Stigma in the Lives of Refugees Living in Turkey

You are invited to the next Migration Talk organized by the Jean Monnet Chair in Legal Aspects of Migration Management in the European Union and in Türkiye.

Speakers: Dr. Hamed Abdollahpour Ranjbar (Istinye University), Khaled Elazab, MA (Clark University), Yomna Nassar, MA (Koç University), Farah Amayreh (Koç University), Dr. Ibrahim Yigit (Florida State University), Prof. Dr. Janet Molzan Turan (Koç University), and Prof. Dr. Bülent Turan (Koç University)

Title:Stigma in the Lives of Refugees Living in Turkey

Date and Time: Monday, May 4, 2026 – 12:30 PM – 1:20 PM (Turkish Time)
Event Location: via Zoom (The Zoom link shall be provided upon request: migration@bilkent.edu.tr)

The event will be held in English.

Abstract
The research is conducted with Syrian and Afghan refugees living in Istanbul, Turkiye to explore and examine effects of stigma and microaggressions in these populations.
It is based on 8 focus groups separately for men and women, four groups with Syrian refugees and four with Afghan refugees, with 4-10 participants in each group. Participants shared that stigma and microaggressions were central forces shaping every dimension of their daily life, well-being, and future plans. The intensity and ubiquity of these experiences appeared to exceed what is commonly documented in other stigmatized populations, owing in part to the visibility and politicization of refugee identity in the current sociopolitical climate in Türkiye, which allows and condones stigma and microaggressions against these populations. Refugees described that they and their children experienced mental and physical health problems not only due to trauma and difficulties faced before and during migration, but also due to post-displacement stigma and microaggressions that they experienced on a daily basis. Refugees employed a range of coping strategies to deal with these challenges, avoidance of interactions with Turks, forms of identity concealment (e.g., not revealing nationality,

changing names, or not speaking their native language in public), avoidance of confrontation, and in some cases educating their neighbors to confront and correct stereotypes.

In the quantitative phase of the research, the research group developed the Refugee Stigma Scale (RSS) informed by the literature and qualitative and quantitative data. The scale includes four theoretical dimensions of stigma: perceived community stigma, experienced stigma, anticipated stigma, and internalized stigma. In a sample of 404 Syrian and 447 Afghan refugees in Türkiye, confirmatory factor analysis supported the hypothesized four-factor structure of the RSS. Results also supported convergent validity of the four subscales showing correlations with validated measures of depression, anxiety, post-traumatic stress disorder (PTSD), somatic symptoms, post-migration difficulties, and contact experiences.

The research group also developed a subscale assessing microaggressions (subtle/ambiguous discriminatory remarks or behaviors). Convergent validity of the Microaggression Scale for Refugees (MSR) was supported by high correlations between microaggressions and experienced stigma, somatic symptoms, post-migration difficulties, and contact experiences with the host country. Importantly, both experienced stigma and microaggressions contributed independently to explaining variance in psychological and somatic symptoms.

It is also explored the concept of identity denial in the context of refugee stigma using the new scales. Even after many years of immigrating, immigrants can have their new cultural identity (in this case, their Turkish identity) denied or unacknowledged. Based on a survey of 156 young Syrian adults living in Türkiye for many years, the research found that Turkish identity denial was associated with higher depressive symptoms and lower psychological well-being, mediated by perceived and anticipated stigma. Furthermore, a challenged sense of belonging was an independent parallel mediating mechanism by which identity denial was associated with psychological well-being and depressive symptoms.