSN Programme is funded by the European Union and implemented by the Ministry of Family and Social Services (MoFSS) in cooperation with Türk Kızılay (Turkish Red Crescent) and supported by the Presidency of Migration Management (PMM) and Directorate General of Population and Citizenship Affairs (DGPCA). The SSN Programme brings together two major humanitarian assistance projects implemented in Türkiye: The Emergency Social Safety Net (ESSN), launched in 2016, and the Complementary Emergency Social Safety Net (C-ESSN), launched in 2021. Together, they form the SSN Programme, the world's largest cash-based humanitarian assistance programme, designed to support the basic needs of vulnerable households with dignity.

Programme eligibility is determined through demographic criteria which was designed based on household vulnerability assessments. The key distinction between the ESSN and C-ESSN Projects lies in these targeting criteria, ensuring that assistance is directed where it is most needed. While the ESSN supports the households based on "dependency ratios", the C-ESSN targets individuals who are among "the most vulnerable" and "unable to be referred into livelihood opportunities". Beneficiaries may only receive support from one of the two projects at a time. Eligible households receive monthly cash assistance via KIZILAYKART, a debit card. Beneficiaries can withdraw their assistance from ATMs and/or use it for shopping needs through POS devices.



## IVS Objectives

The Intersectoral Vulnerability Study (IVS) is an integral part of the Social Safety Net (SSN) Programme to support vulnerable refugees in Türkiye. The IVS provides annual insights into the intersectoral needs of ESSN recipients, C-ESSN recipients and non-recipient refugees residing across various geographical regions of Türkiye. By addressing below mentioned objectives, the IVS contributes to the future orientations of the SSN Programme by providing evidence-based, targeted, strategic discussions on trends, responsive to the dynamic needs of refugees across Türkiye. The specific objectives are;

- Identifying sector-specific priority areas and severity of humanitarian conditions among refugee households in Türkiye
- Improving the efficiency and accountability of the programme to the recipient groups
- Analyzing needs and vulnerabilities of communities across geographic and demographic subgroups

## Methodology

This section outlines the key activities, tools, and procedures implemented to design, collect, prepare, analyze, and report the SSN IVS 2 data and findings.

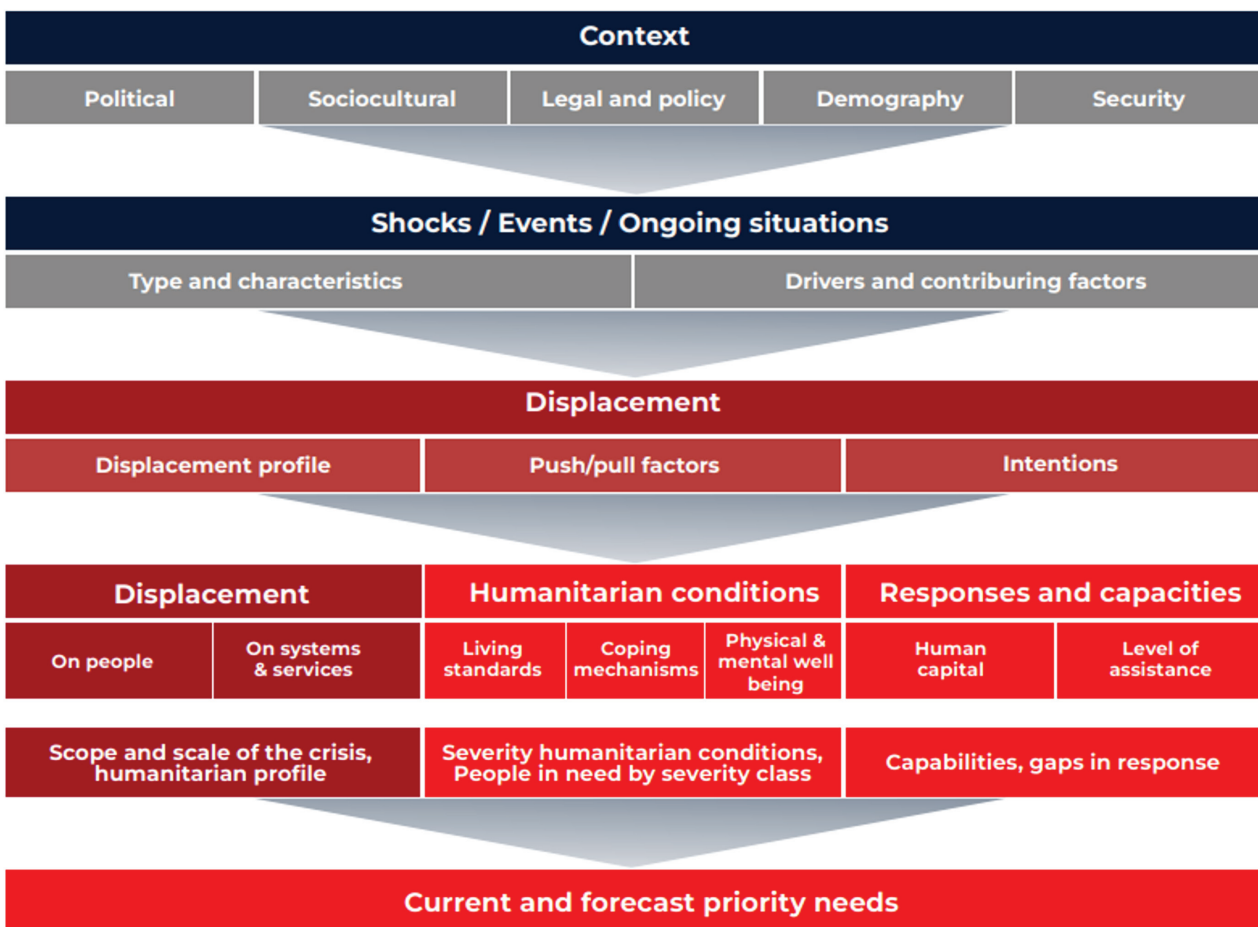
### Design and Planning

The 2<sup>nd</sup> IVS study of the SNN Programme was designed to be conducted face-to-face. Drawing from previous lesson learnt, the survey was crafted with careful attention to operational contexts and emerging field needs, ensuring the preservation of its original research purpose. The question set was carefully prepared in Turkish, English, and Arabic to facilitate broad accessibility. An open section was added at the end of the survey to allow respondents to address issues not addressed in the questionnaire and analysis framework.

Following the questionnaire preparation, a 3-day workshop was organized for the field staff to thoroughly review the questions and to share valuable insights on how the questions should be asked in real-world conditions. Based on their feedback, necessary updates were made to ensure clarity and relevance. Once the question set was finalized, the data collection process began, ensuring that the survey was both methodologically sound and practically applicable.

The SSN - IVS 2 analytical framework includes:

- Analysis framework including the main dimensions and sub-dimensions of the measured humanitarian conditions (Figure 1)
- Analysis and data collection plan, including a selection of structured analytical techniques (SATs) to mitigate the impact of cognitive biases on the quality of conclusions
- Technical note on the calculation of the severity of humanitarian conditions
- Reporting template



*Figure 1 IVS Analysis Framework*

## IVS Data Collection and Collation

The data collection took place between February and August 2025. Trained field staff, fluent in Farsi, Arabic and Turkish, conducted face-to-face interviews with households. To ensure that the sample was representative of all applicants (ESSN and C-ESSN), the list of respondents was drawn from the then-current payment list and the list of non-recipient households. For geographic distribution, Türkiye was divided into five regions, with stratified random sampling applied in each region to ensure representation at both the regional and group levels. This approach aimed for a 90% confidence level and a  $\pm 5\%$  margin of error, covering the three groups: ESSN, C-ESSN recipient, and non-recipient households.

## Secondary Data Analysis

In addition to primary data collection, secondary data analysis and desk review were conducted to enhance the study's depth and contextual relevance. This involved reviewing existing reports, statistical data, and analytical studies produced by a wide range of different organizations related to refugee populations, socio-economic conditions, and humanitarian interventions. By integrating external sources, the study ensured a more comprehensive understanding of emerging trends, historical patterns, and the broader socio-economic landscape. This assessment represents one of the very few, regularly implemented, vulnerability-focused analytical frameworks specifically developed and monitored for refugee populations in Türkiye. The triangulation of primary and secondary data strengthened the reliability of findings and facilitated evidence-based recommendations for policy and programmatic interventions.

## Data Protection and Study Ethics

Robust data protection measures were implemented to ensure respondent protection, data security and adherence to work ethics. Anonymity was ensured by recording only unique household identifiers in the Open Data Kit (ODK); no personal data was collected in the survey. Each household was assigned a male and a female interviewer during the face-to-face data collection process. If any protection risks are identified during data collection, field staff refer cases to the relevant case management teams in accordance with established referral protocols.

Enumerators underwent an IVS training workshop covering survey objectives, questionnaire content, humanitarian principles, referral mechanisms, safety and security protocols, and data protection considerations. The training highlighted the Turkish Red Crescent's commitment to the fundamental humanitarian principle of 'do no harm', equipping enumerators and team leaders to minimize potential harm during the study.

Surveys were conducted exclusively with individuals aged 18 and above, with efforts to ensure children were not present during the interviews. In cases where this was unavoidable, enumerators were instructed to prioritize sensitivity toward children. Measures to address and prevent sexual harassment during the assessment included targeted training and systematic follow-up with households via phone. Respondents were explicitly informed that their participation would not impact the level of assistance they receive.

## Demographics

### IVS Sample Characteristics

• **Sample:** The household interviews took place in five regions between February 2025 and August 2025. A total of 4,292 households, corresponding to 24,771 individuals, were surveyed. The survey groups were made of 1,464 ESSN recipient, 1,411 C-ESSN recipient and 1,417 non-recipient households.

• **Gender and Age:** 68 per cent of the respondents were female, while 32 per cent were male. The average age was 40 for females and 47 for males. Thus, the proportion of elderly people (aged 65+) was 2 per cent in ESSN, 5 per cent in C-ESSN and 3 per cent in non-recipient households. Although the majority of the surveyed individuals were female, heads of households were mostly male. The average age of the heads of households was 40 in ESSN, 45 in C-ESSN and 46 in non-recipient households. 7 per cent of the surveyed individuals were single parents while, 6 per cent were elderly household heads.

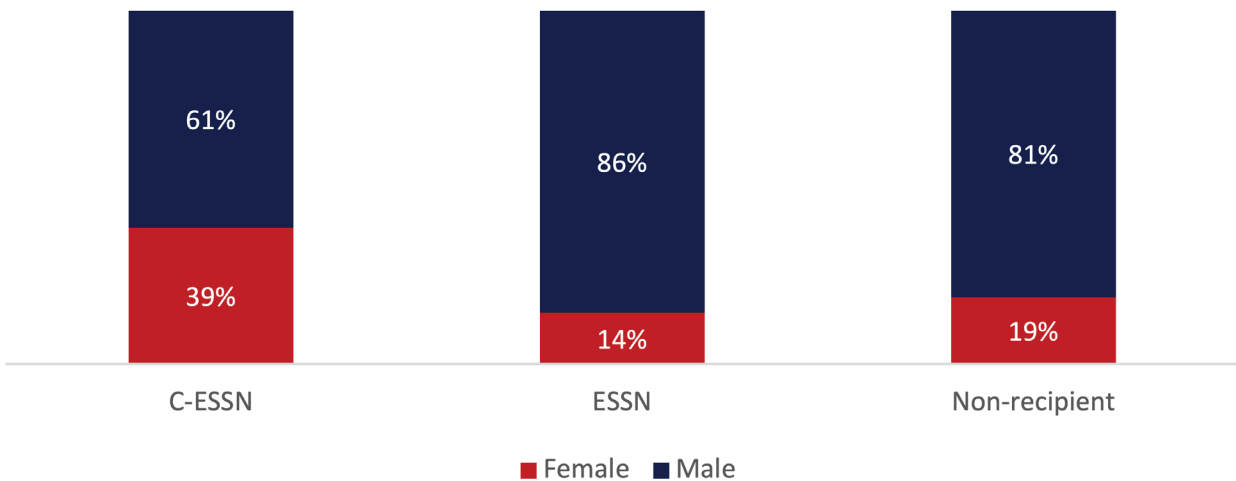


Figure 2 Household Gender Distribution According to Recipient Status

• **Nationality:** The majority of the surveyed respondents were Syrians. Other nationalities included Iraqis, followed by Afghans, Iranians and Lebanese respectively.

• **Marital Status:** 82 per cent of the respondents were married, 9 per cent were widowed, 2 per cent were divorced, 5 per cent were separated and 2 per cent were single. Additionally, 52 per cent of the surveyed respondents were heads of households, whereas 40 per cent were spouses of heads of households, and the remaining percentage comprised other household members. Among all three recipient groups, most surveyed heads of households were married.

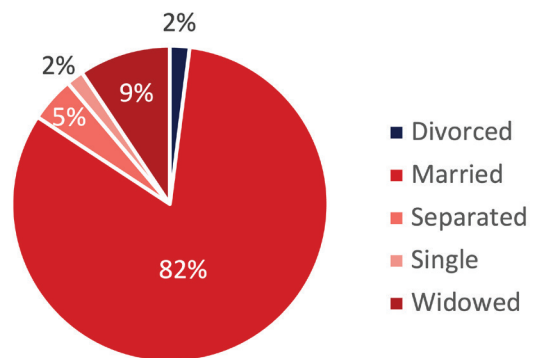


Figure 3 Heads of Households' Marital Status

• **Family Size:** Family size of the ESSN households were bigger compared to the C-ESSN and non-recipient households. The average number of children was 4 in ESSN, 3 in C-ESSN and 2 in non-recipient households.

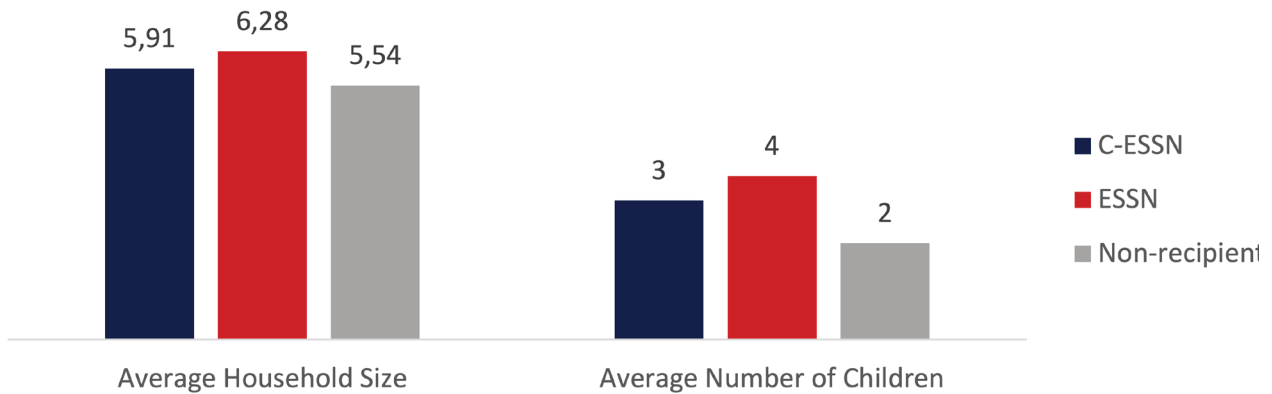


Figure 4 Average Household Size and Number of Children According to Recipient Status

• **People with Specific Needs:** Half of the surveyed population reported having a chronic illness without medical report and 17 per cent reported medical report. Among the three surveyed groups, the percentage of chronically ill without a medical report was 41 per cent for ESSN, 56 per cent for C-ESSN and 53 per cent for non-recipients; compared to those chronically ill with a medical report which was 5 per cent for ESSN, 39 per cent for C-ESSN and 8 per cent for non-recipient households. 19 per cent of the population were pregnant adults including 0,5 per cent who were pregnant adolescents. 2 per cent were elderly individuals with support needs. In addition, 67 separated children and 4 unaccompanied children were identified during the interviews and referred to protection teams.

• **Education Level:** 3 per cent of the surveyed individuals were illiterate, while 2 per cent were literate despite having no formal education. Majority of the respondents had middle school, primary school and high school diploma respectively. Literacy rates were highest among non-recipient households and lowest among C-ESSN households. It has also been noted that about 45 per cent of households receive CCTE assistance overall. Six out of every ten ESSN households benefit from CCTE assistance, as do five out of every ten CESSN households.

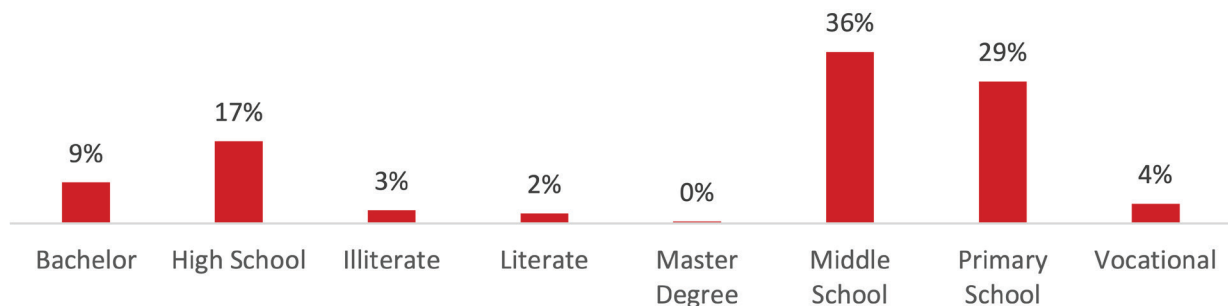
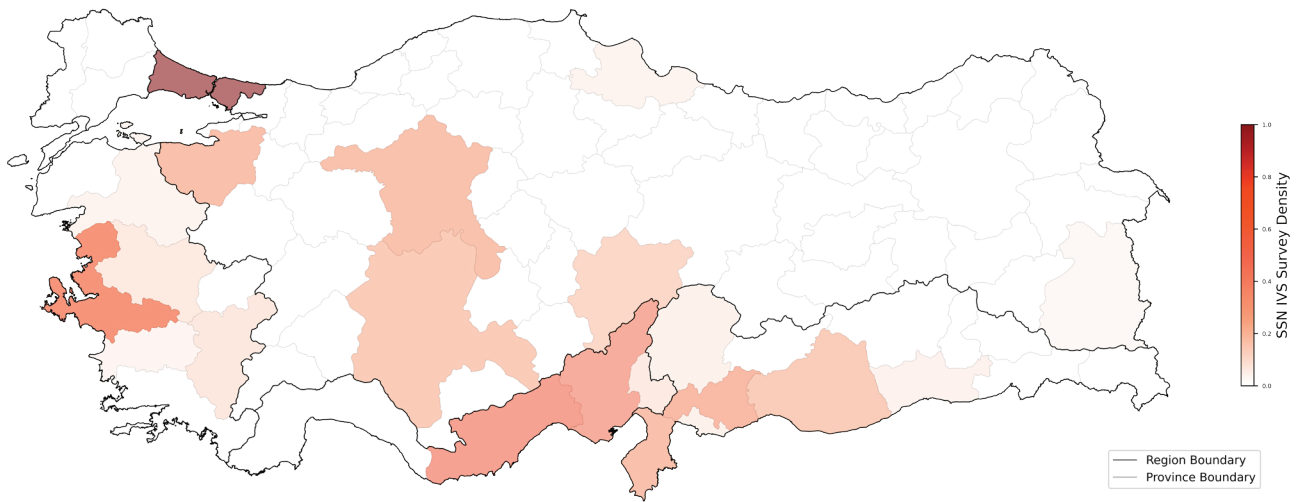


Figure 5 Education Levels

• **Level of Turkish:** Turkish level was analyzed separately between adults and children (aged 6-17). 92 per cent of the children were able to speak Turkish compared to 74 per cent of adults. 7 per cent of school age children did not speak Turkish, while this rate was higher in adults with 26 per cent. It was observed that children had a higher rate of Turkish speaking skills due to their school attendance.



**Figure 6** Map of Türkiye

## Preparation and Exploration

A total of 64 records were removed from the SSN IVS 2 dataset due to inconsistencies, missing values in critical fields and errors. The final usable sample consists of 4,292 households. The data underwent a systematic cleaning process as part of the data preparation phase. This process encompassed verifying the renaming of variables, computing indicators, and conducting outlier analysis to ensure, identify and address any anomalies or deviations that could potentially skew the results. Data preparation included comprehensive data quality checks, such as constructing the severity index (see technical notes in Annex 1), determining weights, checking binary variables, cross-validating results, duplicate records, applying coding techniques, formatting numeric and character variables. Explanatory graphs were created for each variable of the questionnaire and correlations were conducted to identify the main associated variables. The analysis was made focusing on differences between geographical regions, recipient groups (ESSN, C-ESSN and non-recipient) and vulnerability classes. The initial analysis revealed only minor differences between geographic regions; however, these differences were significant enough to merit consideration rather than being entirely disregarded.

## Limitations and Mitigation Strategies

The IVS data was collected over a seven-months period in a dynamic and evolving context characterized by seasonality, price increases, shifting economic policies. These factors significantly influenced household income, expenditure, wellbeing and living standards. Summarizing the results over the entire data collection period has resulted in critical trends, such as seasonality, contextual developments, inflation and exchange rate, being less visible in the aggregate analysis. Where applicable, secondary data and previous studies, including PDMs and FGDs, have been utilized to emphasize key differences and highlight significant findings.

The sampling strategy followed a two-stage approach: first, the provinces with the highest concentration of refugees were selected; then, households in each selected province were randomly selected. As the initial sampling approach had employed purposive selection methodologies, the sampled population was not fully representative. The design ensured that the provinces selected for the survey did not contain more than 70 per cent of the total number of refugees in the region, thus limiting design bias. The number of cities with a small sample was increased based on the central limit theorem. Regional differences could be assessed in this respect.

## KEY FINDINGS

### Context

#### Economy

Rising prices of basic needs have continued to create economic challenges for households across Türkiye in 2025. Throughout the first eight months of the year, annual inflation reached 32.95 per cent, while essential expenditure items, most notably housing rents, which increased by up to 74 per cent year-on-year, continued to exert substantial pressure on household budgets. Concurrently, labour market indicators published by TURKSTAT for August 2025 signal a moderation in economic activity, with the unemployment rate rising to 8.6 per cent on a year-on-year basis and the labour force participation rate declining to 53.8 per cent, reflecting slower employment generation.



For 2025, the net national minimum wage has been set at 22,104.67 TRY.<sup>4</sup> While higher nominal wages can enhance purchasing power and support households in managing essential expenses such as rent, utilities, and food, no mid-year adjustment was introduced under the disinflation policy framework. Given that household income relies predominantly on the minimum wage, the absence of an interim wage increase has limited the income adaptability of households in the face of persistent price pressures.

Taken together, persistently high living costs, constrained wage adjustments, and weakening labour market conditions have intensified economic pressures on households. These dynamics are particularly consequential for vulnerable refugees, who often face structural barriers to formal employment and are concentrated in low-paid or informal sectors.

<sup>4</sup> Ministry of Labour and Social Security. (24 December 2024). The New Minimum Wage to be Applied in 2025 was Determined as 22 Thousand 104 Lira. <https://www.csgb.gov.tr/en/news/24-12-2024>

## Voluntary Return and Immigration Policy

The Social Safety Net (SSN) Programme currently serves approximately 1 million beneficiaries in Türkiye, the majority of whom are Syrian refugees. Developments related to voluntary return therefore have direct implications for the scope, targeting, and sustainability of the programme. Following the socio-political changes in Syria on December 8<sup>th</sup> 2024, voluntary return has entered the agenda of Syrian refugees and Türkiye's immigration policies.

Across the region more than 3.1 million displaced Syrians have returned to their areas of origin. This includes 1,227,738 refugees returning from other countries and 1,944,762 internally displaced persons (IDPs) who mainly departed from displacement sites in Northwest and Northeast Syria.<sup>5</sup> Türkiye continues to host one of the largest refugee populations in the world. European Commission report indicate that in Türkiye 2,508,446 Syrians live in under temporary protection, along with an additional 52,437 Syrians holding short-term residence permits.<sup>6</sup>

The voluntary return process for Syrians under Temporary Protection in Türkiye officially commenced on December 9, 2024. From the first day, voluntary return procedures have been eased and accelerated for Syrians under Temporary Protection in Türkiye. Operational capacities at the border gates were increased and voluntary return applications were made online through the Presidency of Migration Management's appointment system. As a preparatory action for individuals interested in undertaking voluntary return, go-and-see visits were allowed until July 1<sup>st</sup> 2025. Since December 8<sup>th</sup>, more than 411,649 Syrians have voluntarily returned<sup>7</sup> however, there are 2,543,711 Syrian refugees remaining in the country. The path toward voluntary return to Syria remains a distant prospect surrounded by uncertainties and hesitations for most Syrians living in Türkiye.

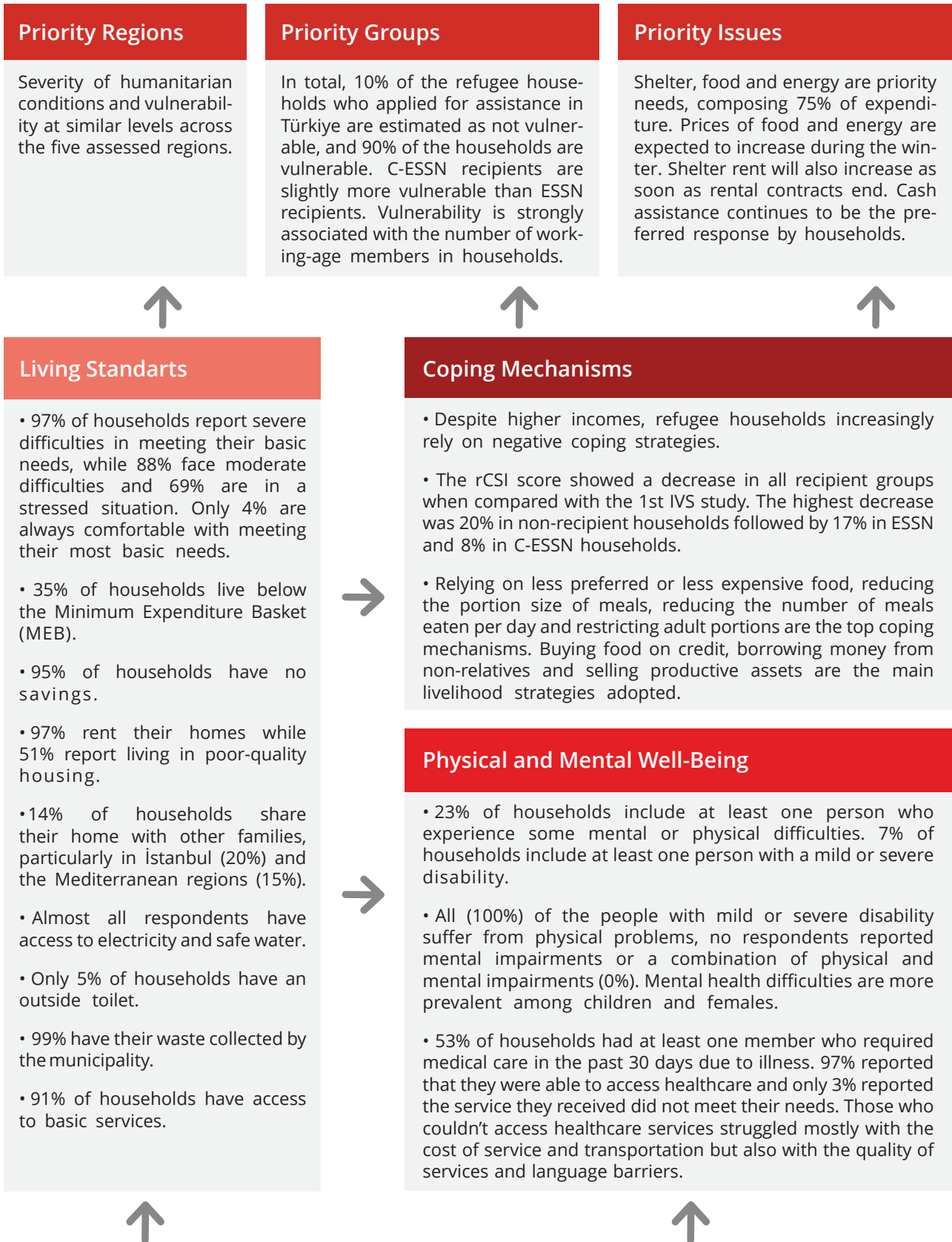


5 UNHCR, Regional Flash Update 53, November 2025. [www.unhcr.org/media/syria-situation-crisis-regional-flash-update-53](http://www.unhcr.org/media/syria-situation-crisis-regional-flash-update-53)

6 European Commission Türkiye 2025 Report, Brussels, 4.11.2025 SWD (2025) 756 final.

7 Presidency of Migration Management. (15.08.2025) Voluntary, Safe, Dignified, and Orderly Returns Have Gained Momentum. <https://en.goc.gov.tr/voluntary-safe-dignified-and-orderly-returns-have-gained-momentum>

## IVS 2 Intersectoral Problem Tree



### Impact on People

- 87% of households have at least one member who is working. In addition, 87% of the working individuals work informally. 5% of the working individuals are children. In relation to livelihood activities, low wages and difficult working conditions were reported.
- Compared to the 1<sup>st</sup> IVS study, median labour income moved from 10,000 TRY to 22,000 TRY for ESSN recipients, and from 14,000 TRY to 25,000 TRY for non-recipients. C-ESSN households only report 20,000 TRY income per month. For all groups, the main source of income is paid work, followed by loans from friends or relatives.
- Median household debt is 15,000 TRY. 61% of households have debts, especially the most vulnerable ones.
- C-ESSN households spend a median of 26,371 TRY, ESSN 29,930 TRY and non-recipients 33,743 TRY per month.
- 9% did not send their children back to school.

### Impact on Services

- 29% annual increase for food basket price, from 1,570 TRY to 2,029 TRY per-person.
- 7% inflation from February to August 2025 for energy prices (such as electricity and gas) (TurkStat).
- Annual housing costs increased by 74% as of August 2025.
- Transportation costs increased by 41% annually.
- Communication prices increased by 23% annually (TurkStat).
- MEB value increased from 6,801 TRY in February 2025 up to 7,904 TRY in August 2025.



### Politics

- Due to the political shift in Syria on December 8<sup>th</sup> 2024, voluntary returns have increased.
- Go-and-see visits were permitted until July 1<sup>st</sup> 2025 for Syrians to observe the situation in their hometowns.
- 411,649 Syrians have returned so far, however there are still over 2.5 million Syrian refugees in Türkiye.

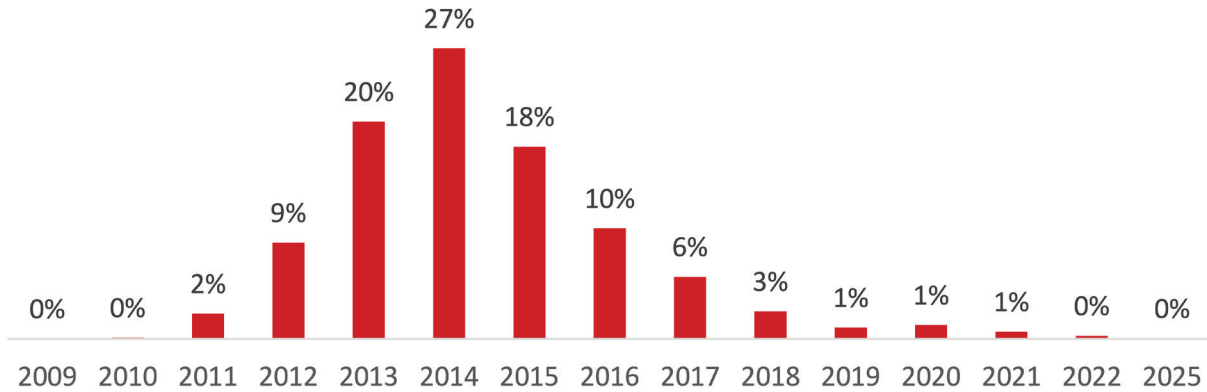
### Economics

- GDP went up by 3.7% in 2025.
- Annual inflation was recorded as 74% by August.
- Rate of unemployment rose to 8.6 per cent on a year-on-year basis.
- High living costs and weakening labour market conditions continue to intensify economic picture on vulnerable refugee households.

### Socio-Cultural

- The majority of the children were able to speak Turkish (92%) compared to 74 per cent of adults.
- 9% of refugee households have members who have experienced physical or verbal assault in the last three months.

## Refugee Movements



**Figure 7** Dates of Arrival in Türkiye

The majority of households in the SSN Programme have been residing in Türkiye for over a decade (over 65 per cent), indicating that the current recipient profile is ‘settled’. Figure 7 shows the number of households registered in the SSN Programme by year of arrival in Türkiye. Although arrivals commenced as early as 2009, the main wave of arrivals occurred between 2013 and 2015. Arrival rates peaked in 2014 at 27 per cent, followed by 2013 (20 per cent) and 2015 (18 per cent). From 2016 onwards, arrival rates gradually declined, with the proportion of new arrivals falling to 1 per cent or less by 2019. According to the Presidency of Migration Management, the number of Syrians under Temporary Protection increased rapidly between 2014 and 2015 and reached its peak in 2021 with 3.7 million and has shown a decreasing trend since 2023.<sup>8</sup> This indicates that these two factors are associated with systematic differences in arrival periods, with some groups tending to arrive earlier or later than others. On the other hand, recent developments in Syria after 8 December 2024 have led to a notable increase in voluntary returns. Between that date and the present, 411,649 Syrians have gone back to their country, raising the cumulative number of voluntary returns since 2016 to 1,151,652. Consequently, the population of Syrians under temporary protection in Türkiye has declined to 2,543,711.<sup>9</sup>

On the other hand, most surveyed households have changed their homes several times over the years for various different reasons. It was found that only 4 per cent of households have not relocated internally, while 96 per cent have relocated since they have settled in Türkiye, half of them having relocated 2 or 3 times. Most strikingly, one in five households has had to relocate 5 or more times within the country. Analyzing the reasons behind such a high rate of household relocation reveals the top reason as eviction by the landlord. Eviction may be due to the cap on rent increases, particularly in the economic environment that began in 2018, or because they prefer to move to cheaper houses.

8 Republic of Türkiye Ministry of Interior Presidency of Migration Management, Statistics, Temporary Protection, <https://en.goc.gov.tr/temporary-protection27> accessed 29 December 2025.

9 Presidency of Migration Management. (15.08.2025) Voluntary, Safe, Dignified, and Orderly Returns Have Gained Momentum. <https://en.goc.gov.tr/voluntary-safe-dignified-and-orderly-returns-have-gained-momentum>

Looking into regional analysis, the highest was seen in the Mediterranean region as 36 per cent of households moved because their landlord evicted them. Another important reason is the search for better housing, which is most prevalent in İstanbul and the Anatolia regions (each at 32 per cent). Notably, non-recipient households are more likely to relocate for better housing than recipient households at 29 per cent, due to their higher living standards compared to ESSN and C-ESSN recipient households. Search for cheaper housing is the third factor for moving, with the highest proportion of households forced to move due to economic reasons was seen in the Aegean region at 16 per cent. Unlike households having moved in search of a better home, 16 per cent of C-ESSN households moved because of cheaper housing, which indicates that C-ESSN households face greater economic hardship than ESSN and non-recipient households. Other reasons for moving include accessing; better opportunities and services, existing social networks, less stressful environment, or for work.

	Aegean	Anatolia	Istanbul	Mediterranean	Southeast
Better Chances	4%	3%	4%	2%	1%
Better House	29%	32%	32%	20%	23%
Better Service	1%	1%	3%	0%	1%
Cheaper	16%	13%	14%	13%	13%
Household Want	28%	26%	25%	36%	33%
Less Tension	3%	3%	3%	2%	1%
Natural Disasters	0%	1%	3%	2%	7%
Other	7%	13%	14%	5%	9%
Recruited	1%	1%	1%	1%	1%
Social Network	1%	1%	2%	1%	1%

Figure 8 Reasons for Moving House by Region

## Education

The largest segments of the surveyed population in all groups have completed either middle school, ranging from 32 per cent to 38 per cent or primary school, ranging from 26 per cent to 33 per cent. This finding indicates that the majority of the adult population possesses only a basic level of formal education. C-ESSN households have the highest level of middle school graduates at 38 per cent, while ESSN households hold the most primary school graduates at 33 per cent. Furthermore, high school graduation rates are lower across all groups (between 15 per cent and 20 per cent). Higher education levels, such as Bachelor’s and Master’s degrees, remain very low in all categories (ranging from 5 per cent to 7 per cent for Bachelor’s). Thus, overall literacy and vocational education rates are also generally low, which indicates possible gaps in education and skill levels that may limit effective participation in the skilled labour market. The highest education level attained within households does not vary with socioeconomic indicators such as income, expenditure, and debt levels, nor with the gender of the household head or household size. However, it shows a statistically significant association with the severity index and the school attendance rate of children within the household.

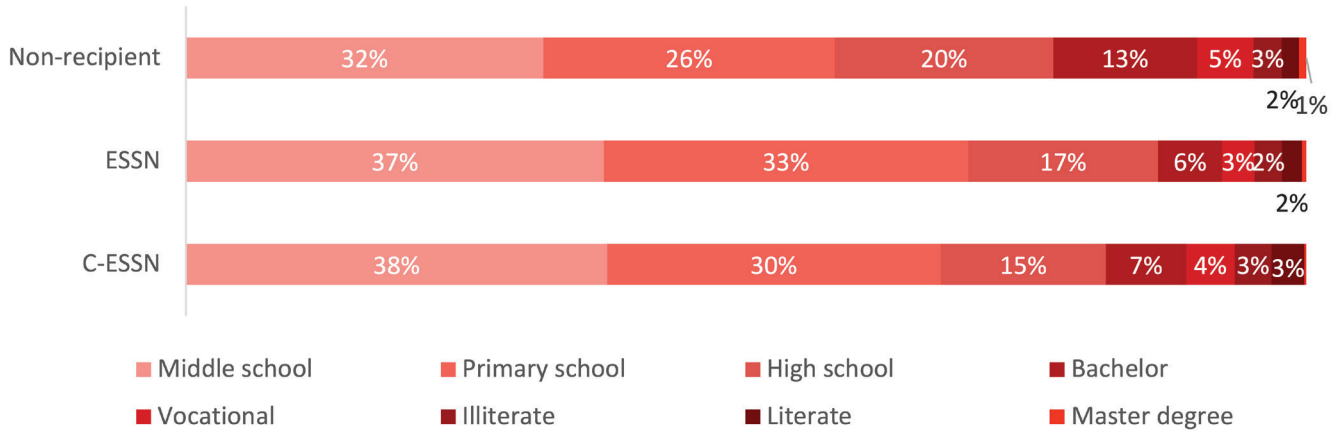


Figure 9 Highest Education Level by Recipient Status

Across all groups, most households reported having no adults with formally recognized or valid diplomas (71 per cent for ESSN, 70 per cent for C-ESSN, and 64 per cent for Non-recipients). This finding strongly suggests lack of formal recognition of educational or professional qualifications obtained in the countries of origin, or the complete absence of formal documentation as a major challenge among refugee households. This issue of non-recognition severely limits their ability to find employment commensurate with their skills and experience, even for those who may have higher levels of education. The rate of having only one valid diploma is 20 per cent for C-ESSN households, 19 per cent for ESSN and 22 per cent for non-recipient households, and the rate drops to approximately half for those possessing two valid diplomas (9 per cent for C-ESSN, 10 per cent for ESSN and, 14 per cent for non-recipient households). Consequently, the data reinforces the need not only to enhance basic education levels but also to streamline the process for the equivalence of international diplomas or provide targeted supplementary professional certification programs that are locally recognized.

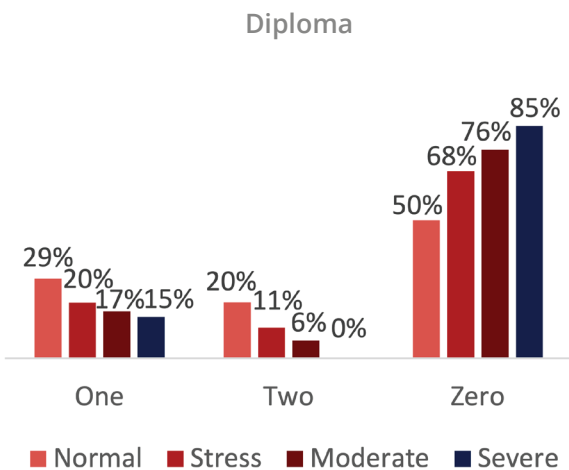


Figure 10 Number of Diplomas by Severity Group

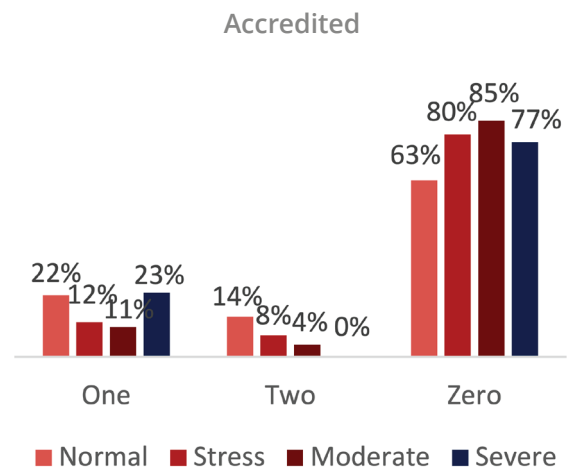
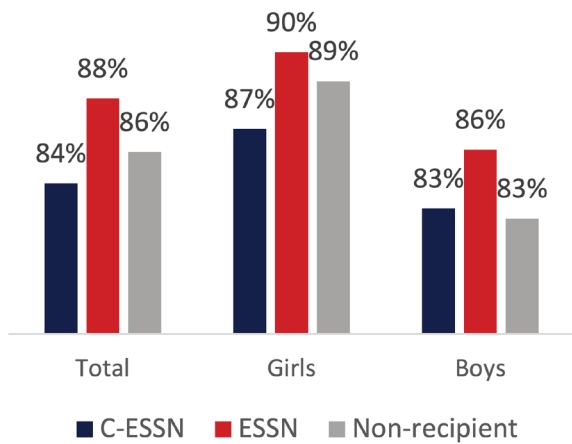
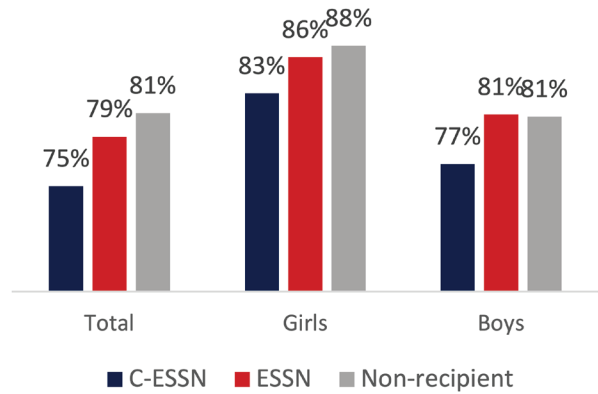


Figure 11 Number of Accredited Diplomas by Severity Groups

Looking into school attendance of children, an association was found between social assistance programs and school attendance rates. Specifically, the percentage of children currently attending school is notably high across all groups, with ESSN recipient households demonstrating the highest rates overall, peaking at 90 per cent for girls. This suggests that the ESSN Project is effective in promoting access to education and is successfully addressing major barriers to enrollment. Furthermore, the analysis reveals that girls’ attendance rates are often equal to or slightly higher than boys’ attendance rates across all recipient groups, which is a strong positive finding concerning gender parity in education. However, when examining the drop-out rates, the reported rates are slightly lower (e.g., 75 per cent for C-ESSN total), highlighting a remaining gap where some children, even in recipient households, are still out of school.



**Figure 12** Children's School Attendance Rate by Recipient Status



**Figure 13** Rate of Households Where All Children Attend School by Recipient Status

According to statistical data, school attendance among refugee children in Türkiye stands at 76 per cent.<sup>10</sup> A variety of policies have been implemented to improve the educational opportunities of refugee students. Turkish language courses and support programmes help students integrate into public schools, while remedial classes, summer schools and language support initiatives assist those who have missed long periods of schooling. Refugee students are also included in assistance programmes designed for Turkish students, such as İYEP and the CTE Project. In addition, adaptation classes aim to strengthen students’ academic performance and facilitate their transition into Turkish state schools.<sup>11</sup>

10 Asylum Information Database, European Council Refugees and Exiles. (29.07.25). Access to Education Türkiye, <https://asylumineurope.org/reports/country/turkiye/content-temporary-protection/employment-and-education/access-education>. Accessed 29 December 2025.

11 UNICEF Turkey & Ministry of Education. (2022). Documentation of the education intervention for Syrian children under temporary protection in Turkey: Final report. UNICEF.



The findings on adult education and training show that while basic formal education is common, participation in higher education remains low. The majority of adults across all categories have completed only middle school or primary school. This indicates a significant need for skills development and pathways to higher education for the adult population. Additionally, participation in recent adult training programs is generally high, ranging from 77 per cent to 84 per cent, which C-ESSN recipients show the lowest engagement at 77 per cent. Critically, the vast majority of the training programs are either directly related to ESSN Project or focused on Turkish language. This underscores that current training efforts are heavily concentrated on program compliance and fundamental integration needs, while access to vocational or specialized skills training that could enhance livelihood opportunities appears to be limited.

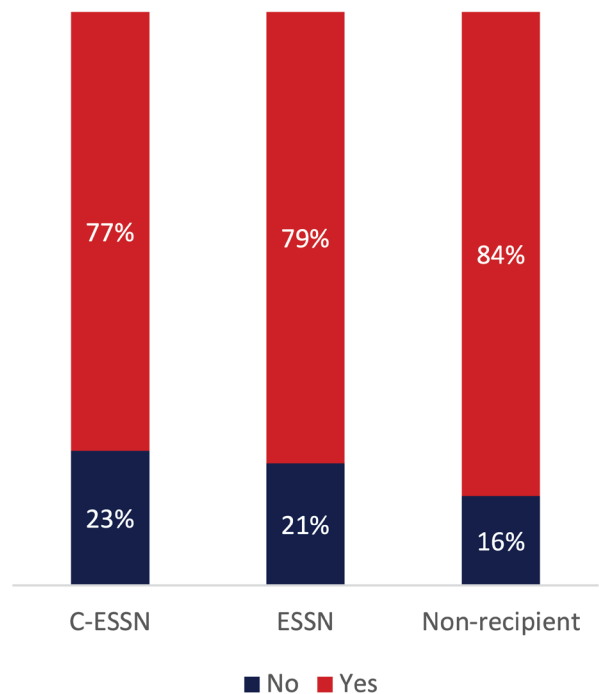
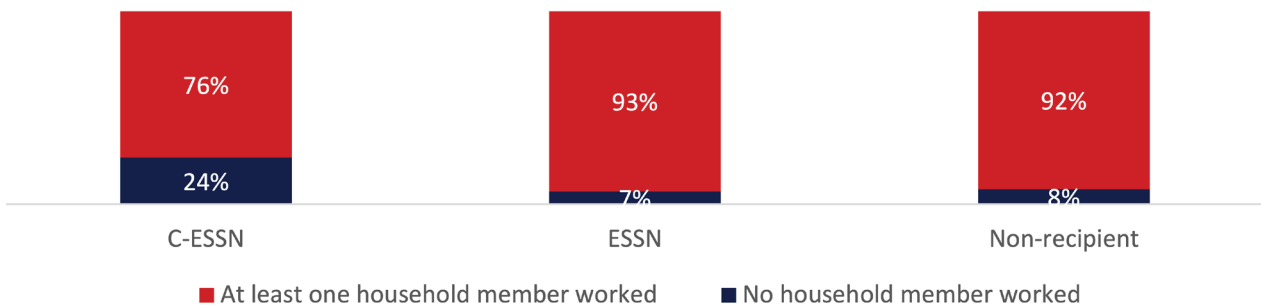


Figure 14 Adult Training Rate by Recipient Status

## Livelihoods

### Income and Labour Force Participation Rates

Labour force participation patterns are consistent with those observed in the previous IVS study. ESSN and non-recipient households show comparable levels of workforce participation, with at least one employed individual in 93 per cent and 92 per cent of households, respectively. In contrast, C-ESSN households exhibit substantially lower participation, with only 76 per cent reporting at least one working individual, meaning 1 in 4 C-ESSN households do not have any working members. The main reason for this distinction is the difference in household profiles between the recipient groups; as ESSN and non-recipient households predominantly consist of adults aged 18-64 who are more suitable for employment, compared to C-ESSN households consisting more of disabled and elderly persons. In the model constructed to explain the presence of employed individuals within households, recipient status emerges as a statistically significant factor, and regional differences also show partial significance. Additionally, the number of working age men (18-64) in the household increases the likelihood of having an employed member, while the presence of women in the same age group does not have a significant effect. Finally, rCSI, LCSi, and per-capita food expenditure are all statistically significant predictors of the likelihood that a household has at least one employed individual. To examine in more detail, the ratio of the number of workers to the number of adults in households stands at 45 per cent for ESSN, 38 per cent for C-ESSN, and 40 per cent for non-recipient households. These results suggest that fewer adults in C-ESSN households are able to work, which helps explain their lower overall employment levels compared to other households. Additionally, compared with the ratio of Turkish nationals which stands at 48.9 per cent,<sup>12</sup> the ratio of refugee households is lower. However, the labour force participation rate of Syrians in Türkiye remains low due to various factors. Language barriers, low wages, long working hours, low education levels, and limited professional qualifications all contribute to reduced participation.<sup>13</sup> When considering the rate of formal employment, the requirements for obtaining work permits further lower the overall participation levels.<sup>14</sup> Another important dimension is women’s participation in the labour market, which remains significantly lower due to childcare responsibilities, limited professional skills, and cultural constraints observed more among refugee women.<sup>15</sup>



**Figure 15** Rate of At Least One Working Individual in the Household by Recipient Status

12 Labor force Statics, July 2025 <https://data.tuik.gov.tr/Bulten/Index?p=Isgucu-Istatistikleri-Haziran-2025-54074> accessed 24 November 2025.

13 SSN Programme. (December 2024). Exploring Labour Market Participation and It's Challenges. 3rd Round of Focus Group Discussion Report. [https://platform.kizilaykart.org/tr/Doc/rapor/3rd\\_FGD\\_Report.pdf](https://platform.kizilaykart.org/tr/Doc/rapor/3rd_FGD_Report.pdf)

14 European Commission. EU Support to Refugees in Türkiye, Priority Area Brief, Livelihoods, No: 5, July 2024.

15 Türk Kızılay. (2024). 2nd round of focus group discussion report: Exploring labor market participation of female ESSN recipients. Türk Kızılay & Ministry of Family and Social Services, July 2024.

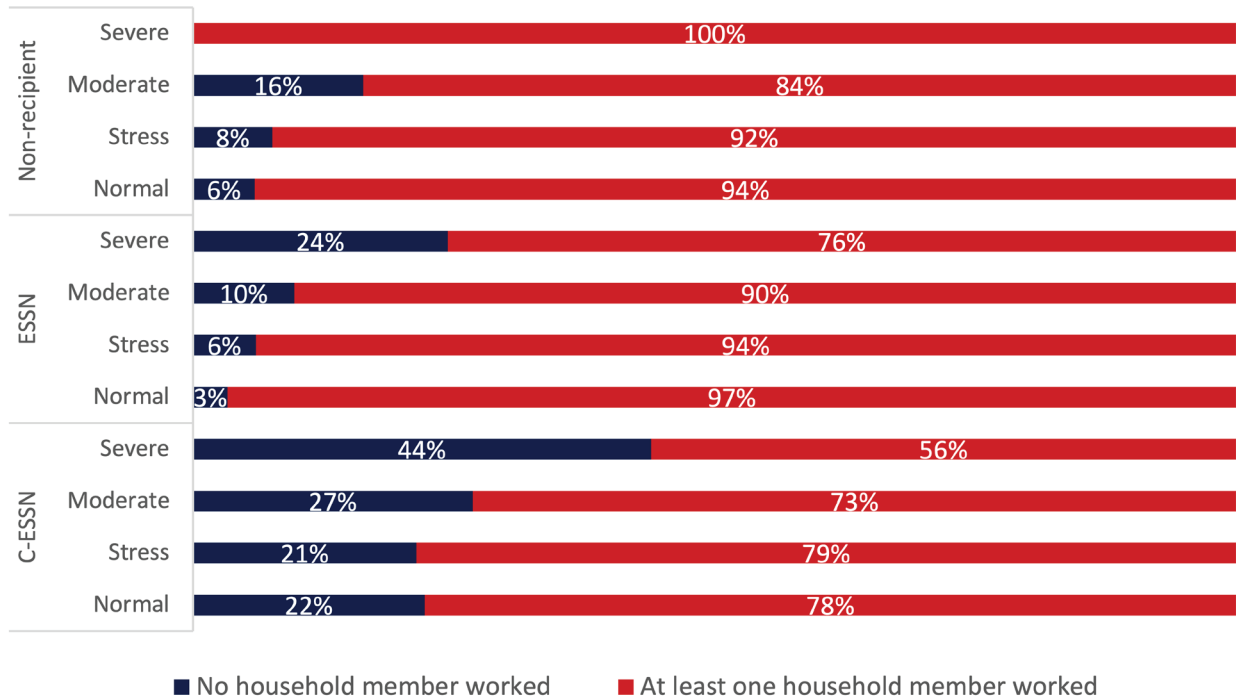


Figure 16 Rate of At Least One Working Individual in the Household by Severity Groups

Beyond labour income, refugee households have additional income sources such as; foreign remittances, sale of goods, pensions, savings, loans and cash assistance. Across the surveyed households, 9 out of every 10 household have at least one income source, while 1 out of 10 household have no income source at all. Households without any income are predominantly non-recipient households, which account for 83 per cent of this group, while ESSN households represent 12 per cent and C-ESSN households account for the remaining 5 per cent.

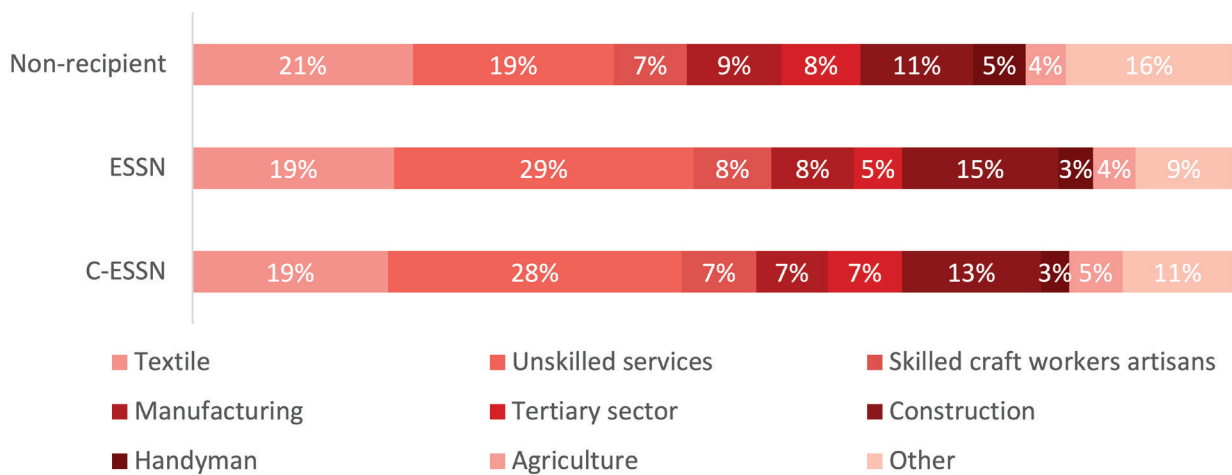


Figure 17 Shares of Occupation Information by Recipient Status



Analysis of employment patterns indicates that one in every three working individuals is employed in unskilled service activities and construction. This distribution is similar among C-ESSN and ESSN households. By contrast, the majority of working individuals in non-recipient households are employed in the textile sector. In addition, the rate of those working in the skilled craft workers artisans, tertiary sector, manufacturing, and agriculture sectors is 28 per cent in non-recipient households, while this rate is 24 per cent in ESSN households and 24 per cent in C-ESSN households. From a broader perspective, comparing ESSN and C-ESSN households with non-recipient, while recipient households are mostly oriented towards unskilled jobs. Examining the sectors in which recipient and non-recipient households work regionally, it is noteworthy that the İstanbul differs significantly from other regions. While people working in the İstanbul are mostly employed in the textile sector, in other regions, people are employed in the unskilled service sector, as is the case overall.

Looking at the sectors according to the vulnerability status of households, it is noteworthy that less vulnerable households are more likely to work in the textile sector, while vulnerable households are more likely to work in unskilled service sectors. Among vulnerable households, 27 per cent are in unskilled service sectors, followed by textiles (19 per cent), construction (14 per cent), manufacturing (8 per cent), and skilled crafts sectors (8 per cent). On the other hand, among non-vulnerable households, 21 per cent are in the textile sector, followed by unskilled services (15 per cent), services (11 per cent), manufacturing (10 per cent), construction (8 per cent), and skilled crafts (8 per cent).

Employment data reveals significant gender inequalities among working individuals across all household categories, particularly among groups receiving assistance. Women's participation in the labour force is highest in C-ESSN households, as approximately 2 out of every 10 workers are women since C-ESSN households are defined as the most vulnerable due to the high concentration of single-parent women, elderly and/or disabled members.

There is a noticeable difference in the gender distribution of individuals participating in the labour force across varying levels of household vulnerability. As vulnerability increases, women’s participation in the labour market declines. In the least vulnerable households, women’s labour force participation stands at 15 per cent, whereas this rate falls to 9 per cent in the most vulnerable group. This trend suggests that women’s economic engagement is inversely associated with household vulnerability and may play a role in mitigating vulnerability across economic, social, and psychological dimensions.

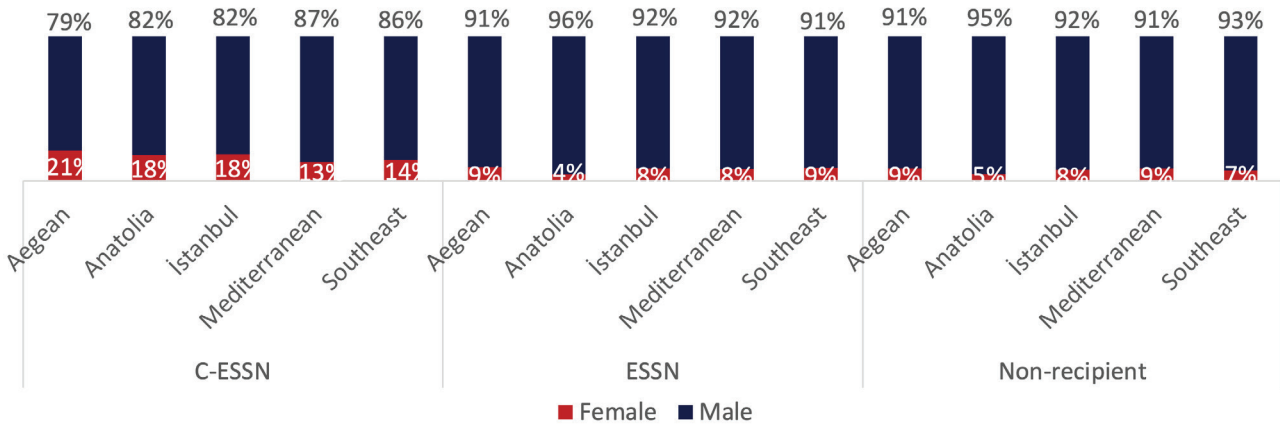


Figure 18 Gender of Working Individuals by Recipient Status and Region

There is a noticeable difference in the gender distribution of individuals participating in the labour force across varying levels of household vulnerability. As vulnerability increases, women’s participation in the labour market declines. In the least vulnerable households, women’s labour force participation stands at 15 per cent, whereas this rate falls to 9 per cent in the most vulnerable group. This trend suggests that women’s economic engagement is inversely associated with household vulnerability and may play a role in mitigating vulnerability across economic, social, and psychological dimensions.

In contrast, general ESSN and non-recipient households show a pattern where men make up the majority. In both groups (ESSN and non-recipient households), women’s participation is reduced by half: approximately 1 in 10 working individuals are women. Regionally, this trend which males constitute the majority, continues across all regions, but the Mediterranean and Southeast regions stand out as the regions most dependent on male workers within C-ESSN households. In these regions, nine out of every ten workers are men. In contrast, the Aegean, Anatolia and İstanbul regions, while having 8 out of every 10 workers being men, show relatively higher, but still minimal, female participation for C-ESSN. These findings highlight a critical insight for humanitarian assistance programmes: despite the high vulnerability of C-ESSN households, labour market participation among their members remains predominantly high in male participation, revealing potential barriers to women’s economic participation that require targeted intervention. Regardless of the recipient groups, women face significant barriers when it comes to employment, with childcare responsibilities, a lack of Turkish proficiency and inadequate professional qualifications being the primary challenges.<sup>16</sup> According to the Turkish Statistical Institute, women’s labour force participation in Türkiye is low at 36.8 per cent, compared to a rate of 72 per cent for men. For Syrian women in Türkiye, this rate is even lower at 13.7 per cent, compared to 79.4 per cent for Syrian men.<sup>17</sup>

16 Türk Kızılay, Focus Group Discussion Report: SSN Programme-Exploring Labor Market Participation of Female ESSN Recipients, Second Edition, September 2024.

17 International Labor Organization Türkiye, Decent Work for Turkish and Syrian Women in Türkiye’s Labour Market: A Focus Group Study, November 2025. ISBN: 9789220429266 (web PDF) DOI: <https://doi.org/10.54394/KPLG4662>

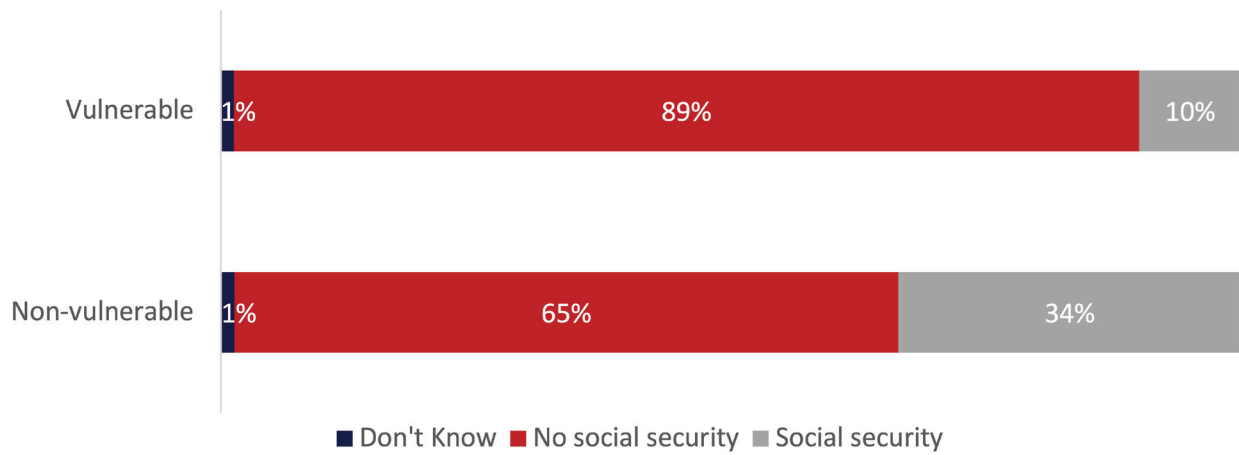


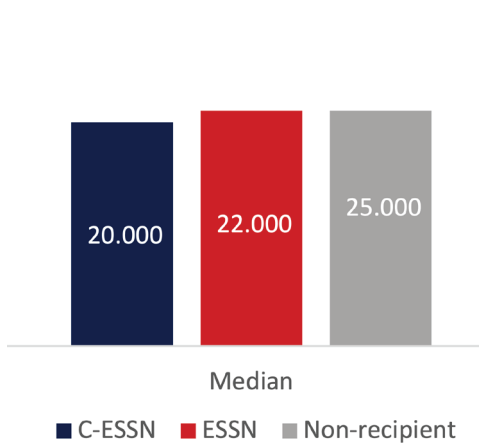
Figure 19 Working Individuals Social Security Status by Vulnerability Status

Social security coverage remains limited across both vulnerable and non-vulnerable households, reflecting the widespread presence of informal labour conditions across the population. Although the gap between groups is notable, informality appears to be a structural characteristic of the labour market rather than a programme-related outcome. Data show that 89 per cent of working individuals in vulnerable households are not covered by social security, compared to 65 per cent in non-vulnerable households, while social security coverage reaches 34 per cent among non-vulnerable households and remains at 10 per cent among vulnerable households; only 1 per cent in both groups report not knowing their status. These findings indicate that informal employment is common in both groups, yet more pronounced among vulnerable households. Examining social security status alongside the Severity Index enables a clearer assessment of how limited access to formal employment aligns with higher vulnerability levels.

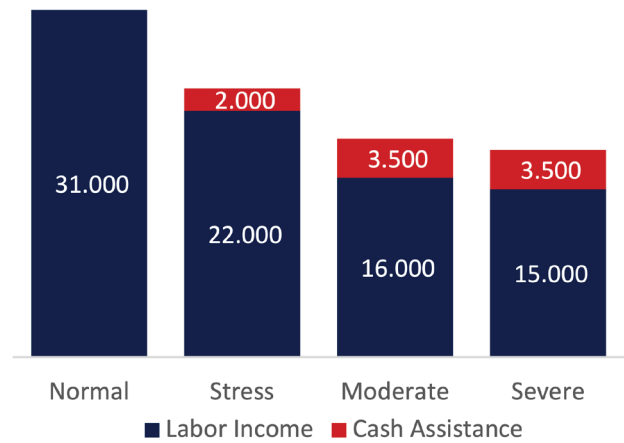
High levels of job insecurity and low social security coverage among recipient households is due to the most common type of employment; daily labour. Among the most vulnerable C-ESSN households, an overwhelming majority of working individuals (60 per cent) are classified as daily labourers. Similarly, one in every two workers (51 per cent) in ESSN households relies on this often insecure and informal labour income, which typically lacks social security benefits. The remaining employment among recipients is mostly in salaried positions (ranging from 37 per cent to 47 per cent). Yet the near-universal lack of social security suggests that even many of these salaried roles are informal. By contrast, non-recipient households exhibit greater economic resilience and formality, with workers more evenly distributed between salaried positions (50 per cent) and a notably higher rate of self-employment (4.5 per cent).

## Income Level

Households' income sources include; labour income, foreign remittances, sales of goods, pensions, savings, debt, and cash assistance. Looking at median incomes, labour income appears to be the highest income type. According to recipient status<sup>18</sup>, C-ESSN households report 20,000 TRY in labour income, ESSN households report 22,000 TRY, and non-recipient households report 25,000 TRY. Hence, all recipient groups are earning around the minimum wage, since the national minimum wage is 22,104 TRY. As mentioned above, the main reason C-ESSN households have relatively lower income levels compared to other recipient groups is their significantly lower labour force participation rate. Moving on, cash assistance plays a central role in the income composition of C-ESSN and ESSN households, ranking as the second-largest income source. In contrast, other income categories close to zero, reflecting the fact that most households have no alternative sources of income. However, it is noteworthy that borrowing and savings are also registered under income sources.



**Figure 20** Median Labour Income by Recipient Status



**Figure 21** Median Labour Income and Cash Assistance by Severity Group

When household incomes are analyzed by severity levels, instead of recipient or regional status, a stark disparity emerges. The least vulnerable group report an average income of 31,000 TRY, this figure drops by more than half to 15,000 TRY among the most vulnerable. However, the most vulnerable households balance this gap through cash assistance as they receive an average of 10,000 TRY in cash assistance, whereas the least vulnerable households receive none. This pattern indicates that the programme has successfully reached vulnerable households and that cash assistance has played a meaningful role in narrowing income disparities between vulnerable and non-vulnerable groups.

<sup>18</sup> Design-based median test for Recipient Status indicated significant differences in households' labour income across groups (Chisq = 123.45, p = 2.2e-16), showing that the labour income was not uniformly distributed among recipient groups.

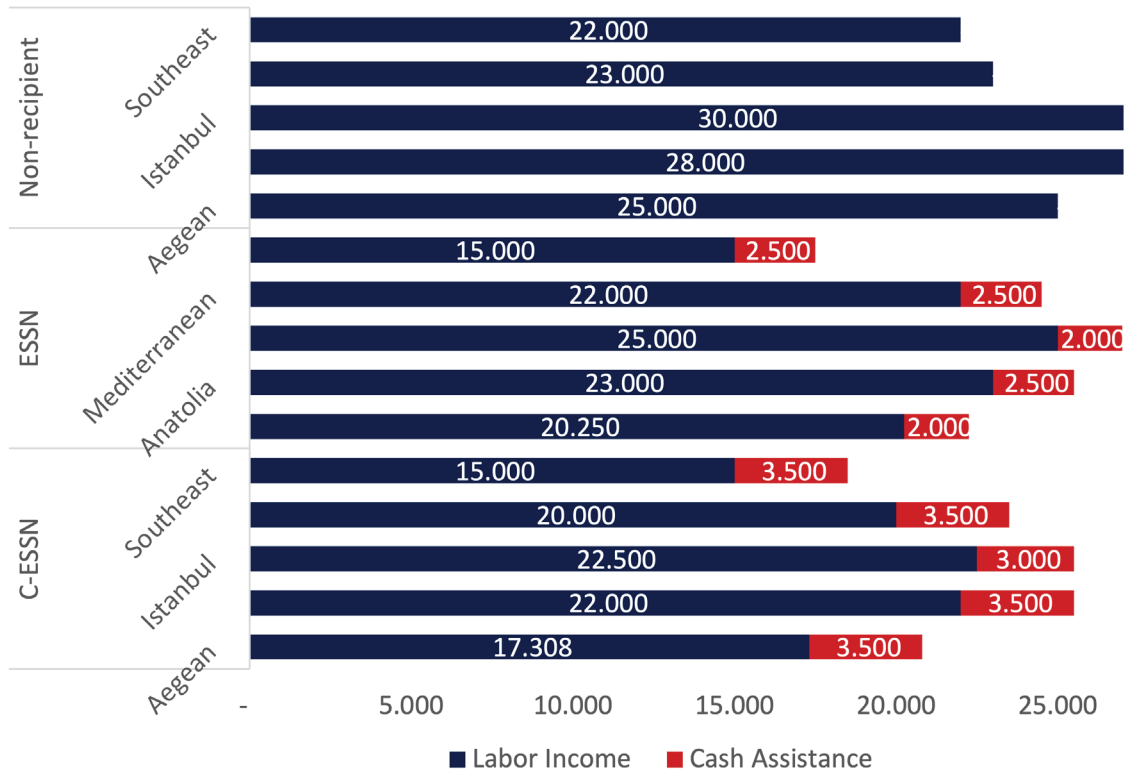


Figure 22 Median Labour Income and Cash Assistance by Recipient Status and Region

Labour income makes up the fundamental household finances across all regions<sup>19</sup>, but the role of median income and cash assistance varies significantly by region. İstanbul generally has the highest median labour income, highest at 30,000 TRY for non-recipient households, compared to C-ESSN and ESSN households at 22,500 TRY and 25,000 TRY respectively. In Aegean and Anatolia, non-recipient households still have high incomes, but the gap narrows down as C-ESSN households in these regions receive significant cash assistance (3,500 TRY), indicating a high level of dependence on the programme to mitigate income inequality. Mediterranean region shows a similar trend where non-recipients report 23,000 TRY labour income, while C-ESSN households also receive 3,500 TRY in cash assistance. Notably, the Southeast region exhibits the most vulnerable profile for both recipient and non-recipient groups, with the lowest median labour income of 22,000 TRY for non-recipient and 15,000 TRY for both C-ESSN and ESSN households. However, both recipient groups compensate their low-income levels with cash assistance (3,000 TRY for C-ESSN and 2,500 TRY for ESSN, plus other assistance). The results above are parallel with the annual average equivalent disposable income per household member in Türkiye, where the lowest income was recorded in the Southeast and Eastern Anatolian Regions.<sup>20</sup> Remittances from foreign countries, sales of goods, and income from other formal/informal sources are consistently reported to be negligible, emphasizing the strong reliance on labour income and cash assistance of households across all five regions.

19 Design-based median test for Regions indicated significant differences in households' labour income across regions (Chisq = 396.1, p = 2.2e-16), showing that the labour income was not uniformly distributed among regions.

20 TURKSTAT. (2024). Income Distribution Statistics. <https://data.tuik.gov.tr/Bulten/Index?p=Gelir-Dagilimi-Istatistikleri-2024-53712>.

## Barriers in Accessing Work

Barriers to employment reveal a fundamental constraint affecting households; the lack of sufficient job opportunities, which is the most commonly reported obstacle, cited by approximately 40 per cent of workers. Besides that, there are notable wage disparities between Syrian refugees and Turkish citizens, with refugees often earning significantly less for the same work, exacerbating their economic vulnerability. Syrian refugees are heavily concentrated in labour intensive sectors such as construction, textiles, and agriculture, where they face exploitation and unsafe working conditions. While a step forward, the work permit scheme has limitations that hinder the effective integration of refugees into the formal labour market. A significant number of Syrian refugees work informally due to bureaucratic hurdles and lack of employer incentives.<sup>21</sup>

Beyond this market issue, a comparison between recipient groups reveals specific requirements. C-ESSN households report the greatest rate of health issues at 28 per cent and of caretaking duties for dependent family members (such as elderly or disabled individuals) at 16 per cent. Conversely, ESSN households report the highest need for ‘more skills’ (18 per cent), suggesting barriers related to deficiencies in human capital. A deeper analysis using the severity index is crucial for workers in the severe vulnerability category, since the primary barriers to employment shift dramatically from market access issues to core welfare needs. Nearly half of these workers (49 per cent) cited health issues and a similar proportion (46 per cent) cited the need to care for family members as their main barrier, overshadowing the lack of job offers. Consistent with findings from similar studies, individuals who face barriers to labour market participation due to disability or chronic illness exhibit significantly lower labour force participation rates, with the likelihood of employment declining as the severity of disability increases.<sup>22</sup> These findings suggest that employment interventions targeting the most vulnerable groups must integrate essential health and care support. In contrast, programmes for less severely affected groups should primarily focus on skills development and improved job-matching strategies to address the prevailing shortage of employment opportunities.

	Normal	Stress	Moderate	Severe	Total
Not Enough Work Offer Work	40%	39%	34%	39%	38%
Health	12%	20%	31%	49%	22%
Need More Skills	12%	17%	15%	9%	16%
Discrimination	12%	16%	18%	13%	16%
No Barriers	30%	15%	7%	0%	14%
Not Enough Turkish	8%	13%	11%	0%	12%
Work Permit	14%	12%	7%	2%	11%
Fund	10%	11%	10%	2%	11%
Need to Care	2%	8%	16%	46%	10%
Not Enough Working Age Members Working	3%	7%	10%	27%	8%
Other	4%	6%	7%	0%	6%
Not Enough Information of How to Look for a Job	2%	3%	2%	5%	3%
Not Enough Information on How to Receive Work Permit	1%	3%	2%	0%	2%
Tradition	2%	2%	3%	0%	2%
Our Skills Diploma Are Not Diploma	4%	2%	1%	0%	2%

**Figure 23** Barriers to Employment Opportunities by Severity Group

21 S. Carrera Nunez et al. (eds.), Şanlıer İlke, Global Asylum Governance and the European Union's Role, International Perspectives on Migration 18, Chapter 9, 2025. [https://doi.org/10.1007/978-3-031-74866-0\\_9](https://doi.org/10.1007/978-3-031-74866-0_9)

22 Öncel, D., Dzügün, B., & Karaoğlan, D. (August, 2016). Disability and Labor Force Participation: Evidence from Turkish Males. Economic Research Center.

## Burden of Debt

Debt is a factor that deepens socio-economic vulnerability, particularly among low-income groups, households with irregular incomes, tenants, low-educated population, women, youth and large families.<sup>23</sup> In this study, analysis shows that three out of every five households are in debt. Examining debt according to recipient status reveals that 66 per cent of C-ESSN households, 65 per cent of ESSN households, and 51 per cent of non-recipient households are in debt. Regional analysis points out that, compared to other regions, households in the Southeast have a higher debt ratio as; 72 per cent of C-ESSN, 73 per cent of ESSN and 56 per cent of non-recipient households are in debt. On the other hand, the lowest debt ratio varies depending on the recipient status and the region. C-ESSN households have the lowest debt ratio of 59 per cent in the Aegean region, while ESSN and non-recipient households have the lowest debt ratios in Anatolia of 55 and 53 per cent respectively. According to severity index, only 31 per cent of the least vulnerable households are in debt, compared to 87 per cent of the most vulnerable. Which means that as vulnerability rises, households' indebtedness also increases.

Examining the debt level<sup>24</sup>, it was identified that C-ESSN households have a median debt of 13,700 TRY, ESSN households have 14,000 TRY, and non-recipient households have 19,000 TRY. Regionally<sup>25</sup>, debt levels are the highest in the İstanbul region for all households (C-ESSN 20,000 TRY, ESSN 15,000 TRY and non-recipients 20,000 TRY), while the lowest levels vary. ESSN households have the lowest debt levels in the Aegean region at 12,115 TRY, while C-ESSN households have the lowest debt of 11,000 TRY in the Aegean and Anatolia regions, and non-recipient households have the lowest debt of 15,000 TRY in the Aegean, Anatolia and Southeast regions. When examining debt levels according to households' vulnerability, a clear linear relationship can be observed. The least vulnerable households have no debt, while the most vulnerable group has a debt of 18,000 TRY.

When examining to whom households are indebted, similarities are observed for all three groups. The majority of households are indebted to their relatives (C-ESSN 53 per cent, ESSN 53 per cent and non-recipients 52 per cent), while non-recipients and ESSN households are secondarily indebted to friends (46 per cent and 48 per cent respectively) and C-ESSN households are indebted to local markets (47 per cent). In addition, while, the majority of households hold debts in Turkish Lira (92 per cent), some also have debts in US Dollars (12 per cent) and Euros (2 per cent).

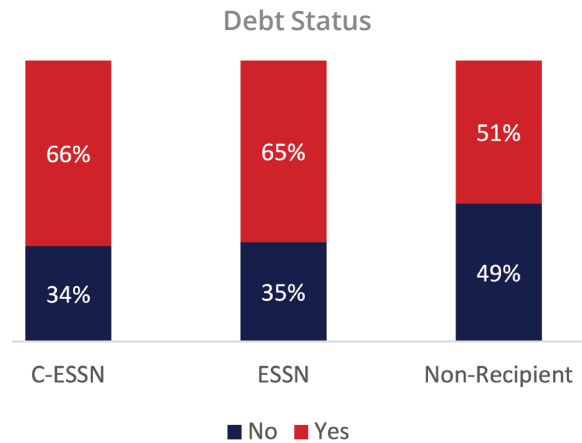


Figure 24 Debt Status by Recipient Status

23 Alpar, Işıl Başak, A Current Assessment of Household Indebtedness in Turkey and the Potential Consequences of Household Indebtedness, *Erciyes Akademi*, 2022. 36(1), 80–107. <https://doi.org/10.48070/erciyesakademi.1116082>

24 Design-based median test for Recipient status indicated significant differences in households' debt amount across groups (Chisq =24.31, p = 5.44e-6), showing that the debt level was not uniformly distributed among groups.

25 Design-based median test for Region indicated significant differences in households' debt amount across groups (Chisq = 13.52, p = 0.0091), showing that the debt level was not uniformly distributed among groups.

## Savings

Strikingly, 95 per cent of households report having no savings, encompassing those receiving ESSN and C-ESSN assistance, as well as non-recipient families. This exceptionally low rate highlights a fundamental economic constraint; savings can only accumulate when expenditure falls below income. Consequently, the vast majority of households involved in the SSN Programme maintain minimal or non-existent financial reserves, regardless of their recipient status.

## Expenditure

Household expenditure has an important role in understanding the socio-economic status of households, as seen in income and debt indicators. When expenditure levels<sup>26</sup> are examined, C-ESSN households have the lowest expenditure at 26,371 TRY, while ESSN households have higher at 29,930 TRY and non-recipient households hold the highest expenditure at 33,743 TRY. It is important to note that, C-ESSN households exhibit lower income and debt levels than other groups as well. However, due to differences in household composition, direct comparisons of total household expenditure are not appropriate. When per capita expenditure is considered, C-ESSN households spend 7,030 TRY, ESSN households 7,297 TRY, and non-recipient households spend substantially more, at 9,469 TRY. Both in terms of total household expenditure and per capita expenditure, the most striking aspect is that non-recipient households spend significantly more. This situation is notably the same for income and debt as well. In this regard, non-recipient households appear to be in a better position than other households in terms of both their ability to borrow and their ability to cover necessary expenditures with their labour income.

Deepening the analysis by examining household spending according to vulnerability levels, the spending level of the most vulnerable group remained at 4,762 TRY per capita and 18,629 TRY in total. In contrast, the least vulnerable households have per capita expenditures of 12,260 TRY and total expenditures of 42,267 TRY. This reveals both the fact that larger households are more vulnerable and that expenditure has a linear relationship with vulnerability.

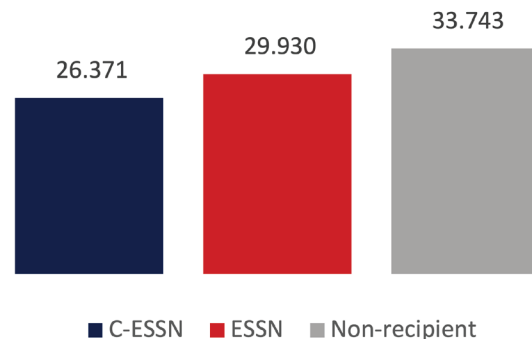


Figure 25 Total Expenditure by Recipient Status

Additionally, households in high-income regions tend to spend more. In major cities such as İstanbul, opportunities, job prospects, and wages are higher, which in turn increases consumption expenditures. In less developed regions, income levels are lower, which limits households' consumption capacity. Notably, the İstanbul region has by far the highest level of expenditure, the cost of living varies regionally, and the goods consumed and services used by households differ. When considering the regional<sup>27</sup> breakdown, it is important to note that the income levels of households in İstanbul are significantly higher than in other regions while the lowest expenditure level is observed in the Southeast region. In the İstanbul region, the total expenditure of C-ESSN households is 36,505 TRY, ESSN households 37,519 TRY, and non-recipient households 43,004 TRY. While in the Southeast expenditure is 22,897 TRY in C-ESSN, 25,805 TRY in ESSN, and 29,510 TRY in non-recipient households.

26 Design-based median test for Recipient status indicated significant differences in households' expenditure amount across groups (Chisq = 107.28, p = 2.2e-16), showing that the expenditure level was not uniformly distributed among groups.

27 Design-based median test for Region indicated significant differences in households' expenditure amount across groups (Chisq = 359.78, p = 2.2e-16), showing that the expenditure level was not uniformly distributed among groups.

As household income levels increase, share of essential expenditures (primarily food expenses) decrease steadily. Conversely, as income levels rise, share of service-oriented expenditures increase.<sup>28</sup> Taking a closer look at expenditure items, food and shelter expenditures are the two most prominent items in the distribution of household expenditures. In Türkiye the expenditure categories with the highest share of household spending were, food and non-alcoholic beverages at 21.7 per cent, followed by housing, water, electricity, gas and other fuels at 15.9 per cent.<sup>29</sup> Shelter is a critical, life-saving need and often the biggest financial investment people make.<sup>30</sup> C-ESSN, ESSN and non-recipient households all have a commonality in this regard, revealing that households prioritize expenditures necessary for sustaining their lives. Food and housing expenses account for 77 per cent of C-ESSN households' expenditures, 75 per cent of ESSN households' expenditures, and 72 per cent of non-recipient households' expenditures. The remaining 25 per cent of expenditures are dominated by hygiene, transportation, clothing, communication, and school items.

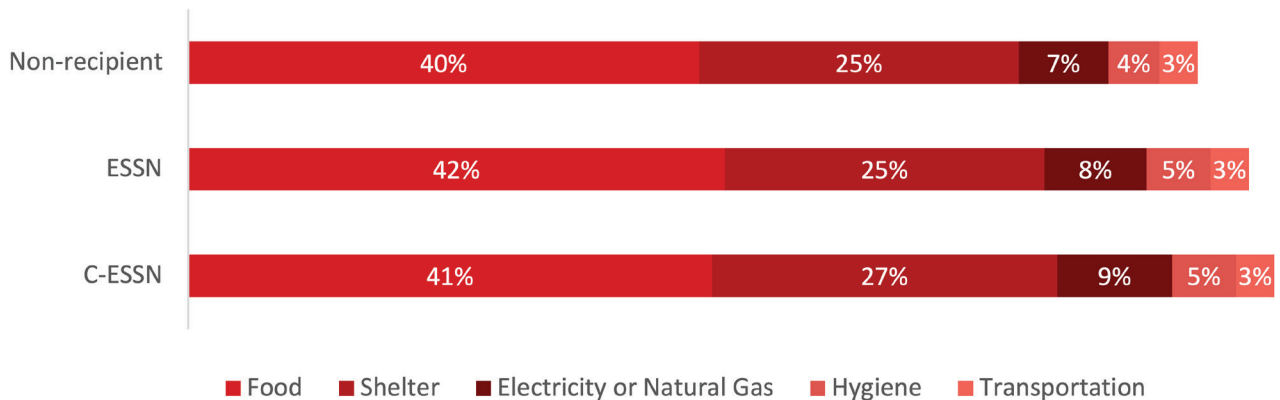


Figure 26 Share of Top 5 Expenditure Items by Recipient Status

28 Yükseler, Z., & Türkan, E. (2008). Türkiye’de hanehalkı: İşgücü, gelir, harcama ve yoksulluk açısından analizi. TÜSİAD Yayınları (Yayın No: TÜSİAD-T/2008-03/455).

29 TURKSTAT, Annual Gross Domestic Product, 2024, <https://data.tuik.gov.tr/Bulten/Index?p=Yillik-Gayrisafi-Yurt-Ici-Hasila-2024>.

30 International Federation of Red Cross and Red Crescent Societies, IFRC-Shelter Research Unit and Luxembourg Red Cross, Shelters, Settlements and Cash A manual on Cash and Voucher Assistance, Geneva, July, 2019.

## Living Standards

### Ability to Meet Basic Needs

Basic needs encompass access to essential services across areas such as health, nutrition, WASH, food, shelter, energy, education, household items, and specialized services for individuals with specific requirements. The basic needs approach also integrates longer-term well-being, including protection, sustainable livelihood opportunities, and durable solutions. This framework draws on previous experience and highlights the growing relevance of cash assistance as a feasible option in an expanding range of contexts.<sup>31</sup> In this study, households' ability to pay rent was examined prior to assessing their capacity to meet other essential needs. Households have similar distributions in terms of rent payment according to their recipient status. Households that pay their rent regularly and make annual payments in advance show that 88 per cent of C-ESSN, 91 per cent of ESSN, and 92 per cent of non-recipient households appear to have no difficulties in paying their rent. On the contrary, rent payment delays were reported by 9 per cent of C-ESSN households, compared to 8 per cent of ESSN and 5 per cent of non-recipient households. As indicated in the expenditure section, households prioritize shelter and food needs regardless of their recipient status, which leaves little space for other specialized needs including those higher up in Maslow's hierarchy of needs. According to the Maslow hierarchy; it is a motivation theory that explains human behavior by proposing that needs are arranged in a progression, starting from basic physiological requirements and moving toward higher-level psychological needs and self-actualization. According to this model, individuals first focus on meeting essential physiological needs (such as food, water, and sleep) and safety needs; once these are largely satisfied, higher-level motivations related to belonging, love, esteem, and ultimately the realization of one's full potential (self-actualization) become more prominent.<sup>32</sup> This pattern is further reinforced by the finding that only a very small proportion of households are able to consistently meet all their needs, that accounts to only 1.5 per cent of C-ESSN households, 3 per cent of ESSN households, and 7.2 per cent of non-recipient households. In contrast, 71 per cent of C-ESSN households, 68.4 per cent of ESSN households, and 54.1 per cent of non-recipient households are rarely able to meet their needs. This data indicates that recipient households (C-ESSN and ESSN) are much more vulnerable than non-recipient households, and that C-ESSN households are the most vulnerable group.

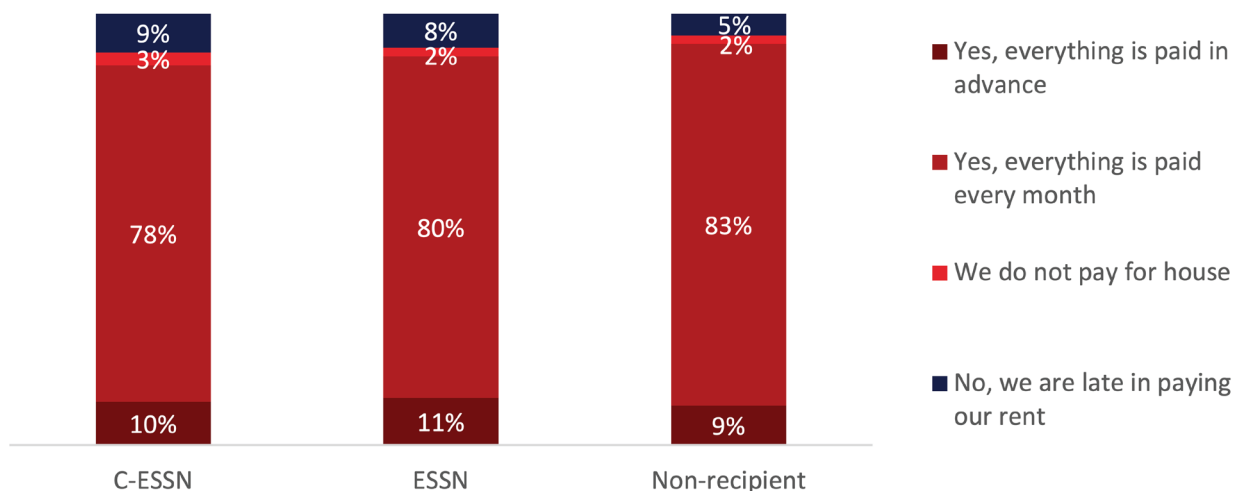


Figure 27 Ability to Pay Rent by Recipient Status

31 UNHCR. (2017). Basic Needs Approach in the Refugee Response. United Nations High Commissioner for Refugees.

32 Şengöz, M. (2022). Maslow'un İhtiyaçlar Hiyerarşisi Modeli'nin bütünlük bir süreç olarak yeniden yorumlanması. JRES, 9(1), 164-173. <https://doi.org/10.51725/etad.977931>

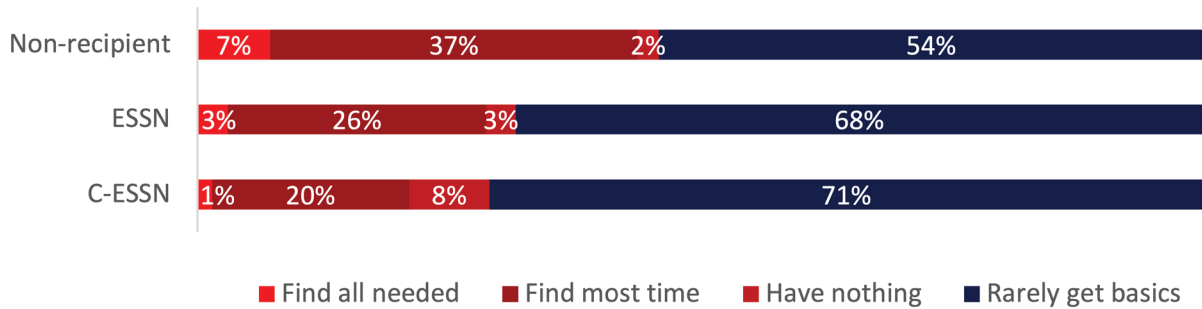


Figure 28 Ability to Meet Basic Needs Status by Recipient Status

At the regional level, C-ESSN households in the Southeast shows the least ability to meet their needs at 75 per cent, followed by ESSN households in the Mediterranean region at 74 per cent, and non-recipient households in the Aegean region at 62 per cent. This situation underlines that households differ across regions in both their capacity and needs, as patterns of expenditure, income, and debt vary regionally.

### Minimum Expenditure Basket (MEB)

Minimum Expenditure Basket (MEB)<sup>33</sup> is a threshold consisting of the minimum standard goods and services required for a household to sustain a decent standard of living (it is a proxy indicator for the poverty line) and is used to analyze poverty. More than half of C-ESSN households (56 per cent), 29 per cent of ESSN households and 22 per cent of non-recipient households fall below the MEB. As with all other socio-economic indicators, C-ESSN households are much more vulnerable than other groups and more than half of households struggle to meeting their minimum standard needs according to this analysis. At the regional level, households in İstanbul (across all three groups) exhibit higher expenditure levels than those in other regions, alongside a much higher rate of remaining above the MEB. However, as mentioned in the expenditure section, regional variations in the cost of living also exist. The fact that the MEB calculation is not based on regional stratification may create the misconception that regions with a high cost of living, such as İstanbul, are in a better position than other regions. Given that the İstanbul region is more expensive than other regions.

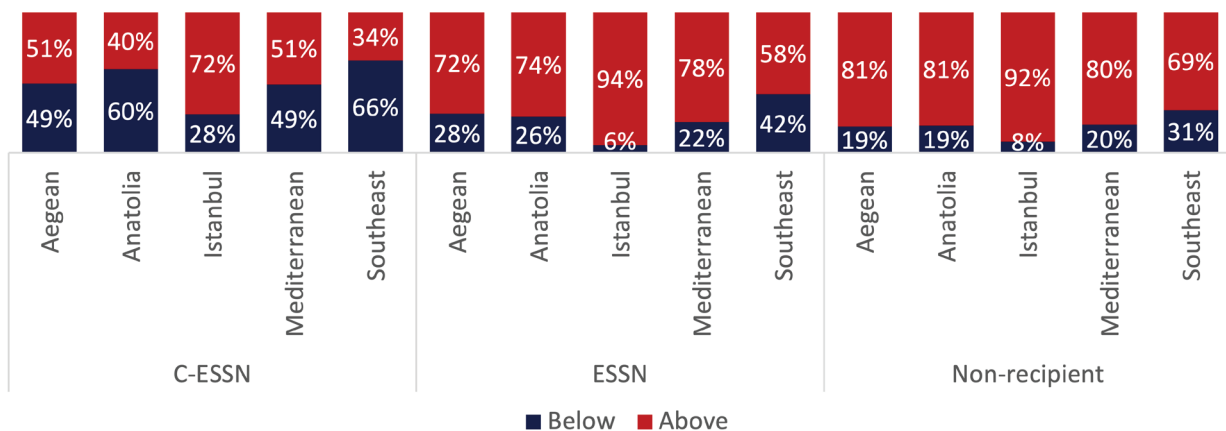


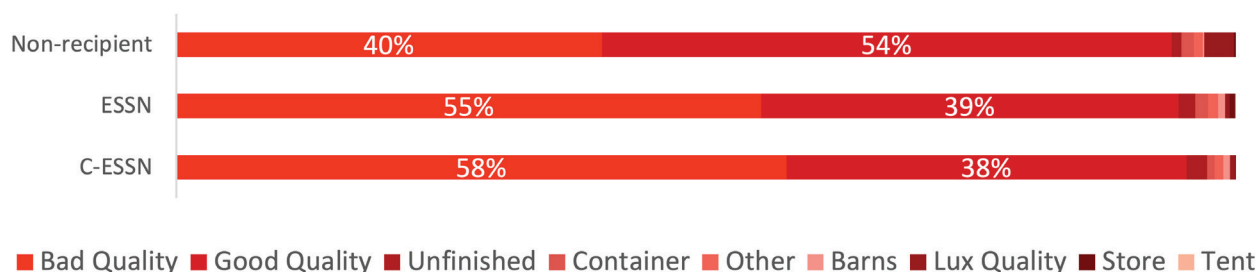
Figure 29 MEB Status by Recipient Status and Region

33 For further information on the methodology and dataset related to this study, please view the MEB Technical Report at: [https://platform.kizilaykart.org/tr/Doc/rapor/MEB\\_Technical\\_Paper\\_Report\\_8.pdf](https://platform.kizilaykart.org/tr/Doc/rapor/MEB_Technical_Paper_Report_8.pdf).

Households' relative poverty levels were estimated<sup>34</sup> based on their per capita expenditures, allowing for a comparative assessment across the sample. To better understand the factors associated with relative poverty, several household characteristics were examined together, including income conditions, regional location, household composition, education level, food consumption patterns, and access to social assistance. The findings indicate that households with higher income levels, better educational attainment, stronger food consumption patterns, living standards above the minimum expenditure threshold (MEB), and residence in İstanbul or the Mediterranean region tend to display relatively better economic conditions. Conversely, larger household size and reliance on cash assistance programmes such as SSN and CCTE are more commonly observed among households experiencing higher levels of relative poverty.

## Housing

Regarding shelter conditions of the households, it is important to note that the majority of households live in bad conditions. According to recipient status<sup>35</sup>, 58 per cent of C-ESSN households, 55 per cent of ESSN households and 40 per cent of non-recipient households live in houses in bad conditions. In contrast, the majority of non-recipient households (54 per cent) live in houses which can be considered to be in good-condition. In addition, although at very low rates, some households live in tents, unfinished houses, sheds, containers, shops, and barns. As expected, the vulnerability of households increases the likelihood of living in worse housing conditions. 80 per cent of the most vulnerable group live in bad-quality housing, 12 per cent in containers, and only 4 per cent in houses that can be considered to be in good condition. In contrast, 69 per cent of the least vulnerable group live in good condition housing, while 25 per cent live in housing in bad conditions. Furthermore, a share of households report difficulties accessing hygiene facilities, affecting 8 per cent of C-ESSN households, 7 per cent of ESSN households, and 3 per cent of non-recipient households, while approximately 3 per cent of households experience difficulties accessing sufficient water. Additionally, in 5 per cent of C-ESSN and ESSN households and 4 per cent of non-recipient households, the toilet is located outside the home. Taken together, both limited access to water and inadequate sanitation infrastructure constrain households' ability to maintain adequate hygiene standards. Lastly, households are observed to share houses with other households, regardless of their recipient status. This arrangement is reported by 16 per cent of C-ESSN households, 11 per cent of ESSN households, and 15 per cent of non-recipient households.



**Figure 30** Housing Condition Status by Recipient Status

<sup>34</sup> Relative poverty was estimated by applying a quadratic normalization to per capita household expenditures. A generalized linear regression model was then used to assess its association with selected household characteristics, including income, debt, region, recipient status, disability presence, MEB status, education level, school attendance, housing-sharing status, ESSN and CCTE assistance, household size, and Food Consumption Score (FCS). Weighted adjustments were applied to account for heteroskedasticity and multicollinearity.

<sup>35</sup> There is a statistically significant association between Recipient Status and Housing Condition, accounting for the survey design and weights (Rao-Scott adjusted Pearson Chisq test,  $F = 6.88$ ,  $p < 0.001$ ).

## Coping Mechanisms

The Coping Strategy Index functions as a sub-index of the comprehensive SSN IVS 2 Severity Index and is designed to categorize the severity of vulnerability among refugee households in Türkiye. The Reduced Coping Strategy Index (rCSI) and the Livelihood Coping Strategy Index (LCSI) are used in combinations to evaluate household resilience in managing shortages of essential goods and services.

### Reduced Coping Strategy Index (rCSI)

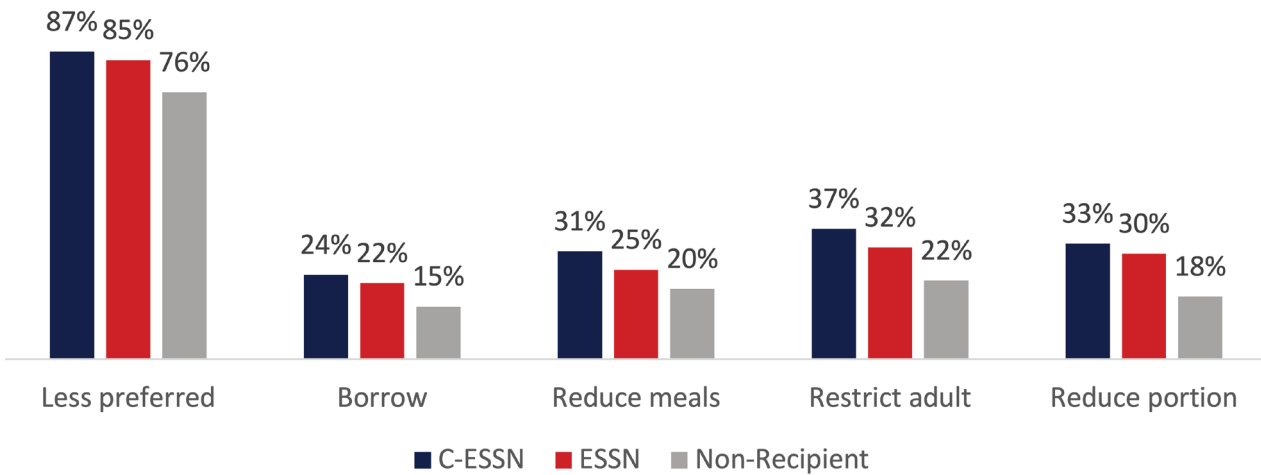


Figure 31 rCSI Components by Recipient Status

The Reduced Coping Strategy Index (rCSI)<sup>36</sup> is a consumption based-coping indicator, with higher rCSI values reflecting increased household vulnerability. When analyzed together with LCSI and FCS, it provides a comprehensive picture of household food security, capturing consumption stress, dietary diversity and livelihood vulnerability. 88 per cent of overall surveyed households resort to reduced coping strategies, while categorically this proportion accounts to 92 per cent of C-ESSN, 90 per cent of ESSN, and 81 per cent of non-recipient households. Looking into rCSI components, a large majority of households in all three groups (87 per cent of C-ESSN, 85 per cent of ESSN, and 76 per cent of non-recipient households) consume less preferred, cheaper foods to sustain their lives. However, the most striking component is reducing adults’ food intake to feed children, which is the second most common strategy, used by 37 per cent of C-ESSN, 32 per cent of ESSN, and 22 per cent of non-recipient households. Reviewing household scores<sup>37</sup>, C-ESSN households have the highest rCSI value at 13.7, followed by ESSN households at 12.4 and non-recipient households at 9.19. rCSI indicator provides slightly different results from socio-economic indicators, indicating that non-recipient households are much less vulnerable than recipient households.

36 The Reduced Coping Strategies Index (rCSI) assesses short-term food insecurity by asking how often households have to apply for negative coping strategies, such as relying on less preferred foods or reducing portion sizes.

37 rCSI differs significantly across recipient status, accounting for the survey design (design-based Kruskal-Wallis test, Chisq = 121.09, p < 2.2e-16).

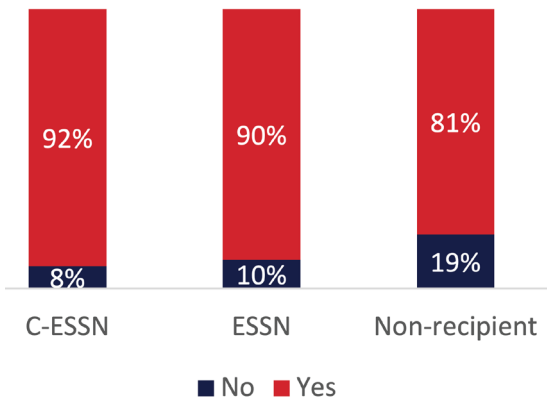


Figure 32 Use of rCSI strategies based by Recipient Status

A comparison of households' use of rCSI strategies based on their recipient status reveals a notable difference between non-recipient households and recipient (ESSN and C-ESSN) households. While non-recipient households implement rCSI strategies much less frequently (19 per cent), ESSN households follow with 10 per cent and C-ESSN households with 8 per cent. This situation also shows that C-ESSN and ESSN households experience more food-based pressure than non-recipient households and therefore resort to rCSI strategies more often.

According to the vulnerability status of households, the average rCSI of the least vulnerable households is 3.89. This value shows a dramatic increase with the vulnerability level, reaching 42.84. Only 64 per cent of the least vulnerable households use at least one food-based coping strategy, while 90 per cent of the most vulnerable households have resorted to at least one of the rCSI components. Furthermore, among households using all rCSI components, 1 in 10 of the most vulnerable households used all five strategies throughout the week, whereas no households in the least vulnerable group exhibited this pattern.

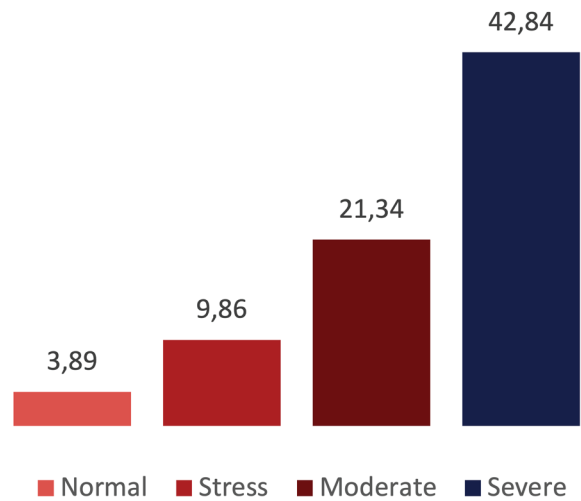


Figure 33 rCSI Score by Severity Group

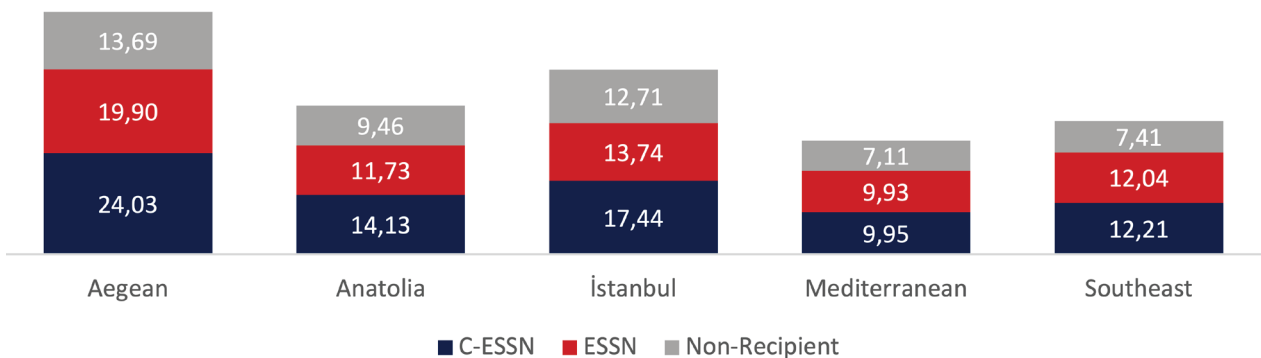


Figure 34 rCSI Scores by Recipient Status and Region

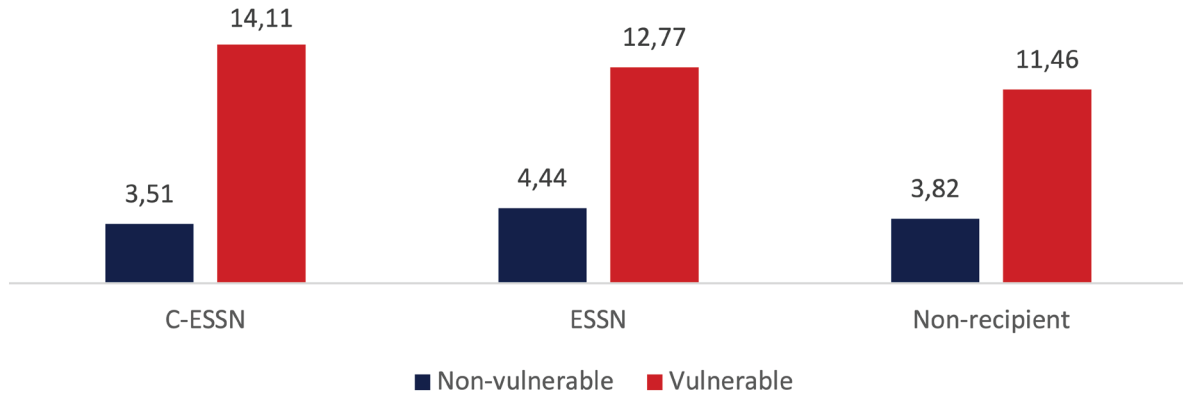


Figure 35 rCSI Scores by Recipient Status and Vulnerability

Analysis of the data reveals that vulnerable households across all recipient groups record significantly higher rCSI scores compared to their non-vulnerable counterparts, with the most pronounced pressure observed among C-ESSN households. Specifically, vulnerable C-ESSN households exhibit the highest rCSI score at 14.11, while non-vulnerable households in the same group stay at a much lower 3.51. This pattern continues with ESN households, where vulnerable families score 12.77 compared to 4.44 for the non-vulnerable. Interestingly, non-recipient households demonstrate slightly lower rCSI levels in the vulnerable category at 11.46, yet they still maintain a score of 3.82 in the non-vulnerable group. These findings suggest that households enrolled in C-ESSN and ESN assistance programs face more intense consumption-related stress than non-recipient households, necessitating more frequent use of strategies such as consuming lower-quality food or reducing meal sizes to manage their daily needs.

Regionally<sup>38</sup>, C-ESSN households in the Aegean region appear to be the most vulnerable, with an rCSI score of 24.03, while non-recipient households in the Mediterranean region have the lowest rCSI score of 7.11. The İstanbul region, which stands out in socio-economic indicators such as expenditure and income, ranks second after the Aegean region according to the rCSI indicator. This situation reinforces the previous arguments and shows that the diversity of the cost of living across regions causes the high income and expenditure in the İstanbul region to be misleading.

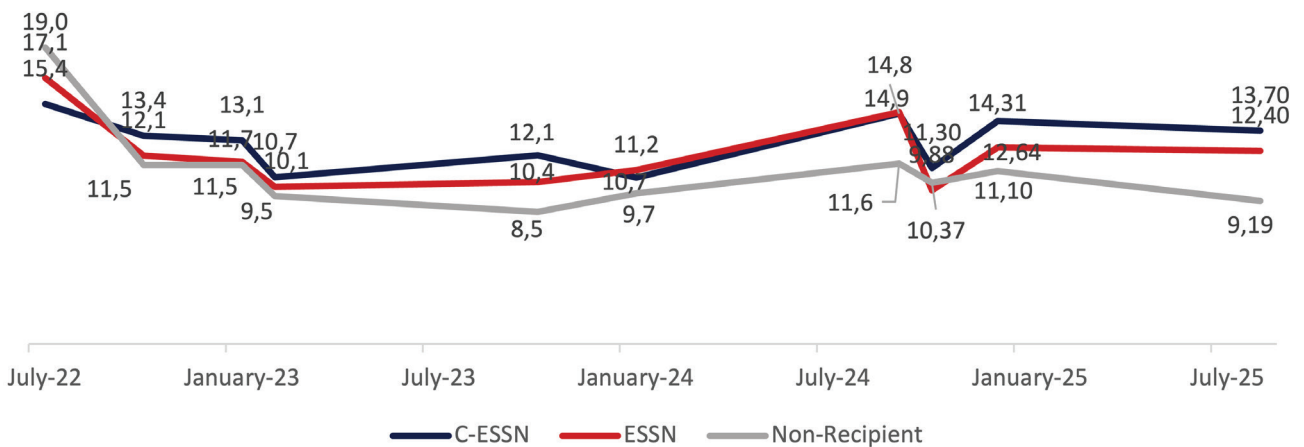


Figure 36 Trend of rCSI Scores

38 rCSI differs significantly across region, accounting for the survey design (design-based Kruskal-Wallis test, Chisq = 281.22, p < 0.001).

The figure shows a consistent pattern in which C-ESSN households record the lowest rCSI levels throughout the period, indicating their comparatively better food consumption levels relative to the other groups. ESSN households follow a similar but slightly higher trend, with values stabilizing after mid-2024. In contrast, non-recipient households display noticeably higher rCSI levels across all rounds, particularly in mid-2022 and mid-2024, when their scores peak before gradually declining. Although all three groups experience fluctuations over time, the gap between non-recipient households and the other groups remains clear, with C-ESSN households persistently showing the most favorable outcomes.

### Livelihood Coping Strategies Index (LCSI)

The Livelihood Coping Strategies Index (LCSI)<sup>39</sup> is an inverse indicator that assesses households' resilience in the face of economic hardship, with higher scores indicating greater vulnerability. The overall LCSI average in the survey is 2.6 across recipient groups<sup>40</sup>, C-ESSN households have the highest LCSI score at 2.94, followed by ESSN households at 2.72 and non-recipient households at 2.13.

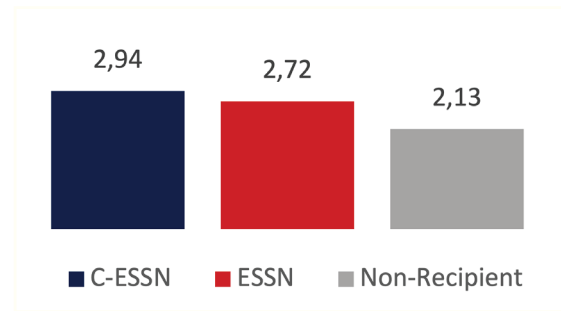


Figure 37 LCSI Scores by Recipient Status

The LCSI comprises three components: stress, crisis, and emergency, with households predominantly resorting to stress-level strategies. This situation indicates that households benefiting from the SSN Programme are generally at the stress level. The most frequently used strategies in all recipient groups are borrowing money and food on credit, followed by the strategy of reducing education and health expenditures in the crisis category. Nevertheless, although the majority of the households are at the stress level, some resort to crisis and emergency strategies sending children to work. In conditions of poverty and economic insecurity, families are compelled to prioritize immediate survival over education, leading to children's engagement in labour. These circumstances highlight how poverty and powerlessness within households contribute to children's entry into work.<sup>41</sup> The presence of child labour in 8 per cent of C-ESSN, 6 per cent of ESSN, and 4 per cent of non-recipient households indicates that some households experience vulnerability at the emergency and crisis levels.

39 The Livelihood Coping Strategies Index (LCSI) evaluates the more severe, often irreversible, actions households take to cope with significant economic hardship, such as selling assets or withdrawing children from school.

40 LCSI differs significantly across recipient status, accounting for the survey design (design-based Kruskal-Wallis test,  $\text{Chisq} = 102.96, p < 2.2e-16$ ).

41 Aykaç, M., & Murat, G. (2019). Sürdürülebilir Kalkınma 2030 Gündemi bağlamında çocuk işçiliğinin önlenmesinde sosyal koruma tabanları. Uluslararası Yönetim İktisat ve İşletme Dergisi (International Journal of Management Economics and Business), CEEİK 2018 Özel Sayısı, 93-118.

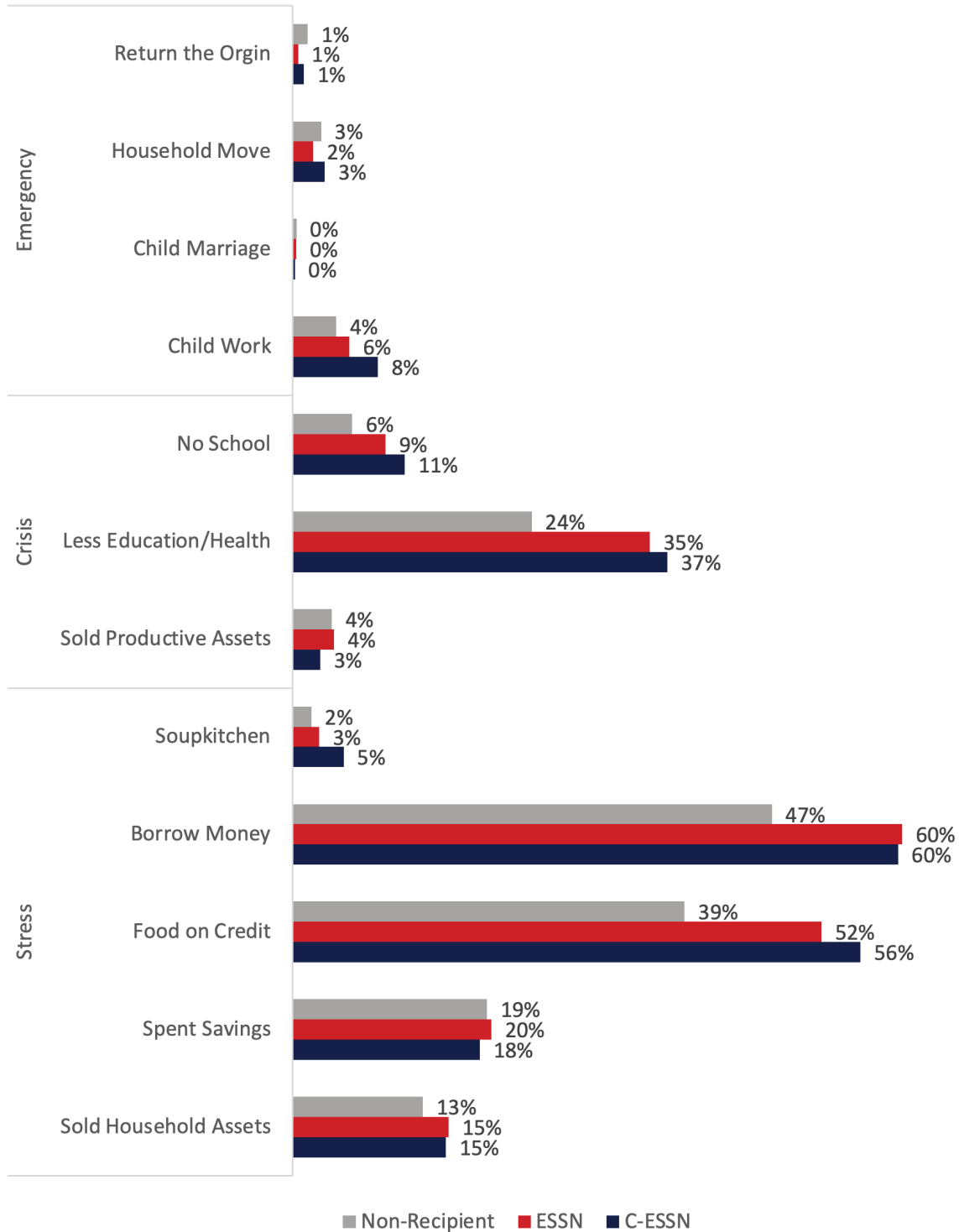
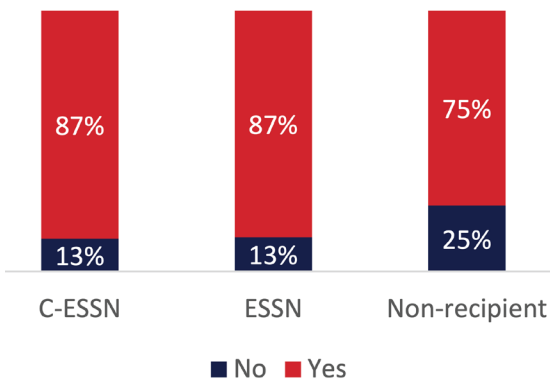


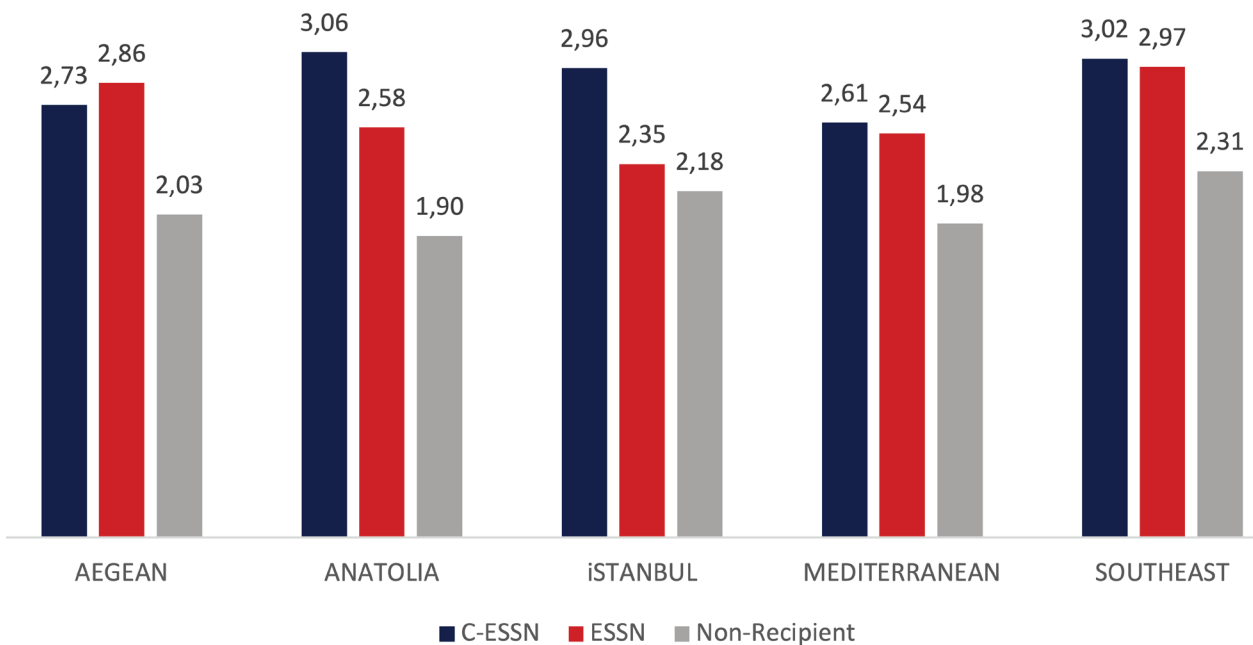
Figure 38 LCSI Components by Recipient Status



**Figure 39** Use of livelihood-based coping strategies by Recipient Status

Comparing households' use of livelihood-based coping strategies by recipient status also reveals clear differences between groups. Non-recipient households report a higher prevalence of livelihood-related coping strategies (25 per cent), compared to 13 per cent for both ESSN and C-ESSN households. This suggests that recipient households are relatively less likely to resort to longer-term, asset-depleting coping mechanisms. By contrast, non-recipient households appear to be more exposed to structural economic stress, which leads them to adopt livelihood-based strategies more frequently.

In terms of vulnerability, LCSi scores for the most vulnerable group is 5.38, while the least vulnerable households' score is 0.97. Those in the vulnerable group were found to engage in more coping mechanisms and face economic stress with limited sources of livelihoods. Furthermore, 36 per cent of the least vulnerable households do not apply any LCSi strategies, while all of the most vulnerable households apply at least one strategy. Regionally<sup>42</sup>, the highest LCSi score for C-ESSN households is in Anatolia (3.06), while for ESSN households it is 2.97 in the Southeast region and for non-recipient households it is 2.31 in the Southeast region. Overall, it can be said that households in the Southeast region in particular are in worse shape than other regions in terms of livelihood sources, but this difference is not at very high levels.



**Figure 40** LCSi Scores by Recipient Status and Region

<sup>42</sup> LCSi differs significantly across region, accounting for the survey design (design-based Kruskal-Wallis test,  $\text{Chisq} = 29.23$ ,  $p < 0.7.315e-6$ ).

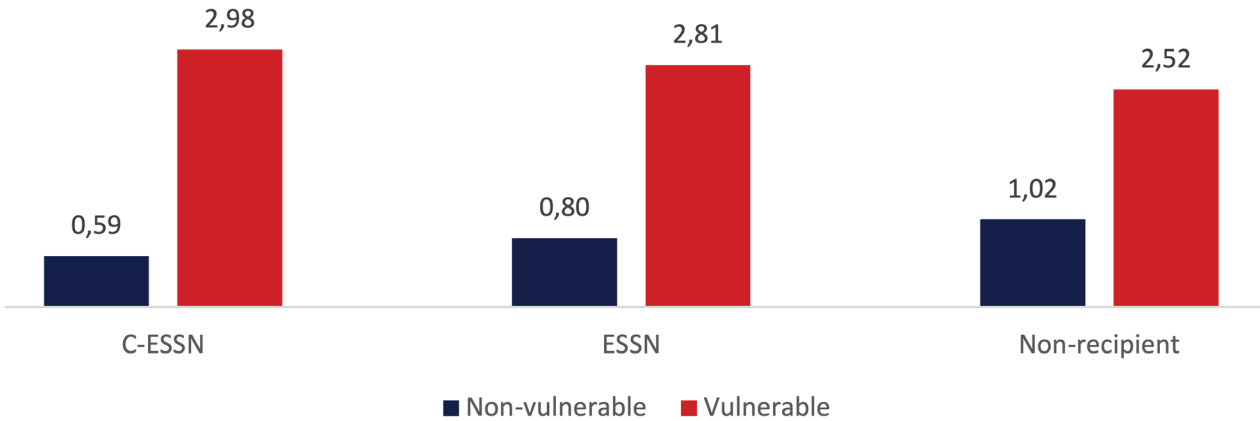


Figure 41 LCSi Scores by Recipient Status and Vulnerability

The investigation of the information indicates that households at risk are subjected to considerably greater pressure to adopt urgent or emergency measures in contrast to non-at-risk households. Specifically, vulnerable C-ESSN households have an average LCSi score of 2.98, while non-vulnerable households have a substantially lower average score of 0.59. A similar trend is evident in the ESSN group, where vulnerable households score 2.81 compared to 0.80 for non-vulnerable households. Vulnerable non-recipient households also demonstrate a high reliance on coping mechanisms, with a score of 2.52; however, they exhibit the highest baseline score among non-vulnerable households, at 1.02. A closer examination of the LCSi components further reveals that vulnerable households report a higher prevalence of specific stress strategies compared to their non-vulnerable counterparts. In particular, vulnerable households are more likely to rely on buying food on credit and on engaging children under the age of 18 in income-generating activities. While vulnerability status is the primary driver of high LCSi scores, these figures highlight that recipient households, particularly C-ESSN households, remain the most exposed to severe, livelihood-based stress. This necessitates more drastic measures to manage economic hardship.

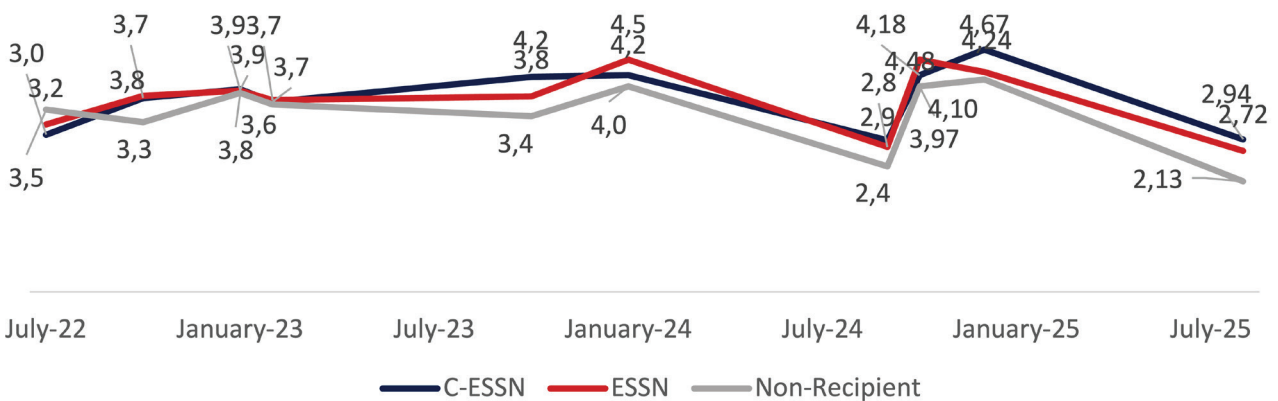
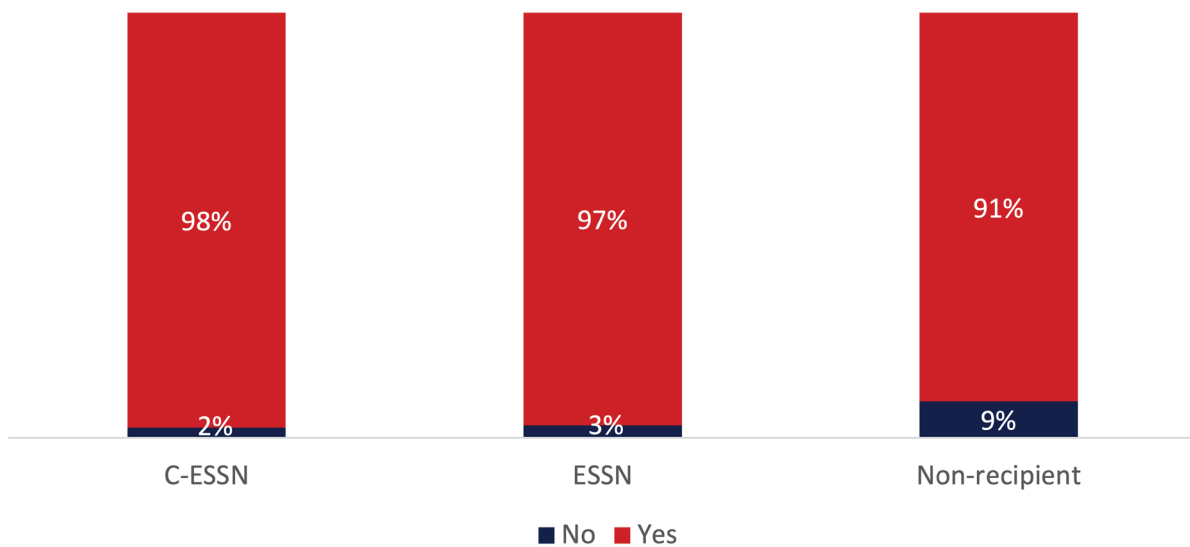


Figure 42 Trend of LCSi Scores

The evolution of the LCSi indicator over time indicates similar movements across the three groups, although there are clear differences in levels. All groups show a gradual increase from the second half of 2022 to the beginning of 2023, followed by a relatively stable trend for a period. A pronounced peak is observed in all three groups at the beginning of 2024, followed by a sharp decline in September 2024. Subsequently, there is another rise towards the end of 2024, while a renewed decline in all groups is noticeable in August 2025. In most periods, C-ESSN households have higher values than other groups, while ESSN households remain at a similar but slightly lower level. Non-recipient households, on the other hand, show lower scores, particularly in September 2024 and August 2025. Although all groups generally follow a similar trend, C-ESSN households appear to be in a more vulnerable position, with higher values in most periods.

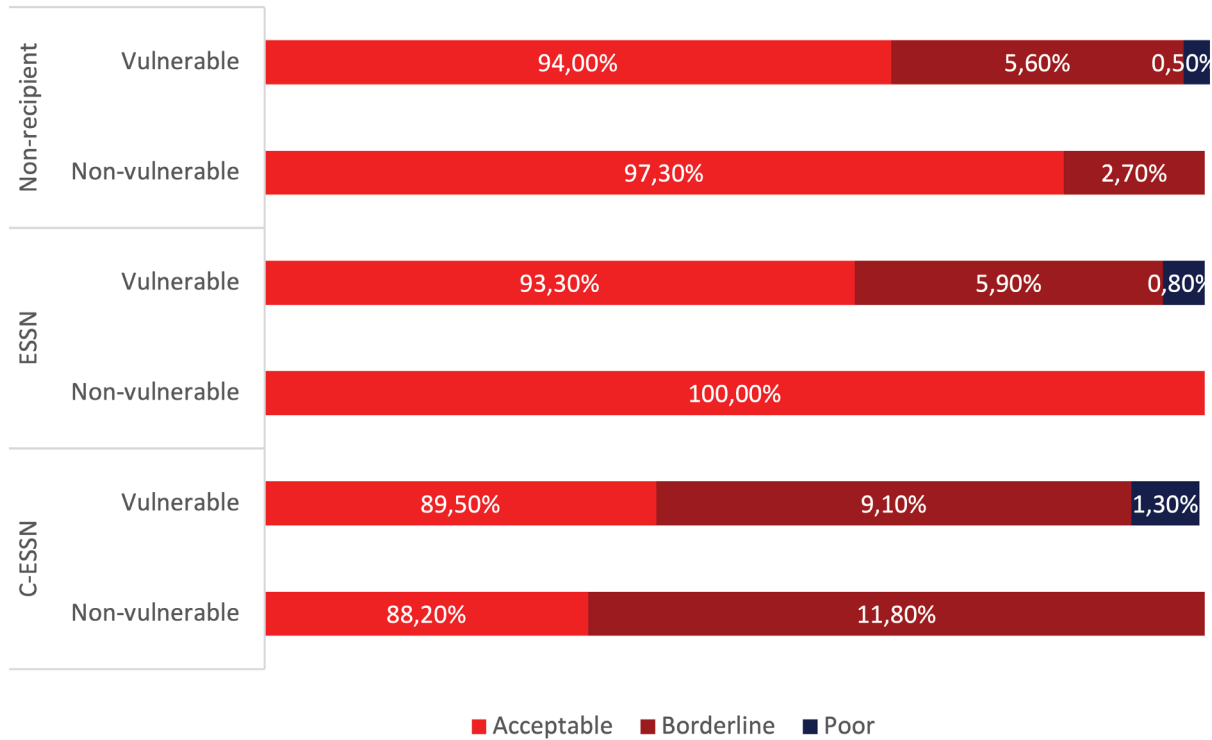


**Figure 43** Rate of Resorting to Coping Strategies by Recipient Status

It is noteworthy that, regardless of strategy (neither rCSI nor LCSi), nearly all C-ESSN and ESSN households were forced to resort to these strategies based on recipient status distribution, while nearly one-tenth of non-recipient households experienced no food-based or livelihood-related pressure and did not require coping strategies. This situation, in parallel with other indicators, shows that non-recipient households are less vulnerable, while recipient households (ESSN and C-ESSN) are more vulnerable.

## Food Consumption Score (FCS)

The Food Consumption Score (FCS) findings, derived from household food consumption frequencies over the preceding seven days, indicate that the proportion of households with acceptable food security remains high. Specifically, 67.89 per cent of the C-ESSN group, 70.34 per cent of the ESSN group, and 73.00 per cent of non-recipient households have scores above the acceptable threshold. However, these high percentages do not necessarily reflect a balanced or nutrient-dense diet; rather, they are primarily driven by the regular consumption of energy-dense staples such as cereals, pulses, oils, and sugar. A detailed analysis of consumption patterns reveals the important role played by cereals and pulses in maintaining these levels. While eggs and dairy products are common protein sources, red meat intake remains limited, and low fish consumption is attributed to household cultural preferences.<sup>43</sup> Although the majority of households across all subgroups remain above the acceptable threshold, lower percentages observed among vulnerable households indicates a more precarious food security status and suggests these groups remain increasingly susceptible to external shocks.



**Figure 44** FCS Groups by Recipient Status and Vulnerability

43 Yilmaz-Hava, Z., Zanjjer, N., & Rottmann, S. B. (2024). Culinary sustainability as a resilience practice for Syrian refugees amidst urban precarity in Istanbul. *Food, Culture & Society*. <https://doi.org/10.1080/15528014.2024.2429905>

## Physical and Mental Well-Being Physical and Mental Disability

Comprehensive examination of individuals facing physical and mental health challenges, categorized by age and gender, reveals distinct and complex patterns in the prevalence and nature of these issues. Understanding these variations is crucial for developing targeted and effective public health and support strategies. The study data consistently highlights the prevalence of physical health problems, which are reported at significantly higher rates compared to mental health issues, across nearly all demographic segments. However, the specific profile of disability, whether primarily physical or mental, varies notably with age and gender. For example, although elderly populations have the highest overall rates of physical impairment associated with ageing, mental health issues are relatively more prevalent among younger women and men. Nevertheless, the burden of physical impairment remains substantial in all groups. Finally, these findings emphasize that disability is not a homogeneous experience, instead it is shaped by an intricate interplay of age, gender and underlying socioeconomic and health conditions. This necessitates a disaggregated approach to fully address the diverse needs of those affected.

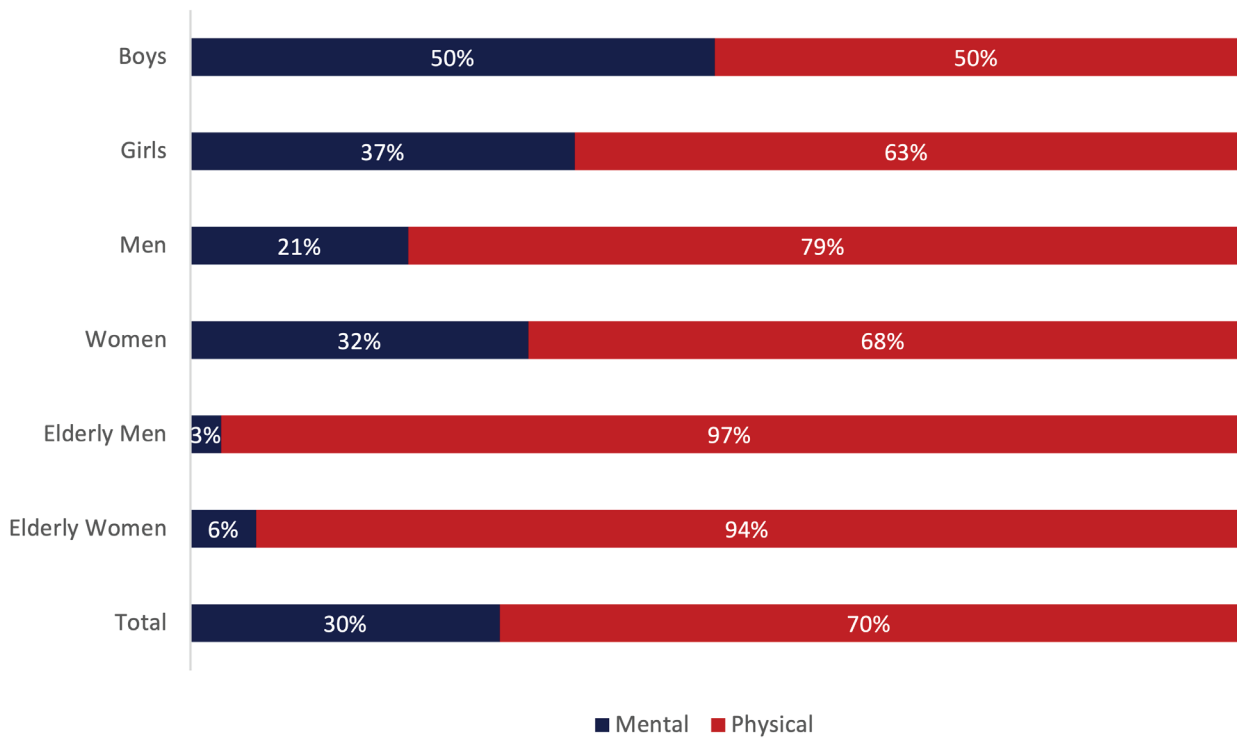


Figure 45 Shares of Physical and Mental Problems by Age and Gender Groups

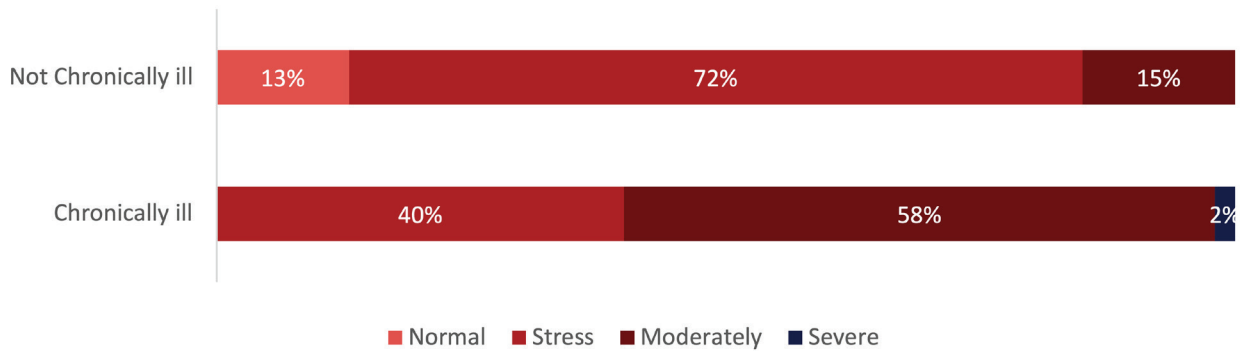


Figure 46 Rate of Chronically Ill by Severity Group

The presence of individuals with chronic health problems in households significantly increases their vulnerability. According to the severity index, while there are no non-vulnerable households which have members with chronic health problems, 58 per cent of these households are moderately vulnerable. Conversely, households without individuals with chronic health problems mostly remain at the normal and stress levels. However, while there is a significant difference in the LCSi indicators of households, it is noteworthy that households which have members with chronic illnesses have much higher rCSI scores (13.44 and 11.67). This shows that households experience similar difficulties in their livelihoods, but households without chronic illnesses are in a much better position in terms of food. Households also exhibit a similar situation in terms of MEB status, with 46 per cent of households which have members with chronic illnesses remaining above the MEB threshold, compared to 68 per cent of other households.

### Mental Health Problems

Many refugees and migrants experience distress in the form of anxiety, sadness and hopelessness. They may also experience difficulty sleeping, fatigue, irritability, anger and physical pain. For most people, these reactions improve over time. However, some will go on to develop mental health conditions.<sup>44</sup> Mental health issues present a significant public health concern, with prevalence varying notably across different demographic groups. Large numbers of individuals experience considerable psychological and social strain after being forced to leave their homes as a result of armed conflict, persecution, or natural disasters, as reflected in projections provided by the World Health Organization (WHO). Many refugees demonstrate strong coping capacities and resilience through support from family and community networks, however those facing heightened vulnerability are more likely to develop mental health difficulties. Under such conditions, emerging social and psychological challenges can intensify distress, contribute to maladaptive coping strategies, and increase the risk of the onset or exacerbation of mental disorders.<sup>45</sup> The data indicates that mental health problems are observed at their highest rate among boys (aged between 0-18), at 50 per cent, followed by 35 per cent of women (aged between 18-65). In contrast, adult men report a lower prevalence, with 21 per cent indicating similar issues. The lowest rates of mental problems in the surveyed population are found in elderly men and women (65 years and older).

<sup>44</sup> World Health Organization, Refugee and Migrant Health, <https://www.who.int/news-room/fact-sheets/detail/refugee-and-migrant-mental-health>

<sup>45</sup> UNHCR. (2013). Operational Guidance on Mental Health and Psychosocial Support for Refugee Operations. United Nations High Commissioner for Refugees.

## Physical Problems

When physical and mental problems are considered together, physical disability accounts for the largest share at 29 per cent. Other problems that can be considered physical problems include chronic neurological and systemic conditions (13 per cent), age-related physical disabilities (10 per cent), speech and language impairments (5 per cent), visual impairments (5 per cent), hearing impairments (4 per cent), and, to a lesser extent, blood and genetic disorders (1 per cent). The remaining portion, which is mostly comprised of diseases such as diabetes, rheumatism, prostate, and cancer, falls under the umbrella of physical problems.

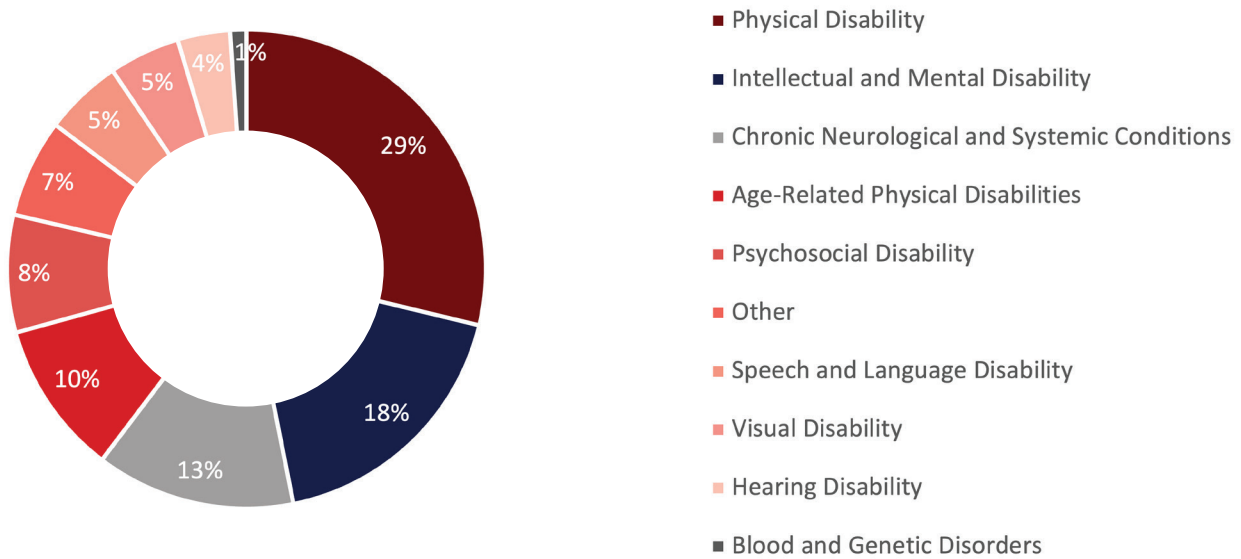
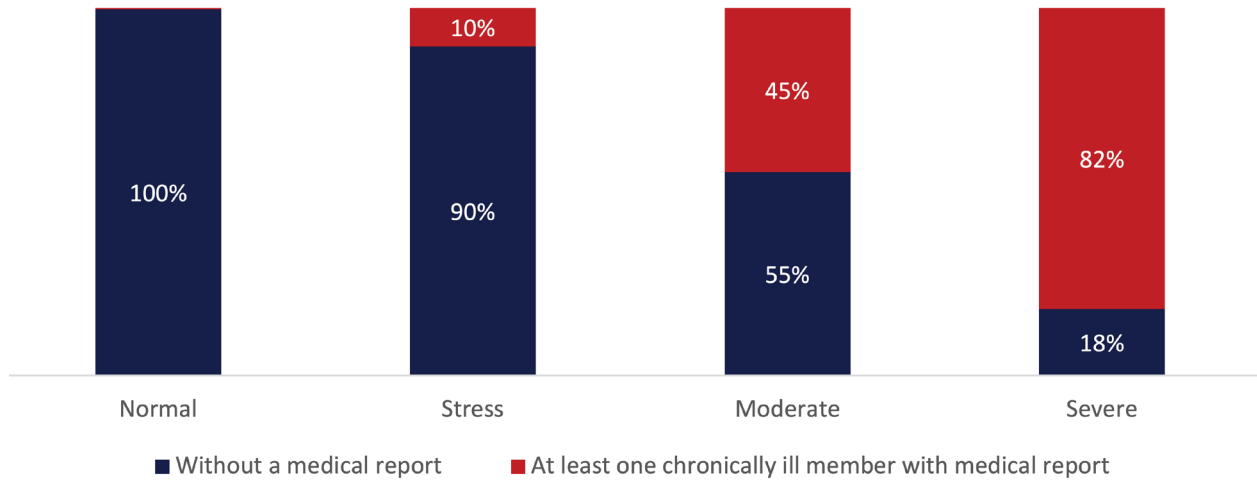


Figure 47 Shares of Physical Problems

## Vulnerability and Disability

Disability increases refugees' vulnerability across multiple domains, including employment and access to education and healthcare services, and may contribute to psychological and social challenges arising from low self-esteem and feelings of social exclusion.<sup>46</sup> The presence of chronic illness within a household is a significant indicator of heightened vulnerability, which is deeply intertwined with disability and the severity of household vulnerability. The data illustrates a strong correlation between the proportion of households with at least one chronically ill member with a medical report and the overall vulnerability level. For instance, among households classified as "highly vulnerable," approximately 78 per cent have at least one member with a chronic illness with a medical report, while this figure drops to 50 per cent for "moderately vulnerable" households, and 8 per cent for "slightly vulnerable" households. Conversely, in "not vulnerable" households, there are no chronically ill individuals holding medical reports. This trend underscores that chronic illness, especially when combined with disability, acts as a powerful factor contributing to household vulnerability, leading to challenges in economic stability, access to essential services, and increased social isolation.

<sup>46</sup> Neither the European Union Agency for Asylum (EUAA, Persons with Disabilities in Asylum and Reception Systems: A Comprehensive Overview, Situation Analysis, January 2024.

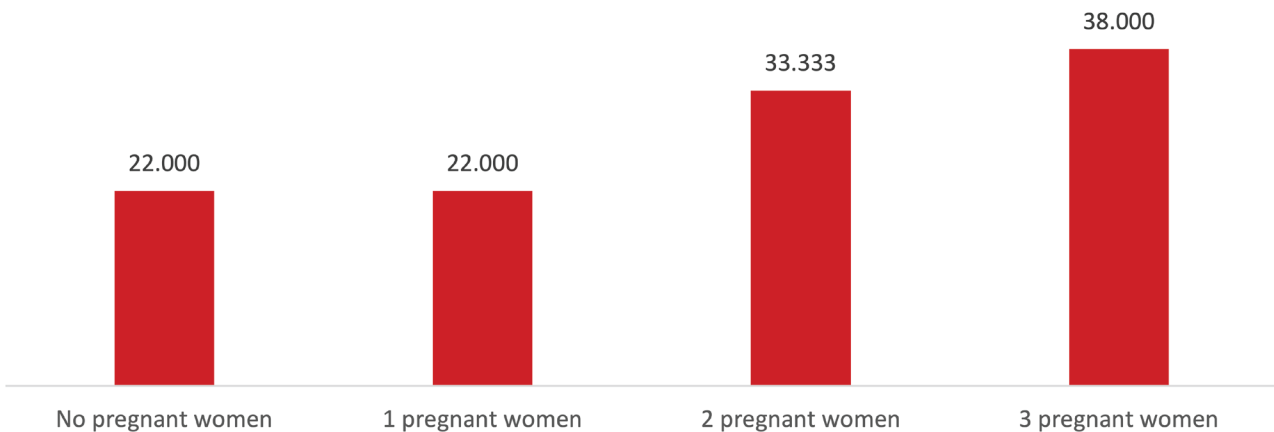


**Figure 48** Rate of Household Chronic Illness/Medical Report by Severity Group

Comparing the different household groups, reveals that the most vulnerable C-ESSN households have a substantially higher prevalence of chronic illness. A significant 38.9 per cent of C-ESSN households have at least one member who is chronically ill with a medical report. This rate is notably higher than ESSN recipients, where only 5.5 per cent report a chronically ill member, and non-recipient households, where the figure stands at 8.3 per cent. Furthermore, the presence of chronic illness also correlates strongly with reported stress levels. Among the Severe group, 82 per cent have at least one member who is chronically ill with a medical report, compared to 45 per cent in Moderate group, and 10 per cent in Stress group. The low prevalence of chronic illness in both the ESSN and non-recipient households, combined with the high rate in the C-ESSN households, reinforces the classification of the C-ESSN households as having the most acute needs and facing complex overlapping vulnerabilities related to health and overall well-being.

### Pregnant Women

15 per cent of C-ESSN households, 20 per cent of ESSN households and 19 per cent of non-recipient households have at least one pregnant woman within the household. In addition, although the proportion is low, 0.54 per cent of the households interviewed have a pregnant woman under the age of 18, which accounts to approximately 23 households.



**Figure 49** Household Income by Number of Pregnant Women

As the number of pregnant women in a household increases, labour income, expenditure and debt also rise; however, per capita expenditure declines. This indicates that such households with pregnant women tend to have larger family sizes and rely more on borrowing to meet basic needs. The average household size was 7.20 in households with 1 pregnant woman, 11.35 in households with 2, and 14.00 in households with 3. This pattern may also be linked to a higher dependency ratio within these households, as pregnant women might temporarily reduce their participation in income-generating activities, while the presence of more children may further increase the number of dependents relative to working members.

In terms of coping strategies, a contrasting pattern emerges: while LCSl increases, rCSl decreases as the number of pregnant women rises. This suggests that although these households are economically more vulnerable, they prioritize protecting food consumption and are therefore less likely to resort to food-based coping mechanisms, instead relying more on livelihood-related strategies.

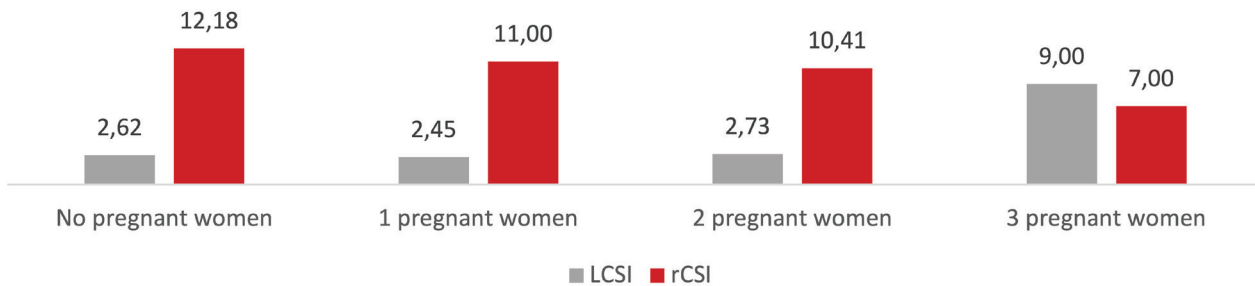


Figure 50 Type of Coping Mechanisms by Number of Pregnant Women

### Separated Children and Families

According to data, separated children (children who are separated from their families but live with their relatives) are present in 2.2 per cent of C-ESSN households, 0.7 per cent of ESSN households, and 1.4 per cent of non-recipient households. Overall, this situation is present in 95 of the households interviewed. Similarly, 7 of the households interviewed have unaccompanied children, who are not related to the household. Refugee and migrant children face heightened risks of family separation, neglect, violence, abuse, and exploitation, as well as social isolation and the long-term impacts of trauma and psychological distress. These vulnerabilities significantly increase their likelihood of dropping out of school and engaging in child labour. In addition, they are at greater risk of child marriage, sexual abuse and violence, economic exploitation, and exposure to domestic violence. Tensions between host and refugee communities, ongoing family separation, fear and anxiety-driven stress within households further exacerbate their psychological well-being.<sup>47</sup>

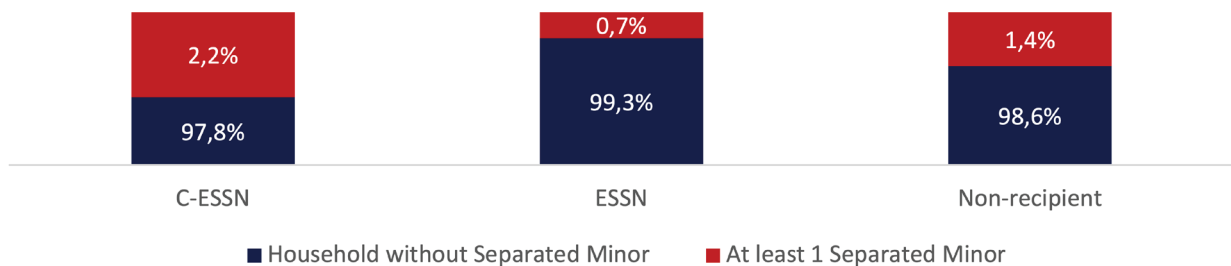


Figure 51 Shares of Separated Minor by Recipient Status

47 UNICEF, Refugee, Migrant and Other Vulnerable Children in Need of Protection <https://www.unicef.org/turkiye/en/refugee-migrant-and-other-vulnerable-children-need-protection?>

## Elderly

According to the survey data, although not in large numbers, there are households with elderly individuals, above the age of 64, who are unable to care for themselves. C-ESSN households have a rate of 4.33 per cent, while ESSN households are at the level of 0.91 per cent and non-recipient households are at 0.92 per cent. The main reason for the differentiation of C-ESSN households from other groups is that the proportion of elderly people in C-ESSN households being higher than in other groups. Elderly refugees in Türkiye face a heightened risk of health problems linked to poverty, social isolation, language barriers, and limited access to healthcare services both within the country and across borders.<sup>48</sup>

## Verbal and Physical Assaults

The analysis of protection risks concerning verbal and physical assault across the C-ESSN recipients, ESSN recipients, and non-recipient households reveals a clear pattern of differential exposure. Non-recipient households demonstrate the highest rate of reporting to have never experienced or witnessed verbal assault in the last three years (90.91 per cent), positioning them as the least exposed group. In contrast, C-ESSN recipients show the highest overall exposure, with 9.09 per cent reporting exposure to verbal assault at least once, closely followed by ESSN recipients at 8.7 per cent. Thus, C-ESSN households also report the highest rate of frequent verbal assault, with 1.29 per cent reporting it once a week or more, confirming their heightened social vulnerability relative to the other two groups.

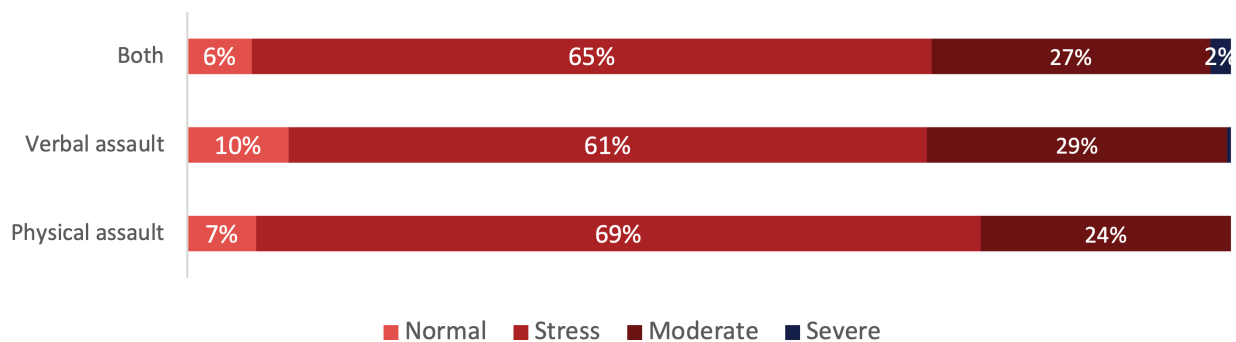


Figure 52 Physical and Verbal Assault Status by Severity Group

The risk profile intensifies when examining physical assault. Again, the C-ESSN recipients report the highest frequency of severe exposure, with 0.64 per cent reporting physical assault once a week or more. This rate is significantly higher than that reported by non-recipients (0.32 per cent) and marginally higher than ESSN recipients (0.59 per cent). In terms of overall exposure, 5.57 per cent of C-ESSN households report experiencing or witnessing physical assault at least once in the last three years, compared to 4.8 per cent for ESSN recipients and 3.65 per cent for non-recipients. This data confirms that the C-ESSN group, understood to represent the most vulnerable population segment, bears the highest burden of severe and cumulative physical protection risks.

48 Snoubar, Y., Turan, Z., Abusafia, B., & Tarsuslu, B. (2025). Being an older refugees in Türkiye: predictors of mental health and quality of life. *Aging & Mental Health*, 29(9), 1651–1658. <https://doi.org/10.1080/13607863.2025.2452936>

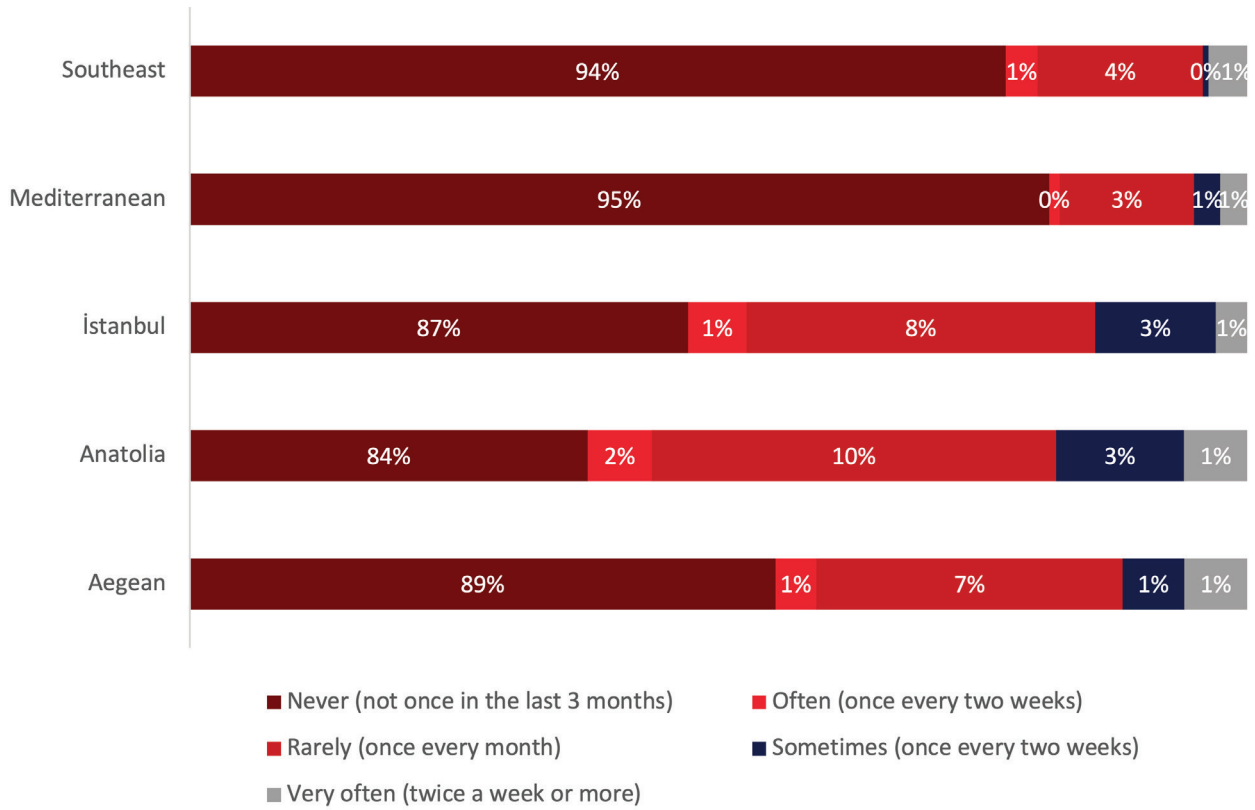


Figure 53 Frequency of Assault by Region

Geographically, the data indicates that risk of verbal and physical assault are not uniformly distributed across Türkiye. The Southeast region consistently reports the highest rates of assault exposure for all three household groups. This pattern is evident across both verbal and physical assault categories and extends to the most frequent reporting metrics. This concentration suggests that the Southeast faces distinct localized environmental or socio-economic stressors that exacerbate risks for all residents, creating a challenging environment that compounds the already high vulnerability of the C-ESSN and ESSN groups living in this area.

In summary, the statistical findings clearly establish that C-ESSN households face the most pronounced risks related to both verbal and physical assault, demonstrating the highest levels of exposure across the measured indicators. This distinct vulnerability profile, combined with the disproportionate risk concentration in the Southeast region, underscores the urgent need for targeted protection strategies. Interventions must prioritize C-ESSN households and adopt region-specific approaches to effectively mitigate social tensions and address the underlying factors contributing to these patterns.

## Priority Needs and Preferred Interventions

Across all regions, shelter clearly stands out as the first-priority need. Its significance is greatest in İstanbul (89 per cent) and the Aegean region (83 per cent), while it is slightly lower but still dominant in the Southeast (75 per cent). Bills and food remain secondary within this category, with bills being relatively more prominent in Anatolia and the Mediterranean regions, and food slightly higher in the Southeast. This pattern indicates that housing-related constraints are the most immediate concern for households, regardless of regional differences.

For second-priority needs, bills become the central pressure point across all regions, with consistently high shares ranging from 63 to 75 per cent. This shift suggests that once the most urgent shelter-related issues are addressed, households turn their attention to managing essential recurring expenses. Food follows as the next significant need, particularly in the Mediterranean and Southeast, while shelter appears as a secondary concern but with much lower intensity compared to first-priority rankings.

		Aegean	Anatolia	İstanbul	Mediterranean	Southeast
First Priority Needs	Shelter	83%	79%	89%	80%	75%
	Bills	5%	11%	2%	11%	9%
	Food	7%	7%	4%	3%	10%
Second Priority Needs	Bills	75%	75%	71%	66%	63%
	Food	10%	10%	15%	15%	16%
	Shelter	10%	12%	6%	9%	11%
Third Priority Needs	Food	67%	73%	57%	56%	55%
	Bills	14%	11%	19%	13%	17%
	Education	5%	4%	8%	6%	4%

Figure 54 Priority Needs by Region

In the third-priority category, food appears as the dominant concern, particularly in the Aegean and Anatolia, where over 70 per cent of households identify it as their next pressing need. Bills remain present but less prominent, and education appears consistently across regions at modest levels. This progression; shelter first, bills second, food third, suggests a clear prioritization sequence that households follow, with immediate housing stability taking precedence, routine financial obligations, and basic consumption needs emerging as subsequent pressures once the more urgent constraints are managed.

A statistical analysis was conducted to better understand how different types of priority needs vary across households, without limiting the comparison to only two categories. Less frequently reported needs were grouped to ensure reliable interpretation. The findings suggest that household-level economic characteristics do not strongly differentiate the type of priority need reported. Instead, geographic location appears to play a more prominent role, with variations across regions more clearly associated with differences in reported priority needs.

## Assistance Other Than the SSN Programme Support

Across all severity categories, households show a strong preference for cash as their primary form of assistance, increasing from 79 per cent among those in normal conditions to 89 per cent among those in severe conditions. This steady rise indicates that as severity intensifies, the flexibility and immediacy of cash support become even more important. In-kind assistance remains limited as a first priority across all categories, while services play a secondary role, particularly among households in normal conditions.

		Normal	Stress	Moderate	Severe	Grand Total
<b>First Preferred Assistance Type</b>	<b>Cash</b>	79%	86%	87%	89%	86%
	<b>In-kind</b>	4%	5%	5%	2%	5%
	<b>Services</b>	17%	8%	8%	9%	9%
<b>Second Preferred Assistance Type</b>	<b>In-kind</b>	49%	65%	68%	58%	64%
	<b>Services</b>	30%	22%	19%	26%	22%
	<b>Cash</b>	21%	13%	13%	16%	14%
<b>Third Preferred Assistance Type</b>	<b>Services</b>	54%	68%	71%	64%	67%
	<b>In-kind</b>	38%	25%	22%	31%	26%
	<b>Cash</b>	8%	7%	7%	5%	7%

Figure 55 Preferred Assistance Types by Severity Group

For second and third-priority assistance types, the pattern shifts noticeably. In-kind assistance becomes the dominant second choice, especially among households in stress and moderate categories, reaching 65 per cent and 68 per cent, respectively. By contrast, services emerge as the leading third-priority option across all severity levels, peaking at 71 per cent among households in moderate conditions. Cash support, while essential for first-priority needs, declines significantly in the second and third tiers. Overall, households follow a clear sequence in their assistance preferences: cash for immediate and most urgent needs, in-kind support for secondary needs, and services for longer-term or less critical needs.

## Voluntary Return

An additional analysis was conducted to explore Syrian households' intention to return to Syria. According to the survey findings, the vast majority of households interviewed expressed no intention to return to Syria, with only 13 per cent planning to do so. Of this 13 per cent, the vast majority (81 per cent) reported plans to return permanently, while 19 per cent plans to visit just for observation purposes. When examined according to recipient status, 83 per cent of C-ESSN households, 80 per cent of ESSN households, and 81 per cent of non-recipient households plan to remain in Türkiye. This shows that, although there are no significant differences, C-ESSN households plan to return to Syria at a lower rate than other groups. Furthermore, a very small proportion (6 per cent) of households had previously visited Syria, and the vast majority of this group (86 per cent) had only visited once to observe. It is noteworthy that these households, which had previously visited Syria for observation purposes, had made their most recent visit within the last 1 to 3 months. Infrastructure (87 per cent), property (82 per cent) and job opportunities (86 per cent) are the most common problems encountered by households visiting, followed by security (55 per cent), health (49 per cent) and education (42 per cent).



Analysis of intended voluntary return timelines reveal that, 2 out of every 5 households plan to return only after more than one year from now. This suggests that households do not have voluntary return plans in the near future. According to recipient status, ESSN households (45 per cent) in particular, plan to return after a year or more at the highest rate, compared to 41 per cent of C-ESSN and 37 per cent of non-recipient households.

When asked how they would prefer to travel when returning, a large majority (44 per cent) of households stated they would travel by bus, followed by 29 per cent who would rent a car, and 21 per cent who stated they had no plans yet. A very small proportion of households stated that they plan to return by taxi, with friends, by plane, or with their own vehicles.

Finally, more than 9 out of 10 households believe they will need assistance upon returning to Syria. According on recipient status, only 3 per cent of ESSN households believe they will not need assistance, while this figure rises to 7 per cent among C-ESSN and non-recipient households. Looking into the preferred types of assistance; 94 per cent of these households prefer cash assistance, followed by services (40 per cent), in-kind assistance (30 per cent), and vouchers (12 per cent). Breaking down into sectors; the vast majority of households require assistance for rent (82 per cent), followed by transportation (52 per cent), food (51 per cent), health (39 per cent), education (30 per cent) and psychological support (8 per cent).

Looking into factors shaping the decision of households, it was found that geographic location within Türkiye plays a notable role in shaping return intentions. Households residing in İstanbul, Anatolia, and the Southeast report a higher likelihood of considering return compared to those in the reference region. Education level is also positively associated with return intentions, with more educated households showing a greater propensity to consider returning. In contrast, economic conditions such as household income, debt status, receipt of assistance, and social support variables do not appear to meaningfully influence the decision. Overall, the findings indicate that return intentions are more closely linked to regional context and human capital characteristics than to immediate economic circumstances.

## CONCLUSION

The 2<sup>nd</sup> Inter-Sectoral Vulnerability Study (IVS) provides a comprehensive and evidence-based analysis of the multi-dimensional vulnerabilities facing refugee populations in Türkiye under the Social Safety Net (SSN) framework. The study confirms that vulnerability among refugee households is highly differentiated. While the ESSN and C-ESSN Projects under the SSN continue to play a critical protective role against extreme poverty, broader economic instability is undermining their effectiveness.

The findings demonstrate that refugee households face a deeply entrenched, multidimensional vulnerability driven by structural barriers rather than temporary income shortfalls. Educational outcomes remain a key constraint; while up to 90 per cent of children are enrolled in school, the majority of adults remain at basic education levels, and approximately 70 per cent of existing diplomas lack formal recognition, significantly limiting access to skilled and formal employment.

Labour market outcomes differ sharply by recipient status. Recipient households are predominantly engaged in low-skilled, informal employment, concentrated in the construction and basic service sectors, with limited job security and social protection. In contrast, non-recipient households show higher participation in textile and salaried employment, resulting in relatively more stable and formal income profiles. Female labour force participation remains critically low among recipient households, with only 1 out of every 10 workers being women. Among working women, the majority belong to C-ESSN households, confirming that care responsibilities, health constraints and skills gaps remain binding barriers to economic participation.

Income analysis indicates that the most vulnerable households earn an average monthly labour income of approximately 15,000 TRY, well below both the minimum wage and the income levels observed among less vulnerable groups. In this context, cash assistance functions not as a supplementary measure but as a core income replacement mechanism, effectively reducing income gaps and enabling basic consumption among the most vulnerable households. Regional disparities are also pronounced. While labour income is higher in metropolitan areas such as İstanbul, households in Southeastern Türkiye display a critical dependence on cash assistance, highlighting the decisive role of local labour market conditions in self-reliance outcomes.

Household economies are heavily concentrated around two income sources; labour income and cash assistance, with negligible access to savings, remittances or asset sales. As a result, households remain highly exposed to economic shocks and potential changes in assistance modalities. This fragility is reflected in debt patterns as 87 per cent of the most vulnerable households are indebted, while 95 per cent report no savings, indicating that borrowing has become a negative coping strategy rather than a financial choice. Although debt prevalence is highest among vulnerable groups, average debt amounts are higher among non-recipient households, consistent with their relatively greater income and credit access.

Expenditure patterns reveal severe welfare compression. In high-cost regions such as İstanbul, household expenditures are approximately 60 per cent higher than in Southeastern regions. Despite these differences, per capita expenditure among the most vulnerable households averages only 4,762 TRY, roughly one-third of that observed among less vulnerable groups. In C-ESSN and ESSN households, over 75 per cent of total expenditure is allocated to food and shelter, leaving minimal fiscal space for health, education or social participation, effectively trapping households in a basic needs survival cycle.

Food security indicators point to widespread and chronic stress. Approximately 88 per cent of households employ food-related negative coping strategies, and 37 per cent of adults report reducing their own food intake to prioritize children. High rCSI scores in regions such as İstanbul and the Aegean further demonstrate that higher income levels do not guarantee food security when housing and utility costs absorb the majority of household resources. While most households resort to stress-level strategies such as borrowing, 4–8 per cent report the use of emergency coping strategies, including child labour, signalling a persistent risk of intergenerational poverty transmission.

Health and care responsibilities emerge as decisive constraints on labour participation. 39 per cent of C-ESSN households report the presence of at least one member with a chronic illness, rising to 82 per cent among severely vulnerable households. Combined with high levels of psychological stress, these factors significantly erode household resilience and underscore that, for the most vulnerable groups, employment interventions alone are insufficient without integrated health and care support.

Poverty outcomes confirm the depth of deprivation. More than 56 per cent of C-ESSN households remain below the Minimum Expenditure Basket (MEB) threshold, indicating not only relative but absolute poverty. Econometric model results corroborate that higher education and labour income are protective factors, while larger household size significantly increases poverty risk.

Finally, return intentions remain limited. 87 per cent of household's report plans to stay, and over 90 per cent of this group wishing to return anticipate requiring cash, rent and transportation support upon return. Furthermore, 40 per cent of households that willing to return, plan to delay return beyond one year, suggesting that large-scale voluntary return is unlikely in the short term without sustained cross-border humanitarian assistance.



## Recommendations

To address the findings of this report and ensure the continued efficacy of the humanitarian response, the following strategic recommendations are proposed:

### 1. Enhancement of Cash-Based Interventions (CBA)

- **Dynamic Transfer Value Adjustment:** Establishing a data-driven mechanism to recalibrate transfer values based on real-time inflation and the fluctuating cost of the MEB to prevent further erosion of household purchasing power.
- **Seasonal and Shock-Responsive Top-ups:** Implementing targeted “winterization” payments and one-off emergency grants to help households manage periodic spikes in heating, electricity, and medical costs, reducing the reliance on debt.

### 2. Pathways to Self-Reliance and Economic Inclusion

- **Livelihood Transition Support:** Prioritizing advocacy for work permit facilitation and the recognition of professional certifications (diploma equivalence) to move recipients from informal to formal and decent employment opportunities.
- **Targeted Technical and Vocational Education and Training (TVET):** Designing demand-driven skill development programs that match local labour market needs, complemented by Turkish language training and childcare support to increase female labour force participation.

### 3. Sector-Specific Structural Support

- **Health and Disability Subsidies:** For C-ESSN beneficiaries with high medical needs, exploring supplementary health vouchers or direct subsidies for specialized medication and assistive devices not fully covered by existing schemes.
- **Educational Retention Programmes:** Implementing targeted incentives to improve school attendance rates, specifically addressing the cost-related barriers, such as transportation and stationary items, that lead to school dropouts among vulnerable youth.

### 4. Policy Advocacy and Social Protection Integration

- **Evidence-Based Programming:** Utilizing the IVS longitudinal data to advocate for continued international donor funding, emphasizing that premature withdrawal of support would lead to a rapid increase in severe vulnerability and negative coping mechanisms.

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## Annex 1. IVS Severity Index-Technical Note

The process from the original variables to the final severity index is detailed in this annex. The Severity Index is a hierarchically constructed composite that combines sub-indices of Living Standards (LS), Coping Strategies (CS) and Well-Being (WB). The index builds on nine indicators, distributed across the three pillars as follows:

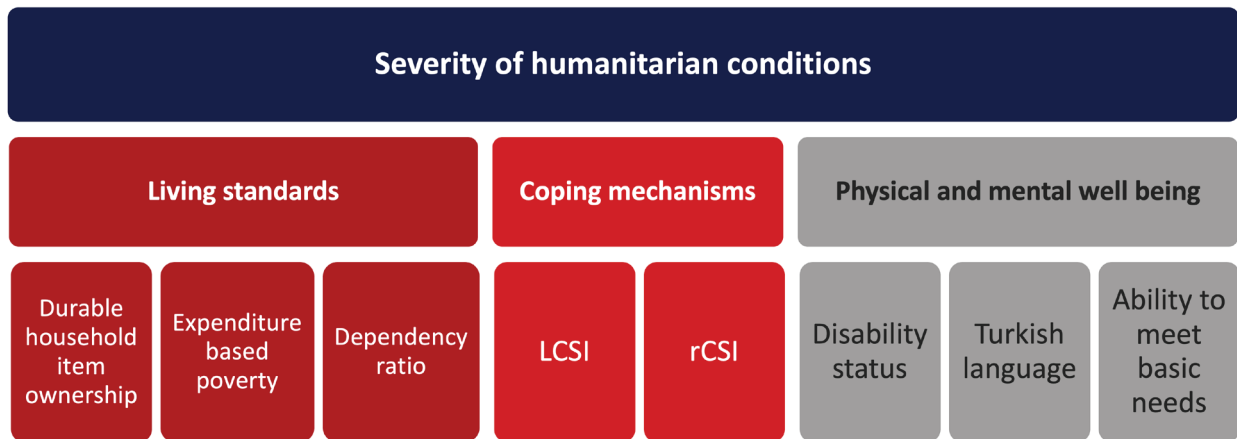


Figure 56 IVS Severity Index Structure and Indicators

### Transformations of Individual Variables into Base-Level Indicators

There were several types of transformations, depending on whether the variables to be transformed were numerical (positive continuous, counts, proportions) or categorical (dichotomous or ordinal). All transformed variables were given a negative orientation, i.e. higher values would contribute more to the severity of the households' situation.

Transformations used include:

- Amounts and rates were scaled to the range [0,1) with a bias towards the median and adjusted for household size.
- Ordinal variables (e.g. language skills, ability to meet basic needs) were transformed into numerical scores, inverted where necessary and scaled to [0,1].
- Expenditure-based poverty status was transformed into a binary variable and inverted to fit the severity orientation.
- Coping strategy indices were rescaled to [0,1] by dividing by their maximum observed values.
- Durable household goods: The 21 items comprising the durable household goods index were recoded (absent = 1, present = 0) and combined using an index-forming function known as the Desai-Shah method (Desai and Shah, 1988).

### Aggregation into Sub-Indices

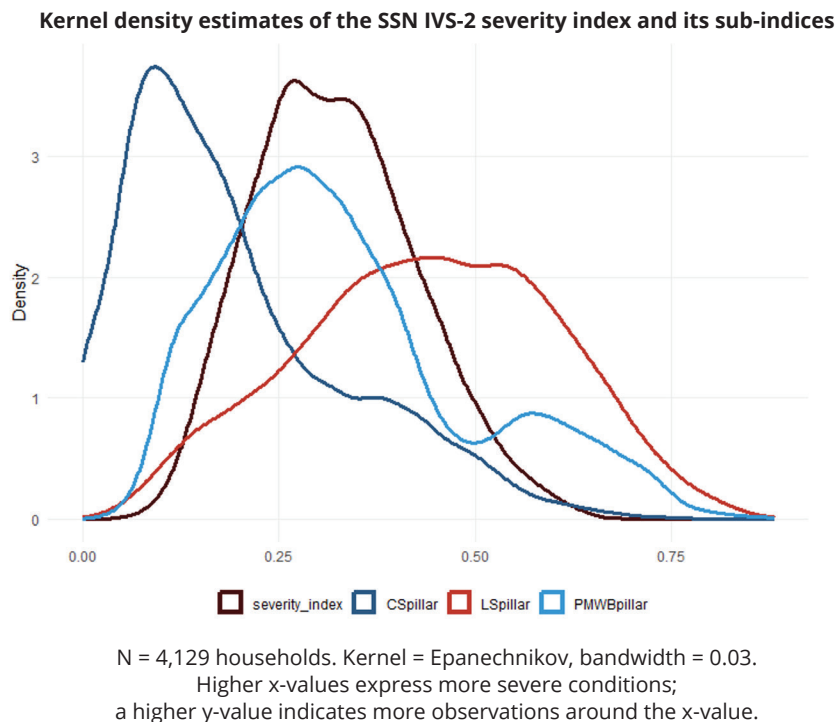
The three indicators that make up the LS (Living Standards) sub-index were aggregated with equal weights using the `mdepriv` command (available in Stata and R) (Alperin and Van Kerm, 2009). Durable household goods (24 reversed items indicating the absence of functional goods) were aggregated using the Desai-Shah method (Desai and Shah, 1988), which assigns higher weights to items that are absent in fewer households, as their absence signals greater deprivation. Redundancy control was not applied due to instability caused by extreme prevalence rates of certain items (e.g. smartphones and trucks).

For the CS (Coping Strategies) sub-index, two re-scaled indicators - the Livelihoods Coping Strategies Index (LCSI) and the Reduced Coping Strategies Index (rCSI) - were aggregated using `mdepriv` with a method that ensures equal contributions to counteract the disproportionate dominance of the rCSI under the Desai-Shah weighting. This adjustment was necessary to balance their different scopes (broad vs. food-specific coping strategies).

The WB (well-being) sub-index combines three indicators: disability status, Turkish language skills, and ability to meet basic needs. The `mdepriv` function with the Desai-Shah option was used, with weights equally divided between the physical and socio-mental dimensions. Within each pair, higher weights were given to indicators with lower prevalence, helping to balance their contributions despite different scales.

### Aggregation into The Final Severity Score

The overall severity score was calculated as the arithmetic mean of the three sub-index scores (LS, CS, and WB). No additional weighting scheme was applied across sub-indices, making their contributions proportional to their means. This method ensures that the severity index distribution directly reflects the simple average of the sub-index scores.



**Figure 57** Kernel Density Estimates of the SSN IVS-2 Severity Index and Its Sub-indices

## Severity Scale

The final index values range from 0 to 1. A five-level categorization was created by dividing each index value by the observed maximum, multiplying by 5, and rounding up to the nearest integer. These five severity classes are defined as: 1 (None), 2 (Stressed), 3 (Moderate), 4 (Severe), and 5 (Critical). Each class corresponds to an interval of 0.2 points on the index scale, following the categorization framework adapted from the joint intersectoral analysis.

Households classified as moderate, severe, or critical are regarded as requiring external support. The severity index serves as a useful tool for comparing outcomes across different IVS assessments.

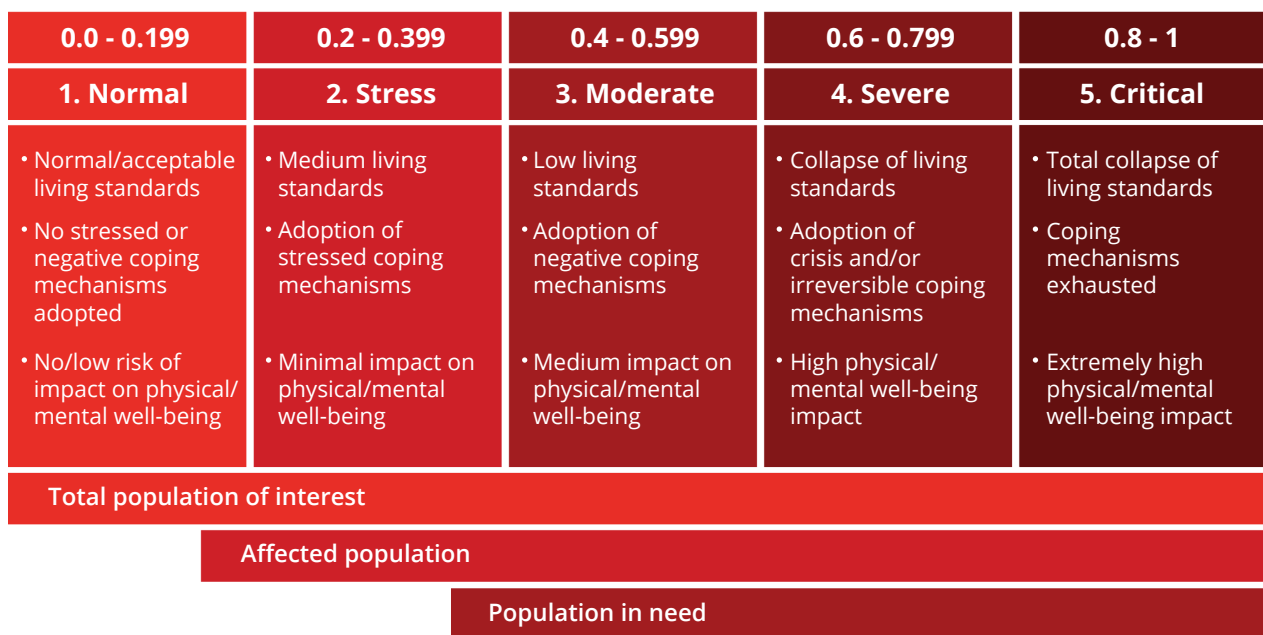


Figure 58 SSN IVS-2 Severity Scale



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# SSN

THE SOCIAL SAFETY NET  
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## Inter-Sectoral Vulnerability Study (IVS)

2<sup>nd</sup> Edition

2026



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