SAVING LIVES CHANGING LIVES



# **Comprehensive Vulnerability Monitoring Exercise** Round 3



**WFP Turkey Country Office** 

May 2019

#### **Definitions of Terms**

Throughout this paper, a variety of terms are used to refer to different population groups. Below are definitions of all these terms.

**Head of the Household:** This term refers to the 'reference person' in the household independent from the family composition as declared by household members. However, traditionally, most households are headed by male members unless there are no adult males in the household so female adults became the heads of their household.

**Registered:** Individuals who have registered their identification documents with the Directorate General of Migration Management (DGMM), a national institution working under the Ministry of Interior. Registration grants individuals legal stay in Turkey, and provides access to public services and assistance.

**Unregistered:** Individuals who are not currently registered with DGMM, as explained above. These may be people who have never registered with DGMM, or are pending registration (i.e. have submitted their paperwork and are awaiting feedback). These may also be those who were registered in one location, but moved to a new location and have not re-registered.

**International Protection, Temporary Protection, Humanitarian Residence:** Within the scope of Turkish Law on Foreigners and International Protection dated 4 April 2013, there are different status for foreigners seeking refuge within Turkey .Registered individuals within the CVME3 dataset fall under one of these legal statuses.

**Refugee:** None of the registered individuals included in the CVME3 are afforded refugee status by the Government of Turkey. However, for simplicity within this paper, any individual who is under any of the legal status noted above, or planning to seek this status, is referred to as a refugee.

**Non-Applicant:** Individuals who have not applied to the Emergency Social Safety Net programme, regardless of beneficiary status.

**Beneficiary:** Individuals who have applied to the Emergency Social Safety Net programme, and were determined to be eligible.

**Ineligible Applicant:** Individuals who have applied to the Emergency Social Safety Net programme, and were determined to be ineligible.



<sup>1</sup>For more information on registration, particularly for Syrians, refer to: <u>https://help.unhcr.org/turkey/information-for-syrians/reception-andregistration-with-the-turkish-authorities/</u> <sup>ii</sup>For the complete legal definitions, refer to the Republic of Turkey Ministry of Interior Directorate General of Migration Management; Law on Foreigners and International Protection: <u>http://www.goc.gov.tr/files/files/eng\_minikanun\_5\_son.pdf</u>

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Section 1: Introduction

## Introduction

The conflict in Syria has caused massive displacement of people with an estimated 5.6 million Syrians<sup>1</sup> having fled the country since 2011. Turkey hosts the largest refugee population in the world: around 3.6 million Syrian refugees have been registered as of 27 December 2018<sup>2</sup>, in addition to 170,000 Afghans, 142,000 Iraqis and 56,400 from Iran, Somali and other nationalities<sup>3</sup>; a total of 4 million registered refugees. While population figures continue to increase incrementally, 2018 figures are used here to align with the period of data collection.

The Comprehensive Vulnerability Monitoring Exercise 3 (CVME3) falls within the scope of the Emergency Social Safety Net (ESSN). The ESSN is a multi-purpose cash transfer programme aiming to support vulnerable refugees in Turkey meet their basic needs<sup>4</sup>. The ESSN program was launched across Turkey in November 2016. It provides unrestricted, unconditional cash assistance to people living under international or temporary protection and the refugees in Turkey. The ESSN cash assistance aims to allow beneficiaries to meet their basic needs. By May 2019, the ESSN was providing monthly assistance to over 1.6 million people.

The ESSN is funded by the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO). The program is implemented through a partnership of the Ministry of Family Labour and Social Services Ministry of Family and Social Policies (MoFLSS), the World Food Programme (WFP), and the Turkish Red Crescent (TRC) as a complementary program to the national social assistance scheme for Turkish citizens.

The CVME3 is the first vulnerability study representative of refugees across Turkey. The main objective of the CVME3 is to assess the socioeconomic vulnerability of the refugee population in Turkey and estimate the refugees' needs. This report fills an important gap in information, quantifying needs across many sectors including providing some detail on the needs of the unregistered population/irregular migrants. The CVME3 also highlights opportunities and challenges associated with the design of the ESSN programme and proposes a set of actions that can improve the programme. This report provides information which can be used by the ESSN stakeholders and many other humanitarian and development actors across Turkey.

Considering the scale of the refugee population in Turkey and the size of the ESSN, the CVME is a vital tool for programme accountability and performance, providing important evidence around refugee needs. CVME3 uses an improved sample size and dataset, drawing on extensive dialogue and interviews with beneficiaries of the ESSN programme as well as those deemed ineligible and those who have not applied (non-applicant). The combined sample is representative of all refugees living in Turkey, regardless of registration or application status. This information gathering aims to understand the socioeconomic vulnerability across the refugee population, not only of ESSN applicants.

The previous CVMEs (1 and 2) have confirmed the relevance of the ESSN and informed programmatic adjustments. Using CVME data in conjunction with other monitoring information, ESSN organisations have:

- Increased outreach to refugees aiming to benefit from the ESSN and assisted them to overcome the pre-requisites to application (identity registration, address registration, etc.).
- Advocated for solutions enabling refugees living in informal housing and seasonal migrants to acquire formal address registration and consequently apply to the ESSN.
- Increased protection referrals, ensuring that households/individuals in need of services outside the ESSN (such as education, healthcare or legal services) are referred to the appropriate service providers.
- Developed the SASF (Social Assistance and Solidarity Foundations) Discretionary Allowance, a complementary targeting mechanism to include very vulnerable households that do not meet the demographic ESSN criteria into the ESSN.

According to the Turkish law, there are different status for people seeking refuge in Turkey: refugees, those under "temporary protection", those under "international protection", those under "humanitarian residence regime", For simplicity, they will all be referred to as refugees in this report.

<sup>1</sup>UNHCR Operations Portal : Syria Regional Refugee Response, Dec 2018 <u>https://data2.unhcr.org/en/situations/syria</u> <sup>2</sup>DGMM Statistics: <u>http://www.goc.gov.tr/icerik6/temporary-protection\_915\_1024\_4748\_icerik</u> <sup>3</sup>UNHCR Turkey Statistics November 2018: <u>https://www.unhcr.org/tr/en/unhcr-turkey-stats</u> <sup>4</sup>For more information on the ESSN, please refer to: <u>https://www.essncard.com/</u>

Section 2: Methods, Sampling and Limitations

#### **Data Collection**

CVME3 data collection was carried out from March to August 2018 with a one-month break during Ramadan in June/July. A total of 1,301 households were surveyed, comprised of 7,681 individuals, through face-to-face surveys in their homes. The questionnaire was addressed at the household level and included information on refugees' demographics, their arrival to Turkey, living conditions, health, education, income, expenditure, debt, food security, coping strategies, gender, safety and security. All data was collected by trained WFP monitoring assistants, paired together with Turkish Red Crescent monitoring assistants. Data was collected on tablets and uploaded via Open Data Kit.

#### Sampling

In order to reach a representative sample, a two-staged approach has been used: geographic and household. The first stage, relying on geospatial analysis, has allowed the sample to be spatially representative, resulting in a selection of 52 geolocations (25 rural and 27 urban)<sup>5</sup>. Figure 1 displays the 52 data collection locations.

#### Figure 1: CVME3 data collection locations



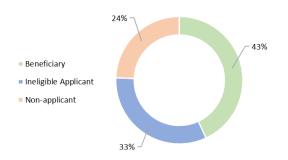
The second stage randomly identified 25 households within each district through the social network theory, using a methodology known as Respondent Driven Sampling, resulting in a minimum sample size of 1,300 households<sup>6</sup>. All households are either under International Protection/Temporary Protection, in the pre-registration phase or planning to seek IP/TP in future. Sampling weights were constructed for both methodologies, resulting in a nationally representative sample. Please refer to Annex 1 for a detailed description of the sampling methodology.

Throughout the report, data is been disaggregated to compare households by eligibility status, sex of household head<sup>7</sup> and nationality. However, CVME3 is statistically representative only at the national level. Nonetheless, these indicative comparisons provide useful information on different needs among population groups, revealing varied levels of vulnerability. The breakdown of the population (weighted sample) by eligibility status, sex of the household head and nationality of the household head are provided below.

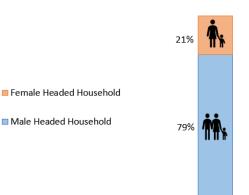
ECCN Status	Llousahalda	ما میں امنی بنام سا
ESSN Status	Households	Individuals
ESSN Beneficiary	661	4,350
Ineligible Applicant	470	2,400
Non-applicant	170	931
Total	1,301	7,681

Nationality of the Household Head					
Syrian	Afghan	Iraqi	Other*		
84.30%	8.60%	6.60%	0.50%		

#### Chart 1: ESSN Status



#### Chart 2: Sex of the Household Head



#### Limitations

#### The main limitations of the CVME3 are:

- During the sampling, 25 districts were excluded for UN travel reasons (as they are located on the southeastern border) and 39 for demographic reasons (these districts have less than 200 refugee households and consequently a very small population of potential respondents).
- The sampling strategy of the CVME3 is very different from CVME1 and CVME2<sup>8</sup>. This does not undermine the quality of the current data, however it means it is not possible to do trend analysis with the previous rounds of data.

<sup>6</sup>For more details on Respondent Driven Sampling, refer to: <u>http://www.respondentdrivensampling.org/</u>

<sup>8</sup>CVME1 and CVME2 were smaller samples and the datasets were not representative beyond the sample. WFP invested in additional sampling expertise to ensure CVME3 data would be representative; the sample size is also almost double that of the previous exercises.

<sup>&</sup>lt;sup>7</sup>According to ILO, female-headed households are those in which an adult female is the sole or main income producer and decision maker. ILO, 2007, ABC of Women Workers' Rights and Gender Equality.

Section 3: Vulnerability of Refugees



- 84.3% of refugees in Turkey are from Syria, followed by Afghans (8.6%) and Iraqis (6.6%).
- 20.8% of refugee households are headed by women.
- 47.3% of female heads of households are illiterate.

### Profiles

#### Countries of Origin:

While the official Government and UNHCR data on registered refugees shows that around 90% are from Syria, 4.3% from Afghanistan and 3.5% from Iraq<sup>9</sup>, the CVME3 data (including those who are not yet registered) would indicate 84.2% of the refugees in Turkey are from Syria, followed by 8.6% Afghans and 6.6% Iraqis. The remaining less than one percent come from a mix of other countries, such as Sudan, Somalia, Iran and Palestine. The difference between the official figures and the CVME3 figures is due to a much higher proportion of Iraqis and Afghans who are not registered or pending registration with DGMM (10% of Iraqis and 36% of Afghans). It should be noted that DGMM would likely to consider some proportion of these to be 'irregular migrants'.

#### Household Composition:

The typical refugee household was composed of 5.5 people on average. However, ESSN beneficiaries had a bigger household size (6.1 members); this is because some of the ESSN demographic criteria prioritize larger families. On average, ineligible and non-applicants had 5.07 and 4.9 members, respectively. Beneficiaries also had a higher share of minors compared to the others: almost two-thirds of the household members (55%) were less than 18 years old, compared to 53% of the non-applicant and 36% of ineligible.

#### Age and Education of Household Head:

The average age of household heads was 43 years old (with minor variation among the groups as follows: 41 non-applicants, 42 beneficiaries and 44 ineligible). 79% of households were headed by men.

Almost three quarters (70%) of the female heads of household received no formal education. This is much higher than for the male heads of household (47%). Almost a third of household heads (28%) were illiterate, though the proportion was much higher for female heads of household (47%) than males (23%). Beneficiaries had a higher rate of illiterate household heads compared to the other groups (35% versus 20% of ineligible and 28% of non-applicants respectively).



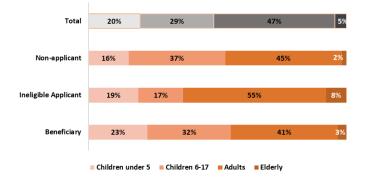
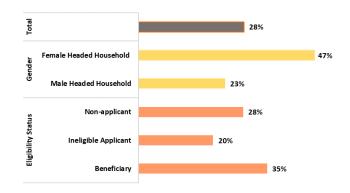


Chart 4: Percentage of Illiterate household head





- 90% of refugees were registered with DGMM whereas only 75% were registered with Nüfus.
- Among those who did not apply to the ESSN, the primary barrier was lack of registration with DGMM and/or Nüfus.

## **Registration & Application**

In order to apply to the ESSN, all household members should be registered at DGMM (Directorate General of Migration Management), have an ID number starting with 99 and be registered under the same family number. Additionally, the address and all household members should be registered at Nüfus (The Population Department Office) in the district they reside. Around 98% of beneficiaries and 97% of ineligible applicants were registered with DGMM<sup>10</sup>. However, this was only 67% for non-applicants

Non-applicants had much lower rates of DGMM/Nüfus registration compared to ESSN applicants, both eligible and ineligible households. 13% of the non-applicants reported not being registered with DGMM and an additional 23% were pending registration<sup>11</sup>. Additionally, only 23% of non-applicants were registered with Nüfus compared to 95 % for beneficiaries and 88% for ineligibles. This is unsurprising, as the registration issues are likely the main reason the non-applicants have not applied.

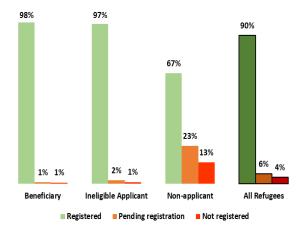
The data also indicates that 10% of those seeking or planning to seek International Protection were pending registration (6%) or unregistered (4 %). While different sampling methodology was used in the CVME2 report, it also found that 10% of

respondents were unregistered or pending registration. The data demonstrates that the bulk of those pending registration or unregistered were Afghans; 30% are pending registration and 6% are not registered. For Iraqis, 1% were not registered, and 9% were pending registration. Among Syrians, on the other hand, 93% were registered.

The 90% registered figure corresponds to registration of almost four million people; this should be considered a large success on the part of the Turkish Government

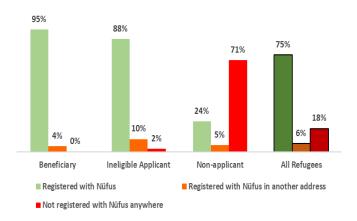
24% of the CVME3 respondents did not apply to the ESSN. When asked why they did not apply, 35% reported that they were not registered with DGMM, and 31% reported that they are not registered with Nüfus. An additional 9% were registered in another province, and 4% were waiting for their IDs. Combined, this indicates that DGMM or Nüfus registration were the primary barriers to ESSN application for almost 80% of non-applicants.

It is useful to note that only 5% of the non-applicants reported not knowing about the ESSN or not understanding how to apply. It is concerning, however, that 11% believed or were told they were ineligible, plus an additional 5% who noted that the SASF had informed them they would not fit the criteria. These results highlight the need to continue ongoing efforts on the part of ESSN stakeholders to provide accurate information on how to



#### **Chart 5:** DGMM registration by eligibility

Chart 6: Nüfus registration by eligibility



<sup>10</sup>DGMM registration is a pre-requisite to apply for the ESSN. The small percentages of beneficiaries and ineligible applicants who are not registered are the unregistered individuals within a beneficiary/applicant family; i.e. the beneficiary family with five registered individuals and one unregistered individual receives ESSN assistance for five people only.

<sup>11</sup>As above, Nüfus registration is a pre-requisite to apply for the ESSN. The small percentages of those not registered with Nüfus are unregistered individuals within a registered family. **11** 

- Only 34% of refugees lived in good quality housing (defined by standards of privacy, natural light and ventilation, security and essential facilities)
- Around 303,000 registered refugees did not have sufficient access to water for drinking and cooking.
- Almost 10% of refugees slept four or more persons per room.

## Living Conditions

#### Housing Quality

Only about 34% of refugees lived in housing that meets the minimum humanitarian standards of privacy, natural light and ventilation, security and essential facilities<sup>12</sup>, with a notable difference between beneficiaries and non-beneficiaries. Only 20% of non-applicants lived in a good quality apartment, versus 35% of ineligible applicants, and 43% of ESSN beneficiaries. This may reflect one of the effects of the ESSN assistance, allowing beneficiaries to live in higher quality accommodation.

Unexpectedly, the data demonstrates that a higher proportion of female-headed households lived in good quality apartments (62%, versus only 27% for male-headed households). However, this may be explained by the fact that a much larger proportion of female-headed households shared housing with other refugee families – 30% of female-headed households shared with another family, versus only 11% of male-headed households.

In the Southeast and Anatolia regions, the proportion of households residing in dwellings in poor conditions was higher compared to other regions. This may be clarified by lower levels of accommodation on offer in these regions compared to the ones in the western part of the country.

Crowding

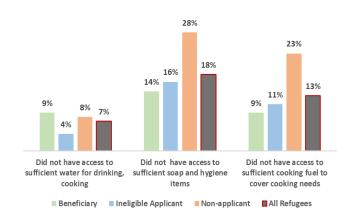
Many people sharing one house, or crowding, has been found to be related to higher rates of infectious disease, higher blood pressure and lower likelihood of accessing health care services<sup>13</sup>. ESSN beneficiaries usually lived in more crowded conditions (2.56 people per sleeping room) than ineligible applicants (2 people per sleeping room) and non-applicants (2.24 people per sleeping room). 9.7% households slept with four or more people per room. This was only 4.8% among ineligible applicants but increased to 11.8% for ESSN beneficiaries and 12.4% for non-applicants. While this statistic is partially a reflection of household size (larger households share rooms with more people), it is noteworthy that non-applicants did not have particularly large households (5.07 people per household) yet still tended to live in more crowded conditions.

Eligibility Status	Crowding Index above 4	Household Size
ESSN Beneficiary	11.8%	6.11
Ineligible Applicant	4.8%	4.98
Non-applicant	12.4%	5.07

#### Access to Basic Needs at Home

Access to water for drinking and cooking, to soap and hygiene items, and to cooking fuel differed between groups. In particular, non-applicant households were worse off by almost all of these measures. In addition, the data indicated that water for drinking and cooking was less accessible for female-headed households (15 % reported insufficient access) in comparison to maleheaded households (5.2% reported insufficient access). Around 303,000 registered refugees did not have sufficient access to water for drinking and cooking.

#### Chart 7: Access to basic needs at home



<sup>12</sup>According to IFRC an accommodation is considered to have minimum standards when the following criteria are met:

Privacy: The covered area should allow for safe separation and privacy between sexes, different age groups and between separate families within a given household. Facilities: Within the accommodation the household should have access to a toilet, running water, place to bathe and space to cook. Natural light and ventilation: The accommodation should have some natural light and ventilation. Secure and safe space: The household should be able to secure the accommodation, and the space should be considered safe.
<a href="http://www.ifrc.org/PageFiles/95884/D.01.02.a.%20SPHERE%20Chap.%204-%20shelter%20and%20NFIs%20English.pdf">http://www.ifrc.org/PageFiles/95884/D.01.02.a.%20SPHERE%20Chap.%204-%20shelter%20and%20NFIs%20English.pdf</a>

<sup>13</sup>Keall, Michael D., et al. "A measure for quantifying the impact of housing quality on respiratory health: a cross-sectional study." Environmental Health 11.1 (2012): 33 and Cutts, Diana Becker, et al. "US housing insecurity and the health of very young children." American Journal of Public Health 101.8 (2011): 1508-1514.



- Only 5% of refugees declared that they felt insecure and have been through any kind of insecurity within the last 3 months.
- 53% of refugees arrived in Turkey 3 to 6 years ago, while only 5% arrived within the six months prior to data collection.
- 11.5% of registered individuals, or 458,000 people, were planning to move on from Turkey even if the conflict continues at home.

## Security

Only 5.2% of respondents experienced any kind of insecurity in Turkey in the three months prior to the survey, which is a good indicator for psycho-emotional well-being. Of these, almost half the cases have restricted the movements of one or more household members as a result. The main reasons for feeling insecure were robberies (62%), ill-treatment or harassment (28%), and a general sense of insecurity (9%). No significant differences existed among the various groups examined. Neighbors were the main source of insecurity for 80% of the cases of those who reported feeling insecure in the last three months, likely due to greater proximity and more frequent interaction.

### Arrivals and Returns

53% of refugees in Turkey arrived 3-6 years prior to the survey, and 35% from one to three years prior. Very few households (1%) arrived in Turkey before 2011; these are mostly Afghans. 19% of non-applicants arrived in Turkey in the last 6 months, which is a likely reason they are still pending registration or not registered.

In the majority of instances (81%), all household members arrived in Turkey at the same time but this frequency is lower (73%) for ineligible applicants. This may also explain why they did not meet the demographic criteria of the ESSN; when family members arrive at different times, they may be registered on different official identity documents and thereby cannot be assessed as one family on their ESSN application. However, it should be noted that during the data collection period, DGMM initiated a verification process for all refugees, intended to update and correct all registration issues.

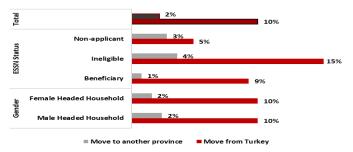
Around 3% of the respondents had one or more household members currently living with them who are separated from their family; two-thirds of the 3% were orphaned children.

Around 10% of refugees explained that they plan to move out of Turkey even if the conflict continues at home. Among the registered refugees, this figure was slightly higher – 11.5%. This equates to 458,000 individuals who planned to move on if the situation at home remained unchanged. This includes those who wanted to return home and those who wanted to move to another country.

Among those would like to move abroad, 27% wished to go to Europe and 19% to USA/Canada. 45% of those who wanted to move out from Turkey report wanting to return to their home country even if the situation at home remained the same. Of those who wanted to return to their home country, 73% were Syrian.

Only 5% of non-applicants planned to leave Turkey, versus 9% of beneficiaries and 15% of ineligible applicants. The large difference between beneficiaries and ineligible applicants indicates that the ESSN support may be supporting households to meet their needs, allowing them to live more comfortably in Turkey.

#### Chart 8: Plans to move on if the conflict continues



It is also interesting to disaggregate the results by nationality, though important to note that these are only indicative, rather than representative of these groups. Less than 2% of Afghans reported planning to leave Turkey if the conflict were to continue at home, versus 8% of Syrians and 36% of Iraqis. Across all nationality groups, a much lower proportion of ESSN beneficiaries planned to leave Turkey, in comparison to the ineligible applicants.

Only 2% of the respondents planned to move to another province. Beneficiaries had the lowest rate compared to the other groups, which may be because if they moved to another province, they would risk their ESSN assistance and would need to renew their application with their new address.

- An estimated 406,000 children aged between 6 and 17 and registered with DGMM were absent from school.
- 340,000 children and 535,000 adults were able to speak some Turkish to sustain their lives in Turkey.
- Most children learnt Turkish at school whereas adults learnt through interaction with the host community.

## **Child Education**

Child education is still a privilege, as many refugees cannot afford to send their children to school. Although education is the foundation of a child's health and well-being, many families are forced to withdraw children from school and send them to work. While the Turkish Government has allowed refugee children to attend public schools free of charge, a UNICEF report<sup>14</sup> estimates that at least 400,000 school-age (5-17 years) refugee children in Turkey are out of school.

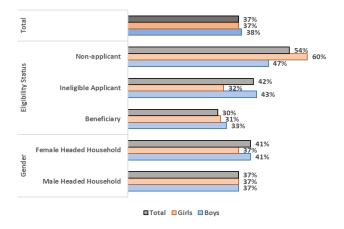
The CVME data shows 37%<sup>15</sup> of school-aged children (6-17 years) were absent from school, defined as not attending school for the past semester (based on self-reported school attendance). When considering only registered refugees, this equates to around 406,000 children absent from school. This aligns with the UNICEF estimate<sup>16</sup>. While the two methods are different (UNICEF considers official enrolment of registered children, while the CVME considers self-reported school attendance of all children), it is reassuring that the two figures align. The CVME percentage goes up to 46% for unregistered refugees compared with 35% for registered; given the latter have the right to attend public school, they must be absent for other reasons.

When considering only ESSN beneficiary households, one school-aged child out of every three (30%) was absent from school, with boys are slightly more absent than girls (33% vs 31%). The rates of absence are particularly worrisome for the non-applicant refugees: over 54% of children from non-applicants missed out on an education. Girls were much more absent from school than boys (60% and 47% respectively) among non-applicants.

Absence from school was slightly higher among children in female-headed households in comparison to male-headed households. Within female-headed households, 41% of boys were absent, versus 37% in male-headed households. This difference between boys and girls may be explained by the main reported reason for children not attending school: the household's need to send children to work in order to help their families (35%).

As noted above, the primary reason for school absence is that children need to work. This is the case for both male-headed households and female-headed households (32% and 42%, respectively, mentioned this as the primary barrier) and again higher for the female headed households. A lack of DGMM or Nüfus registration is reportedly a much more significant barrier among female-headed households versus male-headed households (18% and 6%, respectively, cited this as a primary reason for absence from school).

The overall ratio for children who spoke Turkish is 27%, however only few children (7%) of non-applicant refugee families spoke Turkish, likely a consequence of their lower school attendance. The date of arrival in Turkey also played a crucial role in children's ability to speak Turkish; the longer refugees have stayed in Turkey, the higher the percentage who could speak Turkish, both for children and adults. Around 90% of the refugees who arrived in Turkey before the conflict started in Syria (mostly Afghans) could speak Turkish. The main way in which adults learned Turkish (reported by 91%) was through interaction with Turkish community.



#### Chart 9: Absence from school more than a semester

<sup>16</sup>UNICEF calculates school enrolment as the number of registered school-aged refugee children (at the beginning of the school year) minus the number of refugee children enrolled in the Ministry of National Education management information system.

<sup>&</sup>lt;sup>14</sup>UNICEF Annual Report 2018 (December).

<sup>&</sup>lt;sup>15</sup>Some education results do not correspond exactly to those published in another paper "Reaching Hidden Populations with an Innovative Two-Stage Sampling Method" due to small changes in population weights in the most recent analysis.

- 40% of households had at least one household member with special health needs, such as disability, chronic illness or pregnancy/lactation.
- 35% of registered children under 5, or 278,000 children, were sick in the last 30 days.
- Households sought treatment for 71% of sick children, versus only 34% of sick adults

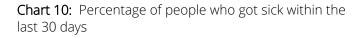
## Health

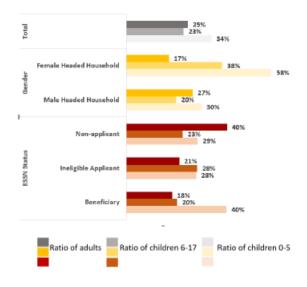
About four in ten households (40%) had at least one household member with special health needs<sup>17</sup>; this figure was highest (47%) for ineligible households followed by beneficiaries and non-applicants, 40% and 29% respectively. The ratio of household members without a medical report for these members differed slightly between eligibility groups: 5% of ineligible households, 4% of beneficiaries and 3% of non-applicants.

There are two main reasons stated for not obtaining the medical report; 33% because they did not want or need the report, and 24% who did not know how to obtain the report. Households with a disability report above 40% are eligible for the ESSN, therefore not being able to obtain a report becomes an obstacle to ESSN eligibility.

Young children (0-5 years old) tend to get sick<sup>18</sup> more often than adults, with 34% of under-fives reported sick in 30 days preceding the survey, versus only 23% of adults. The ratio of registered children who got sick is 35%, equating to 278,000 children. Children in beneficiary households were sick more often than children in non- beneficiary households (40% compared to 28%); this may be partially due to having more children and more crowded living conditions which can result in higher transmission rates of illnesses.

Female-headed households had a higher proportion of sick children compared to male-headed households; this was almost double for under-fives (58% vs 30%). Without a doubt, this creates additional burden on the shoulders of female-headed households related to child-care, ability to work and cost of treatment. Once children get sick, the majority of families reported seeing doctors for treatment. The proportion seeing doctors varied by eligibility groups: beneficiaries (78%), ineligible applicants (54%) and non-applicants (70%). It should be noted here again that 34% of non-applicants were either pending registration or not registered with DGMM, which means they are ineligible for treatment in public hospitals. In the vast majority of cases (70%), medical treatment from a Syrian doctor (22%), who are often not officially registered in Turkey.





<sup>17</sup>The term "special needs" refers to an individual affected by any of the following conditions: physical or mental disability, chronic illness, temporary illness or injury, serious medical condition, pregnant/lactating women and those in need of support in basic daily activities.

18 Sickness mentioned in this question includes diarrhea, fever/chills, or cough. Simple sickness which wouldn't affect daily life of the member shouldn't be counted.

- 1.6 million registered refugees lived under the poverty line, including 215,000 who lived in extreme poverty.
- 31% of boys under 18 (191,000) were working to contribute household finances, while only 4% of adult women were working (43,000).
- 2.2 million registered refugees had borrowed money or credit within the last 3 months period.
- 1.81 million registered refugees were multi-dimensionally poor.

## Economic vulnerability

#### **Employment and Workforce**

Working as a refugee often means accepting informal, unstable, less skilled and usually less paid jobs. In Turkey, two features characterise the work of refuge households, in comparison to their previous situations: the decrease in employment of adults and the increase in working children. It is clear that poverty forces refugee children into work, especially when adults are unable to work. If refugees are not able to meet their basic needs, they send their kids to work. The data demonstrates that 191,000 registered children had to work to contribute to household versus, only 43,000 registered women who were working.

The proportion of male refugee children working in Turkey has risen from 5 to 28% since the arrival to Turkey. Those who didn't apply for the ESSN (non-applicants), experienced the largest increase in child labour since their arrival to Turkey, reporting a 49% increase. The non-applicant households had the highest rate of working children at 59%. Beneficiary households experienced an increase of +9%, the lowest among the various groups, suggesting that the ESSN programme may have protected them from sending their children to work.

The ratio of male children under 18 working was 13% for beneficiaries which was the lowest among all groups. It should be noted that the results of this question are affected by children aging between the two-time periods – i.e. a child may have been 12 in their home country, and is now 16, so is more likely to work. However, this is balanced by others who were teenagers in their home country, and now adults in Turkey. The overall representative nature of the data accounts for this aging over time, which affects each family differently. Many adults have had difficulties in finding a job suited for their skills. The ESSN beneficiaries were the most affected: the proportion of households where the adult male was working was 6% lower than it was before. Data suggests that around 15% of the beneficiary households relied exclusively on the ESSN assistance or had no other income.

While 59% of female-headed households did not have any working member in the 30 days prior to the survey, this figure was only 14% for male-headed households. This suggests that members of female-headed households faced more difficulties in finding a job and that they relied more on assistance. Around 18% of the female-headed households report having no source of income or only assistance from the ESSN or from other humanitarian organizations. This proportion was lower (13%) for male-headed households, which supports the idea that female-headed households more rely on assistance as they have fewer household members possibly working.

In Istanbul, where there are more working opportunities, the reported rate of women's employment was 16%, versus only 5% in other areas. The rate of employment before arrival to Turkey was also the highest for women living in Istanbul (20%); this indicates that the refugee population in Istanbul may originate from different backgrounds than the other areas in Turkey, backgrounds with fewer cultural or educational barriers to women working.

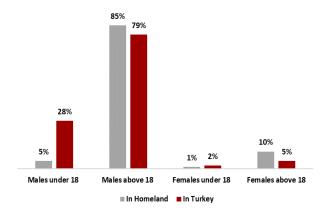


Chart 11: The percentage of household members working

#### Income Sources and Livelihoods

Refugees' full working potential is not always exploited. Data show that refugees have had to adapt to lower skilled types of work since arriving in Turkey, probably resulting in lower wages.

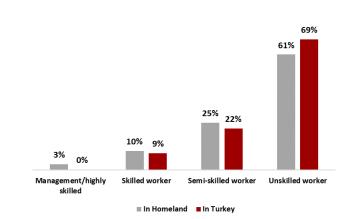
A very small proportion of refugees (9%) had higher qualified jobs, such as skilled labour or management jobs<sup>19</sup>. These figures were relatively similar between beneficiaries and ineligible applicants, but was much lower (2%) for non-applicants. It was larger among male-headed households (7%) than female-headed households (2%).

ESSN assistance was by far the primary source of income during the 30 days preceding the survey for the vast majority of beneficiaries (57%). This indicates that the other income sources are often unreliable or poorly paid, therefore the unconditional cash assistance is a huge contribution to beneficiary budgets.

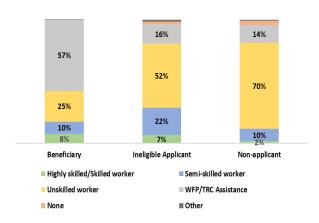
All refugees relied on unskilled jobs as a main source of income (for beneficiaries this came after the ESSN assistance). A considerable proportion of non-beneficiaries (14%) declared they benefitted from some form of WFP/TRC assistance, which is may be the result of sharing of assistance between beneficiaries and non-beneficiaries. This may be encouraged by a high proportion of refugees sharing housing.

It is important to highlight that 2.8% of ineligible applicants and non-applicants declared having no source of income at all. When considering registration status, 5.6% of unregistered refugees reported having no income at all, versus 0.7% of registered refugees. This should be further investigated to identify potentially destitute households in need of immediate assistance.

#### Chart 12: Type of work (ILO definition)



#### Chart 13: The main income source by eligibility



In Turkey, refugees can obtain a work permit when their employer sponsors them or they can apply themselves independently. Seasonal and animal husbandry workers can be exempted from obtaining a work permit following their application.

19 International Standard Classification of Occupation 08 (ISCO-08) definitions by the International Labour Organisation (ILO) are used for categorizing the levels of works.

#### Monthly Food Expenditures

The proportion of expenditure dedicated to food is often used as a proxy indicator of food insecurity or poverty. The greater is the portion of household expenses devoted to food, the poorer and more vulnerable a household usually is, as it often does not have enough resources to cover other basic needs such as education and/or health. Food expenditures, measured in Turkish Liras (TL), represented almost half of the monthly expenditures for all types of refugee households. This data was slightly higher for beneficiaries, with 50% of total expenditure dedicated to food, compared to 44% for non-beneficiaries. Devoting half of the monthly budget to food certainly indicates these households are economically vulnerable and their situation could easily worsen if exposed to food price fluctuations. Food expenditure was also higher for female headed households with 51% compared to male headed households 46%. It should also be noted that when combining food, rent and utilities (78%), only around 20% of the household budget is left for all other expenses. This puts the household in a precarious situation; an unexpected expense could immediately compromise their ability to meet their basic needs.

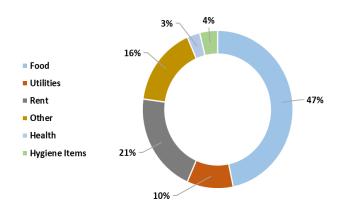


Chart 14: Expenditure patterns

#### Monthly per capita expenditure

Monthly income is a very difficult question to ask in a refugee context; many households underreport income, and income often fluctuates throughout the year. Therefore monthly expenditure is used as a proxy measure, as this is more a more stable indicator.

The average refugee household spent 399 TL per person per month. Expenditure was very similar between female-headed and male-headed households, for both per capita and per adult equivalent measures<sup>20</sup>. However, differences existed

between the groups with different eligibility status: beneficiaries had a lower level of per capita expenditures compared to the ineligible applicants (-20%) and to the non-applicants (-9%). This may be partially explained by the bigger family size of the ESSN beneficiaries. However, the per adult equivalent measure (which accounts for household size) also showed lower expenditure for beneficiaries.

ESSN status	Monthly per Capita Expenditure (TL)	Per Adult Equivalent Expenditure (TL)
Beneficiary	359 (70 USD)	565
Ineligible	449 (85 USD)	645
Non-applicant	405 (77 USD)	602

In order to understand the economic poverty of refugees, the households' per capita expenses are compared to the World Bank poverty line s, as households whose expenditure falls below these lines are considered poor. The poverty lines are calculated using the World Bank "Income-Class Poverty Line" (ICPL)<sup>21</sup>. The World Bank has calculated this as 351 TL by August 2018 (equivalent to \$5.5/day in 2011 purchasing power parity) and has calculated an Extreme Poverty Line at 204 TL (equivalent to \$3.2/day in 2011 purchasing power parity).

The CVME data show that 46% of all refugees were poor, as their per capita expenditure falls below the poverty line of 351 TL, and 10% were below the extreme poverty line of 204 TL. Beneficiaries of the ESSN programme represented the largest proportion of the poor, since more than half of them (52%) had expenditures lower than the poverty line, versus only 37% of ineligible applicants and 34% of non-applicants. 8% of ESSN beneficiaries fell below the extreme poverty line, versus 7% of ineligible applicants and 14% of non-applicants.

The non-applicant group is very diverse. While only 34% were below the poverty line, this included 14% who were below the extreme poverty line – which is almost double share of the extreme poor in the other two groups. This demonstrates that among non-applicants, there was a larger share above the poverty line, but a very large share who were in urgent need of assistance to cover their most basic needs.

<sup>20</sup>Adult equivalent scales are used to account for differences in household size, and resulting economies of scale. Refer to OECD guidelines for more details: http://www.oecd.org/eco/growth/OECD-Note-EquivalenceScales.pdf

<sup>21</sup>The World Bank has introduced Income-Class Poverty Lines (ICPL) to use as a benchmark for countries whose level of development makes the IPL of little use. Two complementary global lines have been introduced, one for lower-middle income countries (LMIC) and one for upper-middle income countries (UMIC). The LMIC poverty line is set at \$3.20 per person per day and the UMIC poverty line is set at \$5.50 per person per day, in 2011 PPP (Purchasing Power Parity). They are calculated as the median national poverty line among all countries in the income **18** class. The figures used correspond to \$3.20 and \$5.50, updated from the 2011 PPP (as of August 2018). http://blogs.worldbank.org/developmenttalk/richer-array-international-poverty-lines When considering registration status, the data shows that 42% of all registered refugees in Turkey were below the poverty line, equivalent to around 1.6 million registered refugees who were poor. The data also shows that 5.4% of registered refugees lived under the extreme poverty line which equals to almost 215,000 refugees. However, over a quarter (26%) of unregistered refugees lived under the extreme poverty line, further highlighting their vulnerability.

#### Per capita expenses vs. Poverty line

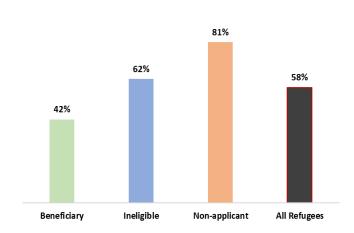
Eligibility Group	Below 351 TL	Below 204 TL
Beneficiary	52%	8%
Ineligible Applicant	37%	7%
Non-applicant	34%	14%
Total	46%	10%

#### Debt

More than half of the refugees (58%) had borrowed money or received credit in the three months preceding the survey. This figure was slightly lower for registered refugees (56%), but this still equates to almost 2.2 million registered refugees. When comparing eligibility groups, the data shows that about 41% of beneficiaries had to resort to borrowing money, but this rate rises to almost 80% for non-applicants.

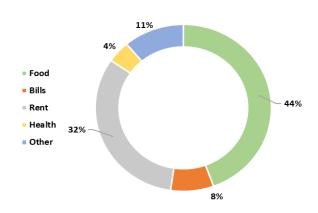
On average, those with credit had total accumulated debts of 1,000 TL, equivalent to half of the average monthly expenditure of a household. Among ineligible applicants, the average was 1,250 TL. Among ESSN beneficiaries, the average was 550 TL. This indicates that the unrestricted cash support may have provided some economic protection to beneficiaries, who did not have to resort to credit as often as the others.

76% of respondents resorted to credit mainly to buy food or to pay rent which are two essential needs for survival. Moreover, some others borrowed money to pay for health expenses (4%) and utilities (8%). Non-applicants resorted to credit to buy food or to pay rent more often (83%) than beneficiaries (70%) and the ineligible (76%), suggesting a higher vulnerability to food insecurity. The majority of respondents (84%) borrowed money from their friends or relatives in Turkey whereas only a minority (5%) asked for help from outside of Turkey. This likely implies that borrowers had better access and arrangements with friends/ family than with the formal or informal credit sector. Moreover, interest rates agreed with family and friends are usually very low, if anything at all. This practice seems very positive as it shows that refugees often rely on a social network, whose solidarity helps protect them.



## **Chart 15**: Percentage of households that borrowed money in the last 3 months

Chart 16: Primary reason for borrowing money



#### Poverty and Deprivation

Non-monetary poverty among refugees in Turkey has been measured through the Multidimensional Poverty Index (MPI) <sup>22</sup>, calculated on a range of 'deprivations' across key dimensions (i.e. essential needs) at the household level. The index identifies deprivations across the relevant dimensions (education, health, living conditions, income generation and food security) and provides the number of people who are multi-dimensionally poor, as well as the intensity of deprivation (i.e. number of weighted deprivations) that poor households typically face.

In line with the monetary poverty results above, the MPI analysis identified beneficiaries as the poorest among the eligibility groups (54%). This is followed by non-applicants (51%) and ineligible applicants (43%). These results, however, are different from the monetary poverty results, which classified the non-applicants as the least poor. Results differ as the methodology is entirely different, with the MPI considering a variety of dimensions. The fact that beneficiaries were poorest by both monetary and MPI measures suggests the targeting process of the ESSN is accurate and that the criteria are enabling the ESSN to reach more vulnerable households, It also indicates a need to understand better the profile of the non-applicants, among which there are most likely people in need of assistance.

It is again useful to divide the non-applicants into those who do not need assistance, and those who were unable to apply. For the former, only 25% were considered poor. For the latter, 55% were considered multi-dimensionally poor. This surpasses the 54% of beneficiaries considered multidimensionally poor, making the non-applicants who were unable to apply the poorest group. Again, it must be noted that this disaggregation is indicative only, as the sample contains only a small number of non-applicants unable to apply. This highlights a need for more data on this group. Overall, this analysis indicates 1.81 million refugees were multi-dimensionally poor. These results also indicate the depth of the multidimensional poverty, which shows there were only some 4.6% of the refugees who are not deprived of any essential need such as education, health living conditions etc. The remaining 95% were deprived of at least one need.

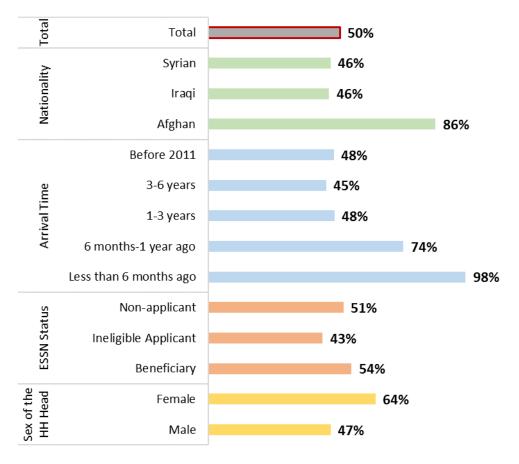
Deprivations	% of Households
Education	37.2%
Health	14.2%
Income Resources	36.9%
Living Standards Food Security	86.9% 44.0%
• • • • • • • • • • • • • • • • • • • •	

Although the disaggregation is not statistically representative, it is interesting to compare results across groups. A higher proportion of female headed households were poor in comparison to the male headed households, with 64% versus 47% respectively. Around half of Syrian and Iraqi refugees were multi-dimensionally poor. However, a much higher proportion (86%) of the Afghans were defined as multi-dimensionally poor including access to health, education, food security.

It is also useful to see that the gender disaggregation within the eligibility status groups shows that female-headed nonapplicant households were the most vulnerable group, as 83% of them were "multi-dimensionally" poor following the MPI methodology. As suggested above, the non-applicants seem to be a heterogeneous group which includes people who have not applied because they do not need assistance and other people who cannot apply due to issues with their registration.

The time of arrival in Turkey also plays a huge role in the vulnerability profile of the refugees. The newer the refugees are, the more they were multi-dimensionally poor. For example, among the small group of refugees who arrived less than six months ago, 98% were considered poor. If the arrival time was more than a year ago, the poverty classifications were roughly the same across groups. The MPI also reveals the deprivations within each dimension – i.e. the proportion of refugees who are considered poor and deprived within that dimension. This allows further insight into which dimensions or sectors are driving the MPI results. The living standard of the refugees is clearly the indicator where the refugees were most deprived (86.9%). This was followed by food security, with 44% of refugees considered deprived. Health was the indicator with least deprivation; among all five dimensions included, refugees had best access to health which may be since registered refugees can access healthcare free of charge in Turkey.

#### Chart 17: MPI results



### Multidimensional Poverty Index Table

<u>Dimension</u>	Indicators	-	ne House- Head		ESSN Status		Total
		Male	Female	Beneficiary	Ineligible	Non- applicant	Total
Education	Absence from school because children need to work and/or assist family	18%	9%	9%	9%	39%	16%
	Absence from school because the fami- ly cannot afford school expenses	5%	3%	4%	3%	7%	4%
	Absence from school more than a se- mester	37%	41%	30%	42%	54%	37%
Health	More than half of the household re- ported sick	3%	14%	11%	2%	2%	6%
	Any member not treated when sick	11%	5%	10%	13%	5%	10%
Food Security	Household with unacceptable food con- sumption	11%	33%	17%	10%	21%	16%
	Household with CSI>18	32%	28%	24%	35%	37%	31%
	DDS <6	19%	29%	19%	14%	34%	21%
Income Resources	No income source other than ESSN and/ or other assistance or no income at all	14%	18%	17%	9%	18%	14%
	Begged	4.8%	3%	0.5%	6.4%	9%	4.5%
	Accepted high risk, illegal, socially de- grading or exploitative temporary jobs	10%	8%	11%	11%	3%	9%
	No household member worked within last 30 days	14%	59%	29%	19%	18%	23%
Living Conditions	Crowding above 3	18%	5%	21%	8%	15%	15%
	No kitchen in the house	7%	4%	6%	5%	9%	6%
	No toilet in the house	20%	19%	21%	14%	25%	20%
	Bad quality apartment	72%	37%	57%	65%	80%	65%
	No sufficient winter clothes	31%	55%	40%	29%	38%	36%
	Insufficient access to any of the items below; water, hygiene items, cooking fuel for cooking	23%	20%	17%	21%	34%	22%



- 84% of refugees had acceptable food consumption; this figure dropped to 67% for female-headed households.
- 522,000 registered refugees had unacceptable food consumption and require assistance.
- On average, adults ate 2.5 meals per day, while children ate 3.1 meals per day.

## Food Security

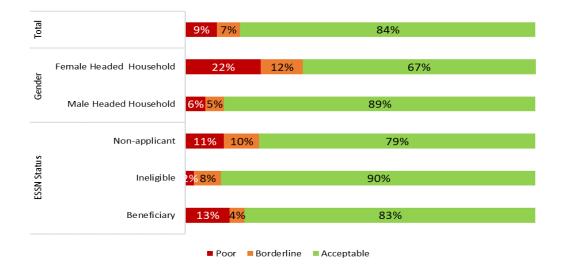
#### Food Consumption

Food consumption measured using the Food Consumption Score (FCS)<sup>23</sup> was acceptable for the majority of respondents. Although data were not comparable with those from previous monitoring exercises (CVME 1 and 2), the prevalence and differences between groups are in line with preceding results. Although the food security prevalence seems satisfactory, 13.1% unacceptable food consumption among registered refugees translates into about 522,000 refugees who require assistance to meet this basic need.

Overall, 84% of households had acceptable food consumption, with some difference between eligibility groups. The poorest results were found in female-headed households (only 67% acceptable).

Daily consumption of cereals, pulses, meat, fish, eggs, vegetables and fruit was generally balanced. No major differences existed between the groups although beneficiaries tended to have a more varied diet than the others, suggesting the positive impact of the ESSN on their food consumption. Female-headed households and non-applicants had lower dietary diversity than the other groups (see Annex 4 for more details).

The average number of meals per day was lower for adults compared to children (2.5 and 3.1 respectively), the gap being even higher within non-applicant households (2.1 and 2.7 respectively), suggesting that this group had difficulties in ensuring the same food intake for all household members, and that adults may need to reduce their normal eating patterns due to insufficient resources.



#### Chart 18: Food Consumption Groups

## **Coping Strategies**

#### **Food Strategies**

Analysis of whether adults or children in the household adjust their food intake—cutting meal size, skipping meals, or going for a day without food—because of lack of money for food gives insights into the households' vulnerability status.

When refugees experienced lack of food or money to buy food, they resorted to coping strategy mechanisms, such as relying on less preferred foods because they are less expensive, borrowing food or relying on the help of family and friends, reducing the number of meals per day, reducing the adults' food consumption in favor of children's, and decreasing portion size for all household members. These behaviours jeopardise food security, in particular for the most vulnerable groups such as children and members of female-headed households.

Almost two-thirds of female-headed households (64%) had experienced lack of food and/or lack of money to buy food during the seven days preceding the survey, meaning they used any one of the five consumption coping strategies. This figure was 48% for male-headed households. Overall, the nonapplicants used the consumption coping strategies more frequently than the other eligibility groups, as shown in table below.

The reduced Coping Strategy Index (rCSI)<sup>24</sup> combines the five strategies into a weighted sum. It counts the number of days the households adopt these five behaviours, and accounts for the severity of each strategy. The higher the score, the more

frequent and severe these strategies are, therefore the more vulnerable and food insecure the household is.

The rCSI shows large differences between the groups. Nonapplicants had the highest average rCSI at 16.8. When further disaggregated, the data shows that the average among those who did not need the assistance was 5.10, while those who were unable to apply were at 18.80. Ineligible applicants followed with an average rCSI of 15.66. The average rCSI among beneficiaries was 11.58. The relatively low beneficiary rCSI again highlights that the ESSN may help these families be more food secure. The extremely high rCSI of the non-applicants reemphasizes the high levels of vulnerability among this group. Female headed households also slightly higher value of rCSI compared to the male headed households. (13.96 vs 15) which again shows the vulnerability of the female headed households.

	Relied on less pre- ferred, less ex- pensive food	Borrowed food or relied on help from friends or relatives	Reduced the num- ber of meals eat- en per day	Restrict consump- tion by adults so that young- small chil- dren can eat	Reduced portion size of meals
Beneficiary	2.4	0.7	1.4	1.5	2.1
Ineligible Applicant	3.2	1.1	1.7	2.1	2.2
Non-applicant	2.7	1.6	2.1	2.2	2.3
Total	2.7	1.0	1.7	1.9	2.1

Those who have not applied to the ESSN used food related coping strategies more than ESSN beneficiaries or ineligible applicants.	e often
than ESSIV beneficiances of intelligible applicants.	
• Over half of refugees reported using the following strategies: borrowing money, food on credit and spending savings.	buying
• Refugees used a variety of coping strategies related to children: 15% of househol to withdraw their children from school, 5% sent them to work and 9% had to many child.	

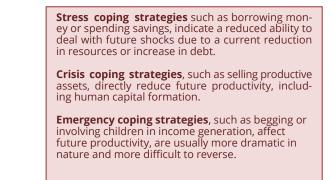
#### Livelihood coping Strategies

Refugees also resorted to livelihood coping strategies: detrimental behaviours whose severity depicts the status of the households' livelihood stress and insecurity. These strategies undermine the long-term coping capacity of households and their capacity to produce in the future. The livelihood coping strategies indicator<sup>25</sup> measures the livelihood stress and asset depletion during the 30 days prior the survey. Households adopt stress, crisis or emergency coping strategies, or no strategies at all.

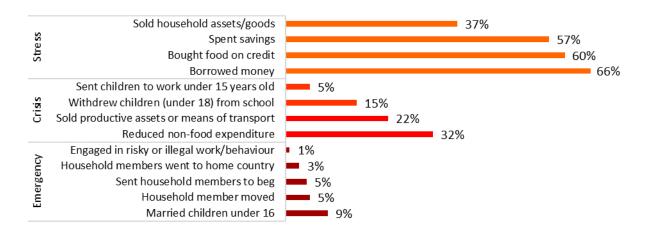
The most common strategy adopted to cope with lack of resources was to borrow money, followed by buying food on credit and spending savings . Note that of those who report spending savings, 32% of the overall 57% have 'exhausted this option,' meaning they had previously used this strategy but can no longer do it.

Unfortunately, adoption of behaviors detrimental to children were not unusual: 15% of households had to withdraw their children from school, 5% sent them to work, 9% had to marry off a child and 5% sent a household member, possibly a child, to beg. In general, beneficiaries used many of the livelihoods coping strategies more frequently than the other groups, perhaps because beneficiary households have more children and therefore have more opportunity to use strategies involving children in order to sustain household finances. As with the other groups, these strategies include withdrawing children from school, borrowing money, reducing non-food expenditure, sending children to work and selling productive assets.

Female-headed households also showed greater vulnerability by resorting more often than male-headed households to detrimental coping strategies such as moving to another place or sending some household members back to their home country. Moreover, sending children to work was also slightly higher for female-headed households than male-headed households (15% versus 13% respectively).



#### Chart 19: Livelihood coping strategies



<sup>25</sup>For more information regarding the Livelihood Coping strategies indicator refer to the CARI technical guidance note: <u>https://resources.vam.wfp.org/sites/default/files/CARI%20Guidance\_2nd%20ed.pdf</u>

- 5% of refugees reported requiring childcare services.
- 7% of women reported requiring women's health centres and family planning services. Among registered adult females, this equates to 59,000 women.
- 5% of refugees reported requiring psychosocial support
- Lack of money to pay for the services was the most commonly cited barrier to access.

## Access to Other Services and Refugee Needs

When asked about access to other services or assistance, 5% of refugees reported they needed childcare services but they were unable to access them. The main reason explained for not having access to the services included lack of availability of such services, the household's inability to pay for the services and not having proper documentation.

Another 7% of women reported needing women's health centres and family planning services, but not having access to them. Of these, about a quarter explained that they could not access to these services as they could not afford them. Another reason cited is that they believed the specific service they required was not available in there area. This figure was 5.5% among registered adult females, which equates to 59,000 women. For unregistered females, the percentage went up to 14.1%. This is particularly important given the extremely high fertility rates among this population (refer to Annex 2 for the population pyramid illustrating the demographics of refugees in Turkey).

Refugees felt they needed additional assistance, especially in the fields of jurisdiction/legal aid (6%) and mental health or psychosocial support (5%). These services are available however the main reason for not accessing legal aid was because refugees could not afford to pay for the services. For the mental health services, either refugees could not afford it, or they did not have proper documentation to access the services. It should be noted that there may be free services available of which refugees are unaware.

Other than the ESSN, 14% of refugees reported benefitting from assistance from other organizations in the 30 days preceding the survey. 9% of non-applicants and 19% of ineligible applicants had received assistance from organizations other than WFP and TRC, versus 12% of beneficiaries. The most common type of assistance was food (82%), followed by shelter/ utilities (6%) and multi-purpose cash (6%). Sources include NGOs, other humanitarian organisations, or Government.

Section 4: Conclusions and Recommendations

## Conclusions

The results of the CVME3 support the disaggregation of the refugee population to identify the most vulnerable. They also show the ESSN continues to protect the beneficiary population from becoming more impoverished by helping them to afford basic needs. However, challenges remain, both for the beneficiaries and for the non-beneficiaries.

**High levels of Vulnerability:** Only 35% of the refugees lived in a shelter that meets the minimum humanitarian standards. Job opportunities remain a challenge for refugee households. 42% had monthly expenses below the poverty line which equals 1.6 million registered refugees and 58% had taken credit within the last three months prior to the survey, equating to some 2.2 million registered refugees. Additionally, 280,000 registered individuals did not have sufficient access to water for drinking, cooking and washing.

**Specific Vulnerable Groups:** Although disaggregation of data by gender and eligibility status is not statistically representative, indicative findings from the data suggest that the most vulnerable groups consist of female-headed households, Afghans, new arrivals and the non-applicants. However, it should be noted that non-applicants are not homogenous as a group; it includes better-off households who did not apply because they were not in need, and extremely vulnerable households who were unable to apply – mostly due to registration barriers. The results do indicate that that the ESSN has positive effects on the beneficiaries.

**Female-Headed Households:** Around 20% of the refugee households were female headed. Female headed households tend to be more vulnerable due to limited work opportunities and cultural boundaries regarding women in work life. Moreover, women at the head of the household were usually less educated than their male counterparts (only 31% had received a formal education versus 53% of men) and had less employment opportunities (5% of adult females were working in Turkey versus 79% of adult males).

Female-headed households struggled more than male-headed households to meet their basic needs and more often share their accommodations with other families. Female-headed households had lower food diversity compared to male-headed households and were more food insecure. Female headed households had usually resorted more often to food-related coping strategies and/or livelihood coping strategies, particularly emergency strategies such as sending a household member back to the home country for work or moving somewhere else. Moreover, the results of the multidimensional poverty index show that female headed households were much more vulnerable than male headed households.

**Afghans:** When the results are disaggregated by nationality, Afghans were the most vulnerable group. The education level of the head of household was much lower than for the other nationalities; 81% were illiterate, where the average illiteracy rate among refugees was 28%. When the profile of Afghans was examined, the majority were men aged between 14-28, uneducated and single. However, there were also considerable number of families, children and women. Afghans usually worked in jobs related to agriculture or animal husbandry as, according to World Bank data, 75% of the population in Afghanistan still lives in rural areas<sup>26</sup>.

Afghans seemed to be the group which is the most food insecure. Additionally, they had to adopt consumption coping strategies more than the other groups, such as eating less quality food, decreasing portions etc. DGMM/ Nüfus registration was also much lower for Afghans. Only 64% of Afghans were registered with DGMM, with 30% pending registration and 6% unregistered. In line with the finding that many Afghans are single males , a large proportion are considered to be irregular migrants and are therefore not registered by DGMM<sup>27</sup>.

**Non-Applicants:** Looking at eligibility status, those who have not applied to the ESSN programme struggled more than the beneficiaries to make ends meet. They are probably a more heterogeneous group than the beneficiaries; this includes some that are still not informed or skilled enough to apply to the ESSN, despite ongoing efforts of TRC outreach teams, while others have more access to more skilled jobs than beneficiaries and do not need assistance. Indicators for this group may thus mask discrepancies between households. The vulnerable non-applicants mentioned that the main reason for not applying for the ESSN was DGMM/Nüfus issues, including not having the correct paperwork, not understanding the procedures, or simply delays in processing. This means many were unable to access free healthcare and education, and other services available to registered refugees. As a result, many were forced to apply some harsh strategies to cope and survive.

Non-applicants had the highest increase in child labour since their arrival to Turkey. In the three months preceding the survey, non-applicants had taken credit more often than beneficiaries (81% versus 42%), especially to buy food or to pay rent (83% versus 69%). They had lower food diversity compared to the other groups and about 31% lived below the extreme poverty line, suggesting again that within this group there are households who need immediate assistance to cover their basic needs. As a consequence, non-applicants were also more often forced into using coping strategies such as debt or taking their children out of school to send them to work, to help meet basic needs.

**New Arrivals:** Lastly, the arrival time plays an important role in the level of vulnerability. The shorter the time refugees have been living in Turkey, the more they were vulnerable. This is again often due to registration problems with DGMM/Nüfus. Only 17% of the refugees who arrived in Turkey within the last six months were registered with the DGMM. Not being registered with the DGMM brings restrictions on access to health, education, work and lack of social connections which can help in finding jobs. The MPI revealed that 98% of those who had arrived within the past six months were multi-dimensionally poor, and 74% of those who had arrived within the past six months to one year were multi-dimensionally poor. The results of the CVME3 clearly shows that the longer the time spent in Turkey, the better their socio-economic situation.

**Ongoing needs of ESSN beneficiaries:** Beneficiaries tended to have a more varied diet than the others, and their food consumption was acceptable more frequently compared to the other groups. However, results of the MPI analysis identified beneficiaries as the group with highest rate of poor households (54%), followed by non -applicant (51%) and ineligible applicants (43%). It seems likely that ESSN assistance has protected this population group over the last two years, offering them a chance to meet their basic needs and protect them from having to use negative coping strategies. Ongoing assistance to the already targeted households, as well as to the most vulnerable groups who are currently excluded, is critical. Given that the bulk of refugees plan to remain in Turkey, it may also be prudent to consider longer-term strategies bridging the humanitarian-development nexus with more development-oriented programming.

Without the ESSN, it is likely that millions of refugees in Turkey would be in poverty. Support to the ESSN should be continued as it plays a critical role in social protection and supports beneficiaries to cover their basic needs.

- The programme should continue to pay special consideration to female-headed households, who have reduced access to employment opportunities and generally higher vulnerability. Children in these households, who contribute more than others to the family livelihood, must be protected from abandoning school.
- The programme should be more gender-sensitive, in particular identifying those female-headed households who are non-applicant and supporting their access to the ESSN (which includes registration with DGMM and Nüfus).
- The heterogeneity of the non-applicant group needs further investigation to identify the most vulnerable households, to address their obstacles in applying to the ESSN, and to support them in the registration process.
- Continue provision of support to households living in informal housing to register with Nüfus, thereby encouraging access to the ESSN.
- Concerning the difficulties in accessing women's health services, the ESSN stakeholders should coordinate with partners (e.g. UNFPA) to support refugee women to access the required services, including provision of information on all services which are currently available.
- To understand fully the links between school absence, language skills, household needs and the education of household head, the rate of working children should be analysed more in depth and triangulated with additional variables during the next monitoring exercise.
- For monitoring and evaluation purposes, it is recommended to keep the same sampling of the CVME3 for future monitoring exercises, in order to identify trends in indicators.
- The objective of the assistance should be widened to consider longer term needs of refugees, the majority of whom plan to stay in Turkey. The humanitarian community should support their skills development; the ESSN or other stakeholders should consider investing in increasing access to Turkish language courses, vocational trainings and internships that may help refugees to find working opportunities suited for their skills. Programme designers and the humanitarian community may engage with employers in the hiring of refugees by encouraging UNHCR's action plan for employers, refugees, governments and civil society<sup>27</sup>.



# Annexes

#### Sampling

Two-staged sampling has used for this round of the CVME, geospatial and random sampling, in order to reach a representative sampling.

#### First Stage: Simple Spatial Survey Method (S3M)

The first stage of the sampling is geospatial. This first stage is required to decrease potential bias derived from the second stage, Respondent Driven Sampling. The geospatial sampling decreases potential spatial autocorrelation, i.e. it reduces correlation between clusters so that the overall sample will be representative of all of Turkey, rather focusing only on certain regions. Mark Myatt (Brixton Health) and Ernest Guevarra (Valid International) used a variable density sampling approach to develop the Simple Spatial Survey Method (S3M).

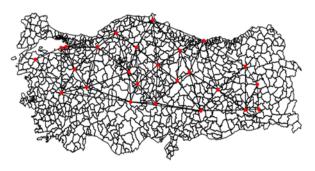
S3M is used to achieve a sample that draws a minimum number of sampling points from administrative areas, so that the survey can provide estimates for each administrative area with useful precision. Administrative areas tend to have roughly similar population sizes. This means that a sample with a minimum number of sampling points per administrative area will also tend to match population density<sup>28</sup>. This method is designed to provide a general survey method which can be used to survey and map the coverage of universal or selective entry programs in survey areas up to ten times larger than Centric Systematic Area Sampling method commonly used to measure indicators related to nutrition and WASH<sup>29</sup>.

S3M produces a sample that is spatially representative, as the sample is distributed evenly across the sample area. In the Turkey case, WFP excluded districts with less than 200 applicants as it would be operationally very challenging for field staff to find refugees in such a sparsely populated area. WFP also excluded an additional 39 districts on the south-eastern border, as UN security restrictions prohibited access. As a result, the total sample frame consisted of 87 urban and 122 rural districts. WFP then split the sample into two strata: urban and rural.

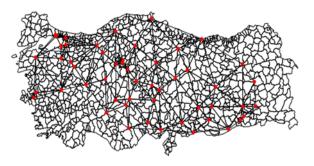
In order to reach the spatially representative sample, a hexagonal grid was laid over the survey area, and settlements were chosen that are closest to the centroids. For each stratum, one settlement in each district was chosen based on the S3M, implemented through the spatial-sampler function in R.

The sampling resulted in a sample size of 25 rural and 27 urban districts each. With geospatial sampling the sampling size can vary slightly around the aspired size (in this case 52) to guarantee a proper geographical spread. For each of the selected districts, a list of all settlements (admin 3 level) was available. The RDS (stage 2 of the sample design) started from GPS points randomly selected from admin 3 level settlements for each district, which was required to narrow down the area for the starting point of the data collection.

#### Figure below illustrates the selected geolocations on the map of Turkey.







Urban Sample

<sup>28</sup> Myatt, Mark; Guevarra, Ernest, Notes on a variable density sampling method for 3SM Surveys – Draft 0.3 17<sup>th</sup> May 2016

<sup>&</sup>lt;sup>29</sup> Valid International S3M Niger Case: <u>http://www.validinternational.org/coverage/workshop/articles\_files/pictureBookS3M.pdf</u>

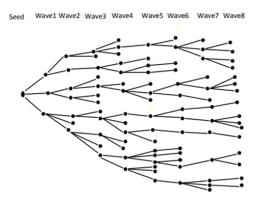
#### Second Stage: Respondent-Driven Sampling

The second stage of sampling is at the household level – the identification of the households within each geolocation who respond to the survey. This stage relies on Respondent-Driven Sampling (RDS), which is a chain referral sampling methodology (probability sampling method). RDS is a sampling method that uses social network theory to identify households. RDS helps to reach a probability-based sampling for "hidden" subpopulations, for which no sampling frame exists – as in the case of refugees in Turkey.

RDS combines snowball-sampling based on social networks with a mathematical model to calculate the probability of each respondent to be sampled. To do so, RDS starts with certain "seeds", who, in a chain-referral system, identify further respondents from their social network. With information on the size of the personal network of respondents, it is possible to calculate selection probabilities for each respondent.

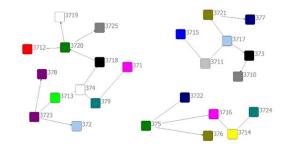
In the second stage of the sampling, seeds were selected, starting from the GPS coordinates of the selected settlement. If the monitoring assistants could not identify any refugees close to the GPS coordinate, they moved to the closest town to identify the seeds. Based on the network of the seed, in each district 25 households were interviewed, resulting in a sample size of 1301 households<sup>30</sup>.

The first step for RDS was to identify 2-3 households who have strong social networks, are enthusiastic to participate in the CVME, and are different in terms of age, gender, ESSN eligibility and socioeconomic status at the given GPS coordinates. After completing the CVME with the seeds, monitoring assistants ask those households to refer them to 2-3 of their friends/family who are also under International Protection/Temporary Protection (IP/TP), in pre-registration phase or planning to seek IP/TP in future. The recruits of the seeds produce wave 1; the recruits of wave 1 produce wave 2; and so on<sup>31</sup>. This process continues until the sample size for the cluster is reached, which is 25.



Source: Johnston LG, Sabin K. Sampling hard-to-reach populations with respondent driven sampling. Methodological Innovations Online, 2010, 5(2): 38-48.

In essence, respondents recruit their peers, as in network-based samples, and researchers keep track of who recruited whom and their numbers of social contacts. A mathematical model of the recruitment process then weights the sample to compensate for non-random recruitment patterns<sup>32</sup>. At the beginning of the CVME3, the social network size, participant number and recruiter number was systemically asked and recorded in order to track the creation of waves. RDS individual weights were calculated with RDSAT 7.1.46 for each of 52 clusters.



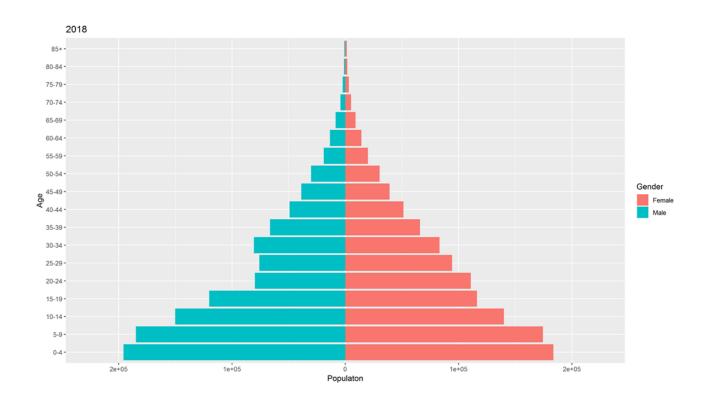
Actual example of RDS wave creation from the CVME selected from Inegöl-Bursa district produced by using NetDraw

<sup>31</sup>Johnston, L., & Malekinejad, M. (2014). Respondent-Driven Sampling for Migrant Populations. In Schenker M., Castañeda X., & Rodriguez-Lainz A. (Eds.), Migration and Health: A Research Methods Handbook (pp. 141-164). University of California Press. Retrieved from <u>http://www.jstor.org/stable/10.1525/j.ctt7zw2z4.10</u> <sup>32</sup><u>http://www.respondentdrivensampling.org/reports/RDSsummary.htm</u>

<sup>&</sup>lt;sup>30</sup>The minimum sample size was 1,300, but 1 additional household was interviewed in 1 location.

#### Refugee population in Turkey

The ESSN application data is used below to construct a population pyramid, which demonstrates that the refugee population is very young and dynamic. The age distribution shows a gap in the 20-24 and 25-29 male categories, suggesting a loss of lives during the war, or different migration patterns for males. Data on population is drawn from the applicant caseload of the ESSN; it covers around 2.5 million people as of July 2018 (aligning with the period of data collection).



## Daily consumption of food

	Beneficiary	Ineligible	Non-applicant	Total
	Mean	Mean	Mean	Mean
Cereals	6.8	6.8	6.8	6.8
Pulses	2.5	2.4	2.1	2.4
Dairy	5.5	5.4	5.1	5.4
Meat, Fish and Eggs	4.9	4.9	4.7	4.8
Vegetables	5.1	5.1	4.6	5.0
Fruit	2.7	2.6	2.2	2.6
Sugar	6.8	6.6	6.6	6.7
Fats	6.9	6.8	6.7	6.8
Condiments	7.0	6.9	6.8	6.9

























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# SAVING LIVES, CHANGING LIVES