

# Navigating Intersectional Complexities: A Narrative Analysis of Syrian Refugee Women With Disabilities in Turkey

Yasemin Karadag Avci <sup>1</sup>  and Irem Sengul <sup>2</sup>

<sup>1</sup> Department of International Relations, Hitit University, Turkey

<sup>2</sup> Faculty of Law, Ankara Yildirim Beyazıt University, Turkey

**Correspondence:** Yasemin Karadag Avci ([yaseminkaradagavci@hitit.edu.tr](mailto:yaseminkaradagavci@hitit.edu.tr))

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## Abstract

Refugee women with disabilities experience a multiplicity of insecurities before, during, and after their displacement, including exposure to violence during conflicts, barriers to their mobility, challenges along their routes to safety, difficulties in accessing rights and services in the host state, and hardships while navigating the means of survival in the host community. Despite the intertwined convergence of gender and ableism in exile affecting refugee women’s experiences, international and national laws and policies fail to address this intersectional reality. This study examines the lived experiences of Syrian refugee women with disabilities in Gaziantep, Turkey. Through an analysis of qualitative data with a narrative approach, the study not only depicts the interactions of gender, disability, and displacement that shape Syrian women’s lives but also contests the traditional discourse on their vulnerabilities. Through specific stories of Syrian women, this study highlights their strategies for survival and their future plans within the context of the intersectionality of the challenges they face.

## Keywords

intersectionality; refugees with disabilities; Syrian refugee women; Turkey

## 1. Introduction

Heba, a 42-year-old Syrian woman living in Turkey for 14 years, recounted how she had managed to escape the war in Syria, clearly illustrating the intersectional insecurities that refugee women with disabilities face during conflict and displacement. Unlike many other Syrians, she could not cross the border into Turkey through irregular means; her wheelchair made that impossible. Instead, she waited a month for a temporary ceasefire in her neighbourhood in Aleppo that would allow her to go home to collect her passport and medical reports.

She took a taxi and, with the help of the taxi driver who carried her upstairs, she packed her documents. That was just the beginning of Heba's long journey to the border together with her sister:

I took my little sister with me because I had to protect her. There was news of sexual violence against women, little girls being kidnapped and raped...When I left Aleppo, I rented a bus and hired a group of military men. I rented them as security guards. My sister was already traumatised by the war, and it got worse during our journey. Whenever a door slams or someone talks loudly, she still panics. (Heba, 15 May 2019)

Despite many challenges, “disabled people migrate too,” as Pisani and Grech (2015, p. 422) assert, and many experience further impairment during conflicts and harsh journeys. However, their needs are often neglected and their protection is typically gender- and disability-blind in their host countries. Refugee women with disabilities struggle with a multiplicity of disadvantages throughout their displacement, including the breakdown of the healthcare system within the country of origin, the disintegration of family/community support systems, hardships of transportation while crossing international borders, increased levels of sexual and gender-based violence during and after displacement, loss of citizenship rights, barriers to access to services in host countries, and the socio-economic difficulties of living in exile (Rohwerder, 2017).

This study examines the intersection of gender, displacement, and disability by focusing on the lived experiences of Syrian women in the Turkish city of Gaziantep, located near the Turkish-Syrian border. Turkey currently shelters among the largest refugee populations worldwide, including approximately 3.1 million Syrians (Presidency of Migration Management, 2024), nearly half of whom are women and girls (3RP, 2023, p. 5). Syrians in Turkey are under a temporary protection regime and do not hold official “refugee status,” but they are considered “refugees” in this study, using that term in a sense broader than its conventional legal definition (UNHCR, 1994). As a bordering country providing Syrians with access to healthcare, treatment, and protection, Turkey has also become a feasible destination for many Syrians with disabilities. UNFPA Turkey (2021) estimates that 450,000 Syrians “live with disabilities” in Turkey.

A substantial number of studies have adopted an intersectional approach in analysing refugee women's experiences during displacement. These studies have highlighted how intersecting forms of oppression, such as racism, sexism, religion, and social class contribute to human rights violations against refugee women, particularly in the context of sexual violence, and how these issues are perpetuated by structural and institutional practices in various settings, including during armed conflict, in refugee camps, and in resettlement countries (Ayoub, 2017; Paz & Kook, 2021; Pittaway & Bartolomei, 2001). There is also a growing body of literature on the various challenges faced by refugees with disabilities worldwide (Crock et al., 2017; Dew et al., 2021; Pisani & Grech, 2015; Wells et al., 2020), including the Turkish context (Cantekin, 2019; Crock & Smith-Khan, 2015a; Tascioglu, 2022). However, there is a significant gap in the literature regarding refugee women and gendered understandings of disability in host countries. Extensive research has separately examined the challenges faced by refugee women or by refugees with disabilities, but the compounded experiences of refugee women with disabilities during displacement remain largely unrecognised, with few exceptions (Crock & Smith-Khan, 2015a, 2015b; Dossa, 2009; Fiske & Giotis, 2021; Rohwerder, 2017; Scheer & Mondaca, 2022). This is particularly important given that 80 percent of individuals with disabilities live in the Global South (WHO, 2022).

The present study contributes to the growing literature on intersectional approaches to gender, disability, and displacement through a case study of Turkey. We aim to provide a nuanced and context-specific analysis of how these intersecting identities shape the experiences of Syrian refugee women with disabilities. Central to this research are questions about how international and domestic laws and policies shape the challenges faced by Syrian refugee women with disabilities in Turkey and how their agency is impacted in the context of aggravated and multidimensional disadvantages. Thus, the study brings together legal and political analyses of international and domestic policies and examines the implications of those policies in practice in the everyday lives of Syrian women based on empirical research.

We argue that the intersection of gender, displacement, and the power dynamics of ableism, which encourages an “institutional bias towards autonomous bodies” and “normatively privileges able-bodiedness” (Goodley, 2014, p. 21), deeply affects the lives of disabled Syrian refugee women in Turkey. By failing to consider this intersectionality, international and national laws and policies fail to acknowledge the agency of disabled refugee women or address their needs and aspirations. This study offers novel insights into the lived experiences of disabled Syrian refugee women in Turkey by adopting a narrative approach. We primarily focus on instances in which the three main factors of (a) traditional patriarchal norms of Syrian society that confine Syrian women to the home, (b) gender- and disability-blind refugee protection policies, and (c) the gap between Turkey’s official adaptation of a social model of disability, as reflected in its legislation, and the prevailing medical model in practice combine to shape Syrian women’s lives. We begin by mapping out the international and national regulations and available protection mechanisms for Syrian refugee women with disabilities in Turkey. We then introduce the narrative approach as a method for achieving a deeper understanding of the experiences of Syrian refugee women with disabilities in Gaziantep through interviews. Subsequently, we explore how the power dynamics of gender and ableism intersect in the context of displacement and how women assert their agency, focusing on the narratives of Amina, Leyla, and Heba.

## 2. Intersecting Challenges for Refugee Women With Disabilities: International and Turkish Contexts

I’m not only Syrian, but I’m also a woman, a disabled woman. (Heba, 15 May 2019)

The quote above from Heba reflects the insights of intersectional approaches to studying the experiences of refugee women with disabilities. Pioneered by Black feminists in the late 1980s and early 1990s, scholarship on intersectionality focuses on the mutually reinforcing powers of gender, class, race, sexuality, poverty, and other factors in constituting the subjectivity of women (Crenshaw, 1991; Hill Collins & Bilge, 2020; Nash, 2008). However, the convergence of gendered and ableist structures in the context of displacement is a relatively new avenue of research.

In the context of disability and forced migration, a growing body of literature explores the aggravated hardships faced by refugees with disabilities worldwide. Such research can be broadly categorised into three main areas. First, in some studies, the challenges encountered by displaced individuals with disabilities are discussed regarding access to humanitarian services in different displacement settings, such as refugee camps or urban areas, due to physical inaccessibility, lack of specialised services, and systemic exclusion (Elder, 2015; Mirza, 2011; Reilly, 2010). Second, the inadequacy of policy and legal frameworks for

resettlement and integration is examined in some studies with an emphasis on the need for more inclusive systems providing holistic approaches to effectively address the unique problems experienced by refugees with disabilities (Crock et al., 2017; Duell-Piening, 2018; Korntheuer et al., 2021; Mirza, 2012). Finally, intersectional perspectives have been applied by some scholars to explore the experiences of refugees with disabilities (Dew et al., 2021; Elder, 2015; Wells et al., 2020) and to critique the dominant Eurocentric and ableist frameworks in the context of disability and forced migration, which often leave the experiences of non-citizens with disabilities unrecognised (Pisani & Grech, 2015; Pisani et al., 2016).

Fiske and Giotis (2021) examined the intersections of gender, disability, and forced migration, arguing that the dominant discourse overlooks the agency and capacity of refugee women with disabilities and fails to grasp the intersectionality of social and biological factors such as impairments, gender, legal status, and physical environment, all of which deeply influence their experiences and opportunities for resilience and empowerment during displacement. Scheer and Mondaca (2022) conducted a longitudinal ethnographic study of five refugee women with disabilities in Sweden, revealing that gender, ableism, religion, and ethnicity significantly impacted their social participation and integration. Finally, in her ethnographic study of a group of four Muslim refugee women with disabilities living in Canada, Dossa (2009) conveyed the experiential knowledge and insights of the women regarding disability, gender, and race, showing that they faced aggravated forms of marginalisation due to the intersection of race, gender, disability, and Islamophobia. Significantly, however, the intersecting forms of disadvantages that these studies highlight are “rarely put together” in legal and practical responses to displacement (Pisani & Grech, 2015, p. 422; see also Fiske & Giotis, 2021).

The Convention on the Rights of Persons With Disabilities (CRPD) of 2006 was the first binding human rights document to adopt an intersectional approach to the protection of fundamental rights. Until the adoption of the CRPD, international regulations failed to address the experiences of refugee women with disabilities. The 1951 Convention Relating to the Status of Refugees and its 1967 protocol adopted a gender- and disability-blind approach in defining the legal grounds for someone to be recognised as a refugee and in framing the protection accorded to refugees (Peterson, 2014, pp. 729–734; see also Adjin-Tettey, 1997). The 1979 Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), which bolstered feminist aspirations by framing women as agents of human rights, did not acknowledge the “cumulative disadvantage of disability and gender-based discrimination” (Mykitiuk & Chadha, 2018, p. 173). That striking omission was later addressed by the General Recommendations, albeit in legally non-binding documents (p. 177).

Starting from its preamble, the CRPD underlines its intersectional approach by acknowledging “multiple or aggravated forms of discrimination” from various vectors, including but not limited to sex, language, nationality, and ethnicity. Article 6 recognises the “multiple discriminations” faced by women and girls with disabilities, while Article 11 calls for the protection of individuals with disabilities during humanitarian emergencies, armed conflicts, and natural disasters. Motz (2018, p. 337) rightly suggests that Article 6 and Article 11 should be read together to ensure the protection of women and girls with disabilities in cases of displacement.

Turkey ratified the CRPD in 2009 and amended the relevant national legislation, the Turkish Disability Act, Law No. 5378 (Republic of Turkey, 2005), shifting from a medical approach to a rights-based perspective (Tascioglu, 2022, p. 199). In contrast to the traditional understanding that equates disability with impairment

requiring medical identification and response (Peterson, 2014, pp. 701–702), the social model of disability also considers how disabilities are socially constructed by systemic barriers that lead to isolation and exclusion (Buettgen et al., 2023, p. 288). In line with the CPRD, the domestic legislation in Turkey and various national action plans have included rights and services specifically available for women and girls with disabilities (UNCRPD Committee, 2019a, pp. 6–7). However, despite the introduction of legal norms and policies, practical implementation remains limited, with accessibility and the enforcement of anti-discrimination measures being major issues (Tascioglu, 2022).

The shift in terminology towards adopting “people with disabilities” as a “people-first language,” as seen in the CRPD, reflects a shift towards a social understanding of disability (Shakespeare, 2018, p. 3). In the lively debate on the appropriate use of terminology, the term “disabled people” is taken by some to reflect a similar understanding, as it acknowledges that people are “disabled by society” due to societal barriers (Shakespeare, 2018, p. 3). Thus, we use these terms interchangeably in this study. Despite the shifts occurring in legal and political discourse in both international and Turkish contexts, the intersecting patterns of displacement, gender, and disability continue to be disregarded in refugee protection responses. An oft-cited report by the Women’s Refugee Commission in 2008 underlined the invisibility of refugee women with disabilities and their neglect in international humanitarian responses. Data as fundamental as the number of people with disabilities often remain unknown to the states and organisations that supposedly address their needs (Women’s Refugee Commission, 2008, p. 2). Nearly two decades later, reports by international organisations still lack information on disability among displaced women (CMW & CRPD, 2017; UNDRR & UNHCR, 2024). Turkey, where a large number of displaced people reside on a global scale, is no exception, as data on disability among refugees in Turkey are unavailable and laws and policies overlook the needs and aspirations of this population (UNCRPD Committee, 2019b).

Syrians in Turkey are under a temporary protection regime, initially adopted as an emergency response to the large-scale movement of Syrians. It was formally integrated into domestic legislation with the implementation of Turkey’s first asylum law, the Law on Foreigners and International Protection, in 2013 and the adoption of the Temporary Protection Regulation in 2014. It provides a lesser package of rights compared to the Refugee Convention, awaiting repatriation of Syrians when conditions become suitable for their return. The temporary protection scheme was designed in line with the EU model; however, in its Turkish implementation, it does not have a time limit and does not provide meaningful access to the right to work. Access to work permits for Syrians under temporary protection is conditional upon employers applying for the work permits and they are often reluctant to do so (Republic of Turkey, 2016). According to the latest official statistics, 91,500 Syrians obtained work permits in 2021 and only 5,355 of them were women (Ministry of Labour and Social Security, 2021). In contrast, temporary protection provides access to public services such as education and health, including rehabilitation services for people with disabilities on equal terms with nationals (Republic of Turkey, 2014, Art. 26; UNCRPD Committee, 2019a).

However, even when refugee women with disabilities are included in policy responses, they are not recognised as active agents but are mainly depicted in terms of their “vulnerabilities.” In Turkey, domestic legislation on refugee protection refers to people with disabilities, pregnant women, single mothers, and women who have been subjected to violence as “persons with special needs” (Republic of Turkey, 2013, Art. 3(l); Republic of Turkey, 2014, Art. 3(l); see also Kivilcim, 2016). While it is crucial to recognise and identify the special needs of disabled women and extend services and support accordingly, focusing solely on their “vulnerability”

and “dependency” disregards their agency. The relationship between gender and disability should not centre merely on finding “common grounds” of vulnerability, preventing attempts to formulate alternative policies (Fiske & Giotis, 2021, p. 448). As leading international organisations have clearly stated (UNDRR & UNHCR, 2024, p. 13), the agency of disabled refugee women and their participation in decision-making remain among the least discussed topics in current humanitarian and refugee responses.

### 3. Methodology

Qualitative research was conducted in Gaziantep, a city located near the Turkish-Syrian border, in 2019 and 2024. The first fieldwork was undertaken by the first author for a previous research project, during which four semi-structured interviews were conducted with Syrians with disabilities. One of the participants, Heba, who later became a good friend of the first author, inspired the present work. As a Syrian refugee woman with severe impairments, she was inspiring in her struggle to be an active member of society despite the challenges she faces at many levels, including various forms of discrimination, restricted access to rights, and financial hardships. Together with her experiences, the way she engaged in conversation, presenting herself by sharing additional information and thereby enriching her narrative while addressing open-ended questions, motivated both this study and its methodology.

In the second round of fieldwork, the first author conducted open-ended interviews with ten disabled Syrian women and an expert on disability as a key informant. The author suggested some topics to be discussed but primarily encouraged the participants to share their own stories. Participants were reached through one of the major NGOs in Turkey. The key informant, who worked at that NGO, guided us in understanding the complex system of refugees’ access to disability rights and services in Turkey. All participating Syrian women self-identified as disabled; some had also obtained medical reports to be officially recognised as individuals with a disability. Except for Heba’s interview, which was conducted in Turkish in her workplace, all interviews were conducted in Arabic in the participants’ homes, preferred by the participants as the most suitable location considering their experiences of restricted mobility. During these interviews, another Syrian woman accompanied the author as an interpreter. Before beginning the interviews, all participants were informed about the scope and aim of the research, and their written consent was obtained. Pseudonyms have been used to protect the participants’ identities.

The adoption of narrative analysis allowed us to explore the ways individuals make sense of their lives through storytelling, providing a deeper understanding of their personal and social realities (Riessman, 2008). Narratives were co-constructed during the interviews, with participants actively shaping their stories in response to their interactions with the author, thereby offering insights into their lived experiences. In this way, the narrative approach helped uncover the multi-layered and contextually situated nature of Syrian women’s experiences (Czarniawska, 2004). This approach was particularly beneficial for the present study as the research involved refugee women with disabilities, who are considered to be one of the most “difficult-to-reach” groups, particularly by external researchers (Harris & Roberts, 2006, p. 155). The gendered power structures in Syrian society, which may lead women to refrain from entering public spaces, make it challenging to reach out to refugee women with disabilities (Curtis & Geagan, 2016, p. 6).

Adopting the narrative approach enabled us to focus on the complex experiences of Syrian women, including their experiences of disability, being a refugee, and being a woman with a disability in exile, and helped us

reveal the moments when our participants most strongly experienced the discrepancy between “ideal and real, self and society” (Riessman, 2002, p. 219). For instance, Amina, who left Syria when she was 17 years old, described her struggle to navigate between the expectations of her husband’s family that she be a “good wife” and her own aspirations for agency, autonomy, and becoming an active member of society, thus underlining the conflict between her ideal self and various societal constraints. Uncovering these moments is crucial as they provide deep insights into how individuals negotiate their sense of self within the context of societal constraints and expectations, offering a richer understanding of their agency in the face of adversity (Riessman, 2008, pp. 105–112).

Although we conducted fourteen interviews in total, we ultimately decided to focus on the stories of Amina, Leyla, and Heba for our narrative analysis. Their stories were particularly rich, offering in-depth insights into the common themes that emerged from our research (Oliver, 1998). We incorporated other participants’ experiences into the study as needed, but by concentrating on three main narratives, we were able to explore the nuances and complexities of lived experiences in greater detail, resulting in a more vivid and focused analysis. All interviews with Syrian women aimed at the interactive creation of knowledge and focused on the women’s experiences and agency. However, in four interviews, participants were accompanied by another person from the family, which potentially hampered what the women could discuss. In three instances, their relatives jumped into our conversations and spoke on behalf of the participants. In the presence of relatives, we avoided discussing sensitive topics such as relationships within the family unless the interviewees initiated such a conversation themselves. While the presence of relatives posed a challenge to sustaining the “active participation” of disabled refugee women (Dew et al., 2021, p. 2868), it simultaneously reflected the complex dynamics of power in the everyday lives of these women. Following all interviews, we followed up with our participants through the NGO to ensure their well-being.

#### 4. Amina’s Story: Intersecting Forms of Exclusion

At the time of our interview, Amina, a 26-year-old Syrian woman, had been living in Gaziantep for 11 years with her husband and daughter, her husband’s brother and his family, and another single brother of her husband. Her story is a vivid expression of how traditional gender norms, the insecurities of living in exile, and the complexities of navigating bureaucratic systems for access to support for disabled people lead to intersecting forms of exclusion. Her life in Turkey, Amina explained, is largely confined to the tiny home she shares with her “husband’s crowded family” (Amina, 21 March 2024). Due to their financial hardships, they cannot live independently. However, life in the extended family is not a comfortable one:

We are always together, eating together, spending the whole day together. They are *non-mahram* to me [i.e., a person to whom marriage is permissible, with a Muslim woman required to cover herself in the presence of such a person], so I can’t even take off my hijab at home—they should not see me without it.

Amina came to Turkey when she was 15. Her father was afraid to send her to school in a foreign country and arranged a marriage to keep her “safe,” but that safety meant home confinement. She melancholically recalled how she was happy and successful in school back in Syria. After her marriage, her husband and his family did not permit her to leave the home. In her own words: “I don’t leave home at all. In our culture, women do not go out, attend classes outside, or do anything outside” (Amina, 21 March 2024). It was impossible for her, she explained, to learn Turkish, attend classes, and get to know Turkey and Turkish people.

She has had an impairment of her foot since birth. An operation in Syria was unsuccessful, and a subsequent surgery in Turkey six years ago was only partially successful. She still cannot wear shoes and cannot stand for long, and on some days, she experiences intense pain that prevents her from walking. However, she does not have an official disability report since she cannot leave home readily and finds hospital procedures too complicated to manage. Samira, 37 years old, and Rana, 40 years old, made similar comments, supporting Amina's view that the process of obtaining a disability report as a Syrian refugee woman in Turkey is complicated. Both Samira and Rana had been living in Gaziantep for seven years with their families.

Samira lives with her husband and three children. She struggles with pain in her feet, which makes it nearly impossible for her to stand or walk on her own. She explained that she is "always dependent on family members in everyday activities" (Samira, 20 March 2024). Rana was a teacher in Syria and now lives with her mother and two sisters in Gaziantep. She has a vision impairment and struggled to find a suitable job in Turkey (Rana, 20 March 2024). Like Amina, both Samira and Rana spend most of their time at home, making it impossible for them to learn Turkish. Samira pointed to the traditional understanding in the Syrian community that public spaces are not safe for women, while Rana underlined the inaccessibility of public spaces for people with disabilities (Tascioglu, 2022, p. 200). Home confinement due to traditional gender roles, the language barrier, the hardships of navigating the bureaucratic system in a foreign country, and the lack of disability-inclusive facilities have been the main obstacles preventing them from obtaining medical reports. Since they are not officially identified as disabled, they do not meet the institutionalised "vulnerability" criteria; accordingly, they cannot benefit from major humanitarian aid programmes. Amina explained:

I can't work since my husband's family finds it shameful for women to work. I can't get humanitarian aid. I never buy anything for myself or for my 5-year-old daughter. I can never spare money for my personal needs....My life is all about raising my children in this home. (Amina, 21 March 2024)

"If I had the chance," she added, "I would continue my education and have a profession....If I had been asked, I would not have gotten married."

She was eager to complete her application for resettlement in a third country, which has been in process for the last three years. For Amina, resettlement is a strategy to overcome intersecting forms of exclusion: to get away from her husband's extended family, be able to go to school or work, and be seen and recognised for her needs, aspirations, and abilities.

## 5. Leyla's Story: The Medical Approach to Disability Reports—"Am I Disabled Enough?"

When we visited Leyla's house, she welcomed us at the door. We entered a large, very dark room with no furniture except for a television and a stove, which was not lit. Leyla's mother-in-law was lying on a floor mattress in the corner, and her four children—the youngest was 3 and the oldest was 11—were playing together. There were many plastic pieces lying on a cloth spread out in the middle of the room, which we only understood after Leyla explained what they were. After inviting us to sit, she said, "If you don't mind, I'll continue making slippers while we talk," and then she began working (Leyla, 22 March 2024). During our conversation, we learnt from her mother-in-law that Leyla had worked making slippers all night without sleep. She was working extra hours to buy new clothing for her children for the upcoming Eid.



Leyla was 42 years old at the time of our interview, living with her husband, four children, and mother-in-law. Her narrative opens new insights into rethinking the identification of disabilities in medical assessments. For Leyla and her husband, who both self-identify as disabled, the already limited opportunities of living in exile are further exacerbated by their exclusion from institutional care and support systems since they are not recognised as “disabled enough.” Leyla had come to Turkey with her family 11 years ago from Aleppo. She had a stroke when she was a child, leading to a loss of sensation in her right foot. Walking is difficult; she cannot walk or stand for long periods. Her husband has similar challenges in walking and standing because one of his legs is shorter than the other. Before the war, he worked as a state employee in Syria with medical recognition as a disabled person. Leyla fondly remembers their life in Syria, where her family was happy before their home was destroyed by a bomb during the war.

When they first came to Turkey, they went to a state hospital, where their medical expenses were covered, for medical examinations. They were highly satisfied with the health services, and Leyla even recalls giving birth in the same hospital as a pleasant memory. Since her mother-in-law is a Turkmen Syrian, she accompanies Leyla to hospital appointments, allowing them to navigate the health system without facing language barriers. However, Leyla explains: “They told us that neither my husband nor I have the required percentage of impairment [i.e., 40 percent] to be officially recognised as a person with a disability.”

Reestablishing their lives in Turkey has been complicated for Leyla and her husband due to their impairments. Since they could not obtain official disability reports, like Amina, they have been excluded from humanitarian aid and social care schemes. Leyla’s husband has attempted several times to work irregularly in tailoring workshops, since obtaining a work permit is nearly impossible for Syrians under the temporary protection regime (see Section 2). Unfortunately, these attempts all failed; each time, he was asked to work faster, which is impossible for him since he cannot stand easily. When the already limited options for viable employment for Syrians intersect with invisible or disregarded disabilities and exclusion from humanitarian aid and social care schemes, it results in aggravated precarity. For Leyla, this means assembling slippers through the night at home, in alignment with traditional gender norms, to earn a very small income. It also means not being able to leave home except for hospital visits and lacking opportunities to participate in social life.

## 6. Heba’s Story: No Benefits of Recognition

Heba’s story not only vividly shows the agency of disabled Syrian women but also signifies the urgent need and failure to recognise their agency:

Everything is still the same. I use a card on the bus just like you [implying that she still cannot benefit from the discounted fare for disabled individuals]. In fact, some things have gotten even harder....The living conditions have become very harsh, but let’s hope things will get better. (Heba, 20 March 2024)

This is how the conversation with Heba began when we asked her what had changed in her life in the last five years, since our first interview in 2019. Her reflections underscored the persistent and evolving challenges she faces, offering a poignant entry point into her broader narrative.

Heba has an official disability report indicating over 80 percent impairment. A spinal impairment as a child confined her to bed until she was 12 years old, preventing her from “living her childhood.” After years of traumatic treatments, she began using a wheelchair. She described her life as nice before the war in Syria; she was very satisfied with her job as a designer in the textile industry. When the war broke out, she was in Aleppo, while her family was outside the country. The family reunited in Gaziantep after her harsh journey to Turkey, where she has been looking after her family for the last 14 years. Her father and mother are dependent on her, she explained; she is the only breadwinner in the family as her 30-year-old sister stays home to take care of their parents. When their savings were depleted in their first year in Turkey, Heba started working at textile industry fairs. She was later hired by a textile firm thanks to her previous experience and Turkish language skills (Heba, 15 May 2019).

Heba has been eager to help others with disabilities and hoped to find a job as a translator where she can support disabled Syrians. She has spent her weekends volunteering for international organisations, NGOs, and the local municipality. However, in her search for jobs, she has faced various forms of discrimination:

I applied to hospitals for jobs, but they rejected me. Once, a doctor told me they were looking for a disabled translator, but one who could walk. I asked him how he got to the third floor; he said by elevator. I told him I do the same, I slammed the door, and I left....I worked at a real estate agency. It's not seen as a job for a woman. I had to quit after eight months because they were not applying for my work permit. I was working there illegally....I was volunteering at an international organisation as a translator, but they kept me waiting for years for a paid opportunity. I asked them: “Why don't you hire me, why do you only benefit from my services for free?”...Finally, I started working as a translator for an NGO. But they made me wait as a volunteer for two and a half years. They said they didn't have the physical capacity to hire someone like me. Later on, they made modifications, and I started working. I'm quite happy here; it's my dream job. (Heba, 15 May 2019)

While she struggled to find a job, Heba also faced difficulties in finding suitable housing due to discrimination against Syrians in the housing market, the challenge of finding a home suitable for her wheelchair, and her need for a secure flat as an unmarried woman. Everything had worsened, she explained, when we met again for the second interview in 2024. Due to the worsening economic conditions in Turkey, it had become even more difficult to obtain or extend work permits. The only options she could foresee were either obtaining Turkish citizenship or resettling in a third country.

Heba's experience underscores a broader issue: Syrians with disabilities cannot benefit from the advantages provided to Turkish citizens with disabilities, such as free bus tickets and employment quotas. This sentiment was echoed by 37-year-old Reem, who described how her life had improved significantly after obtaining Turkish citizenship in 2018. Reem was injured in a bombing in 2016, which led to her leg being amputated after she was transferred to Turkey. Her family followed her to Turkey. After obtaining Turkish citizenship, official identification as a person with a disability was much easier and she found it easier to secure a job. She also registered for the state's social benefits. Additionally, her son, who has an intellectual disability, was able to enrol in a special private school thanks to her citizenship. None of these opportunities were possible with a Syrian ID, she emphasised (Reem, 28 May 2019).

## 7. Discussion

These narratives of Syrian women reflect exclusion resulting from the interaction of traditional gender norms, ableist structures, and the discrimination they face in exile. Amina's story is a depiction of such intersectionality, entailing gendered norms that have prevented her from going to school, working, engaging in social life in Turkey, or learning Turkish (Körükmez et al., 2020, p. 3) together with the hardships of navigating the bureaucracies of the healthcare system with a language barrier and the disadvantages of living in exile with experiences of disability without officially being recognised as a disabled person. Her strong narrative reveals that when such different grounds of discrimination intersect, the exclusion is greater than the sum of its parts (De Beco, 2020, p. 593). The experiences of exclusion among Syrian refugee women with disabilities are varied, including but not limited to exclusion from public spaces, everyday life, social and economic domains, and humanitarian aid or social care schemes.

Nevertheless, the “intersectionality of complex lived experiences” is often ignored in policymaking (Wells et al., 2020, p. 394). Syrian women are not supported in their struggles, particularly in the identification of their disabilities and the accessibility of public services and spaces. Despite the alignment of domestic legislation with the CRPD and its human rights approach, Turkey still follows a medical approach in practice regarding the issuance of disability reports (Confederation of the Disabled of Turkey, 2018, p. 5). The assessment of disability is not merely a bureaucratic process; it has a “verdictive character” (Davis, 2005, p. 157). Medical reports are crucial for accessing disability rights and services, including medical support such as wheelchairs, diapers, or prosthesis implants (Key Informant Interview, 21 March 2024).

Applications for the recognition of disability are assessed by a disability health committee, which is not present at every hospital. In such cases, referral to other hospitals with disability health committees is possible (Key Informant Interview, 21 March 2024). Jennet, a 28-year-old Syrian woman, indicated that it was only at the fourth hospital that she was able to access a committee to obtain her medical report (Jennet, 21 March 2024). After completing various medical tests and physical examinations, the degree of disability in the medical report must be 40 percent or more for adults to gain access to rights and services for disabled individuals (Ministry of Family and Social Services, 2023). Leyla's story underlines the risk of failing to capture actual experiences of disability with the medical model (Smith-Khan et al., 2014, p. 59). Both Leyla and her husband have impairments and experience disabilities that prevent them from fully participating in daily activities or working without reasonable accommodations. However, the contextual, gendered, and environmental factors that disabled Syrian women face, especially in the context of displacement, are ignored.

Official medical reports do not necessarily help overcome the exclusion of Syrian women. Access to particular rights and services, such as discounted bus tickets, provided to disabled individuals requires disabled identity cards, which are provided for Turkish citizens or former Turkish citizens by birth who acquired other nationalities and their descendants, and are subject to apostille procedures (Republic of Turkey, 2023, Art. 4.). In short, Syrians under temporary protection are further excluded from the already restricted social and welfare systems as Heba repeatedly mentioned in her narrative. Moreover, the Turkish care regime for people with disabilities is based on a gendered, family-oriented structure. Public social services prioritise family support and “officially assessed” neediness. For Turkish citizens, care is commodified within the family, with caregivers being financially supported through a cash-for-care scheme

(Atasü-Topçuoğlu, 2022, pp. 71–72). For Syrians, the only advantage of being identified as having a disability is access to humanitarian aid. The European Union-funded Emergency and Social Safety Net (ESSN) and complementary ESSN schemes provide cash-based financial assistance to nearly two million displaced people in Turkey (3RP, 2023, p. 6). The eligibility criteria include a vulnerability assessment based on factors such as the number of children, elderly individuals in the family, and so on. Having certified disability of 50 percent or more results in additional financial support (Türk Kızılay, 2024). Amina, who cannot obtain a disability report because she cannot readily leave her home, and Leyla, who is not considered “disabled enough” by medical assessors, are unable to access this financial assistance. Humanitarian aid can be lifesaving for people in desperate situations. However, it also reinforces gendered and ableist power structures. Like the cash-for-care scheme for Turkish citizens, the care regime for Syrian refugee women with disabilities resorts to dependence on family care in the absence of institutional support. This leads to disabled Syrian women being dependent on their families, reinforcing the patriarchal power relations within the family.

The exclusion of self-identified Syrian refugee women with disabilities from institutionalised “vulnerability” criteria when they fail to obtain disability reports coupled with their inclusion in only humanitarian aid schemes results in “structural vulnerability,” which is created by the positionality of the individual within “diverse networks of power relations” (Quesada et al., 2011, p. 341). In other words, the precarity of disabled Syrian women is not inherently related to their impairments; rather, it is produced by intersecting power relations. Depictions of disabled women as “dependent,” “vulnerable,” and “in need” in legal regulations (see Section 1), the humanitarian sector, and everyday life clearly ignore the agency of Syrian women. On the one hand, the exclusion of women with disabilities as a result of the intersection of disability and gender becomes normalised, as it is extremely common in the Syrian community (for a similar discussion in the Indian context see Thompson et al., 2023). On the other hand, the agency of Syrian women and their strategies of participation are clearly ignored.

Intersecting identities—such as being a refugee, unaccompanied, an adolescent, and a mother—create significant challenges while also offering opportunities for empowerment and resilience (Vervliet et al., 2014). Heba’s story significantly unsettles the dominant discourse on the dependency and vulnerability of disabled women, as she takes care of her entire family, including her elderly parents and her traumatised sister. However, this does not mean a story as vivid as Heba’s is always needed for the recognition of the agency of Syrian refugee women with disabilities. These women adopt a variety of strategies in dealing with intersecting exclusions: working from home, working as volunteers, striving to obtain disability reports to access (limited) benefits, planning for resettlement, struggling to obtain citizenship, taking care of their loved ones, and planning for the future. In the absence of institutional support mechanisms and due to various discriminations, however, they most often focus on obtaining citizenship or resettlement to third countries among their future plans. Unlike humanitarian aid, which reinforces gender roles and the dominant discourse on dependency, resettlement is seen as a tool to escape such power structures. It is framed as a means to realise aspirations, such as access to education, institutional care systems, and work in suitable conditions, but it is also significantly regarded as a strategy for escaping traditional gender relations within the women’s community.

Since resettlement also depends on an assessment of vulnerabilities, obtaining disability reports is crucial not only for access to humanitarian aid but also for resettlement programmes. In practice, the Presidency of

Migration Management in Turkey approves candidates for resettlement either through its own referral system or by approving referrals from NGOs. The files of resettlement candidates are submitted to UNHCR, which also runs its own vulnerability assessment process. Finally, the resettlement cases are submitted to the relevant third countries. UNHCR's institutional vulnerability criteria include "medical needs or disabilities" and "women and girls at risk" as priorities. This is why nearly all participants of the present study who had disability reports believed that they were automatically on the waiting list for resettlement. However, as Welfens and Bekyol (2021) discuss in detail in the context of EU countries, which are among the top countries for resettlement from Turkey, resettlement and admission programmes operate on a discretionary basis. The gendered bias, for instance, led to an understanding that "women and girls at risk" means a "lack of effective protection normally provided by a male family member" in the UNHCR Handbook until recently (Welfens & Bekyol, 2021, p. 5). Those like Amina who married in line with traditional gendered norms to be secure in exile might be seen as having protection and therefore not at risk, despite the insecurities they constantly face in their everyday lives. When it comes to admission countries, among the candidates for admission, all of whom have been deemed vulnerable, those with "integration potential" are prioritised (Welfens & Bekyol, 2021, p. 5). In terms of being self-reliant for integration, "medical needs or disabilities" may be a barrier rather than an advantage for resettlement. The very small resettlement quotas and the complex procedures of vulnerability assessments also explain why, despite being on the list for years, none of our participants have secured resettlement yet.

## 8. Conclusion

This study has argued that we must adopt an intersectional lens in identifying the societal and structural barriers to the inclusion of disabled refugee women, focusing on the interaction of gender and ableism in the context of displacement. The Turkish case shows that even in a country where refugees are relatively satisfied with their access to health services, disabled refugee women suffer from aggravated disadvantages and exclusion. Through three main narratives, this study has revealed the triple jeopardy facing disabled Syrian women. First, gender-blind approaches to addressing disabilities and displacement deeply affect Syrian women's lived experiences and their access to rights, services, and humanitarian aid. The traditional patriarchal norms in Syrian society dictating that women should not leave their homes, work outside the home, or engage with the wider society deepen in exile due to both real and perceived insecurities that refugee women face in public spaces. Home confinement prevents Syrian women from navigating the bureaucratic processes of being identified as individuals with disabilities and benefiting from the associated rights and humanitarian aid. Second, empirical data reveal the pitfalls of the medical approach and the requirement of a certain percentage of impairment for the issuance of a disability report, particularly for refugee women. This epitomises how exclusion from the already restricted institutional care systems leads to aggravated precarity in refugee women's lived experiences when they struggle to overcome societal and structural barriers to their inclusion in social and economic domains on their own. Third, our findings uncover failures that arise in addressing disabilities when the dynamics of displacement are ignored. Even when Syrian refugee women overcome gendered barriers and the shortcomings of the medical approach to be officially recognised as individuals with disabilities, they still struggle to rebuild their lives in the context of restricted inclusion in society as non-citizens. They lack equal access to rights and services while they embark on strategies of survival in exile. Therefore, we argue that it is the intersection of gender, disabilities, and displacement that shapes the particular and aggravated exclusions of refugee women with disabilities.

However, the narratives presented here also show that these intersecting exclusions do not mean that Syrian women in Turkey lack agency in rebuilding their lives. On the contrary, they can turn the traditional understanding of dependency upside down, adopt roles as breadwinners, take care of their families, volunteer for other disabled refugees, and resist stigmatisation. They not only find ways to navigate gendered and ableist structures to participate in economic and social domains but also strategise to rebuild their futures, for instance by pursuing resettlement. This study has argued that despite the introduction of intersectional approaches, particularly after the adoption of the CPRD, practices of refugee protection in Turkey and beyond do not sufficiently support disabled refugee women. The international and national protection policies have not been aligned to consider the particular needs and agency of refugee women with disabilities, often leading to the provision of only (limited) humanitarian aid or leaving these women to fend for themselves. We conclude by arguing that institutional care and support mechanisms acknowledging the intersectionality of exclusions (gendered power relations, ableism, and displacement) must be put in place, recognising the particular needs and aspirations of refugee women with disabilities and significantly recalibrating international and national discourses on the protection of refugees by enhancing their agency and participation.

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### Conflict of Interests

The authors declare no conflict of interest.

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## About the Authors



**Yasemin Karadag Avci** is a lecturer in the International Relations Department at Hitit University, specialising in international law. She earned her PhD from the School of Law at the University of Warwick. She is a member of the Refugee Law Initiative at the University of London and has extensive experience in the non-profit sector. Her research focuses on the legal integration of refugees, the socio-legal dimensions of refugee protection in Germany and Turkey, and the intersectional aspects of refugee experiences.



**Irem Sengul** holds a PhD in international law from the University of Warwick. She is an assistant professor at the Faculty of Law, Ankara Yildirim Beyazit University. She is also part of the Refugee Law Initiative (University of London) Research Affiliates Network. Her research focuses on temporary protection regimes, gendered issues in refugee protection, and socio-legal studies. She is currently involved in a research project focusing on refugee women's participation in decision-making processes.