INTERSECTORAL VULNERABILITY STUDY

THE VULNERABILITY CONDITIONS OF REFUGEES LIVING IN TURKEY

ROUND 1 - APRIL 2021

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ACRONYMS

IVS   Intersectoral Vulnerability Study

JIAF   Joint Intersectoral Analysis Framework

ESSN Emergency Social Safety Net

GPPi   Global Public Policy Institute

ECHO European Civil Protection
and Humanitarian Aid Operations

ODK   Open Data Kit

TRC   Turkish Red Crescent

PDM   Post Distribution Monitoring

SAT   Structured Analysis Technique
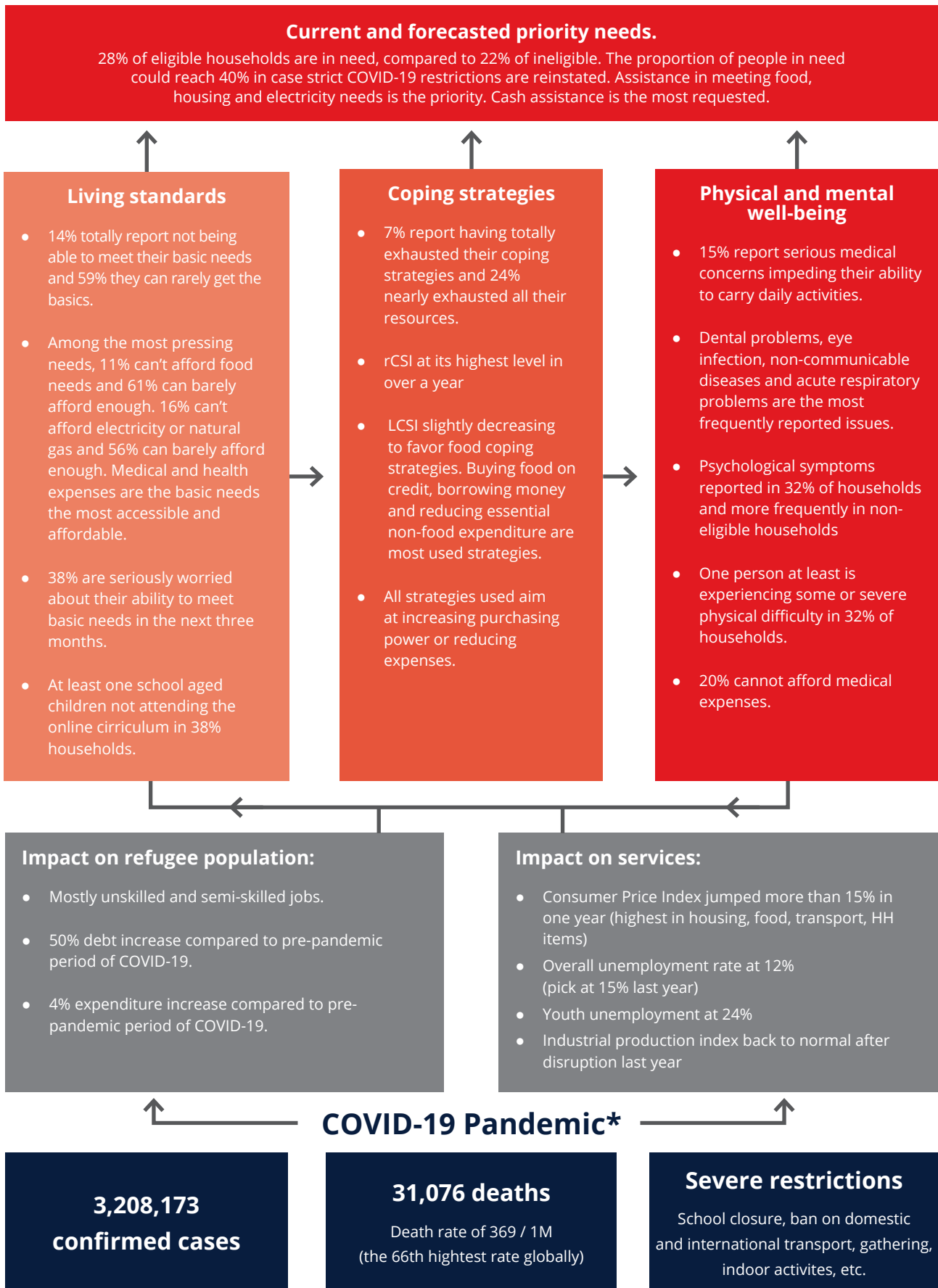
1. EXECUTIVE SUMMARY

1. BACKGROUND

The IVS was designed to assess the severity of humanitarian conditions of the refugee[1] population in Turkey, building on a tailored analytical framework, a representative sample at regional and group level and the latest methodological developments in intersectoral analysis (*Joint Intersectoral Analysis Framework 2020*, *Benini 2016*, *2018*). While some changes to the survey scope were necessary to adapt to COVID-19 restrictions, it offers to date the most comprehensive and representative picture of the changes in humanitarian conditions of the refugee population in Turkey since the beginning of the COVID-19 pandemic.

2. MAIN FINDINGS

Both refugee households recipients from the Emergency Social Safety Net (ESSN) assistance and non-recipients are suffering the economic consequences of COVID-19 restrictions and their impact on livelihoods. Total debt and expenditures increased compared to the pre-pandemic period of COVID-19. This has seriously impacted the ability of refugee households to meet their basic needs, increasingly relying on food related coping strategies, borrowing money and spending savings. The main findings of the IVS and the relationships between issues are summarized in the problem tree below.

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1 • Refugee is referring to foreigners who are under international protection or temporary protection according to the Law on Foreigners and International Protection. Herein the term is used to refer to their legal status.

Figure 1. IVS problem tree and main findings

Current and forecasted priority needs.

28% of eligible households are in need, compared to 22% of ineligible. The proportion of people in need could reach 40% in case strict COVID-19 restrictions are reinstated. Assistance in meeting food, housing and electricity needs is the priority. Cash assistance is the most requested.

Living standards

- 14% totally report not being able to meet their basic needs and 59% they can rarely get the basics.

- Among the most pressing needs, 11% can't afford food needs and 61% can barely afford enough. 16% can't afford electricity or natural gas and 56% can barely afford enough. Medical and health expenses are the basic needs the most accessible and affordable.

- 38% are seriously worried about their ability to meet basic needs in the next three months.

- At least one school aged children not attending the online cirriculum in 38% households.

Coping strategies

- 7% report having totally exhausted their coping strategies and 24% nearly exhausted all their resources.

- rCSI at its highest level in over a year

- LCSI slightly decreasing to favor food coping strategies. Buying food on credit, borrowing money and reducing essential non-food expenditure are most used strategies.

- All strategies used aim at increasing purchasing power or reducing expenses.

Physical and mental well-being

- 15% report serious medical concerns impeding their ability to carry daily activities.

- Dental problems, eye infection, non-communicable diseases and acute respiratory problems are the most frequently reported issues.

- Psychological symptoms reported in 32% of households and more frequently in non-eligible households

- One person at least is experiencing some or severe physical difficulty in 32% of households.

- 20% cannot afford medical expenses.

Impact on refugee population:

- Mostly unskilled and semi-skilled jobs.

- 50% debt increase compared to pre-pandemic period of COVID-19.

- 4% expenditure increase compared to pre-pandemic period of COVID-19.

Impact on services:

- Consumer Price Index jumped more than 15% in one year (highest in housing, food, transport, HH items)
- Overall unemployment rate at 12% (pick at 15% last year)
- Youth unemployment at 24%
- Industrial production index back to normal after disruption last year

COVID-19 Pandemic*

3,208,173 confirmed cases

31,076 deaths

Death rate of 369 / 1M (the 66th hightest rate globally)

Severe restrictions

School closure, ban on domestic and international transport, gathering, indoor activites, etc.

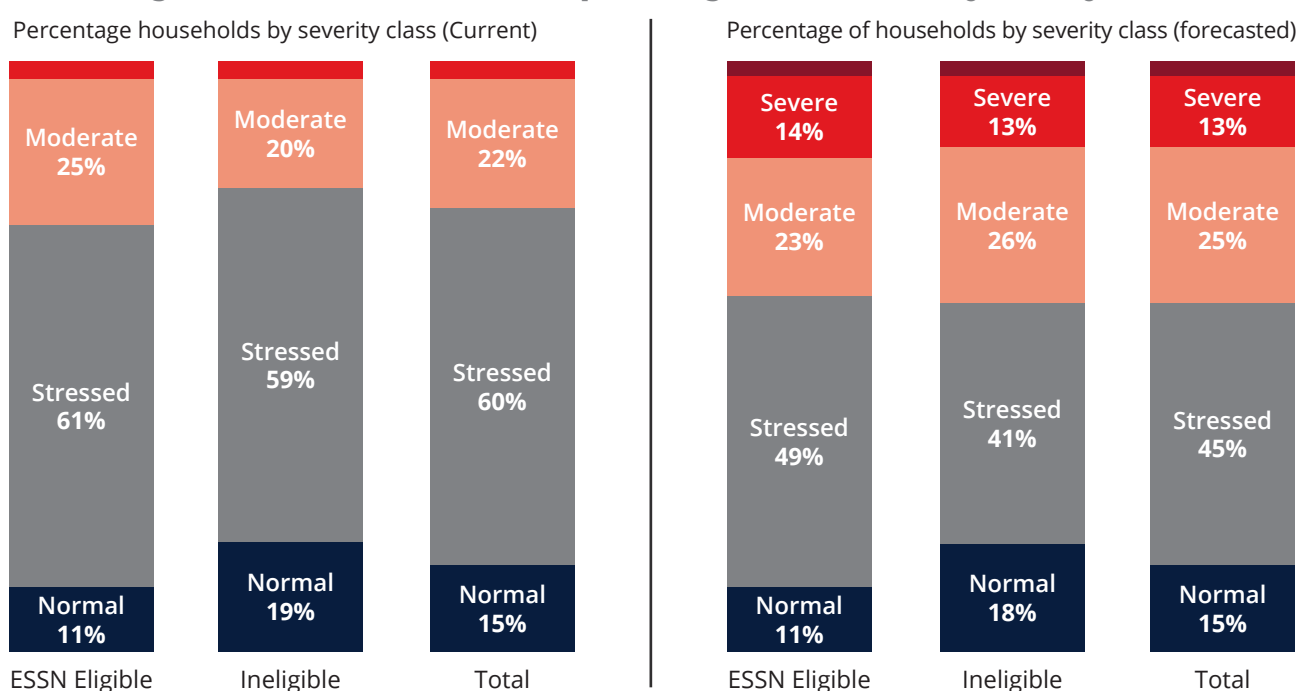*Source COVID-19 cases and death rate - Ministry of Health, 28 March 2021.

3. SEVERITY OF HUMANITARIAN CONDITIONS

The IVS methodology categorized household severity using five severity classes: normal, stressed, moderate, severe and critical (see severity classes definitions in Annex 2). Households falling in the categories moderate, severe and critical are considered in need of additional humanitarian assistance (the higher the class, the more urgent and proportional the assistance should be). Households falling in the category stressed are considered affected by the current situation[2], however are not considered in need of external assistance. Evidence gathered by IVS indicates that nearly 25% of households are currently facing moderate or severe humanitarian conditions (28% of eligible households compared to 22% for ineligible households). Only one interviewed household (ineligible) fell in the category critical. Follow up was immediately ensured to verify the finding and proceed with referral. IVS also identified a segment of both groups falling in the stressed severity class (12% of eligible and 19% of ineligible) whose conditions are alarming and are exhausting their coping mechanisms. This population segment is considered at risk and special measures should be taken to prevent them from falling into the in need category.

4. OUTLOOK

While the eligible population currently shows the highest proportion of people in need, the ESSN assistance provide them with an important financial buffer compared to the ineligible, whose conditions are expected to deteriorate faster in the coming months. Assuming current levels of ESSN assistance and challenges in accessing sufficient income persist, the percentage of refugee households facing unmet needs will most likely increase further in the next six months[3]. The worst-case (but most likely) scenario - return to full lockdown to reduce the COVID-19 third wave infection rates - could see an additional 15% of the refugee households facing moderate unmet needs, bringing the total percentage of households in need at 40% of the total refugee population. Under such scenario, the proportion of households facing severe need would increase significantly from 2% currently to 13%. Additionally - and demonstrating how more vulnerable the ineligible population has become - the proportion of ineligible in need would be equal to the proportion of eligible in need.

Figure 2. Current and forecasted percentage of households by severity class

Percentage households by severity class (Current)

Percentage of households by severity class (forecasted)

Moderate 25%	Moderate 20%	Moderate 22%
Stressed 61%	Stressed 59%	Stressed 60%
Normal 11%	Normal 19%	Normal 15%
ESSN Eligible	Ineligible	Total

Severe 14%	Severe 13%	Severe 13%
Moderate 23%	Moderate 26%	Moderate 25%
Stressed 49%	Stressed 41%	Stressed 45%
Normal 11%	Normal 18%	Normal 15%
ESSN Eligible	Ineligible	Total

2 • Refer to the 2016 humanitarian profile support package for definitions on the categories people affected and in need.
3 • IVS Projections were established by taking into account, for each household, the current level of severity and the level of exhaustion of coping mechanisms. Under the worst case scenario, the severity class of households having reported near or total exhaustion of their coping strategies was upgraded to the next class level.

5. PRIORITY NEEDS

Food, housing and energy are considered the top priority needs by both eligible and ineligible households. To cover regular expenditures related to those three items (accounting for 74% of the total monthly expenses), households have to sacrifice other important expenses, including education, communication and health related costs (e.g. dentist). As a result, 38% of eligible households have at least one school aged child not attending the online curriculum, one household out of two reports dental issues, one out of five cannot afford medical expenses, more than half cannot afford communication costs and 66% cannot afford basic household items.

6. PRIORITY GEOGRAPHICAL AREAS

Geographical areas whose local economy was most affected by COVID-19 restrictions are the same regions where the highest percentage of refugees in need are found, e.g. West Marmara and Aegean region, Black Sea and Eastern Anatolia and the Mediterranean region. Those are also the regions with the highest relative poverty rate in Turkey (TurkStat, 2019). On the other side, areas such as South East Anatolia or East Marmara regions show a slightly lower proportion of their refugee population in need, most likely due to the fact the social network is stronger close to the Syrian border and the local economy (mostly industrial) was not disrupted for too long by the COVID-19 measures in East Marmara. Overall, those geographical differences are not very pronounced and the concerns raised in the IVS report apply to the entire country.

7. MOST VULNERABLE HOUSEHOLDS

The severity of conditions is clearly linked to the income-earning capacity of refugee households and to the number of dependents. Single-income earning households, particularly those headed by divorced, separated, widows or widowed persons and those with children, are more likely to face moderate or severe conditions than households with married couples and those without children. Families that have been living in Turkey for more than three years and with members with a better command of the Turkish language generally find more income earning opportunities and are facing less severe humanitarian conditions.

2. IVS BACKGROUND INFORMATION

OBJECTIVES

The IVS is an integral part of the Emergency Social Safety Net (ESSN) programme funded by the European Union to support refugees in Turkey. It was planned and designed to provide regular analysis of unmet needs and how they evolve over time, across refugee population groups and geographical areas. Assessing and quantifying the humanitarian conditions of the refugee population was especially critical in the light of the COVID-19 pandemic and its impact on vulnerable refugee households. This is the first time the IVS has been conducted in Turkey, and will be followed by additional updates in the future. The specific objectives are:

1 • To establish key priorities and the severity of humanitarian conditions, at intersector level, across different refugee groups (eligible and ineligible) living in different regions;

2 • To identify further information needs, i.e. locations, sectors and/or affected groups requiring more in-depth assessments; and

3 • To provide the evidence-base for improving the efficiency of the ESSN programme and accountability to the refugee population.

IVS is based on a comprehensive analytical framework especially tailored to the Turkish context and providing a methodological toolbox guiding data collection and analysis. The framework design was informed by an in-depth review (2020) of international and regional analytical frameworks aimed at measuring the severity of humanitarian conditions.
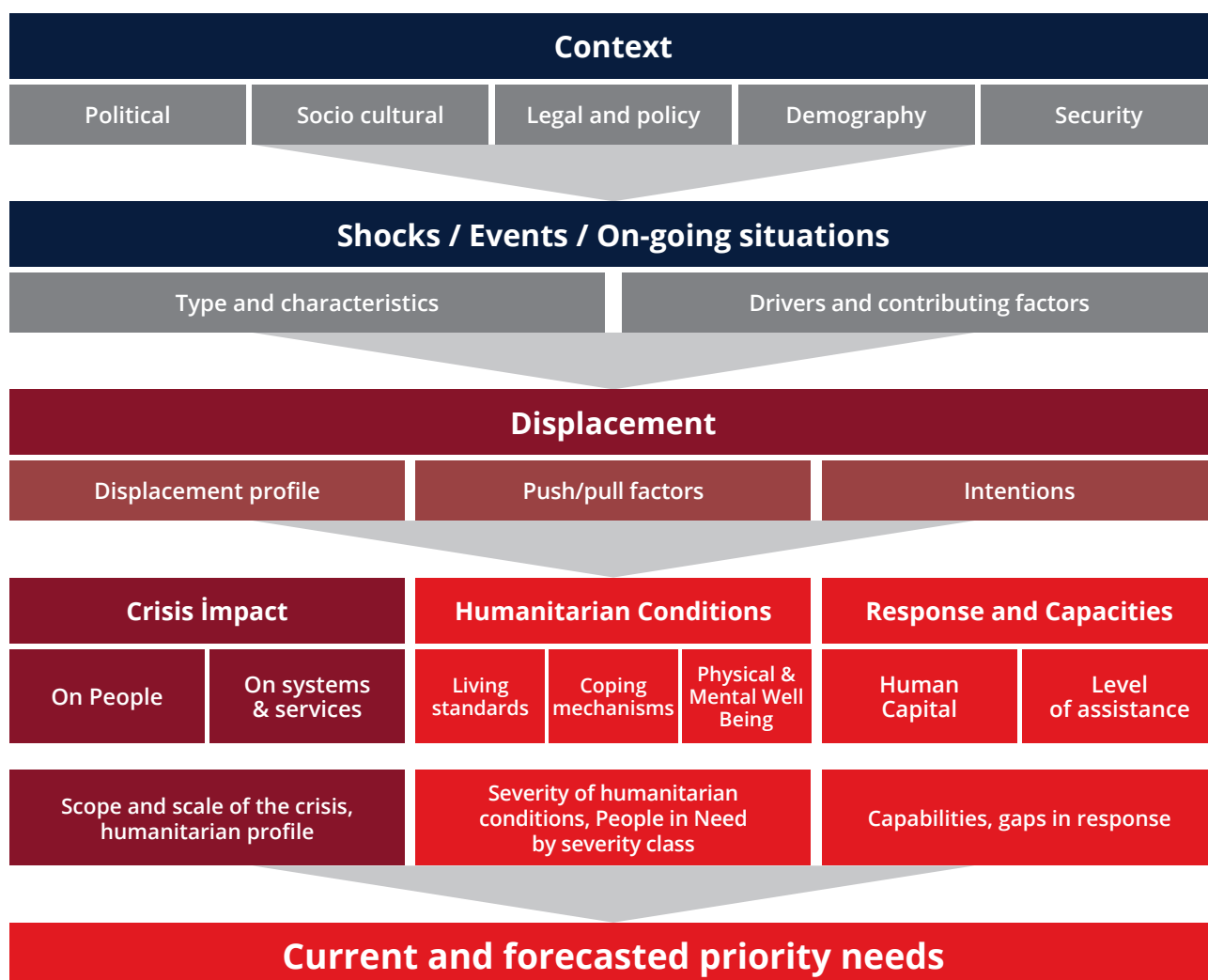
The IVS Analytical Framework includes:

An analysis framework (what are the main dimensions and sub-dimensions of humanitarian conditions that will be measured). See figure 3 for a visual representation of the IVS Analysis Framework;

- An analysis and data collection plan (how the information will be analysed and collected);
- A technical note on the calculation of the severity of humanitarian conditions (how severity will be estimated);
- A report template (how findings will be communicated);

Figure 3. IVS Analysis Framework

Context				
Political	Socio cultural	Legal and policy	Demography	Security

Shocks / Events / On-going situations	
Type and characteristics	Drivers and contributing factors

Displacement		
Displacement profile	Push/pull factors	Intentions

Crisis İmpact		Humanitarian Conditions			Response and Capacities	
On People	On systems & services	Living standards	Coping mechanisms	Physical & Mental Well Being	Human Capital	Level of assistance
Scope and scale of the crisis, humanitarian profile		Severity of humanitarian conditions, People in Need by severity class			Capabilities, gaps in response	

Current and forecasted priority needs

METHODOLOGY

1. DESIGN AND PLANNING

The initial survey design was discussed in March 2020 during a joint workshop in Ankara with the Turkish Red Crescent (TRC) and the International Federation of Red Cross and Crescent Societies (IFRC), including technical, sector, cross-sector and senior staff members who were engaged in the selection of indicators and questions to ask the refugee population. Analysis framework, analysis and data collection plan were validated and revised in April/June 2020 to adapt to COVID-19 restrictions. IVS is a cross sectional survey. To ensure the sample was representative of all ESSN applicants, the list of respondents was drawn from the ESSN monthly payment list and from the ineligible households list, sum of two lists stands for total ESSN applicants. A stratified random sampling was used in each targeted geographical area. Turkish administrative regions were merged to match the geographical distribution of eligible and ineligible population in Turkey. Results can be comparable with the PDMs but geographical area clusters and confidence intervals are different for both studies while both of the studies are able to give information for applicant population. Results are compared in order to see the trend of the variables and to have a broader perspective. The IVS results are representative at the regional level (90% confidence level and 5% margin of error) and at group level (ESSN eligible vs. ESSN ineligible). A detailed table describing the main activities and tools used for the IVS is available in Annex 1.

Figure 4. IVS custom regions

Official Geographical Regions	IVS Regions
East Black Sea + West Black Sea + North East Anatolia + Central East Anatolia	Black Sea and Eastern Anatolia
West Anatolia and Central Anatolia	West and Central Anatolia
West Marmara and Aegean	West Marmara and Aegean
Southeast Anatolia Region	Southeast Anatolia Region
Mediterranean Region	Mediterranean Region
Istanbul Region	Istanbul Region
East Marmara Region	East Marmara Region

2. DATA COLLATION AND COLLECTION

Using phone surveys, IVS collected data from 4.522 refugee households in Turkey. Open Data Kit (ODK), deployed on a secured TRC server, was used to capture and store IVS data. A team of 30 enumerators conducted interviews between August 2020 and February 2021. Each enumerator participated to a 2-days training in which the survey objectives and questions/definitions were explained, the ODK platform was introduced and methodological and ethical aspects of remote data collection were covered.

For secondary data, the PDM 8, 10 and 11 data collected by TRC on a quarterly basis and including similar questions as the IVS for debt, income, expenditures and coping mechanisms offered great opportunities for trends analysis over the last year[4]. PDM 8 data especially (which was collected before the COVID-19 pandemic was declared), is considered a solid baseline against which to compare IVS results. Additional secondary data was also captured to compare and triangulate IVS findings with other sources (government, UN agencies, research Institute, NGOs, etc.) and to inform the pillars of the analysis framework that were not covered by field data collection, (e.g. Context/economic, Impact on people, etc.). All secondary data used are quoted in the IVS report.

Figure 5. Total phone interviews by IVS region

Istanbul Region
653 HHs

East Marmara Region
599 HHs

Blacksea and Eastern Anatolia
578 HHs

West Marmara and Aegean Region
612 HHs

West and Central Anatolia
674 HHs

Southeast Anatolia Region
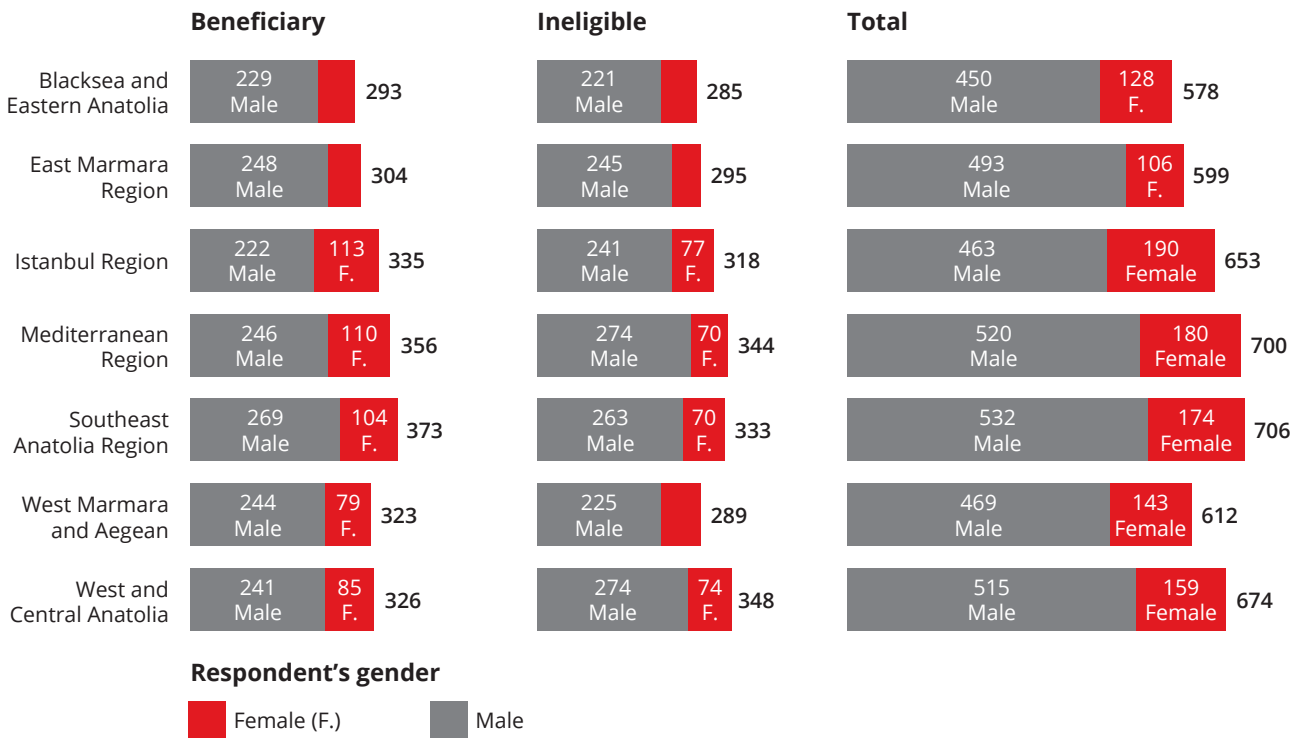706 HHs

Mediterranean Region
700 HHs

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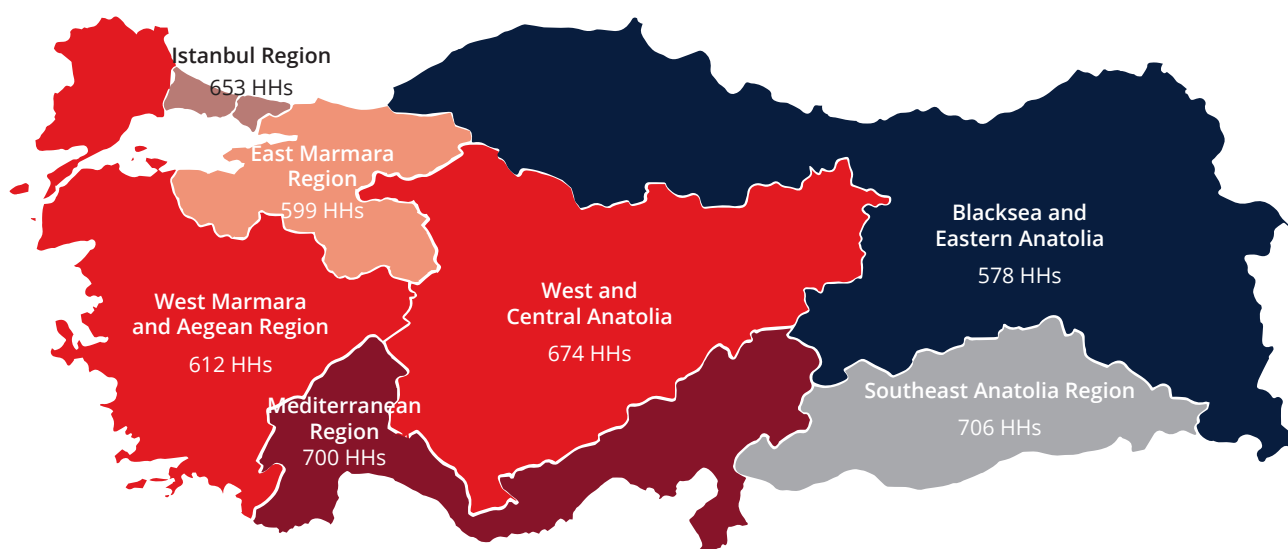
4 • PDM 8 data was collected between April and October 2019. PDM 10 between June and September 2020, PDM 11 between November 2020 and January 2021. Since data collection for IVS and PDM 11 overlap, results are presented using bar charts instead of lines in the IVS report.
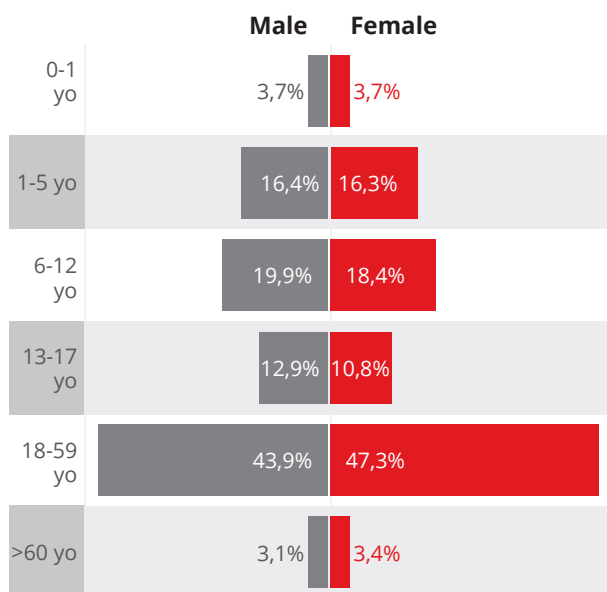
Figure 6. Total phone interviews over time
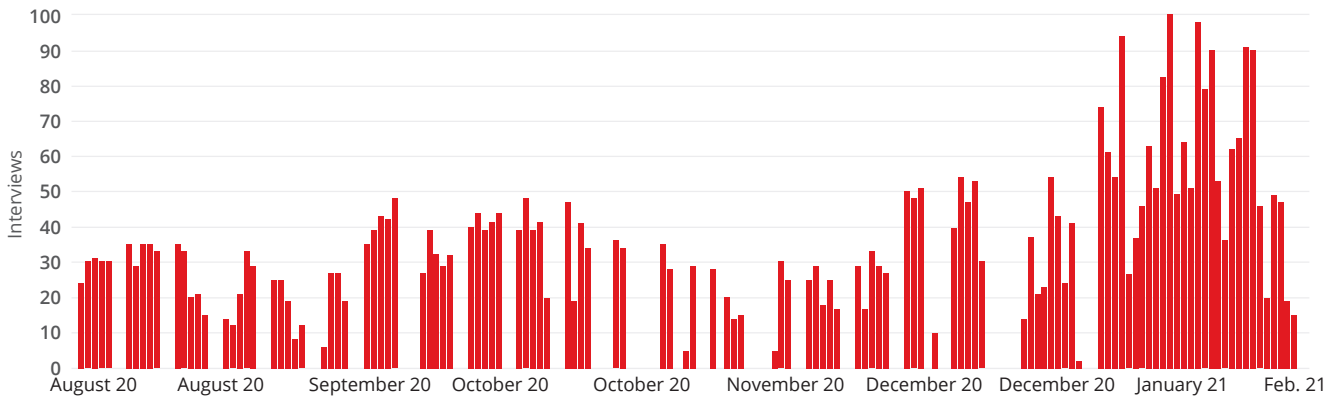
Figure 7. Total phone interviews by respondent's gender and regions

	Beneficiary	**Ineligible**	**Total**
Blacksea and Eastern Anatolia	229 Male / 293	221 Male / 285	450 Male / 128 F. / 578
East Marmara Region	248 Male / 304	245 Male / 295	493 Male / 106 F. / 599
Istanbul Region	222 Male / 113 F. / 335	241 Male / 77 F. / 318	463 Male / 190 Female / 653
Mediterranean Region	246 Male / 110 F. / 356	274 Male / 70 F. / 344	520 Male / 180 Female / 700
Southeast Anatolia Region	269 Male / 104 F. / 373	263 Male / 70 F. / 333	532 Male / 174 Female / 706
West Marmara and Aegean	244 Male / 79 F. / 323	225 Male / 289	469 Male / 143 Female / 612
West and Central Anatolia	241 Male / 85 F. / 326	274 Male / 74 F. / 348	515 Male / 159 Female / 674

Respondent's gender

■ Female (F.)   ■ Male

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IVS SAMPLE CHARACTERISTICS:

- **SAMPLE:** 4,522 households were surveyed in seven regions between August 2020 and February 2021. In total, IVS identified humanitarian conditions for 25,918 people.

- **RESPONDENT'S GENDER:** 1,080 female respondents and 3,442 males were interviewed by phone. All have provided informed consent before to take the survey and understood the objectives and use of the data. Respondent were all heads of households. The average age of the respondents is 39 years old for female and 40 years old for males.

- **REFUGEE'S NATIONALITIES:** 23 refugee nationalities were covered by the survey, however 97% of the sample is composed of Syrian and Iraqi refugees. Syrians are a large part of the sample in Istanbul, Mediterranean and Southeast Anatolia regions (97-98% of the sample), while Iraqis are more predominantly present in the Black Sea and Eastern Anatolia region (43% of the sample) and in West and Central Anatolia (21% of the sample).

- **MARITAL STATUS:** 88% of respondents are married, 6% are widowed, 3% divorced, 2% single and 2% separated, without significant differences between groups or regions.

- **FAMILY SIZE:** The average family size for Syrians is 5,8 members and 5,4 for Iraqis. Family size is generally higher for ESSN eligible families with an average of 6,4 members compared to 5,1 for ineligible families. This finding is logical since number of children is part of the criteria for selecting ESSN eligible households.

- **PEOPLE WITH SPECIFIC NEEDS:** 6% of the population surveyed are reported being chronically ill without medical report and 4% with medical report. Nearly five percent of the population are pregnant adult and 1% are pregnant adolescent. Less than one percent are elderly with support needs. IVS also identified 171 separated children and 27 unaccompanied children.

- **DEMOGRAPHY:** 51% of the population surveyed are male and 49% female. Demographic characteristics of the IVS sampled households are identical to data collected through the PDM. 31% of the total population surveyed are school aged children (6-17 years old).

- **TURKISH LEVEL:** Only 27% of all household members are reported being proficient or fluent in Turkish. 27% of the surveyed households do not speak Turkish and 25% of them have basic level of Turkish. 21% of them have medium level of Turkish.

Figure 8. IVS population pyramid

Age	Male	Female
0-1 yo	3,7%	3,7%
1-5 yo	16,4%	16,3%
6-12 yo	19,9%	18,4%
13-17 yo	12,9%	10,8%
18-59 yo	43,9%	47,3%
>60 yo	3,1%	3,4%

3. ANALYSIS

A core team of five social researchers, assessment and analysis experts conducted the analysis using different statistical and data processing packages (R, Python, SPSS, Stata). The severity index was calculated and tested (See technical note in Annex 2) in parallel of the descriptive analysis and results were reconciliated to identify the main characteristics of the households falling in each severity class. Survey results were discussed during a two-day joint analysis workshop (25-26 March 2021) involving TRC and IFRC technical staff and senior management. Key messages were jointly agreed.

4. COMMUNICATION/REPORTING

The IVS report was finalized early April 2021 and validated by TRC and IFRC senior management. A lessons learnt workshop was conducted to identify main IVS challenges and issues and provide practical recommendations for improvement of the next IVS round, e.g. questionnaire design, sample, analysis, data collection timeframe, etc.

While not per se a coordinated assessment, the IVS approach was designed to meet the quality criteria established by the Workstream 5 of the Grand Bargain on Joint and impartial Needs Assessment. Quality criteria were developed by the Global Public Policy Institute (GPPi) and funded by the European Civil Protection and Humanitarian Aid Operations (ECHO). Based on the scoring methodology, the IVS meets 97% of core requirements and is rated "best practice".

LIMITATIONS AND MITIGATION STRATEGIES

Due to COVID-19 restrictions, the IVS data collection plan was revised for remote data collection. Interviews were conducted by phone instead of face-to-face in-house visits. The form was shortened to fit recommended phone interviews duration (45-60 min max). As a result, some topics originally planned for in the analysis framework were de-prioritized, e.g. response and capacities, crisis impact, context, etc. Additional secondary data research was conducted to fill the gaps.

Some affected groups originally targeted for interviews were excluded due to the difficulties in reaching them using remote data collection techniques, i.e. non-applicants to ESSN. The vulnerability conditions of this group are unknown as no comprehensive survey measuring their living standards, coping mechanisms and physical and mental well-being is currently available.

To mitigate against biases inherent to remote interviews and the absence of direct observation in the households, additional questions were added for interviewees and enumerator to cross-reference previous answers. For instance, at the end of each questionnaire section, interviewees were requested to self-rate their ability to meet basic needs, cope with current conditions and assess the health status of their family members. This was cross referenced with more detailed questions available in IVS. When results are inconsistent, it was noted in the report. Enumerators were also requested to provide with a final severity rating against which the results of the severity index were compared. Overall the distribution of the severity estimates obtained from those different measures corroborate themselves, however the IVS severity index is more conservative in its identification of severe conditions. The IVS severity model downplay considerably severity compared to the measures obtained from enumerators and the interviewees themselves.

Conscious or information gaps, the IVS analysis followed a rigorous sense-making process based on the IFRC Analysis Workflow, and covered five levels of the Analysis Spectrum (exploration, description, explanation, interpretation and anticipation). At each step, assumptions and hypothesis to be further tested were identified and then later confirmed or discarded. The main Structured Analysis Techniques (SAT) used for IVS analysis was the Key Assumption Checklist, Problem Trees for causal analysis and Structured Brainstorming in joint sessions with technical staff. Specific briefings with the enumerator team allowed to fill some information gaps. The key messages highlighted in the executive summary were refined using three independent workshop sessions, two including IFRC and TRC technical staffs and one final with TRC and IFRC senior management.

3. KEY FINDINGS

CONTEXT

COVID-19

The first COVID-19 case in Turkey was recorded on 11 March 2020, when a local returned home from a trip to Europe. The first death due to COVID-19 in the country occurred on 15 March. As of 28 March 2021, Turkey has 3,208,173 confirmed cases, 2,957,093 recoveries, 31,076 deaths, and a death rate of 369 per million people (the 66th highest rate globally) (source Ministry of Health).

The resulting wave of infections never came close to overwhelming the Turkish health system, which has the highest number of Intensive Care Units in the world at 46.5 beds per 100,000 people (compared to 9.6 in Greece, 11.6 in France, and 12.6 in Italy) (*The Economist, June 2020*). As of 26 March 2021, Turkey's observed case-fatality rate stands at 0.98%, the 139th lowest rate globally (*John Hopkins University, Dec 2020*). This low case-fatality rate can be explained by the relative rarity of nursing homes, favorable demographics, long legacy of contact tracing, high number of intensive care units, universal health care, and a lockdown regime that led to a higher proportion of positive cases among working-age adults.

Figure 9. COVID 19 cases, deaths and restrictions measures *(OXFORD Stringency Index 2020)*
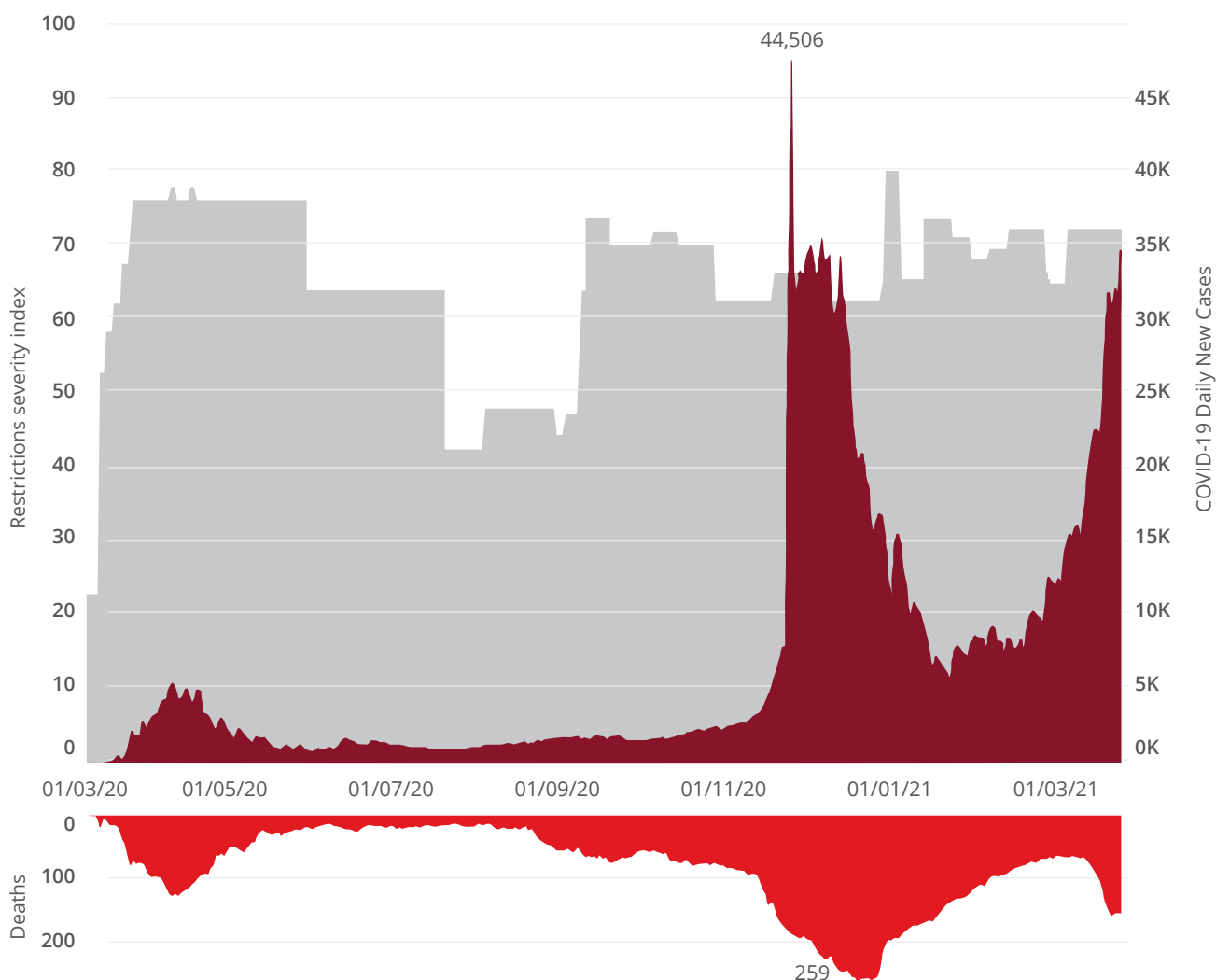
RESTRICTIONS

Restrictions measures adopted to prevent COVID-19 infection started as early as March 2020 and included halting indoor activities (businesses and places of worship, school closure), a curfew for elders and children under 18 years old, home lockdown, the prohibition of public gathering and bans on domestic and international travels. A remote education channel opened on TRT EBA TV to replace school and became functional on March 2020, with the rest of the teachers matched to students to provide individual assessment, coaching and tutoring. The country activities progressively reopened between June-September 2020 before new restrictions were introduced in October and November 2020. Turkey detected 15 cases of the highly contagious UK coronavirus variant on 1 January 2021. At the beginning of March 2021, restrictions were eased but the rates of infections are quickly rising since. Turkey has suffered a poor season of tourism due to the pandemic restrictions, but bars and restaurants have been allowed to reopen at half-capacity in provinces with lower infection rates.

ECONOMY

Turkey provided a boost to the economy in a series of historically large economic packages including forgivable loans to small businesses, support to retired people and unemployment checks. TurkStat indicates that unemployment peaked at 14.5% in 2020 and decreased to 12.2% following the economic expansion in the third quarter, and job retention programmes announced by the government (Turkstat, February 2021). However, while the overall unemployment declined, youth unemployment increased to 24.3%, meaning that the demographic least capable of bearing financial pain bore the majority of it. In addition, the governmental economic support did not reach the important portion of refugees involved in the unformal sector, more severely impacted by the economic consequences of the restrictions due mostly to lack of employment protection (ILO, March 2021). In parallel, consumer prices in Turkey jumped 15.61 % year-on-year in February of 2021, the highest inflation rate since July of 2019 with transportation (22.47 percent), miscellaneous goods and services (20.61 percent), food and non-alcoholic beverages (18.4 percent) and health (18.11 percent) recording the biggest price increases.

REFUGEE MOVEMENTS

> The rate of arrival in Turkey has considerably decreased since 2018. While the number of in-country relocation reported is high, only 27% of the households intend to move again in the next 12 months, either inside or outside Turkey. Social tensions leading to verbal or physical aggression between refugees and host community or between refugees are generally rare.

ARRIVAL IN TURKEY

Most interviewed families arrived in Turkey between 2013 and 2016. 73% of families reported moving to Turkey all together and the remaining 27% moved separately (at least one family member come to Turkey afterwards). Time between arrivals are frequently one year. 30% of the family regrouping happened the same year of the first departure and 38% within a 12 month period after the first arrival. This finding is similar across all assessed regions and having children or elder family members did not affect the decision to come at different times.

Figure 10. Time of arrival for refugee families
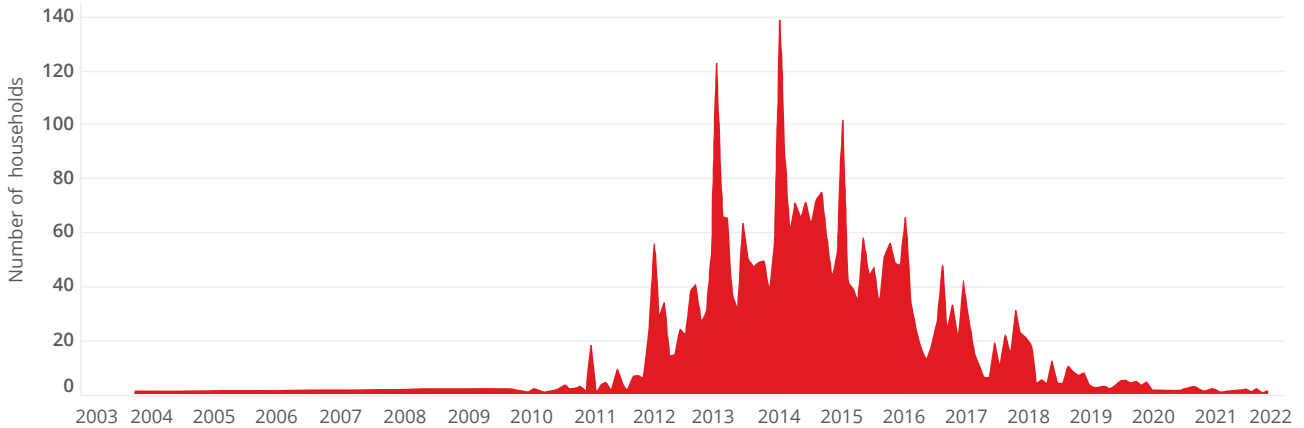
RELOCATION

Only 14% of the households never relocated in Turkey after their arrival. One out of four households relocated two times and one out of five four times of more. The highest frequency of relocation is found in the Southeast Anatolia Region (25% report having moved at least four or more times). Suggesting that after several local integration attempts, Syrian refugee families move closer to the Syrian border, where social network among refugees is known to be stronger.

Figure 11.
Number of relocations inside Turkey
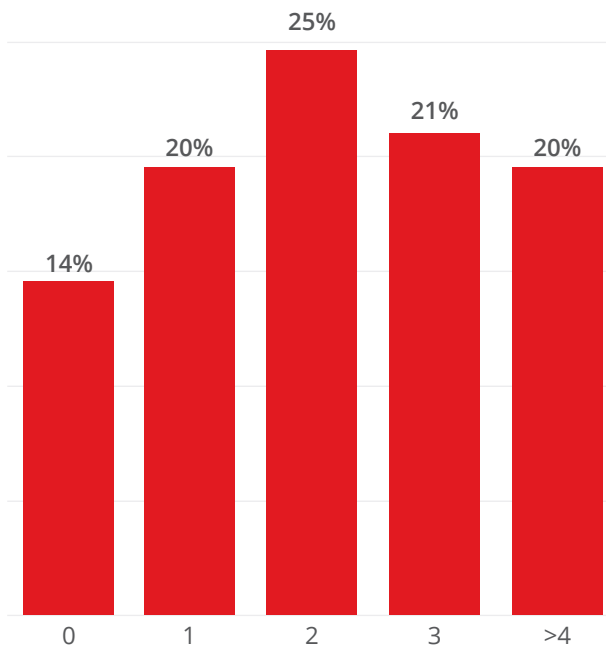
REFUGEE'S INTENTIONS

73% of interviewed households expressed willingness to stay in their current province within the next 12 months, and 20% to relocate in another country. 3% express willingness to relocate somewhere else in Turkey and only 4% are seeking return in their country of origin. Significant differences are reported between regions: 31% of the refugees located in Istanbul and 35% of those in Black Sea are seeking to relocate in a different country, compared to only 12% and 17% of those located in Mediterranean and Southeast Anatolia region. The origin of those differences are unknown.

SOCIAL TENSIONS

Verbal or physical aggressions between refugee population and host community are rare, demonstrating a good social cohesion between refugees and host population. Only 8% of the interviewed households report incidents in the last three months, and 2% only report frequent or very frequent issues. Tensions are more frequently reported by interviewees in Istanbul (10%) and West Marmara regions (9%) compared to other regions. No important differences were observed between ESSN eligible and ineligible households. Intra-refugee community tensions are even lower among the refugee households, with only 5% of households reporting incidents in the last three months. Here also, no important geographical or group variations were observed. IVS results suggest that the desire for local integration diminishes if tensions with host communities are frequently reported. To be noted that only data on physical or verbal aggression were captured by IVS. For a more detailed and comprehensive survey on social cohesion, please refer to the *July 2020 WFP* report capturing trends over time.

EDUCATION IMPACT

Average education level in refugee households is generally lower than high school. COVID-19 restrictions measures have significantly impacted learning, with one in three households reporting that at least one of their school aged children is not attending the online curriculum. This is mostly due to lack of computer, internet or for lack of knowledge on how to use the new platform. ESSN eligible households are the most impacted with 38% households reporting at least one child not attending the online curriculum, compared to 26% for ineligible households.
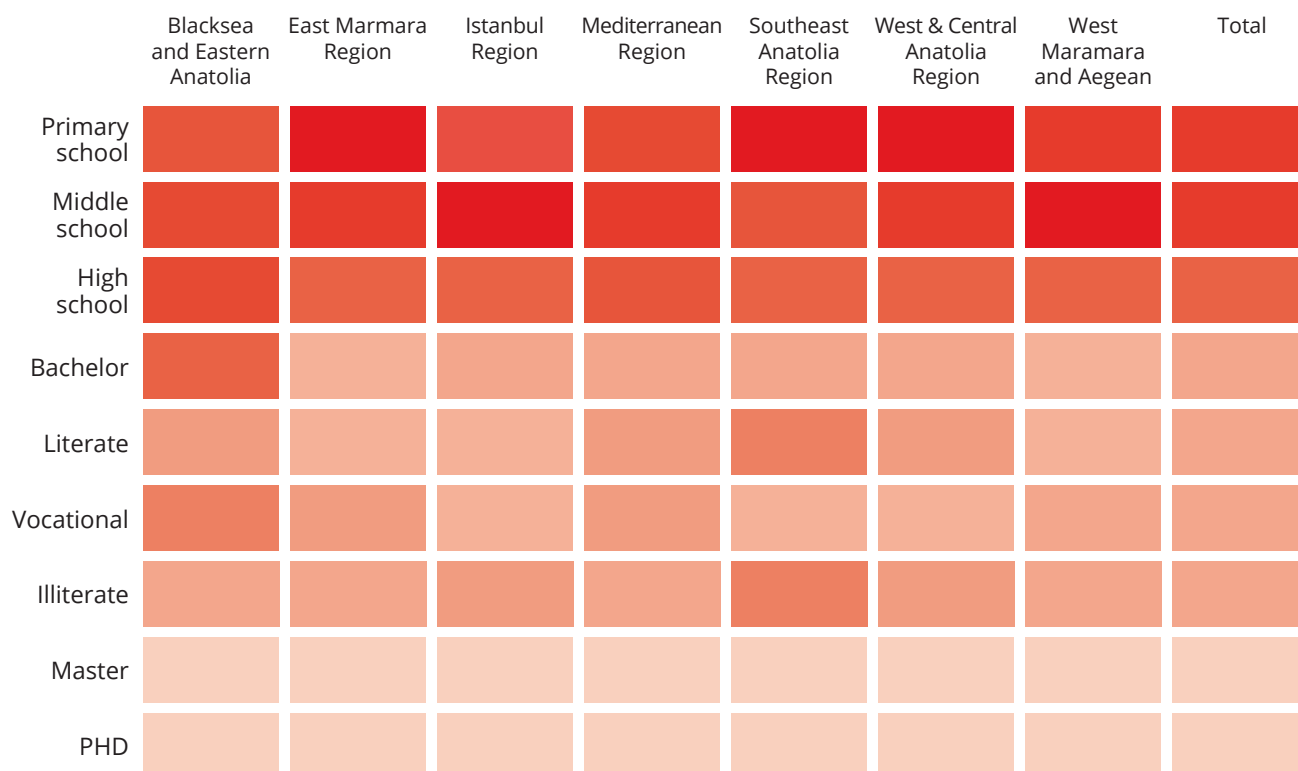
EDUCATION LEVEL

The highest education levels[5] in refugee families are mostly primary and middle school. In total, 7% of households report that both heads have no formal education and are illiterate and 11% only report having at least one person with a bachelor's degree. Less than 1% report having at least one master's degree. The education level is generally higher for ineligible households, with twice more bachelor's degrees and vocational training compared to eligible who have more high school level or less illiteracy.

ENROLMENT

81% of the eligible households have school aged children compared to 56% of the ineligible households. This difference is logical as the number of children is one of the criteria used to select eligible ESSN households. However, 13% of ineligible households report that at least one school aged child is not enrolled in school, compared to 8% of eligible households. This is particularly the case in East Marmara, Mediterranean and West and Central Anatolia regions where the level of Turkish fluency in the family is lower (calculated based on the two highest fluency level in the family).

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5 • Preferences or priority questions in IVS were processed using borda counts. These questions are visualized using heat tables showing the highest preference, priority or level with darker colors, and lower preferences, priorities or levels using lighter colors. In figure 12, a darker color indicates the most frequent education levels found in households, across the two highest levels.
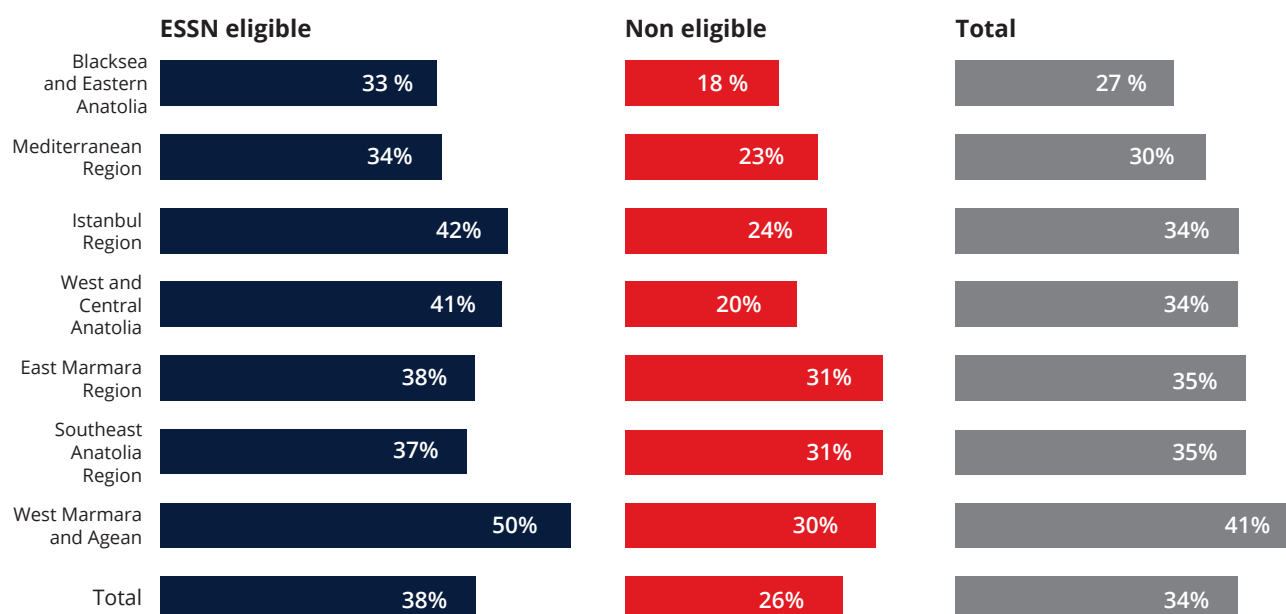
Figure 12. Highest education degrees in the refugee households

	Blacksea and Eastern Anatolia	East Marmara Region	Istanbul Region	Mediterranean Region	Southeast Anatolia Region	West & Central Anatolia Region	West Maramara and Aegean	Total
Primary school								
Middle school								
High school								
Bachelor								
Literate								
Vocational								
Illiterate								
Master								
PHD								

ATTENDANCE

Attendance level to the online curriculum adopted during the COVID-19 pandemic is significantly lower for eligible households, with 38% of households having at least one school aged children not attending, against 26% for ineligible households. Regions with the lowest ESSN eligible school attendance rate are West Marmara and Aegean, Istanbul and West and Central Anatolia regions. The most frequently mentioned reason for not attending the online curriculum are the lack of computer/tablet (59%) and internet (25%) as well as a lack of knowledge of how to use the platform (14%).

Figure 13. Percentage of households with at least one school aged children not attending the online course

	ESSN eligible	Non eligible	Total
Blacksea and Eastern Anatolia	33 %	18 %	27 %
Mediterranean Region	34%	23%	30%
Istanbul Region	42%	24%	34%
West and Central Anatolia	41%	20%	34%
East Marmara Region	38%	31%	35%
Southeast Anatolia Region	37%	31%	35%
West Marmara and Agean	50%	30%	41%
Total	38%	26%	34%

LIVELIHOOD IMPACT

> ESSN eligible refugees are more affected by unemployment compared to ineligibles, especially in geographical areas where the local economy has been more impacted by COVID-19 restrictions. Male adults are the main contributors to family income, although IVS also report that 7% of males and 1% of females under 18 years old are working. Most income earners are engaged in unskilled and semi-skilled activities. Access to higher professional levels is improving since arrival in Turkey.

INCOME EARNERS

Figure 14. Percentage of households with working members in the last 30 days

ESSN Eligible

Region		
Blacksea and Eastern Anatolia	No worker 25%	1 worker 68%
East Marmara Region	No worker 22%	1 worker 68%
Istanbul Region		1 worker 66%
Mediterranean Region	No worker 22%	1 worker 62%
Southeast Anatolia Region		1 worker 66%
West and Central Anatolia	No worker 22%	1 worker 65%
West Marmara and Aegean	No worker 20%	1 worker 68%
Total	No worker 20%	1 worker 65%

Ineligible

Region		
Blacksea and Eastern Anatolia	No worker 30%	1 worker 54%
East Marmara Region		1 worker 66%
Istanbul Region		1 worker 62% · 2 workers 23%
Mediterranean Region		1 worker 59% · 2 workers 18%
Southeast Anatolia Region		1 worker 66% · 2 workers 18%
West and Central Anatolia		1 worker 65%
West Marmara and Aegean		1 worker 67%
Total		1 worker 63% · 2 workers 18%

Total

Region		
Blacksea and Eastern Anatolia	No worker 28%	1 worker 60%
East Marmara Region		1 worker 67%
Istanbul Region		1 worker 64% · 2 workers 18%
Mediterranean Region	No worker 19%	1 worker 61%
Southeast Anatolia Region		1 worker 66%
West and Central Anatolia	No worker 20%	1 worker 65%
West Marmara and Aegean		1 worker 67%
Total		1 worker 64%

83% of the interviewed households had at least one household member working in the last 30 days (64% of households had one working member and 15% had two). 20% of ESSN eligible households are suffering from total unemployment compared to 15% of the ineligible. This is logical since dependency ratio and the lack of formal employment is one of the criteria for ESSN eligibility. Regions where household members are the least employed are Black Sea and Eastern Anatolia (28%), Mediterranean (19%) and West and Central Anatolia (20%).

Income generation is mostly undertaken by adult male workers in the households (76% of the households has at least one adult male worker. Adult male workers are engaged more in income generating activities compared to other working members in the households), while only 8% of the households are reported that they have adult female workers. Child labor is less frequent for the households have female workers, with 7% of the households have male workers under 18 years report working and 1% of the households have female workers under 18 years. The percentage of the households have adult male workers in ineligible households (80%) is higher than in eligible households (72%). More working members are generally found in Istanbul and West Marmara and Aegean regions compared to others while Black Sea and Eastern Anatolia have the lowest percentage of working members per family. Additionally, the highest percentage of the households have female workers above 18 years are reported in Southeast Anatolia Region.

PROFESSIONAL SKILLS

Before coming to Turkey, households that were working were mostly engaged in unskilled or semi-skilled jobs. After moving to Turkey, the proportion of unskilled workers decreased nearly by half, while the proportion of semi-skilled workers increased from 35% to 44%, showing that refugees have increased professional skills or improved access to more qualified jobs in Turkey with experience. The percentage of households where the most qualified individual was not working decreased from 13% to 8%, suggesting a return to professional life for most of them. In the case a second person in the household is engaged in income generating activities (this is the case in 15% of the households), they generally engaged into unskilled or semi-skilled jobs.

The secondary data gathered for IVS indicates that more than 95% of refugees work informally in Turkey (*KAS 2019*, *ILO 2019*). The main sectors that Syrians are engaged in are textile, garment, leather and footwear industries. 92% of those who work do not have a work permit due to limited access to job opportunities in the formal sector. Main barriers to the formal sector include language, educational accreditation, skill level, unwillingness of employers to apply for the permit, delays in acquiring the permit and the quota system (the number of individuals under temporary protection in a workplace cannot exceed the number of Turkish workers by more than 10 per cent) (*Watan and IBC, 2020*)

INCOME LEVEL

> Due to a smaller number of income earners, ESSN eligible population income (excluding ESSN assistance) is generally less than the eligible households. Comparison with previous PDM data shows an important decline in income level following the November 2020 COVID-19 restrictions measures, for both groups. Highest income levels are reported in East Marmara (industrial region) and Istanbul and the lowest in Black Sea and Eastern Anatolia and the Mediterranean regions.

INCOME SOURCE

The primary source of income for the eligible population is the ESSN cash assistance, followed by unskilled/semi-skilled labor and remittances. Apart from the ESSN support, primary sources of income for the ineligible population are also unskilled/semi-skilled labor and remittances.

INCOME

The median income (ESSN assistance is excluded) is 1200 TL for eligible households and 1800 TL for ineligible households. The median square root scale[6] income for ineligible households is 816 TL and 495 TL for eligible. Both eligible and ineligible households have the highest income in the Istanbul region. This can be explained by higher pay and economic activity, higher number of working household members and increased job opportunities. Lowest income levels are found in Black Sea and Eastern Anatolia and in the Mediterranean region. Secondary data gathered for IVS indicates that refugees with irregular work (without contract and pre-defined hours) earn, on average, 250 TL less by month compared to those with a regular job. Inequality between genders is also observed, as female employees receive 250 TL less monthly than men. Also, being an adult employee pays 220 TL extra compared to being a young employee (ILO 2020).

Figure 15.
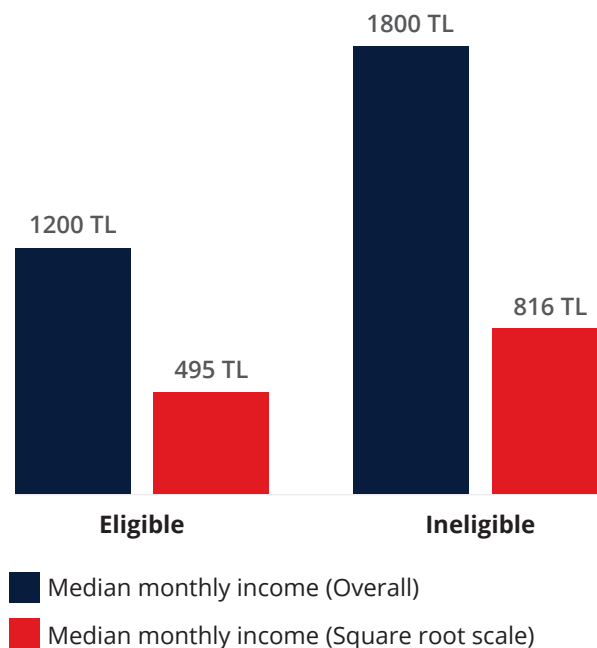
Figure 16. Median monthly income by eligibility status and regions
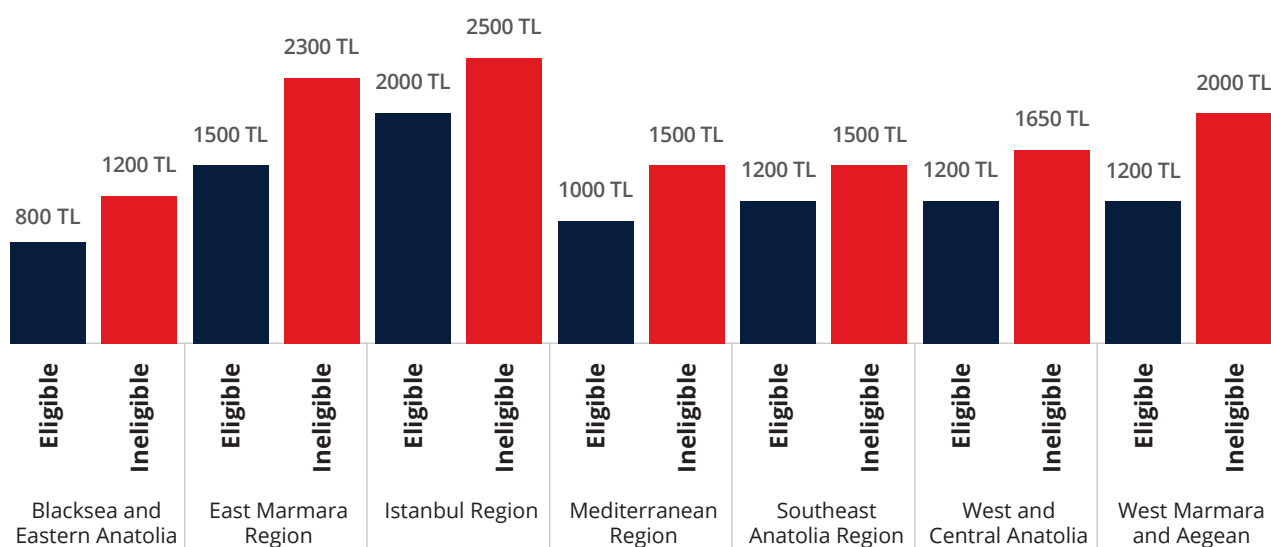
Income levels collected for IVS were compared to previous PDM studies. Both eligible and ineligible income levels are found decreasing, especially following the November 2020 COVID-19 new restrictions measures. While income instability is more obvious for eligible (up and down trends), it is the first time that the ineligible population is showing a decrease in over a year. Eligible population's income is back to pre-COVID-19 levels at 1200 TL.

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6 • The needs of a household grow with each additional member but – due to economies of scale in consumption– not in a proportional way. Needs for housing space, electricity, etc. will not be three times as high for a household with three members than for a single person. Recent OECD publications comparing income inequality across countries use a scale which divides household income by the square root of household size. This implies that, for instance, a household of four persons has needs twice as large as one composed of a single person. In the IVS report, the square root scale has been used to replace the traditional per capita calculation for income, expenditures and level of debt.

Figure 17. Evolution of median income between PDM exercises and IVS

Median income (per household)

Median income (Square Root Scale)

Ineligible   Eligible
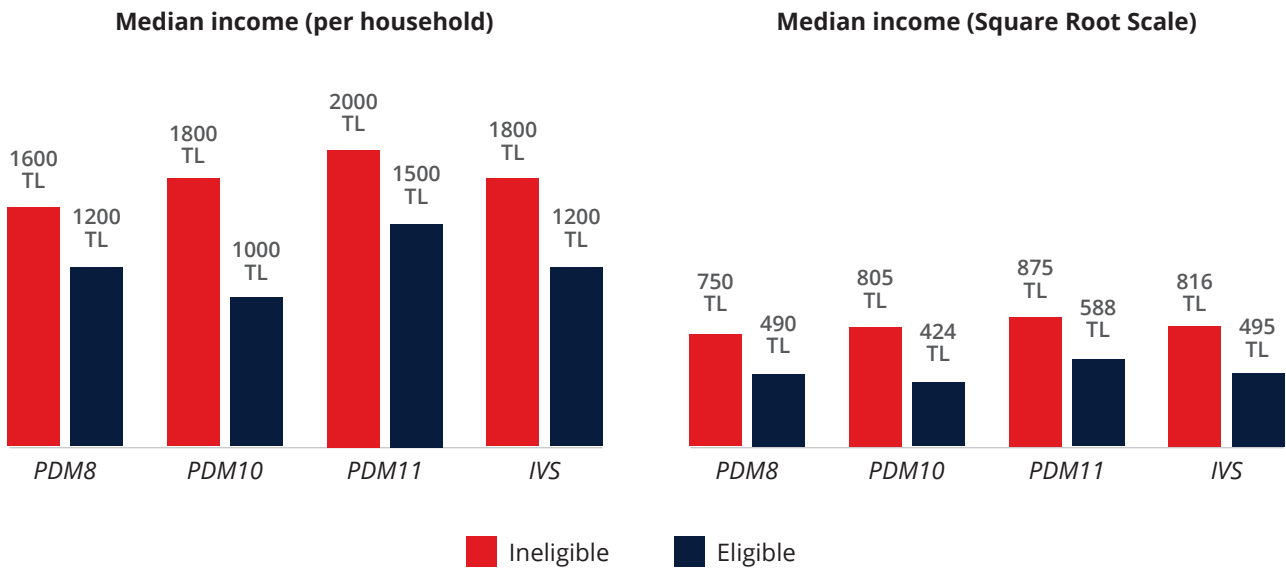
HOUSEHOLD'S DURABLE GOODS

> Asset ownership is mostly similar across regions and groups. Less than 10% of the refugee population owns durable goods such as computers, dishwashers, cars or air conditioning. More than 80% own a smartphone, a refrigerator, beds, blankets and a washing machine.
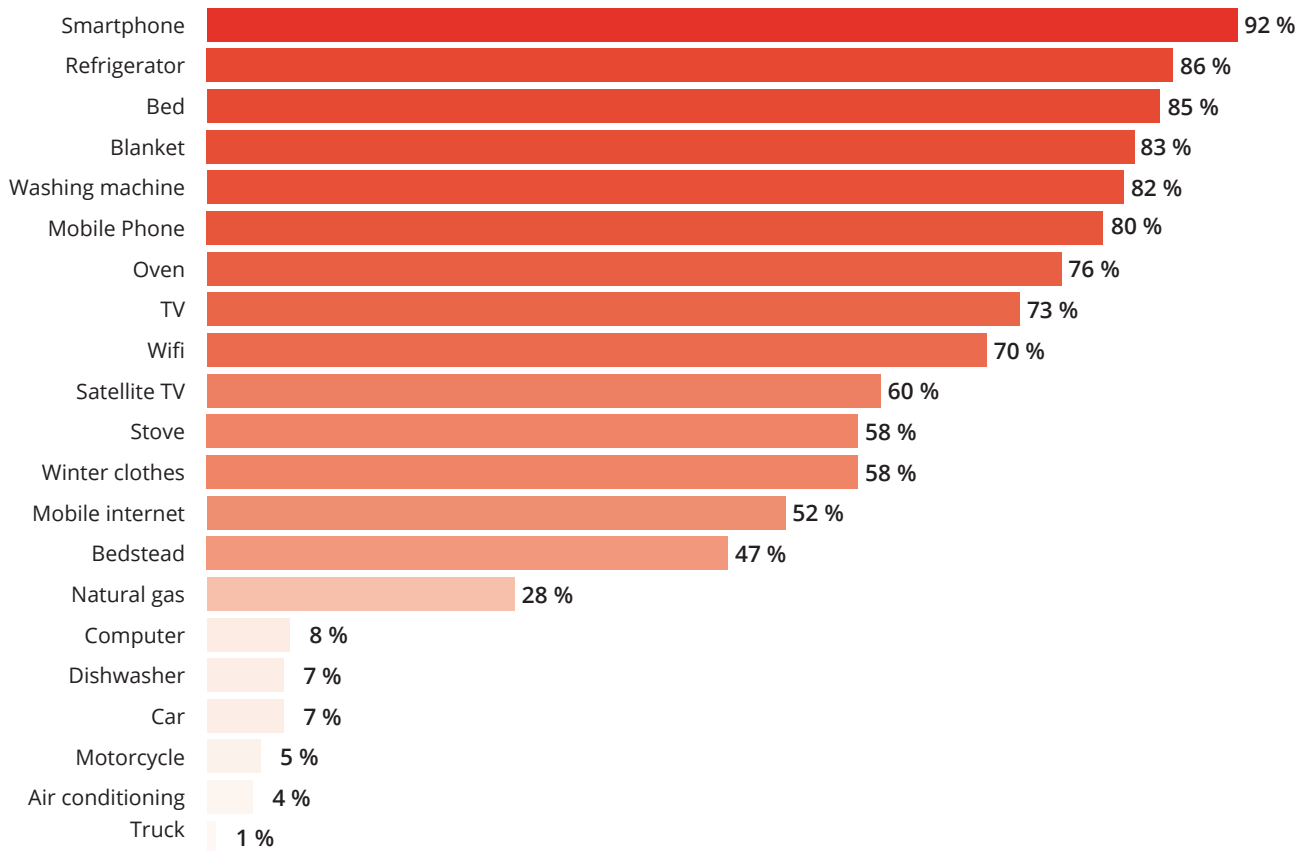
Smartphones, refrigerators, beds and blankets are the most common items owned by both eligible and ineligible groups.

The least common items owned by households are truck, air conditioning, motorcycle, car, dishwasher and computer. On average, ineligible households own more of those items than eligible households, suggesting better living standards. Nearly half of the owners of a mobile phone and smart phone do not have mobile internet.

Car ownership is reported by only 7% of the households, mostly by ineligibles. 15% of the households with a salary greater than 3000 TL own a car (nearly three time the monthly income of the median eligible household) while only 5% of the households with a monthly income below 3000 TL owns one.

The overall level of deprivation is similar across regions, indicating homogeneity across the country. Southeast Anatolia and West Marmara and Aegean have slightly higher level of deprivations than the rest of the country. Significant differences in asset ownership can be found between regions for specific items such as satellite TV, winter clothes, stove, mobile internet, bedstead and natural gas. As mentioned above in the education section, the lack of a computer (only 8% of households report owning at least one) and WIFI (30% do not access house internet, up to 35 and 40% in Mediterranean and Southeast Anatolia regions) influences the attendance level to online courses.

Figure 18. Household durable goods ownership

Item	%
Smartphone	92 %
Refrigerator	86 %
Bed	85 %
Blanket	83 %
Washing machine	82 %
Mobile Phone	80 %
Oven	76 %
TV	73 %
Wifi	70 %
Satellite TV	60 %
Stove	58 %
Winter clothes	58 %
Mobile internet	52 %
Bedstead	47 %
Natural gas	28 %
Computer	8 %
Dishwasher	7 %
Car	7 %
Motorcycle	5 %
Air conditioning	4 %
Truck	1 %

Figure 19. Household durable goods ownership by regions

	Smartphone	Refrigerator	Bed	Blanket	Washing machine	Mobile Phone	Oven	Wifi	TV	Winter Clothes	Satellite TV	Stove	Mobile Internet	Bedstead	Natural gas	Computer	Dishwasher	Car	Motorcycle	Air conditioning	Truck
Blacksea and Eastern Anatolia	93%	86%	90%	85%	82%	83%	86%	75%	73%	64%	65%	56%	51%	57%	42%	8%	7%	5%	4%	2%	1%
East Marmara Region	94%	92%	87%	86%	86%	80%	87%	81%	73%	66%	53%	45%	54%	64%	56%	10%	7%	7%	4%	2%	1%
Istanbul Region	93%	85%	89%	78%	84%	63%	85%	87%	67%	58%	49%	25%	47%	64%	71%	12%	10%	5%	1%	3%	0%
Mediterranean Region	92%	86%	87%	87%	84%	87%	79%	65%	75%	62%	62%	72%	51%	44%	8%	7%	6%	9%	9%	7%	2%
Southeast Anatolia Region	91%	85%	80%	80%	78%	78%	63%	60%	78%	50%	70%	62%	54%	28%	13%	6%	7%	7%	4%	6%	0%
West and Central Anatolia	93%	87%	85%	82%	83%	83%	78%	72%	67%	55%	56%	61%	55%	55%	37%	7%	7%	5%	4%	1%	1%
West Marmara and Aegean	94%	87%	87%	85%	80%	85%	81%	70%	65%	63%	53%	68%	50%	53%	14%	7%	5%	6%	5%	3%	1%
Total	92%	86%	85%	83%	82%	80%	76%	70%	73%	58%	60%	58%	52%	47%	28%	8%	7%	7%	5%	4%	1%

Households who have recently arrived in Turkey (in the last 5 years) tend to own fewer durable goods than households who have arrived earlier.

DEBT BURDEN

The median level of debts has increased by at least two-thirds since the beginning of the COVID-19 pandemic and is especially high for ineligible households. The highest level of debts is found in Istanbul, the Mediterranean and the East Marmara regions. 43% of households have a debt greater than two months of salaries.
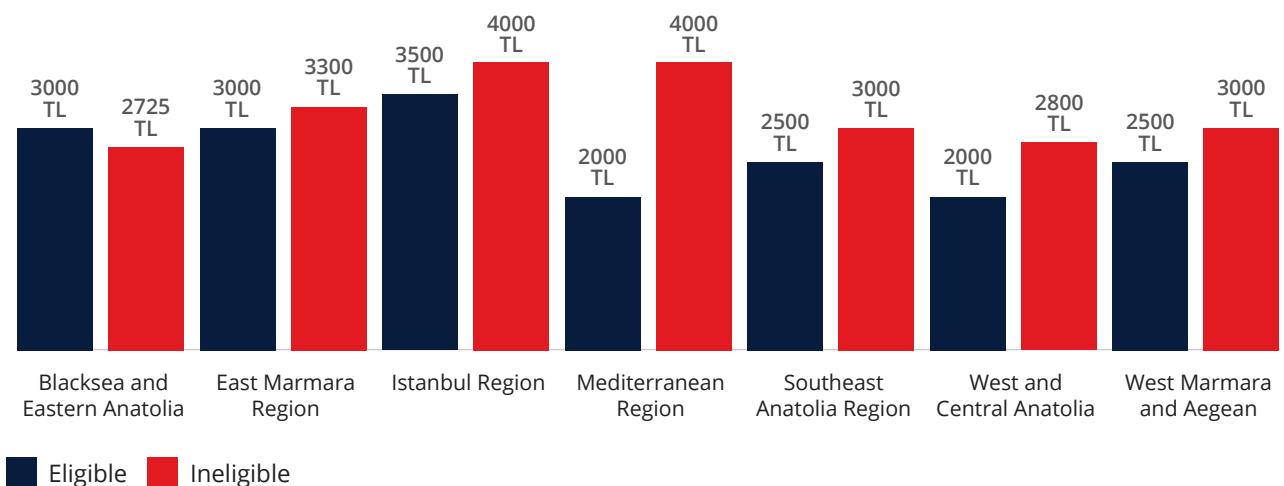
75% of the households report having debt. Black Sea and Eastern Anatolia is the region with the least percentage of households with debt (65%) and Southeast Anatolia Region report the highest percentage of households with debt (78%).

The median debt (calculated excluding households without debt) is 2,600 TL for eligible households compared to 3,000 TL for ineligible households, showing they are contracting higher debts to cope with the current conditions. The debt level of eligible households is lower than the debt of ineligible households in almost every region surveyed. The most significant difference can be found in the Mediterranean region where eligible households have 2,000 TL median debt and ineligible household twice more.
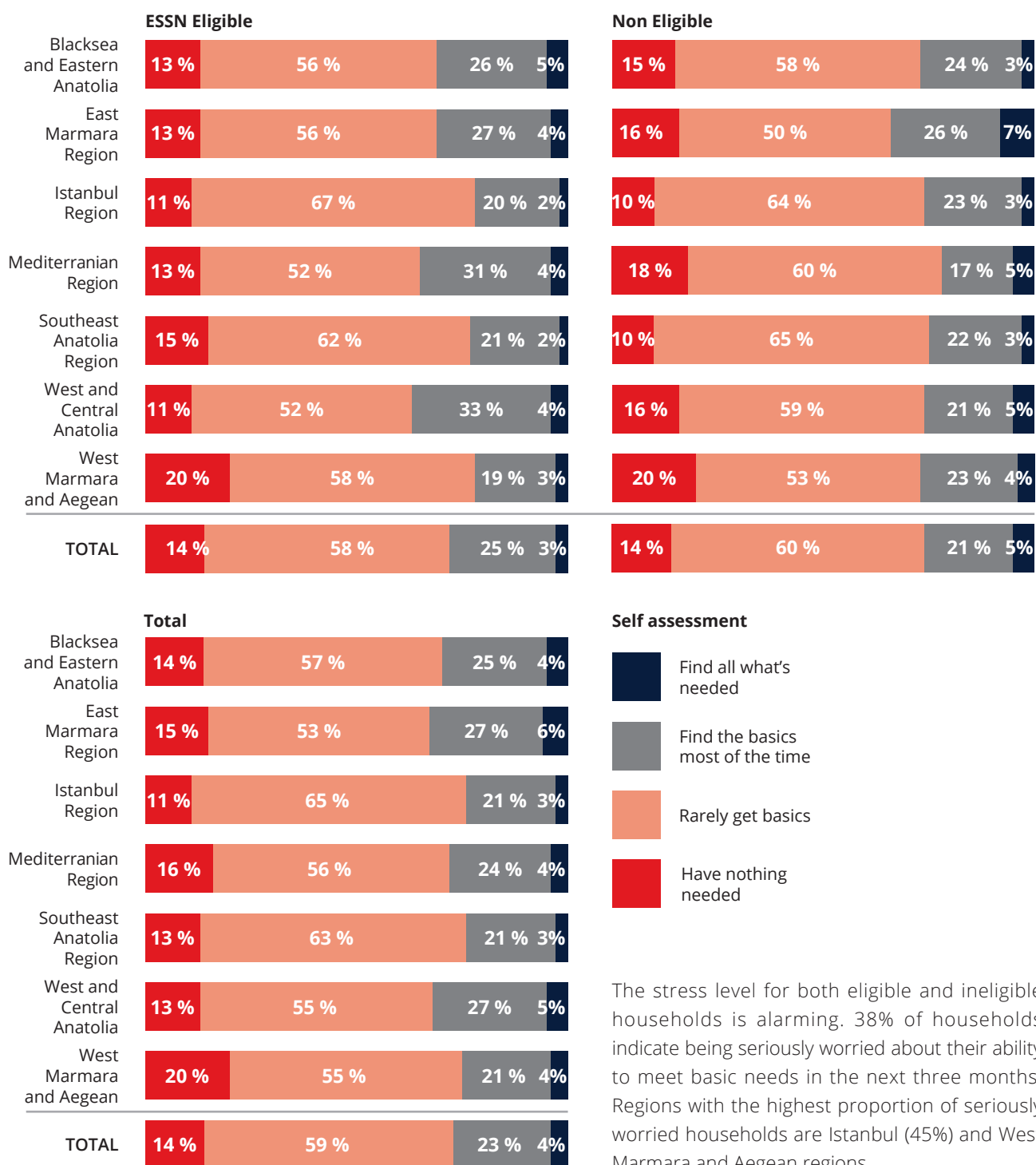
Figure 20. Median households' debt

Median debt (Overall)
Median debt (Square root scale)
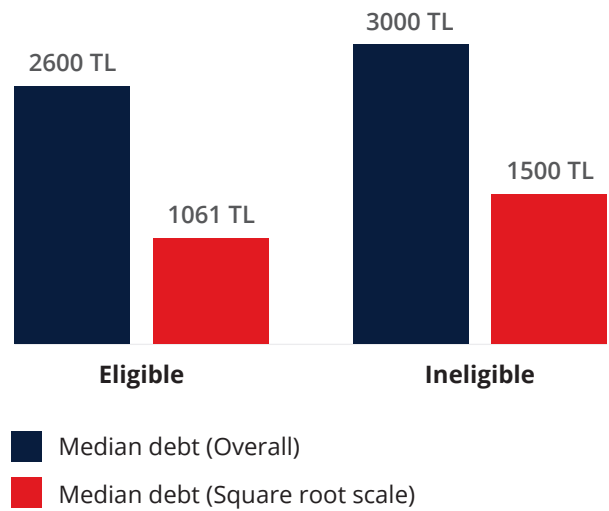
Figure 21. Median household debt by eligibility status and region

Eligible   Ineligible

Figure 22. Percentage of households with debt greater than monthly income

34%	Debt/Income is between **0-1**
23%	Debt/Income is between **1-2**
43%	Debt/Income is **greater than 2**
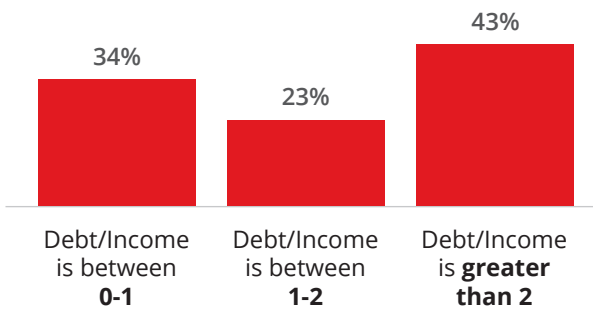
66% of households have a debt greater than one month of their income and 43% greater than two months of income.

Comparison of debt levels over time using PDM data indicates that the debt level has reached its highest level, since pre COVID-19 levels.

Figure 23. Evolution of median debt between PDM exercises and IVS

Median debt

PDM8: 1800 TL / 1500 TL
PDM10: 2200 TL / 2000 TL
PDM11: 2300 TL / 1900 TL
IVS: 3000 TL / 2600 TL

Median debt (Square Root Scale)

PDM8: 850 TL / 612 TL
PDM10: 1000 TL / 756 TL
PDM11: 1118 TL / 735 TL
IVS: 1500 TL / 1061 TL

■ Ineligible   ■ Eligible
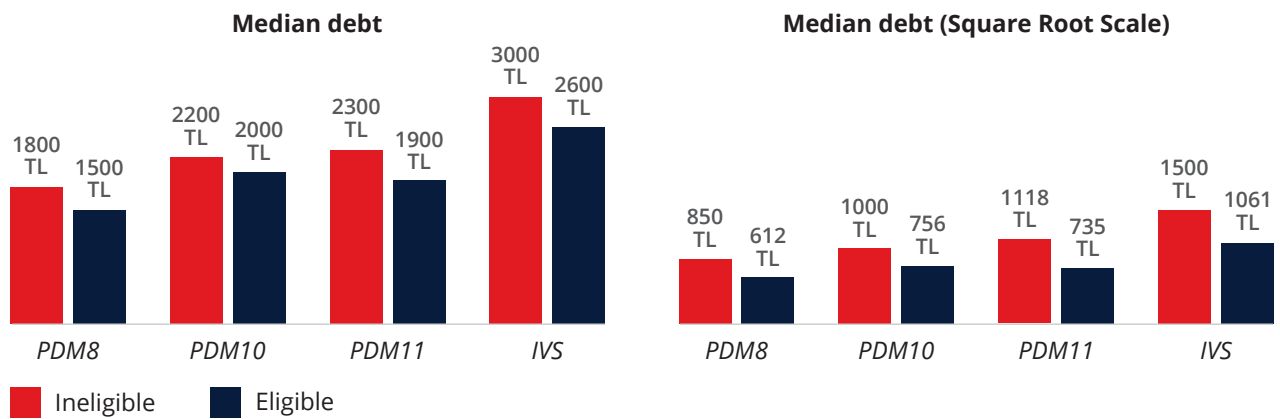
LIVING STANDARDS (ABILITY TO MEET BASIC NEEDS)

ABILITY TO MEET BASIC NEEDS: Across the country, 14% of households interviewed report not being able to meet their most basic needs and 59% they can rarely get the basics. Even more alarming is the proportion of households who absolutely cannot or can barely afford essential needs such as food (72%), shelter (66%) and electricity (72%). Medical and health expenses are the most accessible and affordable basic needs, due to free access to the health system.

75% of the households report having debt. Black Sea and Eastern Anatolia is the region with the least percentage of households with debt (65%) and Southeast Anatolia Region report the highest percentage of households with debt (78%).

The median debt (calculated excluding households without debt) is 2,600 TL for eligible households compared to 3,000 TL for ineligible households, showing they are contracting higher debts to cope with the current conditions. The debt level of eligible households is lower than the debt of ineligible households in almost every region surveyed. The most significant difference can be found in the Mediterranean region where eligible households have 2,000 TL median debt and ineligible household twice more.

A large portion of ESSN eligible and ineligible refugee households cannot afford or can barely afford basic household items, communication costs, kitchenware, drinking water and education costs. Health services and medical expenses are the most met basic needs with transport and sanitation.

Figure 24. Ability to meet basic needs (by basic goods and services)

Category	Absolutely cannot afford	Can barely afford enough	Can meet and afford needs	Largely meet needs
HH items	66 %	21 %	8 %	5 %
Communication cost	53 %	30 %	10 %	7 %
Kitchen ware	45 %	31 %	12 %	12 %
Drinking water	38 %	21 %	17%	23%
Education	34 %	30 %	11 %	25 %
School items	31 %	35 %	11 %	23 %
Health services	21 %	21 %	16 %	41 %
Communication services	20 %	50 %	16 %	14 %
Medical	20 %	24 %	18 %	39 %
Transportation	17 %	37 %	21 %	25 %
Electricity or natural gas	16 %	56 %	15 %	13 %
Shelter	14 %	52 %	15 %	18 %
Sanitation	13 %	47 %	17 %	23 %
Food stuffs	11 %	61 %	18 %	10 %
Hygiene	10 %	54 %	20 %	17 %

Legend:
- Largely meet needs
- Can meet and afford needs
- Can barely afford enough
- Absolutely cannot afford

Food, shelter and electricity are of particular concern as more than 65% report not being able or barely able to meet those essential needs. Eligible and ineligible household results show similar patterns in terms of ability to meet basic needs, demonstrating identical pressure levels. This suggests that the ESSN assistance (used as primary source of income by the eligible population) function as an important financial buffer for eligible households, without which their ability to meet basic needs would be severely impacted. Those challenges are also confirmed by the household's living standard's self-assessment, indicating that 14% of households are totally unable to meet their basic needs and nearly 60% can rarely access the basics. Regions with the highest percentage of households facing difficulties are in West Marmara and Aegean, Southeast Anatolia, the Mediterranean and the Black Sea and Eastern Anatolia regions. Istanbul households report also the highest level of stress, with 65% of households being rarely able to meet their basic needs.

Figure 25. Ability to meet basic needs (self-assessment across all basic goods and services)

ESSN Eligible

Region	Have nothing needed	Rarely get basics	Find the basics most of the time	Find all what's needed
Blacksea and Eastern Anatolia	13 %	56 %	26 %	5%
East Marmara Region	13 %	56 %	27 %	4%
Istanbul Region	11 %	67 %	20 %	2%
Mediterranian Region	13 %	52 %	31 %	4%
Southeast Anatolia Region	15 %	62 %	21 %	2%
West and Central Anatolia	11 %	52 %	33 %	4%
West Marmara and Aegean	20 %	58 %	19 %	3%
TOTAL	14 %	58 %	25 %	3%

Non Eligible

Region	Have nothing needed	Rarely get basics	Find the basics most of the time	Find all what's needed
Blacksea and Eastern Anatolia	15 %	58 %	24 %	3%
East Marmara Region	16 %	50 %	26 %	7%
Istanbul Region	10 %	64 %	23 %	3%
Mediterranian Region	18 %	60 %	17 %	5%
Southeast Anatolia Region	10 %	65 %	22 %	3%
West and Central Anatolia	16 %	59 %	21 %	5%
West Marmara and Aegean	20 %	53 %	23 %	4%
TOTAL	14 %	60 %	21 %	5%

Total

Region	Have nothing needed	Rarely get basics	Find the basics most of the time	Find all what's needed
Blacksea and Eastern Anatolia	14 %	57 %	25 %	4%
East Marmara Region	15 %	53 %	27 %	6%
Istanbul Region	11 %	65 %	21 %	3%
Mediterranian Region	16 %	56 %	24 %	4%
Southeast Anatolia Region	13 %	63 %	21 %	3%
West and Central Anatolia	13 %	55 %	27 %	5%
West Marmara and Aegean	20 %	55 %	21 %	4%
TOTAL	14 %	59 %	23 %	4%

Self assessment

- Find all what's needed
- Find the basics most of the time
- Rarely get basics
- Have nothing needed

The stress level for both eligible and ineligible households is alarming. 38% of households indicate being seriously worried about their ability to meet basic needs in the next three months. Regions with the highest proportion of seriously worried households are Istanbul (45%) and West Marmara and Aegean regions.

Figure 26. Median monthly expenditure per household

	Eligible	Ineligible
Median Expenditure (Overall)	2500 TL	2560 TL
Median Expenditure (Square root scale)	1015 TL	1188 TL

■ Median Expenditure (Overall)   ■ Median Expenditure (Square root scale)
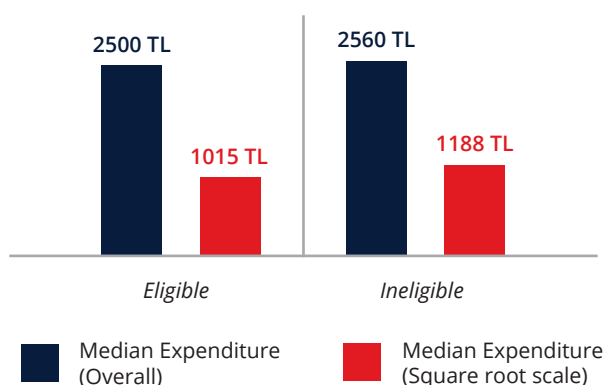
The median monthly expenditure for eligible households is 2500 TL. For ineligible households, median expenditure is nearly similar at around 2560 TL. While Income and debt levels are significantly different between eligible and ineligibles, the ESSN assistance received by the eligible population allow nearly similar expenses level compared to ineligibles.

Foods, shelter and energy/electricity alone account for 74% of the monthly expenditure. As essential needs, IVS data suggest that households are saving money to cover for those regular expenses to the detriment of other important expenses such as education, communication, household items and drinkable water.

EXPENDITURE LEVEL:
Household expenditures have decreased considerably following the November 2020 COVID-19 restrictions measures and the subsequent decrease in income earning mentioned above. Households have shifted their expenditures to ensure essential and regular needs (food, shelter and electricity) are covered and have sacrificed in the process other important expenses (education, communication, household items costs, etc.). Half of the eligible households have lower expenditures than the Minimum Expenditure Basket value.

Figure 27. Total monthly expenditure by region

Region	Expenditure
Blacksea and Eastern Anatolia	2274 TL
East Marmara Region	2960 TL
Istanbul Region	3215 TL
Mediterranean Region	2355 TL
Southeast Anatolia Region	2380 TL
West and Central Anatolia	2325 TL
West Marmara and Aegan	2580 TL
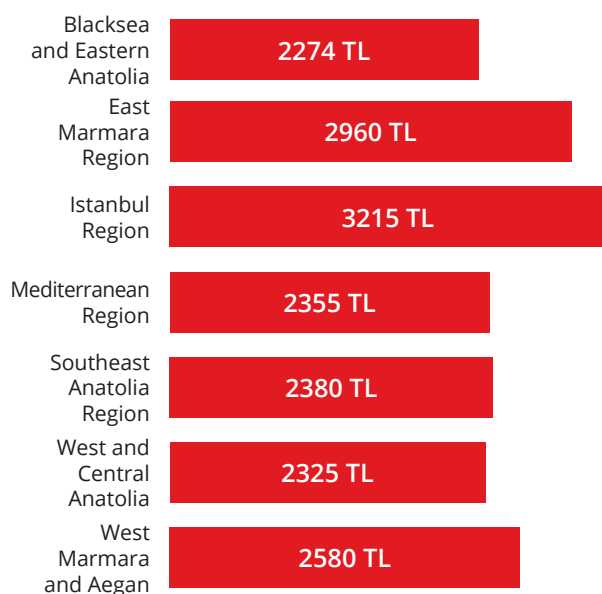
Monthly household expenditure is the highest in Istanbul and East Marmara regions and the lowest in Black Sea and Eastern Anatolia regions.

IVS results show that 35% of ineligible households spend less than the Minimum Expenditure Basket (MEB), compared to 51% of eligible households.

Expenditure levels have varied significantly since COVID-19 started and show similar evolution patterns for both eligible and ineligible population: expenditures increased significantly until end 2020 (following inflation rates) and have decreased considerably since, suggesting households are more careful in their consumption. The decrease in expenditures observed following the November 2020 COVID-19 restrictions measures correlates with the decrease in income levels.

Median monthly expenditure per household

2331 TL 2519 TL 2746 TL 2607 TL 2981 TL 3081 TL 2560 TL 2500 TL

PDM8 PDM10 PDM11 IVS

Median monthly expenditure (Square root scale)

1095 TL 1015 TL 1252 TL 1065 TL 1374 TL 1257 TL 1188 TL 1015 TL

PDM8 PDM10 PDM11 IVS

■ Ineligible   ■ Eligible
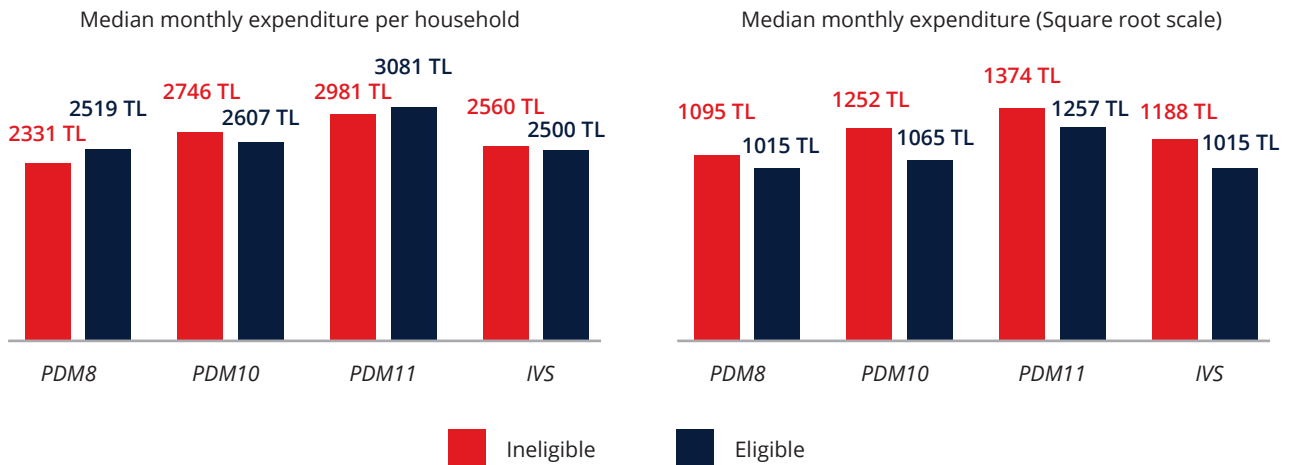
COPING STRATEGIES

> IVS results indicate that the refugee population are recently shifting from livelihood to food based coping strategies. Food is the highest monthly expenditure and households can realize considerable savings by diminishing food costs. Relying on less preferred food and cheaper food is still the most frequently used coping strategies (comparable to pre-COVID-19 period) and reducing the number of meals per day or portion size are increasingly used strategies. Buying food on credit, borrowing money and reducing essential non-food expenditure are the livelihood coping strategies most used by both groups.

REDUCED COPING STRATEGY INDEX (RCSI[7])

The rCSI is at its highest level in over a year for both eligible and ineligible groups, showing that both groups are increasingly relying on food-based consumption coping strategies to meet their daily basic needs.

The use of food coping strategies across regions is significantly different with the highest rCSI score in Black Sea and Eastern Anatolia, Istanbul and West Marmara and Aegean regions. The lowest scores are found in Southeast Anatolia and West and central Anatolia region.

Figure 29. Evolution of mean rCSI between PDM exercises and IVS

10 10,5 12 9,2 11 11,5 13 13,2

PDM8 PDM10 PDM11 IVS

■ Ineligible   ■ Eligible
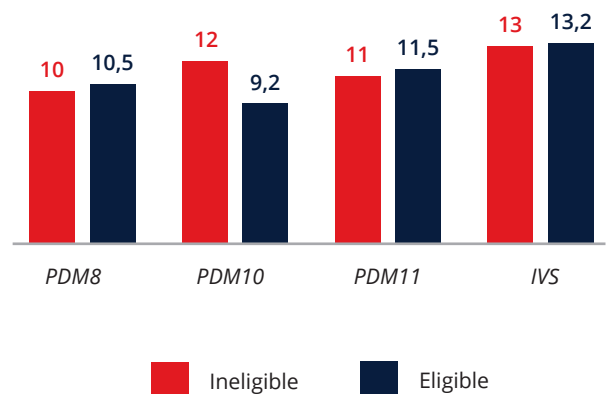
7 • The rCSI is an experience-based indicator measuring the behavior of households over the past seven days when they did not have enough food or money to purchase food.

Figure 30. Mean rCSI by regions

Blacksea and Eastern Anatolia	Istanbul Region	West Marmara and Aegean	East Marmara Region	Mediterranean Region	Southeast Anatolia Region	West and Central Anatolia
14,5	13,8	13,3	13,1	12,9	12,5	11,8
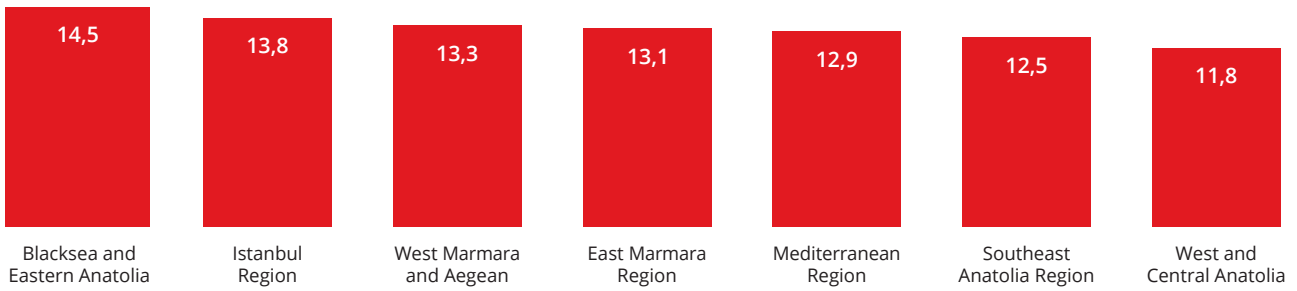
Figure 31. Frequency of use of food based coping strategies between PDM exercises and IVS (% of households)

Legend: PDM 8 | PDM10 | PDM11 | IVS

	PDM 8	PDM10	PDM11	IVS
Rely on less preferred, cheaper food	82%	81%	76%	79%
Borrow food or money to buy food	18%	20%	18%	17%
Reduce number of meals eaten per day	37%	38%	44%	44%
Reduce portion size of meals	32%	37%	39%	39%
Reduce consumption of adults so children can eat	20%	39%	44%	35%
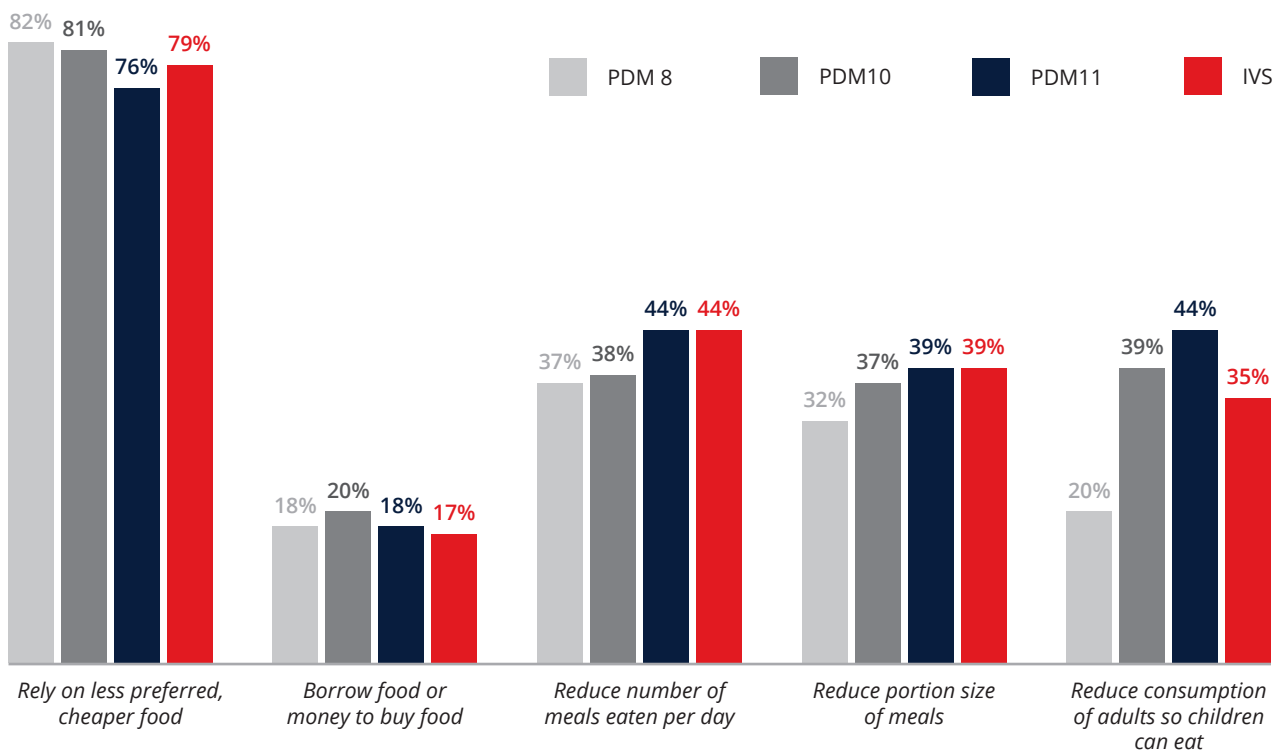
Relying on less preferred and cheaper food is the most frequent food related coping strategy, currently used by more than 79% of the households and increasingly used in the last few months. The proportion of households reducing their number of meals (44%) and the portion size of meals (39%) has also slightly increased over the last year. Reducing consumption of adults so children can eat has been a strategy widely used during 2020 (from 20% of households in 2019 up to 44% end 2020) but seems now to be on the decline to favor relying on less preferred and cheaper food. The proportion of households borrowing money to buy food seems to slightly decrease over the last year, from 20% of households in PDM 10 compared to 17% in IVS.

LIVELIHOOD COPING STRATEGY INDEX[8]

The severity of livelihood coping strategies is currently higher for eligible households and slightly decreasing compared to previous PDM measurements.

Buying food on credit, borrowing money and reducing essential non food expenditure are the coping strategies most used by both groups. Across regions, the frequency of use of the different livelihood coping strategies are similar.

Comparison with previous PDM measurements show that the sharpest increase in livelihood coping strategies in the last year has been on spending savings, with less than 10% of households using this strategy end 2019 up to 26% currently.

Figure 32. Evolution of mean LCSI between PDM exercises and IVS
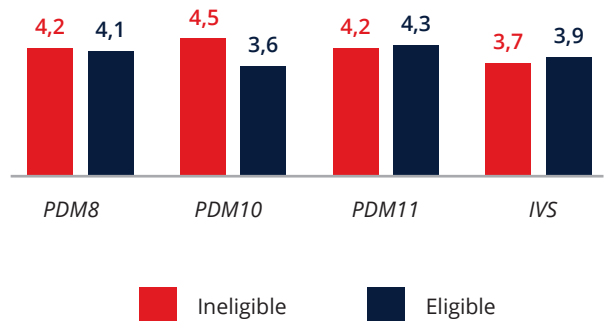
Figure 33. Most frequently used livelihood coping strategies
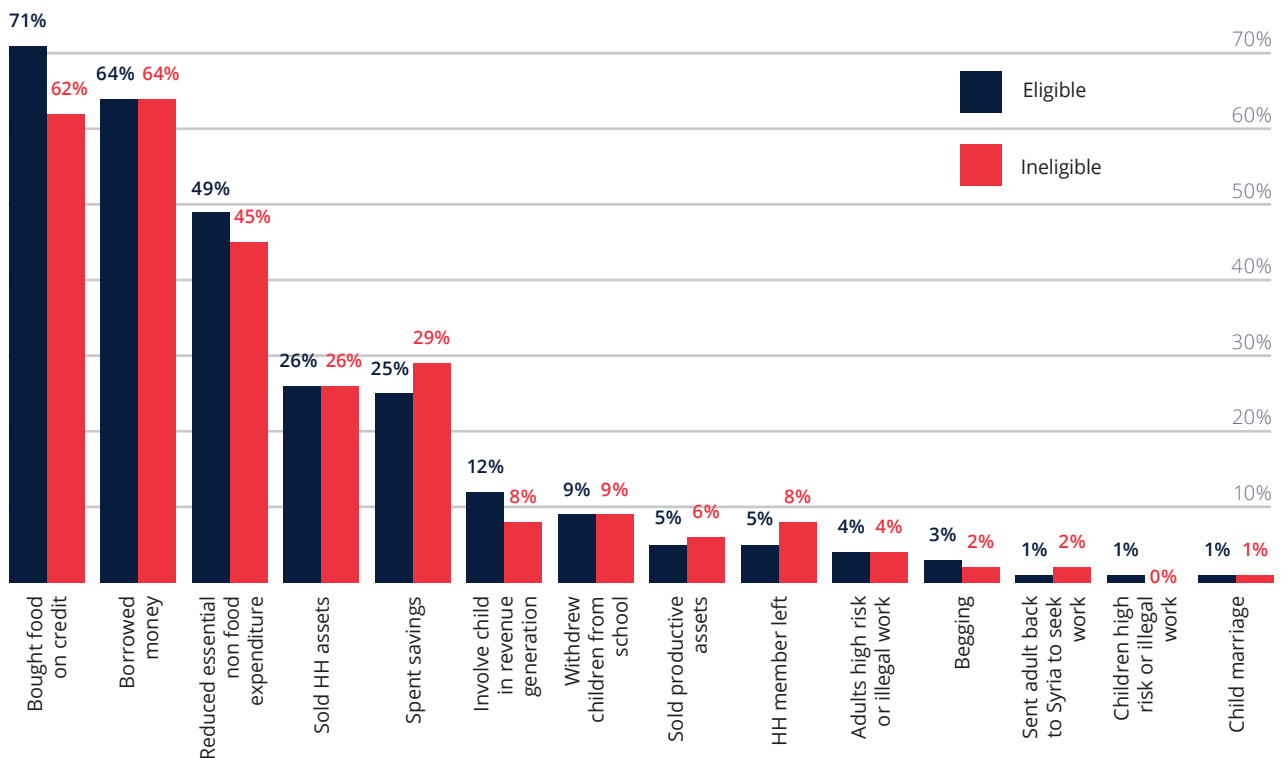
Since end of 2020, a sharp increase is also reported in borrowing money from 53% to 64% of households, which correspond to previous IVS findings on level of debt. The most widely used (nearly 67% of the households) and steady strategy is to buy food on credit. Withdrawing children from schools, selling productive assets and begging are not widely used mechanisms but are on a slow increase over the last 12 months.

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8 • The Livelihood coping strategies index is an indicator to measure the extent of livelihood coping households need to utilize as a response to lack of food or money to purchase food.

When requested to categorize their ability to cope with the current situation, 7% of households reported having no more avenues to cope. Resource exhaustion level is generally higher for ineligibles recipients (26% for ineligible vs 21% for eligible). 41% of the ESSN recipients report making sacrifices to cope with the current situation against 31% for ineligible population. Self-coping assessment scores are strongly correlated with the results of the rCSI.

Households with higher asset ownership tend to have lower coping scores. Surprisingly and despite the fact that borrowing money is a coping mechanism reported by 64% of households, there is no strong correlation between the level of debt and coping scores. rCSI has a weak negative correlation with income while LCSI shows no correlation at all with the level of income. No strong relation was found between food expenditure and rCSI while normally, these two variables should correlate (or at least have a weak correlation). Further qualitative research is required to understand better the recent household financial and coping strategy dynamics.

PHYSICAL AND MENTAL WELL-BEING

16% of households include at least one member with severe physical difficulties and 22% report at least one member with some difficulties, increasing the burden on other households members. In addition, signs of psychological distress are reported in 32% of the households, and more frequently for ineligible adults and eligible children. Common health issues such as dental problems are reported by half the households interviewed, suggesting that families are delaying visit to the dentist for economic reasons or fear of COVID-19 infections. Overall, 16% report a serious deterioration of their health status.

Figure 34. Most frequently reported health issues

	Eligible	Ineligible
Dental	47%	50%
Eye	30%	29%
Non communicable diseases	30%	25%
Acute respiratory problems	25%	26%
Fever	20%	24%
Skin	14%	17%
Other	15%	14%
Gynecological	14%	13%
Asthma	12%	13%
Ear	11%	10%
Diarrhea	8%	10%
Injury	7%	8%
Pregnancy	5%	5%

■ Eligible   ■ Ineligible
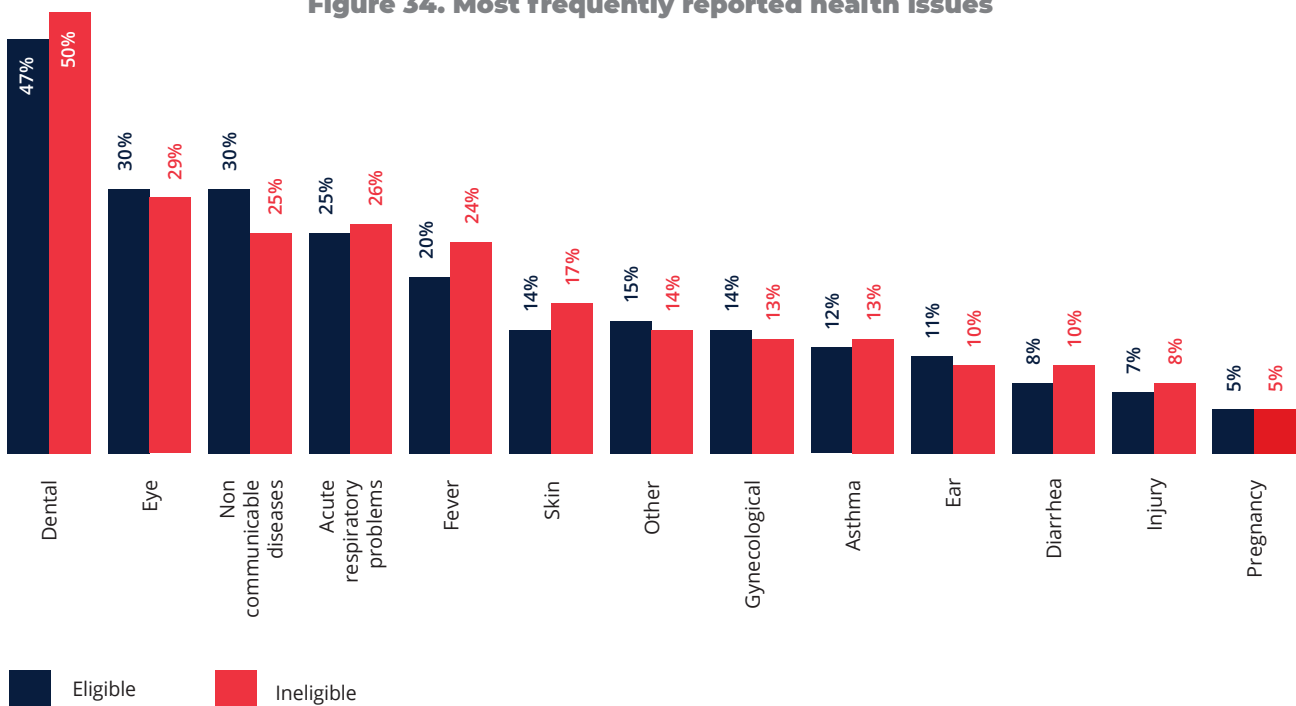
Dental problems are the health issue most reported by eligible and non- eligible groups (half of them), most likely due to the cost of dental care. The next most frequently reported health issues are eye infection (30%), non-communicable diseases and acute respiratory problems. 5% of households include a pregnant women. In addition, 6% of the population surveyed is reported chronically ill without medical report, and 4% with a medical report.

The overall proportion of disabled people in the eligible population is higher compared to the ineligible. For an unknown reason, the proportion of disabled women is higher in both groups.

Figure 35. Percentage of disable persons in the overall refugee population
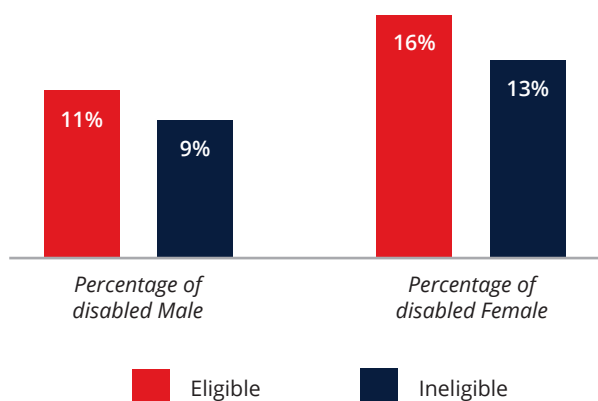
Figure 36. Percentage of households with at least one member suffering from some or severe physical difficulties
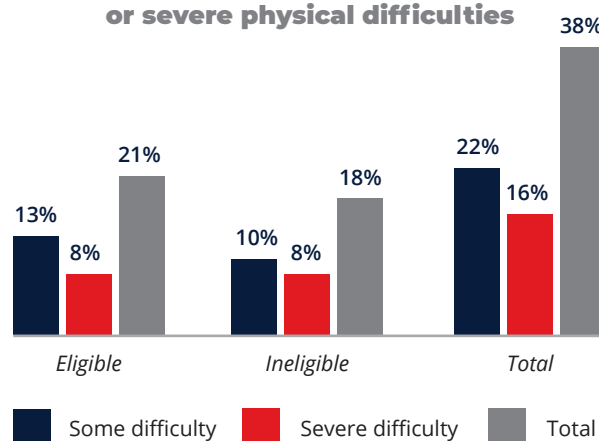
Figure 37. Percentage of people with psychological or distress symptoms
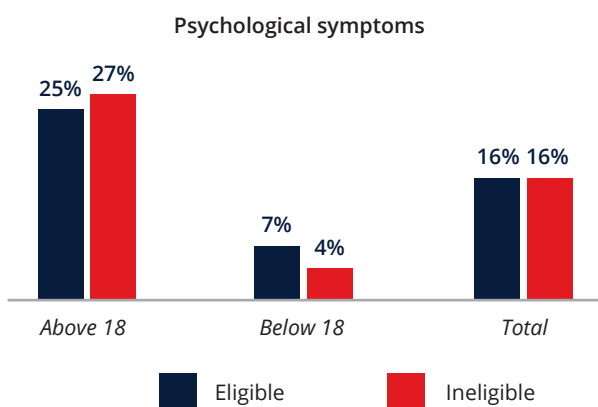
In 38% of the households, there is at least one person who is experiencing some or severe physical difficulties. 16% include at least one member with severe physical difficulties (have a lot of difficulties carrying daily activities, or cannot at all). The proportion of eligible households with members who have a disability (21%) is slightly higher than for the ineligible (18%), probably due to ESSN selection criteria favoring households with higher dependency ratio (eligible households are more likely to include elders, in turn more likely to suffer from disabilities).

In 32% of the households, there is at least one household member showing psychological or distress symptoms (16% are adults and 15% are children). Ineligible households have a higher number of adults with psychological symptoms (27% reported having at least one adult member showing psychological or distress symptoms), while eligible households have a higher number of children with psychological or distress symptoms (7 %).

16% of the households reported their general physical and mental well-being conditions have seriously deteriorated and requiring immediate medical attention. On the other side, 31% of households report having no health issues in their family.

PRIORITY NEEDS

Across the seven assessed regions and both eligible and ineligible groups, shelter, energy and food were overwhelmingly identified as priority needs.

This is logical as together, those three items' expenditures account for 74% of the household monthly budget. Communication, transport and safe water needs are the least prioritized needs.

Subsequent priorities expressed by the refugees differ considerably between groups and regions. The ESSN eligible population prioritized household furniture's (especially in Istanbul and Southeast Anatolia), education, healthcare and sanitation. Ineligible households prioritized sanitation, healthcare, education and household furniture's.

When requested which type of assistance would support best the households in meeting their current needs (without mentioning what options are available), the response was overwhelmingly cash assistance.

Figure 38. Priority needs as expressed by the refugee population[9]

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9 • Darker color indicates higher priority level expressed by respondents

4. RECOMMENDATIONS FOR FURTHER RESEARCH

As mentioned above, the number of questions included in the IVS questionnaire were reduced to adapt to COVID-19 restrictions and the recommended maximum time for remote based surveys. The main consequence was to refocus the survey on those indicators critical to calculate the severity of humanitarian conditions and sacrifice indicators or approaches allowing to contextualise better findings and understand the main contributing factors. The following recommendations are based on information gaps identified during IVS analysis and should be considered to modify the design of the next IVS round or for more in-depth assessments.

Figure 39. Main Information needs and recommendations for next round of IVS.

Topic	Analysis framework Pillar	
Push and pull factors	Displacement	20% of households have relocated more than four times in Turkey. Asking specific questions on push and pull factors will allow to better understand the drivers and conditions for local integration
Social tensions	Displacement	For households reporting verbal or physical aggression, add a question on main reasons and motives.
Professional sector	Impact on people	Some economic sectors have been more impacted than others by COVID-19, e.g. tourism. IVS only asked questions on professional level. This should be complemented by a question on the professional sector of the main income earner, e.g. farming, industry, tourism, etc. See the Income and Living conditions survey 2019 classification of economic activities for reference.
Income	Impact on people	Add a question on regular vs irregular income and formal vs informal labour
Attendance level	Impact on people	34% of households reported that at least one of their school aged children do not attend the online curriculum. It is important to understand better the age of the children / school level and their activities and correlate with psychological distress
Debt	Impact on people	75% of households report having debt. Understanding the type of debt (relatives, bank loan, etc.) and the capacity / timeframe to reimburse is important
Asset ownership	Living standards	Understanding how asset ownership differs from the Turkish population would allow for better comparison between residents and refugee population.
Ability to meet basic needs / coping mechanisms	Living standards/ Coping mechanisms	Focus group discussions (if COVID-19 restrictions allow) in each region with male and female respondents to discuss the expenditures and coping strategies dynamics in the households as well as ensure a gender approach. This would allow to better contextualize IVS findings.
Coping mechanisms	Physical and mental well-being	Add a question to next IVS round to determine the proportion of households who have delayed a visit to the doctor/health centre and the reasons why (fear of COVID-19 contagion, lack of financial resources, queue, etc.
Psychological well-being	Physical and mental well-being	Identify a more robust psychological distress measurement scale

5. OPERATIONAL RECOMMENDATIONS

1 • According to the severity of humanitarian conditions, households that are especially in moderate and severe classes are a group of interest for the programme in terms of humanitarian conditions. Even as the rest of the severity classes seem better than them, that does not necessarily mean that they are in better shape in terms of socio-economic conditions. Therefore, in addition to ongoing regular assistance, it is highly recommended to consider multiple cycles of additional payments as a recovery package for this target group.

2 • While the eligible population currently shows the highest proportion of people in need, the ESSN assistance functions as an important financial buffer. In the scenario of ongoing restrictions or challenges in income-generating activities due to the pandemic, it is expected that the vulnerability of both eligible and ineligible groups will deteriorate. The current estimation shows that the proportion of ineligible in need would be equal to the proportion of eligible in need. Thus, it is essential to focus on the ineligible group more in order to increase the coverage of the ESSN so that the assistance could alleviate the severity of humanitarian conditions of people who are not benefitting from the programme just because of not meeting the ESSN criteria.

3 • Comparatively, the conditions of ineligible households are expected to deteriorate faster in the coming months. Based on further in-depth analysis on the vulnerability of ineligible groups, it is recommended to explore additional support options both through the ESSN (i.e. promoting higher usage of the SASF allowance or adapting the targeting criteria) as well as through linkages with other assistance programmes.

4 • According to the survey results, households are sacrificing other important needs to meet their food, housing/shelter, and energy-related expenses. After clearly determining the seasonality of these needs, it is suggested to increase the coordination and collaboration with other NGOs to make them give any possible opportunities for the target group by providing them additional assistance which can continue in a certain period of time. It is also crucial to advocate with other project implementers - especially ones working in the education and health sector - to increase their coverage in the field by reaching out to households as much as possible with the aim of enhancing more inclusion in their programmes.

5 • According to the study, the severity of conditions faced by refugees is linked to the income-earning capacity of refugee households and to the number of dependents. Families living in Turkey for more than three years and those with members with a better command of the Turkish language generally find more income earning opportunities and face less severe humanitarian conditions. Taking into consideration that the percentage of household members reported as being proficient or fluent in Turkish has remained relatively low; referrals to language courses as well as to other livelihood activities should be prioritized. The 3RP Task Team on Livelihoods Referrals and Transition to Employment, which is co-chaired by TRC, can provide an important forum to enhance such referrals, including with the private sector.

6 • Considering the geographical dynamics, socio-economic differences, variety of population density, refugee movement across the country and such other factors need to be taken into account in understanding the level of severity of humanitarian conditions. In other words, together with the socio-economic indicators that serve as a proxy to see their conditions, their environment should be well-understood in interpreting any survey results. As a result, more comprehensive and dedicated studies should be conducted in specific areas to support the current quantitative data.

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ANNEX 1 – METHODOLOGY

The below table describes the activities and tools used at each step of the Intersectoral Vulnerability Survey.
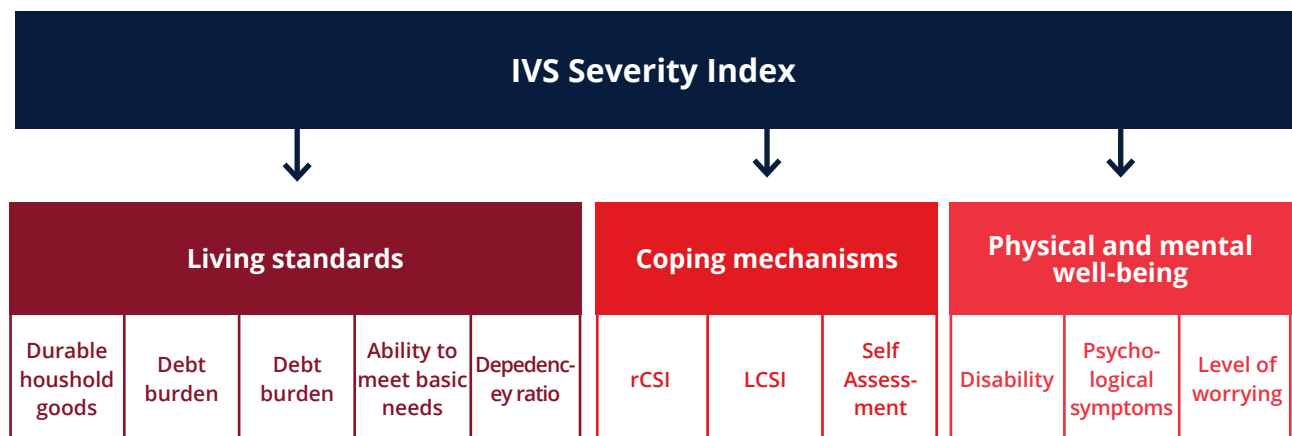
Figure 40. IVS Methodology

	March 2020	Aug 2020 – Feb 2021	8 - 18 March 2021	22 – 26 March 2021	DD/MM – DD/MM
Main IVS activities	Definition of objectives and scope	Secondary Data review	Exploratory data analysis	Descriptive analysis	Report & Graphs, tables and maps
	Joint design of Analysis Framework, analysis and data collection plan	Stratification and sampling methodology	Key indicators and IVS severity index calculations	Explanatory analysis	Technical notes, documentation of data and methods
	Severity score aggregation options and methods	Enumerators training (30) and phone surveys (4522 HHs) in seven regions	Information gaps identification	Interpretive analysis (joint analysis workshop)	Confidence, uncertainty, consistency and plausibility check
	Data collection scenario	Data cleaning (Feb 2021)	Patterns identification, outliers and inconsistencies	Recommendations for further field data collection	Safe storage and archiving
		Data protection and anonymization	Preliminary results	Joint analysis Workshop	Lessons learnt workshop and improvements action plan
	Design & Planning	**Collection & Collation**	**Exploration & preparation**	**Analysis & sense making**	**Communication & sharing**
Main tools used to support IVS	• Desk review of existing vulnerability framework • Question Bank • Secondary Data review • Scenario exercises • Dissemination plan	• Analysis and data collection plan • DEEP assessment registry • ODK (for primary data) • Python (for data cleaning) • Enumerators debriefing tool • Data collection SOPs • Enumerator Training Package • Change log	• DEEP assessment registry • Python (Jupyter 3.8.8.), SPSS, STATA, Tableau Desktop, R (4.4.2.), Microsoft Excel • Key assumption checklist • Change log	• Python (Jupyter 3.8.8.), SPSS, STATA, Tableau Desktop, R (4.4.2.), Microsoft Excel • Key assumption checklist • Interpretation sheet	• Tableau software • Adobe illustrator and Indesign • Confidentiality protocols • Lessons learnt template
Main outputs	• Analysis Framework • Analysis Plan • Data Collection Plan & questionnaire • Report template	• IVS dataset • SDR repository (quantitative and qualitative data)	• Final IVS dataset and change log • Preliminary assumptions to confirm later	• Interpretation sheets • Information gaps and assumptions lists	• Final IVS report • Lessons learnt action plan • Revised IVS package

ANNEX 2 – IVS SEVERITY INDEX - TECHNICAL NOTE

1. Normal	2. Stress	3. Moderate	4. Severe	5. Critical
• Normal/acceptable living standards • No stressed or negative coping mechanisms adopted • No/low risk of impact on physical/mental wellbeing	• Medium living standards • Adoption of stressed coping mechanisms • Minimal impact on physical/mental wellbeing	• Low living standards • Adoption of negative coping mechanisms • Medium impact on physical/mental wellbeing	• Collapse of living standards • Adoption of crisis and/or irreversible coping mechanisms • High physical/mental wellbeing impact	• Total collapse of living standards • Coping mechanisms exhausted • Extremely high physical/mental wellbeing impact

Total population of interest

Affected population

Population in need

This annex details the process that led from the original variables to the final severity index. The IVS Severity Index is a composite measure that combines subindices of Living Standards (LS), Coping Strategies (CS) and Well-Being (WB). The index builds on 11 indicators, distributed across the three pillars as follows:

Figure 41. IVS severity index structure and indicators

IVS Severity Index											

Living standards					Coping mechanisms			Physical and mental well-being		
Durable houshold goods	Debt burden	Debt burden	Ability to meet basic needs	Depedency ratio	rCSI	LCSI	Self Assessment	Disability	Psychological symptoms	Level of worrying

The IVS severity index output allow to categorize households in five distinct severity classes: Normal, stress, moderate, severe and critical. The following scale, adapted from the Joint intersectoral Analysis Framework, is used to define each severity class.

Households categorized in the categories moderate, severe and critical are considered in need of external assistance.

In order to produce the index, three types of operations were undertaken:

1 Transformations of individual variables into base-level indicators. Transformations were of several types, depending on whether the variable 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 make a bigger contribution to the severity of the household's situation.

2 Aggregation of indicators. For instance, the 21 items composing the durable household goods index were combined using an index-forming function known as "Desai-Shah" method (Desai and Shah 1988).

3 Aggregation into sub-indices. The LS subindex incorporates, besides the affordability and durable items-based deprivation measures, the debt, monthly expenditure and dependency ratio indicators. The aggregation was performed using the mdepriv command (available in Stata and R) with equal weights. The same method was used to calculate the Coping strategy sub index (three indicators). To calculate the Physical and mental wellbeing sub-index (three indicators), the Mdepriv function was also used, but this time correcting for redundancy (modified Desai-Shah items weights by taking into account the correlation between the three indicators). The distribution of this last subindex scores is jagged and not ideal (see the density graph below), but no better aggregation method was found.

4 Aggregation into a final severity score, calculated using the arithmetic mean of the three subindex scores. No weighting scheme was used across sub-indices.
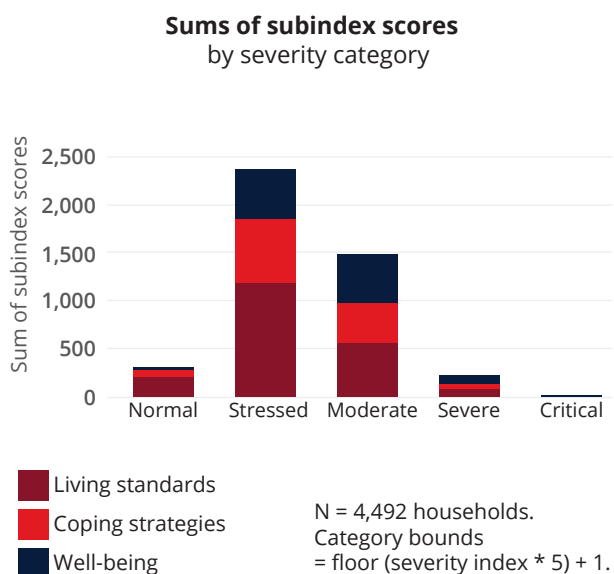
The multiple density estimate graph in figure 42 outlines the distributions of the subindices as well as the final severity index scores.

Figure 42. Kernel density estimates (LS, CM, PMWB and final severity index)

Kernel density estimates
for the pillar subindices and the severity inex
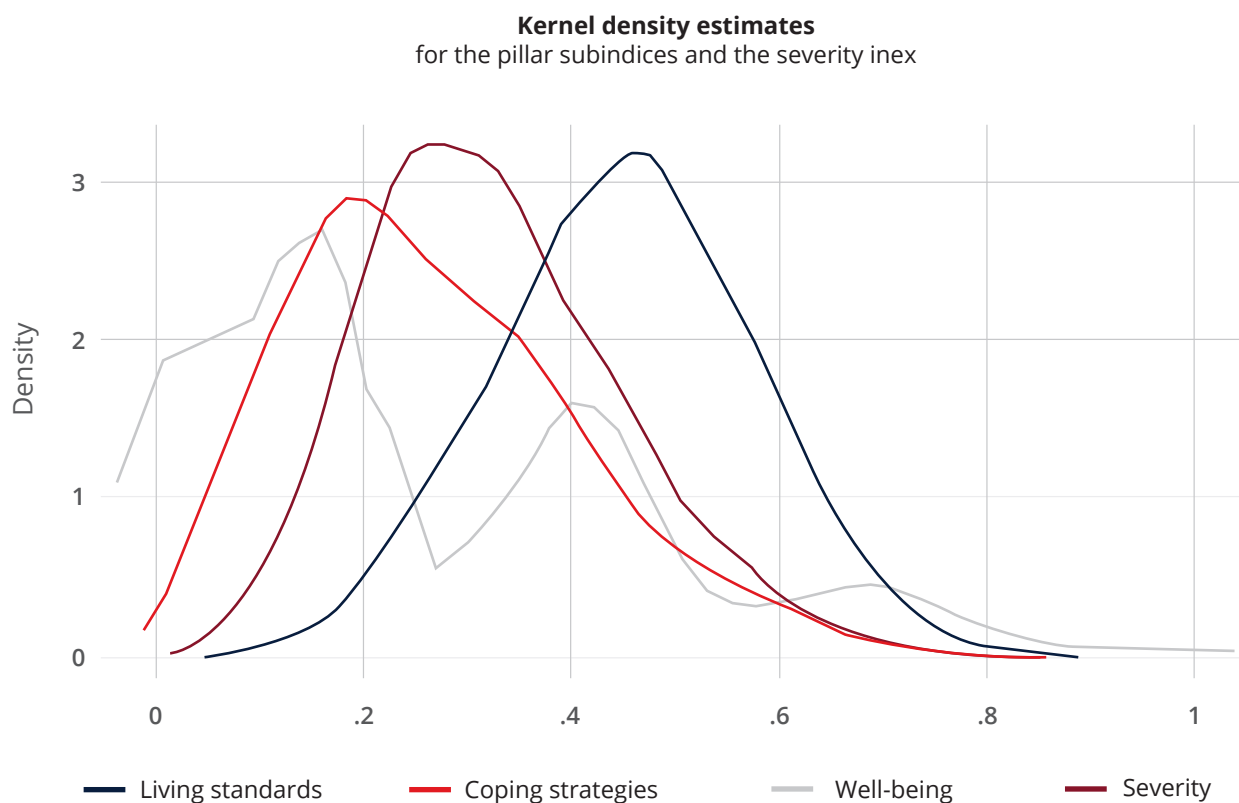
N = 4,492. Kernel = Epanechnikov; bandwidth = 0.0208.

Figure 43. Sum of sub-indices scores (LS, CM, PMWB)

Sums of subindex scores
by severity category

Living standards

Coping strategies

Well-being

N = 4,492 households.
Category bounds
= floor (severity index * 5) + 1.

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These different shapes show that the three sub-indices contribute variable shares to the severity index. This is even more obvious when categorizing the severity index (see figure 43). The shares of the subindex scores vary from normal to severe (the "critical" category is too rare to visualize them), with the Livings Standards share decreasing, and the Well-being share increasing significantly. This is consistent with the philosophy of intersectoral analysis that consider that higher priority should be given to households with compounding issues in Living Standards, Coping Strategies and Physical and Mental Well-Being. However, since the distribution of the Well-being subindex behave strangely (it has three distinct peaks, for which there is no substantive rationale), more efforts are required in better capturing the physical and mental health conditions of the refugee population in future IVS rounds.

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