Executive Summary

Turkey is home to the largest refugee population in the world. The scale of the crisis continues to stress Turkey's basic services – with strain in the southeast and the northwest, where 98 per cent of refugees currently reside.1

CARE International in Turkey began responding to the needs of Syrian refugees in Southern Turkey in October 2014. As of 27 November 2019, Turkey hosts 3,691,333 Syrian registered refugees, accounting for around 5% of total resident population in Turkey and over 365,000 refugees of other origins.2 Of that total, around 45.8% are females, with 21.4% of those female refugees are below the age of 18.3 A total of 62,216 individuals are hosted in 7 camps.4

The impact of the now nine-year old conflict on Turkey's economy, livelihoods, public infrastructure and services have been so profound that it is starting to affect inter-community cohesion. Off-camp refugees face several challenges linked to their ability to meet basic needs and are especially vulnerable to protection risks, forced to resort to negative coping mechanisms such as early marriage, child labour and reduction of meals since their original displacement.

CARE's experience in South East Turkey illustrated numerous gaps in access to services (education, health, legal), financial security, protection risks (child labour, sexual and GBV) and access to sufficient current information for the refugee population. Building on this CARE's prior experience, we embarked on the Knowledge Attitude and Practice (KAP) Survey to provide additional context and aims to understand the changes in the community as a result of CARE's protection programming.

The overall purpose of the KAP/base-line assessment is to provide valid reliable information focusing on Syrian refugees’ knowledge, attitudes, perceptions and behaviors related to some crucial topics such as; child/early/forced marriage; gender-based violence; child protection; information and access to services and sexual and reproductive health. The specific objectives of the survey were:

- To better understand community attitudes, beliefs, perceptions and behaviors specific to protection, and legal rights;
- To serve a benchmark for the knowledge level, beliefs and behavior of the targeted community in order to create a ground for attribution of any success or identifying the rooms for improvement for our PO programming;
- To inform decision making on the appropriate topics and issues of priority for CARE Turkeys’ Community Activators programme as well as planning.

The data collection was carried out over fifteen business days, October 10, to November 22, 2019 in CARE's Information Protection Spaces (IPSs). 314 fixed family members were invited to IPSs and interviewed, included 226 Females (72%) and 88 Males (28%). The key findings of the assessment are presented thematically below.

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1 https://en.goc.gov.tr/temporary-protection27  
3 https://data2.unhcr.org/en/situations/syria/location/113  
Child Marriage

- The youngest age range of girls who get married in the community is 12-26; for boys the age range is larger; from 12-30. For the majority of the respondents, this has stayed same since the community moved to Turkey. Only 10% of respondents mentioned boys get married below age 18.
- 81% of the respondents, without a significant variance in gender, stated that it is the father in the household who is the most responsible for deciding when and how a girl gets married. On the other hand, 68% of the respondents stated that it is the boy himself who is responsible for deciding when and how a boy gets married.
- Over 80% of evaluated the effects of early marriage on a girl’s happiness as negative. The reasons explained by respondents show girl’s happiness is affected negatively in the case of early marriage due to girl’s inability to take on the responsibilities of marriage, lack of experience and immaturity. Some respondents also mentioned girls are impatient to get married; therefore, if a girl finds a good husband, there is no reason to be unhappy.
- Majority of the respondents, 76%, evaluated the effects of early marriage on a girl’s physical health as mostly negative; mainly risks in pregnancy and childbirth.
- Almost 80% of respondents, acknowledged the effects of early marriage on a girl’s education prospects as mostly negative. Respondents who are concerned of negative impacts mentioned a married girl will be deprived of her right to education. Her husband will not allow girl to continue her education, and the responsibilities associated with marriage will not provide a girl any opportunity to continue her studies.

Gender Based Violence (GBV)

- Majority (55%) of the females and males stated a woman would ask for support from her other family members, if she is exposed to violence.
- Majority (61%) of the participants agreed people should be treated equally. However, there were a considerable number of males who disagreed with the idea of gender equality. Respondents who disagree think that women are sensitive, they are vulnerable and need special treatment. Almost all respondents mentioned that women are weaker than men.
- More than half of participants believe the prominent role of a woman is as a housewife, who takes the responsibility of her family and home.
- A significant share (59%) believes a man is the responsible household member who financially takes care of his home and family. Man is the budget holder and therefore, the breadwinner in the family.
- Majority of the respondents (78%) think a woman should obey her husband. They expect woman to obey the culture and traditions, not only to husband. Some respondents also made reference to religion and expect wife to obey her husband. This is woman’s duty and the way she respects her husband.
- Just under half of the respondents agree a wife can be punished if her husband believes her behavior deserves punishment. Punishment is disincentive and prevents repetition of the mistake. Therefore, it is necessary and effective.
- 51% of the respondents believe intimate partner violence is recognized and tolerated. Respondents believed it is better to solve the problems internally and to keep the children happy and family together, wife should be tolerant to violence from husband.
- 18% of the respondents agree that one should blame a woman, if she is raped. It is believed a woman should take care of herself, be responsible from her own clothing and her behaviors, according to respondents who agree with the statement. Therefore, if a woman is raped, this can be because of her clothes or behavior.
Child Protection

- Since respondents have moved to Turkey, approximately 40% believe their children’s education has been negatively affected. According to respondents who stated that school of children has been affected negatively since moved to Turkey, this is due to children having to go to work, they face language barriers in schools, due to fear of losing their mother tongue, they are mistreated in schools and dropping out and parents lack necessary information to enrol their children in schools.
- Respondents were asked the reasons for school aged children to be out-of-school. The prominent barrier to girls and boys attending school is financial.
- More than half of the respondents did not find it acceptable to send girls below 15 to work outside of the household to support the family. They mentioned girls are still children, they need to be in the school instead of work, they are young, and it is risky for them work at young age (such as violence, harassment). It is more acceptable for the community members to send their male children to work, compared to girls.
- The respondents were asked if parents or caregivers have the right to physically punish their children, when they are frustrated by their children. Just like in the statement related to wife being beaten by husband, depending on the mistake, physical punishment is seen as necessary.
- If a child experiences abuse at home, only 14% mentioned they would report the case. 50% of the respondents would confront the perpetrator, 14% would keep quiet or do nothing.
- Out of the 86% of respondents who mentioned they would not report a potential child abuse case; 36% thought this issue was not their business; 10% thought it is normal for such things to happen, 9% said they don’t know where or who to report to, 9% said no action is likely to be taken, 5% was concerned about fear of retaliation.

Information and Access to Services

- In all locations, obtaining a TPID and changing TPID to another location are the main legal issues facing refugee women in respondents’ neighbourhood.
- The respondents were asked if they face any challenges in accessing basic services, such as; health care, education, work, legal support 5% responded “yes”.
- The challenges experienced in accessing services varies. However, the outstanding results are as follows: 45% experience language barrier; 25% discrimination due to refugee status; 17% lack of money to access services. 28% mentioned other reasons including but not limited to lack of sufficient care by doctors in hospitals and problems encountered during school enrolment.

Social Cohesion

- Majority of the respondents, with no significant variances between male and female, have described their relationship with their Turkish neighbours as “good” or “neutral”.
- Respondents were asked if there are people such as friends or community members, that they can talk to when they have problems, over 60% responded “yes”.
- Out of 36% who mentioned they do not have friends or there are no community members they share their problems, majority of the respondents (63%) mentioned language barriers, followed by Turkish people’s lack of preference to talk to Syrians (10%) and having not met any Turkish people (10%).
- 70% of the respondents feel they have the same access to public services as Turkish citizens.
- Respondents were asked to what extent and if they feel safe in their neighbourhoods. A lion’s share mentioned they feel very safe (42%) and safe (46%) in their neighbourhoods.

Sexual and Reproductive Health

- 51% of the respondents mentioned they know where in Turkey they can access family planning and reproductive health care services.
- Among females, 62% mentioned they know how to access these services. Contraceptive services as well as prenatal and perinatal services are the most accessed services by the female respondents.
- Among males, 24% mentioned they know how to access these services. STD testing/service,
contraceptive and fertility are the services accessed by men in Birecik and Eyyübiye.

- Majority of the respondents (52%) mentioned that it is NOT acceptable for a woman to access family planning and reproductive health care services without asking permission from her husband/father/brother.
- Highest share of the respondents (49%) mentioned that it is NOT acceptable for a woman to decide on timing and spacing of her pregnancies, by herself.
Discussions and Recommendations

Child Marriage
- Mobilize community members in awareness campaigns targeting child marriage: Given the reported lack of awareness and knowledge on the repercussions of child marriage on the children and parents, there is a need for information and awareness raising sessions on protection issues with a special emphasis on children’s rights, child abuse, violence against children and early marriage.
- Mobilize Community Steering Committees (CSCs) to advocate on child rights and education: Given that CSCs are previous Community Activators and gather regularly to discuss the positive social change within their communities, the committee can focus on child marriage.
- Protection Outreach and Case Management teams to continue to coordinate for early identification of child marriage cases and to provide a comprehensive response
- Develop participatory programs targeting young girls and their parents: Participatory programmes could support girls and their parents in understanding and mitigating the reasons/risks resulting in early marriage.

Gender Based Violence (GBV)
- Mobilize community members in awareness campaigns targeting GBV: Given the reported lack of understanding on gender equality and gender roles among the respondents, it is clear negative gender roles are internalized by both men and women.
- Mobilize Community Steering Committees (CSCs) to disseminate information and raise awareness on GBV: Given that CSCs are consisted of previous Community Activators and gather regularly to discuss the positive social change within their communities, the committee can focus on GBV.
- Engage men and boys in order to disseminate gender equality: Men and boys are key actors in creating a more gender-equal society and their engagement in GBV-related activities, in addition to women’s and girls’, will support empowerment of women and girls.

Child Protection
- Mobilize community members, particularly youth, in awareness campaigns targeting child labour and education: Significant portion of respondents mentioned schooling of children has been negatively affected after crisis and child labour is common. Youth agency can work to involve young people in tailoring the design and delivery of information as well as develop youth-led events and initiatives including community theatre workshops.
- Mobilize Community Steering Committees (CSCs) to disseminate information and raise awareness on child labour: Given that CSCs are previous Community Activators and gather regularly to discuss the positive social change within their communities, the committee can focus on child labour prevention.
- Sessions on child labour to be complemented with CCTE and ESSN support as well as parenting skills and children’s rights, with a holistic approach.
- Protection Outreach and Case Management team to continue to coordinate for early identification of child labour cases and to provide a comprehensive response

Information and Access to Services
- Continue provision of legal sessions and counselling by CARE’s lawyer on issues related to TPID, accessing to basic services, work permit and so on.
- Case Management team to continue provision of translation services to overcome language barriers faced with community members in accessing various services.
- Funding for Turkish language courses should continue to be a priority.
Social Cohesion
- Mobilize members of host community in disseminating sessions: Protection Outreach team invests in Community Activators from the refugee community in order to disseminate sessions on critical protection messages as well as organize community-based events.
- Members of the host community continue to be included in community events and should part of CSCs.

Sexual and Reproductive Health
- Mobilize community members in awareness campaigns targeting SRH: Given women cannot make their own decisions about accessing to SRH services and their pregnancy, there is a need for information and awareness raising sessions on GBV and SRH together.
- Protection Outreach team to continue collaborating with Case Management team in order to facilitate access of women to SRH services.