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**THE HUMAN RIGHTS OF SYRIAN REFUGEE WOMEN:
A COMPARATIVE ANALYSIS OF HEALTHCARE ACCESS AND
EDUCATIONAL OPPORTUNITIES IN TURKEY AND GREECE**

Doctoral Dissertation - Thesis Booklet

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Budapest, 2026

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1. Research background and justification for the selection of the topic

Syria continues to represent one of the world's most significant forced displacement situations, with more than 14 million Syrians having fled their homes since the conflict began in 2011 (UNHCR, 2025). Syrian women constitute a substantial portion of this displaced population, as women and children together represent 75% of Syrian refugees (Samari, 2017). Yet their specific protection needs remain systematically unmet despite decades of international commitments to gender-responsive refugee protection.

This dissertation investigates the implementation gaps between formal legal entitlements and actual access to healthcare and educational opportunities for Syrian refugee women in Turkey and Greece between 2015 and 2025. The central research puzzle is one of convergence: despite fundamentally different legal frameworks, Turkey's temporary protection regime, operating outside the 1951 Refugee Convention, and Greece's EU Common European Asylum System, Syrian women in both countries encounter strikingly similar patterns of systematic exclusion. This convergence demands explanation beyond legal analysis alone.

The research is guided by the main question: *How do implementation gaps affect Syrian refugee women's access to healthcare and education in Turkey and Greece (2015–2025)?* Three sub-questions examine the specific barriers women face despite formal entitlements, the role and effectiveness of NGOs in bridging protection gaps, and the causes of convergent outcomes across legally distinct systems.

Three gaps in existing scholarship justify this research. First, comparative analyses capable of explaining why similar protection failures arise across different legal systems are underdeveloped; most studies focus on single-country documentation. Second, no integrated analytical framework has been developed to show how implementation barriers interact and compound one another. This dissertation addresses this gap through a four-factor implementation gap framework — encompassing bureaucratic inefficiencies, geographic disparities, limited institutional capacity, and gender-blind service design — applied comparatively across both contexts. Third, empirical research grounded in Syrian women's own testimonies remains scarce, partly because the Assad regime had generated well-founded fears that prevented open disclosure. The collapse of the Assad government in December 2024 made it possible to conduct interviews with Syrian refugee women under conditions of genuine safety, rendering the primary data collected for this research historically significant.

The selection of healthcare and education as the two focal domains is justified by the fact that both are explicitly guaranteed under the respective legal frameworks in Turkey and Greece, making any implementation gaps directly attributable to institutional failures rather than legal omissions. These sectors also carry compounding consequences: inadequate healthcare access undermines physical wellbeing and reproductive autonomy, while inadequate educational access forecloses integration, economic independence, and intergenerational opportunity.

The theoretical justification for the research lies in its application of feminist institutionalism (Chappell, 2006; Acker, 1990), which reveals how apparently neutral bureaucratic structures

embed gendered assumptions that systematically disadvantage women. Both protection systems have institutionalised an 'abstract refugee' modelled on male mobility and freedom from caregiving responsibilities, a logic that renders Syrian women's circumstances invisible regardless of their formal legal entitlements. This framework offers a more analytically powerful explanation for the convergence of protection failures than legal or resource-based accounts alone.

2. The Methods Used

This study employs a qualitative comparative case study design, incorporating document analysis and semi-structured interviews to achieve a comprehensive understanding of the protection of Syrian refugee women's rights. The qualitative approach allows in-depth exploration of policies, legal frameworks, lived experiences, and institutional responses while capturing the complexity of how gender, displacement, and legal status intersect to shape Syrian women's protection outcomes.

Comparative Case Study Approach

This research adopts the "most different systems design" (MDSD) comparative approach (Przeworski & Teune, 1970), examining Syrian refugee women's protection in two countries with fundamentally different legal and political systems that receive the same displaced population. The MDSD methodology examines different systems to identify whether similar outcomes occur despite systemic differences, allowing investigation of factors that transcend specific institutional arrangements (Przeworski & Teune, 1970). The underlying logic follows Mill's (1843/1970) method of agreement: when cases that differ in most respects nevertheless produce similar outcomes, the explanation must lie in factors common to both systems rather than in their institutional differences.

Turkey represents a temporary protection regime specifically designed for Syrian displacement, operating outside standard refugee status determination and implemented in a non-EU context. The Turkish framework provides group-based protection without individual asylum processing, creating a parallel legal status specifically for Syrians. Greece represents the EU asylum system implementation, where Syrian women undergo individual refugee status determination according to the Common European Asylum System (CEAS) procedures, operating within democratic EU governance structures with EU institutional oversight.

This methodological choice allows systematic investigation of whether institutional differences produce different protection outcomes, or whether implementation factors transcend legal system variations. If protection failures converge despite different legal frameworks, this provides evidence that implementation gaps, rather than legal framework inadequacy, explain Syrian women's exclusion from rights.

Case Selection and Time Frame

Both Turkey and Greece serve as primary reception countries for Syrian displacement, with Turkey hosting the world's largest Syrian refugee population (approximately 3.6 million) and Greece serving as a major EU entry point. Both countries implemented specific legal frameworks in response to Syrian displacement, allowing a temporal comparison. Geographic proximity means Syrian women in both countries fled similar circumstances and made similar migration decisions, controlling for pre-displacement factors.

The comparison reveals whether EU membership and democratic governance genuinely improve Syrian women's protection outcomes, or whether resource constraints and implementation capacity matter more than legal frameworks—a question with significant policy implications for refugee protection globally.

The research examines Syrian refugee women who arrived between 2015 and 2025, covering the period of mass Syrian displacement to Europe and subsequent protection framework development. This timeframe captures: Implementation of Turkey's Temporary Protection Regulation (2014) and its application to growing Syrian populations, the EU-Turkey Statement (2016) and its impacts on Syrian women's mobility and protection, development of Greece's asylum system reforms (2016-2022) specifically responding to Syrian arrivals, and evolution from emergency response to longer-term integration challenges.

This ten-year period allows examination of both immediate displacement experiences and longer-term protection trajectories as Syrian displacement becomes increasingly protracted.

Data Collection

Three data collection methods were employed

Document analysis. Primary legal sources were analysed, including Turkey's Temporary Protection Regulation (2014), the EU–Turkey Statement (2016), Greece's Asylum Code (Law 4939/2022), EU directives on reception conditions, and relevant bilateral and international instruments. Secondary sources included AIDA country reports, UNHCR data, EU institutional reports, and civil society publications documenting the implementation of formal frameworks.

Semi-structured interviews with NGO representatives. Six NGO representatives participated — three based in Turkey and three in Greece — representing a purposively selected sample combining international organisations, local NGOs, feminist advocacy groups, and a refugee-led initiative. Organisations were selected on the basis of direct service provision to Syrian women, a minimum of five years of operational experience, and thematic diversity across healthcare, legal protection, psychosocial support, economic empowerment, and gender-based violence prevention. Geographic representation included both island and mainland contexts in Greece and border and urban areas in Turkey. Interviews were conducted via Zoom between February and August 2023, lasted 90–120 minutes each, and

were conducted in English. Participants were assigned anonymous codes (P1–P6) to protect confidentiality.

Semi-structured interviews with Syrian refugee women. Eight Syrian refugee women participated — four in Turkey and four in Greece — recruited through snowball sampling via NGO and community contacts. Participants ranged in age from 25 to 56 years, varied in educational background (primary to postgraduate), and included women at different stages of protection procedures (temporary protection status in Turkey; asylum seeker and recognised refugee statuses in Greece). Interviews were conducted via WhatsApp phone calls between July and September 2025, lasted 60–90 minutes each, and were conducted primarily in Arabic. As a native Arabic speaker from Syria, I conducted and translated all interviews without the need for third-party interpreters, enabling fuller linguistic and cultural communication. Interviews were voice-recorded with participants' explicit consent.

Researcher Positionality and the Political Context of Data Collection

A critical contextual factor shaped the data collection timeline. From the beginning of the doctoral research in 2020, all attempts to recruit Syrian refugee women as interview participants failed. Syrian women consistently declined participation or expressed fear about speaking openly, even under guarantees of anonymity, due to well-founded concerns about risks to family members remaining in Syria under the Assad regime.

The collapse of the Assad government in December 2024 fundamentally transformed Syrian refugees' willingness to participate in research. Following this political transformation, recruitment became possible, and most participants agreed to the use of their real first names — a decision unthinkable under previous conditions. The interviews conducted for this dissertation are consequently among the first empirical accounts of Syrian refugee women's lived protection experiences collected under conditions of genuine safety and voluntary disclosure.

My Syrian background and native Arabic fluency provided significant methodological advantages: shared cultural context created rapport, facilitated understanding of gender norms and family dynamics, and eliminated the translation distortions that third-party interpretation would have introduced. I have disclosed my positionality as a Syrian researcher throughout the analysis, treating it as an asset for cultural proximity while maintaining analytical reflexivity.

Analytical Framework

Data analysis was conducted through the four-factor implementation gap framework developed in this research, examining how bureaucratic inefficiencies, geographic disparities, limited institutional capacity, and gender-blind service design interact to produce protection failures across both contexts. Feminist institutionalism provided the overarching theoretical lens, directing analytical attention to the gendered assumptions embedded in institutional structures, implementation practices, and service design choices. Document analysis and interview data were analysed thematically and comparatively, with findings presented by

sector (healthcare, education and integration) before synthesis in the cross-cutting discussion chapter.

3. Scientific Results of the Dissertation

The results below are drawn from comparative analysis of legal frameworks, policy documents, semi-structured interviews with eight Syrian refugee women and six NGO representatives across Turkey and Greece, and application of the four-factor implementation gap framework to both healthcare and education/integration sectors.

Main Research Question

- Implementation gaps function as systematic mechanisms of exclusion that transform formal legal entitlements into inaccessible promises. They operate through four interconnected structural factors — bureaucratic inefficiencies, geographic disparities, limited institutional capacity, and gender-blind service design — that are features of protection systems, not incidental failures.
- The four factors operate *multiplicatively*: addressing one barrier provides no access when others remain. A Syrian woman without Turkish language skills, restricted from intercity travel, living without Arabic-speaking medical staff, faces complete healthcare exclusion despite valid legal rights.
- Formal legal equality coexists with systematic gendered exclusion. Women with protective factors — language proficiency, urban location, family support — navigate services successfully; women facing compounded vulnerabilities experience complete exclusion despite identical legal entitlements, constituting human rights violations under international law.

Sub-question 1: Specific Barriers to Healthcare and Education Access

- **Bureaucratic inefficiencies.** Neither Turkey nor Greece legally requires interpretation at healthcare or education facilities. Both systems construct an 'abstract refugee' presumed capable of navigating services in languages they do not speak (Acker, 1990). Faihaa (Turkey) was forced to use her son as interpreter for gynaecological consultations because promised hospital translators were absent. In Greece, state-funded interpretation was completely suspended by mid-2024 (AIDA/GCR, 2025, p. 20,22), leaving women reliant on mobile phone translation for medical appointments. Turkey's demand-based education provision (Article 28) required women to request services through the institutional systems that denied them the language skills to do so.
- **Geographic disparities.** Turkey's provincial registration required intercity travel permits that were frequently denied — access depended on 'the employee and your luck' (Faihaa). Greece's Ministerial Decision 1140/2019 confined asylum seekers to islands without specialised services. Walaa travelled two and a half hours to a hospital, was turned away despite a confirmed appointment, and made the return journey in pain. Both systems trapped women in locations regardless of service availability, disproportionately affecting those with childcare responsibilities and mobility constraints.

- **Limited institutional capacity.** In Turkey, large-city hospitals faced severe interpreter shortages by 2024, forcing patients to hire translators by the hour (AIDA/GCR, 2025, p. 218); NGO P3 faced closure because funders excluded rent from budgets. In Greece, interpretation services were fully suspended (AIDA/GCR, 2025, p. 20); Niveen's child received one autism therapy session per week — clinically insufficient; Walaa attended a 15-day language course described as inadequate exposure rather than education. Funding for refugees declined in both countries (P6), creating a scale mismatch: P1's cooperative supported 40 women while hundreds of thousands needed assistance.
- **Gender-blind service design.** The absence of childcare in language courses, vocational training, and health education was the most consistent cross-systemic barrier. Haya (Turkey) and Niveen (Greece) both identified lack of childcare as the reason they could not attend language courses. Healthcare facilities provided no guarantee of female interpreters for sensitive consultations; Niveen felt 'embarrassed to talk about private health problems in front of a male translator', effectively excluding her from reproductive healthcare. Financial assistance programmes in Turkey excluded women caring for elderly relatives, assuming all recipients were mothers with minor children — rendering Nadia invisible despite her caregiving responsibilities.

Sub-question 2: NGO Role and Effectiveness

- NGOs in both countries provided essential but structurally insufficient support. In Turkey: P1 offered physiotherapy, psychological support, and legal services using Arabic-speaking staff, and operated a livelihood cooperative for 40 women; P2 directly followed up with hospitals delaying legally required care and physically accompanied women to ensure services were provided; P3 implemented a 13-week sexual and reproductive health education programme, training peer educators to disseminate information in Arabic.
- In Greece: P4 provided prenatal outreach to camps and home-based postpartum services during the first 40 days; P5 offered integrated programmes with dedicated childcare as standard provision; P6 applied a survivor-centred, human rights-based methodology, keeping survivors at the centre of all processes.
- Structural limitations constrained effectiveness across both countries: organisations served dozens to hundreds of women while hundreds of thousands required support; Greece's Law 4939/2022 restricted NGO access to camps, with only two or three large organisations permitted entry (AIDA/GCR, 2025, p. 172); and declining donor funding threatened programme continuity. Nadia's experience — receiving no functional support from either state or NGO services despite being among the most marginalised participants — illustrates how services are concentrated in accessible urban areas, while the most vulnerable women in remote locations fall through all safety nets.

Sub-question 3: Explaining Convergent Outcomes Across Different Legal Systems

- The convergence of protection failures across Turkey's temporary protection regime and Greece's EU asylum system is explained by *institutional logic rather than legal design*. Both systems institutionalised an 'abstract refugee' modelled on male mobility and

freedom from caregiving — assumptions that rendered Syrian women's circumstances systematically invisible regardless of their formal legal entitlements (Acker, 1990; Chappell, 2006).

- The four factors operated identically across both countries despite different mechanisms: bureaucratic inefficiencies excluded through omission; geographic disparities created parallel immobilities through provincial registration (Turkey) and island containment (Greece); limited institutional capacity manifested through interpreter shortages and NGO funding decline in both contexts; gender-blind service design excluded mothers through absent childcare and inappropriate scheduling.
- Political will functions as the underlying force sustaining implementation gaps. Both countries have adopted increasingly restrictive refugee policies — Turkey's EU–Turkey Statement (2016) and Greece's Asylum Code (Law 4939/2022) introduced containment measures and accelerated inadmissibility procedures — creating political climates in which gender-specific protection gaps are not a priority.
- The findings demonstrate that formal legal reform without institutional transformation cannot achieve substantive equality. Laws can be amended, and entitlements expanded, yet if the gendered assumptions, resource priorities, and informal norms embedded within implementing institutions remain unchanged, protection outcomes for refugee women will continue to converge around exclusion regardless of the legal architecture above them.

Theoretical and Analytical Contributions

- The research advances feminist institutionalist theory by providing empirical evidence that gendered institutional mechanisms transcend formally distinct policy architectures. Identical exclusion patterns — language omissions, geographic immobility, capacity failures prioritising male-normative services, gender-blind design — arose under both Turkey's Temporary Protection Regulation and Greece's EU asylum system, confirming Chappell's (2006) premise that gendered institutional operations are not a product of specific legal frameworks.
- The four-factor implementation gap framework constitutes a replicable analytical tool for studying protection failures in other refugee contexts. It reveals that these factors operate as an interconnected system: partial solutions that address one factor in isolation produce no meaningful access when others remain operative.
- The findings challenge narratives attributing access barriers to individual refugee deficits. The evidence relocates explanatory responsibility within institutional structures: services were designed around assumptions that Syrian women were systematically denied the capabilities to meet, making exclusion an institutional product rather than an individual failure.

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