



UNITED
NATIONS
TURKEY



COVID-19

SOCIO-
ECONOMIC
IMPACT
ASSESSMENT
REPORT

JULY 2020



UNITED
NATIONS
TURKEY



COVID-19

SOCIO- ECONOMIC IMPACT ASSESSMENT REPORT

JULY 2020



Food and Agriculture Organization
of the United Nations



International
Labour
Organization



UNITED NATIONS
INDUSTRIAL DEVELOPMENT ORGANIZATION



World Food
Programme



World Health
Organization

Photograph by

Levent Kulu / UNDP Turkey
Ministry of Health
ILO Turkey
Berke Araklı / ILO Turkey
Emrah Gürel / UNHCR Turkey
Mehmet Cemtaş / WFP Turkey
Yaser Derviş / UNFPA Turkey

Design

Carnavale

Print

TABLE OF CONTENTS

Executive Summary	5
Introduction	15
Pillar 1. Health First	19
1.1. Covid-19 and the resilience of the health system in Turkey	19
1.2. Ability of the health system to sustain specific services.....	21
1.2.1. Mental Health.....	21
1.2.2. Non-communicable diseases (NCDs)	22
1.2.3. Sexual and Reproductive Health (SRH).....	23
1.2.4. Youth and Adolescent Health	23
1.2.5. Child Health.....	24
Pillar 2. Protecting People	27
2.1. Social Protection	27
2.2. Children.....	30
2.2.1. Social Conditions	31
2.2.2. Education.....	32
2.2.3. Child Protection.....	34
2.2.4. Adolescents and Young People.....	35
2.3. Gender Inequalities and Gender Based Violence	36
2.3.1. Gender Based Violence.....	36
2.3.2. Gender Equality in Labour Markets.....	38
2.3.3. Gender Parity in the Health Sector.....	39
2.3.4. Unpaid Care and Domestic Work.....	40
2.3.5. Leadership and participation.....	41
Pillar 3. Economic Response and Recovery	43
3.1. Labour Market Implications of the Covid-19 Crisis	43
3.1.1. Employment and Unemployment Dynamics	43
3.1.2. Working Conditions.....	46
3.1.3. Social Dialogue.....	48
3.2. Impact on Businesses	49
3.3. Covid-19 and the Agri-food Sector.....	53
3.4. Pathways for a more inclusive, environmentally sustainable and resilient recovery	55
3.4.1. Environmental Sustainability and Green Economy	55
3.4.2. Sustainable consumption and production.....	55



3.4.3. Clean energy transition	56
3.4.4. Nature-based solutions	57
3.4.5. Natural resources management	57
Pillar 4. Macroeconomic Response and Multilateral Collaboration	61
4.1. Transmission channels of the Covid-19 crisis	62
4.1.1 External Demand Channel.....	62
4.1.2. Domestic Demand Channel.....	63
4.1.3. Financial Distress Channel.....	63
4.1.4. Uncertainty Channel.....	64
4.2. Early Impacts of the Covid-19 Crisis.....	64
4.2.1. Economic Activity	64
4.2.2. External Balances.....	67
4.2.3. Price Dynamics and Monetary Policy	69
4.2.4. Financial Markets.....	70
4.2.5. Public Finances	72
4.2.6. External Financing Needs.....	74
4.3. Government Response and Policy Options for a Resilient Economy and Better Recovery.....	75
4.4. Multilateral Collaboration and Covid-19.....	78
Pillar 5. Social Cohesion and Community Resilience	81
5.1. Public Service Delivery and Governance at local levels	81
5.2. Human Rights and Community Dynamics.....	82
5.2.1. Right to Liberty and Security of Person/Right to Life, Health and Safety of Persons Deprived of Liberty/Judiciary/Access to Justice.....	82
5.2.1.1. Right to Life of Persons Deprived of Liberty.....	83
5.2.1.2. Safety and Right to Health of Prisoners.....	83
5.2.1.3. Monitoring of prisons and detention centres	84
5.2.1.4. Access to Justice/the Judiciary.....	84
5.2.2. Right to Freedom of movement/ Freedom of Expression/Media/Right to Information/ Assembly/Association/Civil Society Space/Right to Religion/Right to Privacy.....	85
5.2.2.1. Freedom of Movement.....	85
5.2.2.2. Freedom of Media/Expression /Misinformation.....	85
5.2.2.3. Right to Privacy/Protection of the Personal Data.....	86
5.2.2.4. Right to Information/Transparency.....	86
5.2.2.5. Right to freedom of assembly/association/civil society space/volunteerism	87
5.2.2.6. Right to Freedom of Thought, Conscience and Religion.....	87
5.2.2.7. Cultural Rights.....	87
5.3. Specific Groups Facing Vulnerabilities.....	88



5.4. Refugees and migrants	90
5.4.1. Livelihoods and income	90
5.4.2. Access to Health.....	94
5.4.3. Access to Education.....	95
5.4.4. Food Security and agriculture	95
5.4.5. Access to social protection, and protection services including legal services and registration	97
5.4.6. Specific community dynamics and social cohesion issues, and relations with local authorities	97
5.5. Resilience to Disasters and Emergencies, and Shared Responsibility	98
Conclusion	101
Annex 1: Key Macroeconomic Policy Responses	111
Annex 2: Possible policy actions for the world of work under a three-phased policy response approach	113
Annex 3. Scope of support provided by MDBs and IFIs in response to the Covid-19 crisis	117





Photo: Levent Kulu / UNDP Turkey



Executive Summary

The Covid-19 pandemic is both a health crisis and a socioeconomic crisis that looks set to increased poverty and inequalities and pose risks to progress towards the Sustainable Development Goals (SDGs) on a global scale. In view of the unprecedented situation brought on by Covid-19, the United Nations Development System has shifted to development emergency mode. Accordingly, UN agencies in Turkey have been assessing the impacts of the crisis in Turkey and adjusting their programming to respond to extra demands and emerging needs due to the Covid-19 crisis.

Simultaneously, the UN Country Team, which is composed of all UN agencies active in Turkey, has established a Task Team to assess the economic and social impacts of the pandemic and to prepare a short to medium-term response offer to support the efforts of the Government of Turkey in its efforts to contain and reverse the negative consequences of the Covid-19 crisis along with the national development priorities outlined in the 11th Development Plan and in line with UN agency mandates and priorities, as well as pave the way for a better recovery, which is inclusive, gender-equal, fair and green. The present Covid-19 Socioeconomic Impact Assessment Report has been developed by the UNCT as part of this ongoing process and intended to serve as a contribution to further discussion and dialogue.

The report is structured under five pillars: Health First; Protecting People; Economic Response and Recovery; Macroeconomic Response and Multilateral Cooperation, and Social Cohesion and Community Resilience. These pillars correspond to the five workstreams of the global UN Framework for the Immediate Socio-Economic Response to Covid-19, which complements the UN's global frameworks for health and humanitarian support.

The Covid-19 pandemic interrupted progress towards the Sustainable Development Goals (SDGs) in Turkey along with many countries in the world in the first half of 2020 and is likely to impact progress on the 2030 Agenda. The crisis has had particularly noticeable repercussions for vulnerable groups and increased the importance of the principle of “leaving no-one behind”.

Pillar 1. Health First

Even though Turkey is among one of the countries with a considerable number of total Covid-19 infections, the health sector mounted a robust health response to the pandemic, benefiting from Turkey's strong healthcare and health insurance systems. Despite being well positioned to handle systemic pressures, the health system came under significant stress, as seen elsewhere globally. The provision of some other health services, including routine maternal and child health services like vaccination and antenatal/postnatal care; prevention and treatment of non-communicable diseases (NCDs), Sexual and Reproductive Health (SRH) services, was affected due to the prioritisation of the pandemic and the mitigation/distancing policies taken to slow it down. Since the beginning of June, hospitals have started a return to normal operations and outreach services have been partially restored.

The pandemic continues to demand resources: large numbers of Covid-19 cases are still occurring, the health system faces a challenge of accumulated workload, and there is uncertainty about the future trajectory of the pandemic. Moreover, the virus is likely to have increased the need for health service provision in some areas, such as mental health. Psychological support hotlines have been used but may not reach all the most vulnerable, including refugees and migrants with language barriers. The social restrictions and economic disruption caused by Covid-19 are also likely to have increased risk factors for non-communicable diseases due to lack of exercise, increasing stress levels and possible negative coping mechanisms such as smoking, use of drugs, and alcohol consumption.

Access to health services was maintained also for refugees throughout the Covid-19 crisis. However, there were some limitations in the provision of, and access to, non-emergency primary health care, SRH services, NCD prevention and management, and mental health and psychosocial services. Refugees have displayed a high awareness about Covid-19 and measures to prevent infections, but limited knowledge of what to do in case of Covid-19 infection.

The following are opportunities for “building back better” an integrated resilient health system with preparedness and readiness for future pandemics:

- Disease surveillance, testing, tracing, treating and isolating need to continue. Efforts need to continue to prevent overcrowding in public spaces and on public transport, regulate mask wearing and disinfect key locations.
- Regular communication to the public, including refugees and migrants, about Covid-19 precautions and what to do in the event of symptoms also needs to continue.
- There is an opportunity to revamp primary health care with a stronger focus on health promotion and education.
- Vulnerable workers within and outside the health sector, including care workers and those involved in processing waste, including medical waste, require sufficient protective equipment and guidance.
- Other health and outreach services need to be safely restored to previous levels and enhanced where necessary, including vaccination and other maternal and child health (MCH) services, treatment of NCDs, support for the elderly and the disabled, SRH services, youth and adolescent health, mental health and psychosocial support services. Remote services such as telemedicine can play a valuable role with the necessary capacities, training and infrastructure.
- Special attention needs to be paid to restoring/expanding services accessible to refugees and migrants and members of other vulnerable groups. It will be useful to review and address barriers to access and to revisit the coverage of health insurance to ensure that nobody is “falling between the cracks”.
- The rights, concerns and capacities of health workers, particularly front-line workers need to be taken into account. There may be needs for rest, recuperation, psychological support, additional personnel and training. Plans need to be developed for possible future “waves” of Covid-19 or other pandemics.
- Investing in efforts to tackle the social, economic and environmental determinants of health such as stress, poverty, education, pollution, lack of exercise, is as important as ever.

Pillar 2. Protecting People

All components of social policies in Turkey (social insurance, social assistance, labour market policies) have remained operational during the Covid-19 epidemic, and additional steps have been taken, including cash transfers for those not covered by social insurance.

Nevertheless, the risk of poverty, particularly among the self-employed, informal workers, and other vulnerable groups has increased, as in many economies. Children living in poor households face heightened risks of malnutrition, learning gap, school drop-out, child labour and child marriage with potential lifetime and cross-generational consequences.

Further steps to reinforce the social protection system may also need to be taken in areas like the following:

- The additional social assistance provided during the crisis may need to be increased, extended and broadened to prevent exclusion, poverty and loss of food security. For the time being, refugees will continue to need social assistance schemes which are more inclusive and targeted to meet increasing needs, funded through international assistance.
- The social protection system could be reviewed in the light of the pandemic to ensure that all those in need or who fall on hard times due to an emergency or any similar crisis are reached quickly, including informal workers, small business mostly operating informally, youth, persons with disabilities, rural populations, refugees and all vulnerable groups.

1 International protection applicants and status holders have access to the public health services and are covered under the general health insurance scheme upon their registration by Provincial Directorates of Migration Management (PDMMs). However, pursuant to the amendments to the Law on Foreigners and International Protection in December 2019, their health insurance is deactivated by Directorate General for Migration Management (DGMM) after one year since the registration of their asylum application, if the person does not fall under ‘persons with special needs’ or other categories defined by Ministry of Interior (MOI). The lack of coverage under the general health insurance scheme is not an obstacle to access emergency services, however it can be a practical barrier due to financial concerns. A Presidential Decision (issued on 14 April) regulated that all persons irrespective of their social security coverage or absence of it, will be exempted from the cost of the PPEs, tests and medication for Covid-19 which are obtained and distributed by the Ministry of Health under the measures taken in the fight against Covid-19.



- Social policies may need to be more child-sensitive and specifically address child poverty, including among migrants and refugees.

Schools were closed in March and are due to reopen in September. Continuity of learning has been made possible for grades 1-12 through the use of TV and Internet programmes, including for special education. By April, 9.7 million students had accessed online learning. However, children with no access to television or internet; children from low income families; young learners; Syrian students; children with disabilities; and migrant children, working children and other vulnerable children are observed to have benefited less than others.

Large portions of the refugee population report that they have only limited access to remote education services due to lack of equipment and connectivity, lack of information and the language barrier. About 400,000 refugee children were already out of school before the pandemic, and there is a risk that the number of out-of-school children among the refugee population may grow further. To mitigate such risks, the Conditional Cash Transfer for Education Programme for Refugees (CCTE) continue to function and grow, benefitting more than half million refugee children and their families.

School closures also deprive children of opportunities for physical, emotional and cultural development, and weaken certain lines of their protection from violence, abuse, exploitation and neglect.

Besides education, Covid-19 has affected other opportunities and services for children and young people such as the nationwide youth centres and camps of the Ministry of Youth and Sports (MoYS).

Short and medium-term needs include the following:

- It is a priority to reopen schools safely when possible by providing the necessary materials, equipment, information, guidance, training and institutional arrangements.
- Until schools can be reopened safely, work needs to continue to increase the effectiveness of distance learning programmes and particularly their accessibility for children in large or deprived households, or facing barriers of language or disability. Refugee children require particular support.
- Provided such conditions can be met, a form of “blended” education which provides the benefits of school attendance and individual technology-assisted learning, may be explored for the future.
- These considerations apply equally to child day care, preschool education, non-formal education, language education, vocational training, higher education, and youth centres and services.
- Along with continued social assistance programmes such as the CCTE and ESSN, vigorous back-to-school/learning campaigns will be needed to prevent poor children and refugee children from dropping out, or never being included in education.
- Sensitivity of social protection measures to child-wellbeing and child-poverty needs to be increased.

Globally and in Turkey, the Covid-19 pandemic is exacerbating pre-existing gender inequalities and gender-based violence (GBV), which are areas Turkey has already been trying to improve its policy responses.

Evidence from service providers shows that women and girls have become more vulnerable to violence as a result of the confinement measures, coupled with deepening economic and social stress. Turkey is one of the countries (alongside 145 member states) that responded to the appeal of the UN Secretary General urging governments to make prevention and redress of GBV a part of national response plans for Covid-19². The government has taken different measure as elaborated below. At the same time, considering the urgency and complexity of the problem and reported disruptions and delays in referrals and services by the survivors, there is a need to accelerate concrete policy responses to GBV in the context of Covid-19 and promote zero tolerance across all sectors of society. Refugee women and girls have faced additional challenges in accessing essential services.

2 https://eeas.europa.eu/delegations/un-new-york/77352/answering-un-secretary-general's-call-gender-based-violence-and-covid-19_en



Women are particularly vulnerable to loss of employment, business and income during the pandemic. In addition, the introduction of distance education and curfews for persons above 65 and below 20 years of age and persons with chronic diseases have added to women's care and domestic responsibilities to a larger degree than those of men.

Two-thirds of healthcare providers in Turkey are women. These women have faced high risk of exposure to Covid-19, the risk of burnout due o longer shifts at work and additional care work at home.

Additional steps to empower women and girls in the face of the pandemic can include the following:

- Prevention and response services for GBV survivors and women at risk need to be expanded rapidly, including specific programmes for the most vulnerable.
- Programmes addressing early and child marriage and child labour need to be accelerated.
- Labour market policies and economic measures specifically targeting women are needed.
- Social policies also require a gender lens. Greater public involvement in caring for the elderly, persons with disabilities and children will increase women's access to jobs and income-earning opportunities. Media campaigns can be used to encourage the involvement of men in care-giving and domestic tasks.
- Women should be actively engaged in the design, implementation and monitoring of all Covid-19 response and recovery efforts, to enable women's leadership and ensure that sufficient attention is paid to gender aspects.

Pillar 3. Economic Response and Recovery

Economic life in Turkey was also severely disrupted from March onwards with the consequence of a deterioration in labour markets and business activities.

Turkey entered the crisis with relatively low employment rates, particularly for women, relatively high unemployment rate for women and youth and a significant level of informality, including among refugees. The government proactively introduced stimulus packages to support the economy, protect jobs and keep cash flowing to workers and businesses including expansion of short-term work allowance for over 3 million employees, banning lay-offs and supporting workers on unpaid-leave through monthly cash transfers.

These steps have facilitated protection of formal jobs, however informal workers were disproportionately affected, particularly among women, youth and refugees and migrants increasing their vulnerabilities. Additionally, employment-related income support measures fall short of fully compensating for lost income and could not reach informal workers and self-employed exacerbating the risk of increased income inequalities.

Workers' rights related to leave, overtime, job security and timely payment have sometimes been overridden. In addition, those working informally and without social protection do not have the means to suspend working even if they are unwell. On the other hand, provision of decent and safe working conditions remains as one of the main concerns caused by Covid-19.

Business activities has also been significantly affected. The crisis affected smaller enterprises disproportionately and micro and small businesses are having difficulty to maintain employment and payments with limited working capital. Among Syrian-owned enterprises, there is a high reported risk of closing down. On the positive side, the impact of supply chain disruptions proves to be weaker than had been expected at the beginning of the crisis.

As a coping strategy, enterprises have been deferring new investments and growth plans in order to alleviate the effects of the crisis, with possible longer-term impacts for their own businesses as well as potential growth of the economy at large. Firms with adequate infrastructure and digital means have adapted themselves rapidly to remote working.

The needs of enterprises center around areas of capacity building for a safe return to work, business continuity measures and business transformation for adaptation to the post-Covid economy including digitalization.



The risk of food insecurity due to potential disruptions to agriculture appears limited. Taking wheat production as a proxy for overall food security at national level, early production prospects point to a near-record global wheat output in 2020. The wheat production estimates for Turkey in 2020 also supports this view.

The Government has acted to safeguard agricultural production. A Digital Market Place (DİTAP) has been introduced for agri-food products. However, essential public services in agriculture, including extension diagnostics, training, field visits, and pest monitoring and surveillance, have been disrupted for a certain period. Additionally, working conditions for citizens and refugees working in agriculture, including migratory seasonal agricultural work, needs attention given the health risk posed by Covid-19.

Further steps to safeguard employment, working conditions and enterprises might include the following:

- Measures to preserve jobs may need to be extended or augmented, particularly for micro-and small enterprises. Avoiding large-scale lay-offs proves critical as emergency measures are phased out.
- Targeted measures are needed to preserve employment among women, who are more likely to lose their jobs than men and have more difficulty finding new employment, and among vulnerable groups, in informal employment who have not benefited from the labour market measures adopted so far.
- There will be an increased need for active labour market policies and special employment programmes for vulnerable groups including women, refugees and migrants, to prevent long-term unemployment, and for training for jobs and skills which will be in demand following Covid-19, such as online skills.
- Efforts need to continue to combat health risks at work. SARS-CoV-2 could be recognised as an occupational disease. Occupational safety and health information, arrangements and equipment need to be implemented for all persons in formal and informal employment, including migrants and refugees.
- A major effort is needed to reduce informal employment, so as to reduce inequalities and vulnerabilities and universalise social insurance, and build the resilience of individuals, households and society to adverse events and emergency situations. Innovative incentives may be used to promote formal employment.
- In the extraordinary conditions created by social distancing measures, school closures and homeworking, the main burden of care-giving and domestic chores has fallen on women. Flexible working arrangements and rights to paid/unpaid leave needs to be explored for both women and men.
- Further support may be needed to enable micro-, small and medium-sized businesses, businesses in most- affected sectors and regions, and enterprises that have not received support so far to survive the crisis. Priority might be given to women entrepreneurs, migrant and refugee entrepreneurs and the self-employed, who are affected disproportionately from the crisis. While supporting businesses, workers' rights need to be upheld in all circumstances.
- Smaller businesses in particular also require support to ensure a safe return to work. This may include information and advice, hygienic supplies and equipment, or technical support to build capacity both for occupational safety and health and for teleworking and digitalisation.
- These businesses may also need support in developing new e-commerce and other sales channels, and also in developing their own business continuity plans and preparing for future emergencies.
- Continued vigilance is needed concerning the risks of supply chain disruptions, labour shortages and price volatility in agriculture. Markets might need to be cleared in case of excess supply or low demand.
- Healthy and hygienic environments are needed for agricultural production and supply chains. Agricultural extension services need to resume in a safe manner, especially for small producers and elderly farmers. New forms of marketing including digital marketing need to be developed further.

The pandemic has underlined the links between economic, social and environmental development goals. It has highlighted the vulnerability of human societies and the need for resilience, and demonstrated the need to adapt and prepare for further hazards and emergencies while mitigating climate change, a major causal factor.



Although Covid-19 has reduced personal and business travel, lowering carbon emissions in the short term, it has also led to greater reliance on private rather than public transport, and to an increase in home deliveries. Investments in clean energy are threatened due to cheaper fossil fuels and reduced resources for investment.

Clean water and sanitation are essential to public health. However, water shortages already exist at a regional level, and increased usage and pollution are putting pressure on resources.

The pandemic has put the spotlight on waste management, including packaging used in online purchases and meal deliveries, medical waste, and single-use personal protection equipment. Food waste remains a burning issue at all stages of the food chain in Turkey, headed by losses at the agricultural production phase.

Paths for an environmentally sustainable and resilient recovery might include the following:

- Efforts to mitigate and adapt to climate change and preserve natural resources need to be redoubled, with careful monitoring. Conservation, afforestation, sustainable agriculture and nature-based solutions like liveable and green cities are just some of the means available.
- Incentives for investment in renewable energy and energy efficiency need to be reinforced. A long-term climate change strategy could be adopted, and municipalities and businesses could be supported in adopting their own climate change strategies and plans. One focus could be on green buildings; another could be on public and private transport.
- Greening the economy can create jobs and reduce vulnerability to natural hazards. Incentives may be provided for eco-entrepreneurship and eco-innovation. Relevant skills and education policies need to be developed. Employment-intensive investments can be made to deliver green public goods.
- There is a need to redouble efforts towards integrated water management, improved water quality and responsible and efficient use of water resources in agriculture, industry and households.
- Lifestyle adjustments due to Covid-19 provide an opportunity to promote responsible production and consumption in industry, services and households, thus reducing carbon footprints and food waste, conserving water and other natural resources, minimising waste generation and increasing recycling levels through a mixture of investment, regulation, incentives, public information and awareness-raising. Public procurement arrangements can also be used to support the circular economy.

Pillar 4. Macroeconomic Response and Multilateral Collaboration

There is widespread consensus among economists and international institutions that the world economy has entered the worst recession since World War II due to the Covid-19 crisis. What started as a health crisis very soon turned into one of the most severe economic crises witnessed in recent history, changing the global economic landscape dramatically within a matter of weeks. Another distinctive characteristic of this period is the unprecedented level of uncertainty accompanying this picture.

The magnitude of the impact in each country will depend on the capacity of the health infrastructure to contain and respond to the pandemic, the country's dependence on the sectors that are hit hardest by the crisis, the fiscal space available to respond, the coverage of employment and social protection systems, the social fabric of societies, the degree and nature of connectedness with the world economy, and the specific transmission channels to which the country is exposed.

Turkey is being affected particularly through the external demand channel, the domestic demand channel, the financial distress channel, and uncertainty. The economy is likely to see a marked contraction in 2020 as a consequence of strong integration with the world economy both as a major exporter of goods and services, and especially as a major tourism destination, in an environment where major trading partners are experiencing significant economic contraction and many factors continue to limit international travel.

Economic sectors that were impacted by containment measures and major exporting sectors experienced significant declines in output and revenues especially from March to May, though mild signs of recovery



started to be observed from May onwards. Overall, there has also been a considerable loss of export revenues in the first half of the year.

The Covid-19 crisis triggered a new wave of capital outflows for many emerging market economies, including Turkey, putting downward pressure on the foreign currency reserves of the Central Bank.

The Covid-19 crisis has had a serious effect on public finances in March-May 2020. Low tax revenues and higher expenditures, including social protection expenditures, have caused the budget deficit to increase considerably. The deficit will be financed through extra borrowing. As Turkey's public debt is lower than the debt levels of many advanced and developing economies, debt sustainability is not of particular concern, however, the cost of borrowing and access to financial markets will have to be taken into consideration.

The Government has taken substantial steps to counter the economic and social impacts of the Covid-19 outbreak, including deferral of tax and social security payments, provision of additional loan guarantees, expanding cash-transfer to low-income households and expanding employment-related benefits. Meanwhile, the Central Bank and the Banking Regulation and Supervision Agency have stepped in to avoid financial disruptions and excessive volatility in financial markets as well as to improve liquidity and credit conditions and facilitate flow of credit to households and enterprises. One of the characteristics of Turkish experience has been the implementation of a partial lock-down. Via this method, the government aimed to limit social interaction while keeping economy at some level of activity, to continue income generation for different social groups.

More policy measures might still be required to mitigate the ongoing crisis and to ensure a better recovery and a resilient economy. In this context:

- Even though the measures taken by the government are quite comprehensive in nature, the magnitude of the response might need to be scaled up in line with actual needs.
- There might be need to extend the coverage of the measures taken, especially towards supporting the vulnerable segments of the society, which are hit hardest by the crisis and lack resources to shore the negative effects on their lives.
- Smart stimulus measures will be called for following the mitigation measures that are currently in place in an effort to stimulate the economy and to shape the country's future for the years to come.
- Addressing structural problems of the economy could help Turkey to reposition in the new normal and unleash the potential of the economy.
- Post-crisis fiscal interventions can be oriented towards prioritizing decarbonization, digitalization and the technological enhancement of industries as well as gender-equitable and job-rich growth.
- A medium-term exit strategy incorporating both a macroeconomic and developmental response needs could play a vital role in guiding all economic agents towards common aspirations.
- Sharing the costs of developmental interventions fairly could be an important element of a new social contract.
- Coordination and communication of macroeconomic and development policies have a critical role to play.



Pillar 5. Social Cohesion and Community Resilience

Strengthening social cohesion between citizens and the state, as well as within and across social groups, is central to promote and sustain peace within the society. The Covid-19 pandemic has encouraged and obliged people to communicate and cooperate with one another and the authorities towards common aims. It has led to widespread social expressions of solidarity and support across different groups within society. The sense of solidarity created during the crisis can be channelled into cooperation among individuals and convening organisations.

However, social distancing and the economic and social pressures induced by the pandemic might also put strains on social bonds, including resentment against refugees given adverse labour market conditions leading to strong competition for fewer jobs.

Alongside the national government institutions, a wide range of partners including municipalities, companies and business organisations, philanthropic organizations, civil society organisations and the media played a critical role in response to the Covid-19 crisis and their continued engagement is needed.

Social dialogue between employers' and workers' organisations at all levels can underpin progress in business and working life. Engagement with women's organisations will ensure that gender issues are properly addressed. The inclusion of children, young people, people with disabilities, refugees and members of vulnerable groups in consultative decision-making processes will result in better policies and programmes. Municipalities continue to have a key role for healthy and sustainable local environments and reaching vulnerable groups during the pandemic.

Turkey's existing disaster risk reduction and disaster management capacities can be strengthened further in the light of the Covid-19 experience and an evaluation of the response, with a focus on how to respond to compound risks, and how to integrate infection risk into responses to other disasters and emergencies such as earthquakes and floods, and into climate change adaptation efforts. All key institutions, including the private sector, need to enhance their resilience and readiness for emergencies as a precondition of increasing societal resilience.

The response to the Covid-19 crisis also had some human rights implications. Measures taken to slow the spread of the Covid-19 pandemic included lockdowns for the elderly and children and at weekends, travel restrictions and the suspension of collective prayers and sporting and cultural activities. Some restrictions on the elderly are still in force. This emphasis on the elderly led to the social perception that the elderly are "dangerous" rather than at risk.

Case and mortality data have been released daily but it is advised that disaggregated data on certain groups, geographical location, etc. are released as well.

Containment measures delayed judicial work with implications for length of trial and access to judicial recourse, including for children. Social distancing made the provision of child protection services in the community more difficult although needs may have increased. Hotlines and online counselling services were used to meet the needs.

Refugees and migrants were among the groups most adversely affected by the consequences of the Covid-19 pandemic due to their existing vulnerabilities. Covid-19 crisis has increased the reliance of Syrian refugees on international assistance. Two-fifths of refugee households were already multi-dimensionally poor prior to the crisis. The Emergency Social Safety Net (ESSN) and the Conditional Cash Transfers for Education (CTE) programmes have continued to provide a reliable income support to about 45% of refugees in Turkey. Even so, not all vulnerable households are covered. Available assessments indicate that a significant percentage of refugees has recently lost work due to Covid-19. Meanwhile, the processing of work permits was interrupted except for specific sectors and extensions of existing work permits. These may lead to negative coping strategies including reduced food expenditure, borrowing, sale of valuable items, child labour and child, early and forced marriage.

Protection services for refugees and migrants concentrated on emergency cases and outreach efforts were also suspended. Reduced access to legal aid and legal services meant that persons in removal centres might not have been able to receive legal assistance in time. Registration of International Protection applicants and Syrians under temporary protection - which is essential for access to services - continued on an exceptional basis, mostly for newly-born babies and persons with urgent medical needs.



Further steps to strengthen social cohesion and for a more resilient society include the following:

- All individuals should be able to enjoy their human and civil rights, and transparency and accountability needs to be maintained. This may require additional arrangements. Solutions are still needed to ensure the health and rights of prisoners along with adequate monitoring of prison conditions.
- All government and non-government social services, protection services and outreach systems need to be safely restored to pre-crisis levels and made accessible for vulnerable groups. Social services and protection services need to be intensified where gaps existed before the pandemic and/or extra needs have arisen during it.
- The safe restoration and expansion of services (including legal aid, psychosocial support, referrals etc.) to refugee and migrant women, men, girls and boys is particularly important. Refugee registration services also need to be safely resumed and restored.
- There is need for safe restoration and reinvigoration of social cohesion programmes, using communications technologies as appropriate, and for careful attention to social inclusion and the do-no-harm principle in actions for refugees.
- Steps may be needed to prevent elderly persons, persons with chronic illnesses and persons with disabilities from being regarded as a health risk and/or a burden on society and there may be an increased need to promote and encourage their active participation in society.

* * * * *

Strategies and actions required to meet the needs for Covid-19 response and recovery, and for starting to build back better, include macroeconomic measures and regulations; the strengthening of health and protection systems; transformation of businesses and labour markets; the dissemination of know-how; a great deal of communication with the general public, and transformation of life styles.

There is wide scope for sharing experience and expertise across borders. States and other actors within different countries need to document and share their experience with one another in support of the Covid-19 response and recovery efforts. Turkey can contribute to the development of the capacities of other countries through the supply of equipment and know-how. To this end, Turkey can integrate Covid-19 interventions into its international development assistance and engage in south-south and triangular cooperation.

As the Covid-19 crisis revealed the vulnerabilities of human societies and highlighted the need to increase resilience of our systems and societies along with the need to reconcile our life styles with the needs of the planet, it can be considered as a wake-up call for countries to renew their commitment to implement the 2030 Agenda and the 17 Sustainable Development Goals. Making progress on this global roadmap for a more inclusive and sustainable future will allow countries to avoid and better respond to future crises.





Photo: Levent Kulu / UNDP Turkey



Introduction

The Covid-19 pandemic emerged as an unprecedented global health crisis taking its toll on the world, causing deaths and illnesses. As time passed by, it has changed the landscape of the world and unfolded into a health crisis compounded by social and economic crisis. The virus and the measures taken to mitigate its spread have severely affected economies and societies around the world. Almost everywhere, it is pushing millions of people into extreme poverty, changing and widening existing inequalities, and disrupting progress towards the Sustainable Development Goals (SDGs).

It is essential to suppress the transmission of the virus to stop the pandemic and save lives. It is equally necessary to collectively respond to the enormous impact of the crisis on economies, small businesses, employment, incomes and essential services such as health and education, and its potential impact on human rights, gender equality and social fabric. In this process, special attention must be paid to existing and new forms of vulnerabilities that can be exacerbated by the crisis, leaving the most vulnerable further behind.

The recovery agenda of UN moves beyond a return to the old normal. It envisions a leap forward to a new future—one that is greener and more inclusive, humane, and resilient. This aspiration has been at the heart of the most ambitious global agendas of our times: the Sustainable Development Goals (SDGs) and the Paris Climate Change Agreement. To this end, the UN stands ready to provide Building-Back-Better type of support to facilitate a transition towards a low-carbon, inclusive, gender-equal and rights-based economies and societies in line with the spirit of SDGs, which can make our societies more resilient and strong in the face of pandemics, climate-change and many other complex risks the world faces.

* * * * *

In view of the unprecedented situation brought on by Covid-19, the United Nations Development System has shifted to development emergency mode. In all countries where UN sustainable development programmes are in place, these programmes are being adjusted in line with the urgent needs and the principles stated above. The UN aims to support governments and other national and local actors on the crisis response and recovery efforts.

The UN system in Turkey is also responding swiftly to the current situation. UN agencies in Turkey – jointly with government counterparts and partners- have undertaken initial assessments in order to understand the early impacts of the crisis on different segments of the society and economic sectors including women, refugees and migrants, youth, seasonal agricultural workers and businesses of different sectors and scales. At the same time, all UN agencies have revisited their portfolios with an intention to reprioritize and expand their existing programming to respond to emerging needs due to the Covid-19 crisis and to increasing demands of beneficiaries.

Simultaneously, the UN Country Team, which is composed of all UN agencies active in Turkey, has established a Task Team (i) to assess the economic and social impacts of the Covid-19 crisis in Turkey with the guiding references of 2030 Agenda for Sustainable Development and the principle of Leaving No One Behind and (ii) to prepare a short to medium term response offer to support the efforts of the Government of Turkey in its efforts to contain and reverse the negative consequences of the Covid-19 crisis along with the national development priorities outlined in the 11th Development Plan and in line with UN agency mandates and priorities, including options for a better recovery, which is inclusive, gender-equal, fair and green. The present Covid-19 Socioeconomic Impact Assessment Report has been developed by the UNCT as part of this ongoing process and intended to serve as a contribution to further discussion and dialogue.

* * * * *

The report provides quantitative and qualitative evidence and assessment of the early impact of the pandemic in Turkey as of June 2020 in key areas of development, and highlights areas and interventions



for possible prioritization and acceleration. The report is designed to be updated as more evidence emerges regarding the medium and long-term impacts of the pandemic and its likely future course.

The report is structured under five pillars: (i) Health First; (ii) Protecting People; (iii) Economic Response and Recovery; (iv) Macroeconomic Response and Multilateral Cooperation, and (v) Social Cohesion and Community Resilience. These pillars correspond to the five workstreams of the UN Framework for the Immediate Socio-Economic Response to Covid-19, which complements the UN's global frameworks for health and humanitarian support, and linked through a strong environmental sustainability and gender equality imperative to build back better. The topics addressed under each pillar reflect Turkey's specific conditions, capacities and challenges, including the fact that it hosts the largest number of refugees around the world.

The report is intended to contribute to the understanding of the situation and benefit all those willing to support the Government of Turkey's efforts in Covid-19 immediate response, recovery from crisis, and its development efforts to build a more resilient society and sustainable economy.







Photo: Ministry of Health



Pillar 1. Health First

1.1. Covid-19 and the resilience of the health system in Turkey

Turkey has a strong public health system and has demonstrated global partnership in supporting other countries in their Covid-19 response. Turkey has been a forerunner among emerging markets in creating Universal Health Coverage for its citizens to improve the health of individuals. The country has a general health insurance system to which individuals and employers make contributions, with insurance premiums for children and the poor paid for by the state, with limited presence of voluntary health insurance. Through a family physician system and the migrant health centre system that provides services to the large refugee³ population, there is broad access and coverage of health care. In addition, a Presidential Decree in April 2020 guaranteed everyone in Turkey have free access to testing and treatment of Covid-19, irrespective of their legal status⁴. In 2018, Turkey had 28.3 hospital beds per 10,000 people, while the numbers of physicians and nurses and midwives per 100,000 reached 187 and 301, respectively⁵. In addition Turkey had 38,098 intensive care unit beds in 2018⁶. In its early response, GoT, made key investments in the health sector, building two emergency hospitals with more than 1000 bed capacity, 400 of which are intensive care units. Special attention was also paid to the producing medicines and equipment for Covid-19 management. As of September 2019, the Ministry of Health through the SIHHAT project⁷ had 674 migrant health units with plans to expand, and ten community mental health centres providing free services to Syrians under Temporary Protection⁸. Beside the service delivery investments, a Coronavirus Scientific Board⁹ was established to provide strategic guidance to the response. Overall, while there may be gaps in the breadth and reach of some health services (see below and other sections of this report), Turkey's health system capacity has put it in a good position to cope with the Covid-19.

Nevertheless, the crisis has stretched even the strongest health systems the world over¹⁰. Besides the health challenge posed by the pandemic itself, the pressure of containing the disease through routine testing, contact tracing, isolation, quarantine and treatment procedures puts a strain on health care systems that may affect their capacity to provide other essential health services effectively. As of June 18, Turkey had reported **182,727 cases and 4,861 deaths**, while 745 patients were in intensive care and 306 intubated. At the same time, Turkey reported that 80% of the patients diagnosed with Covid-19 had recovered. The country's success has been in testing, with the daily number of tests processed increasing to over 30,000 by April and to over 40,000 by June 2020. Health care facilities have remained fully open with the pause and delay of elective surgery in March 2020 despite full availability of emergency services. At the same time, the Ministry of Health cancelled staff leave of absence and resignations until June 2020 to ensure sufficient human resource capacity during the response to Covid-19. Further, Ministry of Health took steps to increase human resource capacity by temporarily repurposing workers in different specializations of healthcare to support the Covid-19 response. Renumeration for health

3 The term "refugee" as utilized in this document refers to international protection applicants, international protection status holders (refugees, conditional refugees and subsidiary protection status holders) and temporary protection beneficiaries as per the Law on Foreigners and International Protection (2013)

4 Limited to PPE, tests and medicine. Inpatient or outpatient treatment is subject to fee and if the foreigner is not covered under a health insurance, then s/he needs to pay for the Covid-19 related treatment.

5 Health Statistics Yearbook, 2018, p 154, 227, 239

6 <https://dosyasb.saglik.gov.tr/Eklenti/36164,siy2018en2pdf.pdf?0> page 127

7 The project on Improving the health status of the Syrian population under temporary protection and related services provided by Turkish authorities.

8 3RP Turkey http://www.3rpsyriacrisis.org/wp-content/uploads/2020/02/Turkey_english.pdf

9 The Board consists of scientists in the fields of infection, microbiology, virology, internal diseases, intensive care and chest diseases

10 To support countries in strengthening the health system to respond to Covid-19, WHO released policy recommendations for country consideration and adoption (http://www.euro.who.int/__data/assets/pdf_file/0003/436350/strengthening-health-system-response-Covid-19.pdf?ua=1). WHO has also produced operational planning guidelines to support country preparedness and response as countries try to find a balance between responding to the demands of Covid-19 and maintaining essential service delivery (<https://www.who.int/publications-detail/covid-19-operational-guidance-for-maintaining-essential-health-services-during-an-outbreak>), so that countries emerge from the pandemic with maintained public trust in the health system, continued health-seeking, and reduced mortality due to causes other than Covid-19. These documents are in addition to the recent WHO global action plan for healthy lives and well-being for all, "Stronger Collaboration, Better Health" (<https://www.who.int/publications-detail/stronger-collaboration-better-health-global-action-plan-for-healthy-lives-and-well-being-for-all>).

workers in public facilities was also increased to increase staff motivation. Since the beginning of June 2020, hospitals have started a return to normal operations with specific hospitals and wards dedicated for Covid-19 treatment. Outreach services such as care for the elderly and refugees living with disabilities provided through community health support workers in targeted provinces have resumed, albeit at a limited scale, affecting access to care among this vulnerable group.

From now on, the system will likely have a challenge of accumulated workload and high burnout among care providers, some of whom will be recovering from Covid-19 infection themselves. In a speech on 29 April, the Health Minister reported that 7,428 health personnel (6.3%) were infected with Covid-19. While there is no systematic evidence of the impact of Covid-19 on health workers in Turkey, health care workers as frontline responders are likely to work longer hours and to experience psychological distress, fatigue, occupational burnout, stigma, and physical and psychological violence, beyond being exposed to pathogens¹¹. Impacts on women workers are likely to be significant (For gender parity in the health sector, see Pillar 2). The path to recovery will need strategic actions that optimize service delivery settings while ensuring the wellbeing of care providers. The effects of previous adjustments in facility operations such as postponed appointments will also have an impact on the health system recovery.

Building the resilience of the health system and addressing the social determinants of health is imperative in order to stay on track for Sustainable Development Goal (SDG) 3 (Good Health and Well-Being). Individual health is not only influenced by medical care and individual choices and behaviour but also by social, economic and environmental determinants (SEEDs) and dimensions of inequality such as the opportunities available in places where people are born, live, grow, work and age. All these factors are being influenced significantly by Covid-19. Evidence shows that factors such as unemployment, stress, levels of income and education, sex, geographical location, social exclusion, and lack of social support put health at risk and influence health outcomes¹². Covid-19 is exacerbating these factors, putting already-vulnerable populations at a further disadvantage. Covid-19 will only deepen inequalities and worsen a pre-existing high burden of NCDs (diabetes, cardiovascular diseases, cancer, and chronic respiratory diseases), mental and behavioural disorders, mortalities and morbidities due to gender-based violence and delayed/limited access to essential sexual and reproductive health (SRH) services. As much as strategic actions need to be taken to continue to build the resilience of the Turkish health system, a response plan to address the social and economic impact of Covid-19 provides an opportunity for critical multi-sectoral action and collaboration across the SDGs to achieve health and wellbeing for all.

The following are opportunities for “building back better” an integrated resilient health system with preparedness and readiness for future pandemics.

1. **Harness the Digital Revolution to improve access and efficiency in the health system:** In Covid-19, internet access and availability have morphed from a choice to an absolute necessity, especially under **Tele-Health**. With 5G bandwidth coming to mainstream Turkey in the next 2-5 years, **laying a foundation of broad-based Telehealth** should be prioritized. This platform will offer a convenient, timely, efficient medium for access to and take-up of primary health care (PHC) services (NCDs, mental health, maternal health, SRH, daily outpatient services etc.) – not least in rural areas.
2. **Adjust Health Information System and Health Information Management data collection tools and streams.** Data collection systems should be adjusted to capture more disaggregated data, including data on new vulnerabilities (migrants, refugees, newly unemployed losing employment-based health coverage, etc.). Such data will make possible a focused response to addressing the needs of specific populations – this being the central tenet of the SDG promise to **“leave no one behind.”**
3. **Revamp Primary Health Care:** Evidence that shows primary care is linked to improved health outcomes, health system efficiency, and health equity, making a good case for better investment

¹¹ Coronavirus disease (Covid-19) outbreak: rights, roles and responsibilities of health workers, including key considerations for occupational safety and health. WHO/2019-nCov/HCW_advice/2020.2

¹² WHO, the Social Determinants of Health- Solid Facts <https://apps.who.int/iris/bitstream/handle/10665/108082/e59555.pdf?sequence=1>



in PHC¹³. While Turkey has a functional PHC system, revamping it with a strong re-focus on health education and promotion (personal hygiene, hand washing) is paramount during the Covid-19 pandemic and in the post- Covid-19 period. The large primary health workforce that has been mobilized at the provincial and municipal level to monitor contacts is and will remain a key asset in active surveillance and detection of alerts for new suspected Covid-19 cases.

4. **Strengthening Infection Prevention and Control (IPC) at pre-hospital, and hospital levels:** The Ministry of Health has implemented several Covid-19 Infection Control Measures in Health Institutions¹⁴. There is an opportunity to assess the impact of the measures that were implemented for the protection of health care personnel, learn what worked well, and possibly identify any remaining gaps in order to devise ways of filling the gaps.
5. **Strengthen Disease Surveillance:** Before a vaccine is made available, a sufficient level of immunity will not be guaranteed in the population, and early detection of new Covid-19 cases will be essential in preventing the generation of new clusters outside already identified transmission chains. As such, it is important to train PHC staff as the “eyes and ears” for Early warning/Novel disease detection at the grassroots level. In addition, data from the strong high-capacity laboratory network that was set up for the diagnosis of Covid-19 needs to be linked to patients’ databases to improve the timeliness of the surveillance.
6. Optimize the emergence of **Risk Communication and Community Engagement** as critical enablers and elements of response to future health crises.

1.2. Ability of the health system to sustain specific services

1.2.1. Mental Health

The Covid-19 crisis is likely to have increased mental health and psychosocial support needs while constraining services. While there is no evidence-based study in Turkey about the effects of Covid-19 on the population’s mental health, needs for mental health and psychosocial support are likely to be increasing as the pandemic creates additional stressors on the affected population. For already vulnerable populations like refugees, migrants, and asylum seekers, the stress of the lockdown disrupted livelihood activities. Fear of infection only aggravates the existing psychosocial effects of war and prolonged displacement. Furthermore, women’s mental health requires particular attention due to increased gender-based violence and an increased burden of care and domestic work (see Pillar 2). Yet mental health services are limited to hospitals and outpatient clinics that treat psychiatric symptoms with relatively few community centres available to address psychosocial problems. Moreover, the Covid-19 crisis has affected the delivery of mental health services. Although emergency and inpatient services continue, as usual, psychiatry outpatient clinics and Community Mental Health Centres had to decrease their activities.

Psychosocial support hotlines have been established in 81 provinces based on documented evidence of successfully using telephone or video calls in the delivery of mental health and psychosocial support services where face-to-face interviews are not possible or appropriate. However, due to language limitations, these services are yet to be put in place for refugee and migrant populations. Furthermore, hotline services may not be accessible for women who experience intimate partner violence and have to be in the same place as the perpetrator. The Ministry of Health Department of Mental Health has ensured that the psychosocial support hotlines in the provinces actively provide information on mental health services during the Covid-19 pandemic. Hotlines are also used in referring people to secondary care or social care services. In three months, more than 100,000 people called the hotlines.

Responses may include:

1. Capacity development in terms of staffing and training, including supervision for healthy life centres,

¹³ WHO 2018, Building the case for Primary Health Care: a scoping review. https://www.who.int/docs/default-source/primary-health-care-conference/phc---economic-case.pdf?sfvrsn=8d0105b8_2

¹⁴ Ministry of Health Website - <https://translate.google.com/translate?depth=1&pto=aue&rurl=translate.google.com&sl=tr&sp=nm4&tl=en&u=https://covid19bilgi.saglik.gov.tr/enfeksiyon-kontrol-onlemleri>

refugee health centres and community mental health centres, particularly **training in alternative ways of providing services**, to avoid gaps in treatment and the follow-up of already identified service users and identification of new cases, and to build mental health services back better.

2. Strengthening capacity of **cultural and language-sensitive psychosocial support hotlines** that are accessible to refugees and migrants, ensuring equity and quality of mental health services for all during and beyond Covid-19.

1.2.2. Non-communicable diseases (NCDs)

NCDs are a major health challenge in Turkey, causing disability and premature deaths, and having a significant negative impact on the productivity of the workforce and socio-economic development. NCDs are responsible for 87.5% of all deaths (36.6% cardiovascular disease (CVD), 38.9% cancer, 7% chronic respiratory diseases, 5.8% diabetes). The probability of premature death (death before the age of 70 years) from one of the four major NCDs for a person living in Turkey was around one in six (16.8%) in 2015, with a higher probability for men (22.5%) than women (11.6%). An economic burden analysis found that the economic cost of NCDs to the Turkish economy in 2016 was TRY69.7 billion, which is equivalent to 3.6% of the country's annual gross domestic product¹⁵. A WHO survey¹⁶ on the health status of Syrian refugees showed that 15.2% of the total sample reported having a chronic disease, the most common conditions being hypertension, psychiatric disorders, asthma, diabetes, and cardiac disease.

Covid-19 has added to the challenge of NCDs. Evidence from the pattern of Covid-19 suggests that people with pre-existing non-communicable diseases (NCDs) are more vulnerable to becoming severely ill. Moreover, Covid-19 mitigation measures have meant a longer time spent indoors and reduced physical activity. The mitigation measures and their social-economic impacts, may increase stress to individuals leading to negative coping mechanisms such as smoking, use of drugs, and alcohol consumption, which increase the risk of NCDs. Stress in households may also increase domestic violence and injuries to women affecting their physical, mental health and reproductive health. During this period, some NCD patients may have problems accessing pharmacies due to fear of getting infected while using public transport, especially now social distancing requirements have been lifted, leading to a shortage of essential medicines. NCD patients for whom visits to health facilities are imperative could be at greater risk of getting exposed to Covid-19, highlighting a need to have patient flow systems that avoid contact with Covid-19 patients. Overall, NCD patients might be less motivated or able to actively seek care, including testing for Covid-19, while for those living with family members, there is an increased risk of transmission to younger family members.

An adaptive response is needed for the prevention and control of NCDs in the Covid-19 response, especially as the true scale of at-risk groups is probably underestimated, given that many cases of hypertension and diabetes are undiagnosed. Actions for preventing NCDs and supporting patients with NCDs may include the following:

- Continue to use technology to provide information on the management of NCDs, increased risk of being severely ill among those with NCDs, physical exercise, mental health self-management, healthy eating, and cooking etc.
- Continue to use telemedicine and allow doctors and pharmacists to renew or extend drug prescriptions, and where possible deliver essential NCD drugs to homes.
- Prioritize NCD patients for Covid-19 testing and promote the need for testing; triaging should take account of whether patients have NCDs and are immunocompromised.
- Focusing more contact tracing on those with increased risk factors for NCDs and NCD patients, and alert and follow up closely any possible contacts for NCD patients.
- Prioritize and ensure continued community level transportation services in a safe way to cater for NCD patients' needs.
- Ensure Covid-19 free hospitals and clinics for NCD patients with comorbidities and make available and encourage patients not to postpone routine medical appointments and tests, which can delay NCD management.
- Provide training for health care workers who are dealing with NCD patients on infection control.

15 WHO 2018, Prevention and Control of Non Communicable Diseases in Turkey; a case for investment. http://www.euro.who.int/__data/assets/pdf_file/0009/387162/bizzcase-tur-eng.pdf?ua=1

16 http://www.euro.who.int/__data/assets/pdf_file/0018/400581/who-health-survey-report_-25.04.19_with-cover.pdf



1.2.3. Sexual and Reproductive Health (SRH)

Some gaps persist in SRH in Turkey. Turkey's fertility rate is 2.3. Everyday more than 3,500 deliveries are made. Although 99% of deliveries occur at a health facility and 90% of pregnant women receive at least four pre-natal care consultations, still one fifth of mothers and one third of newborns do not receive a postnatal-check within the first two days after birth. There are also gaps in the provision of essential health services such as maternal, newborn and child health services including emergency obstetric care (EmOC), safe abortion, family planning services (including provision of commodities), sexually transmitted infections management, volunteer counselling and HIV testing. According to the 2018 Demographic and Health Survey, 12% of Turkish women had an unmet family planning need in 2018, and this rate has doubled since 2013, the primary cause being a decrease in the use of family planning methods^{17 18}.

Certain populations are worst affected. The fertility rate of Syrian women is much higher than for Turkish women, at 5.6, but only one out of four Syrian women is using a modern contraceptive method. As many as 40% of Syrian women cannot complete the minimum four antenatal-care visits. The infant mortality rate among the Syrians (22%) is more than twice Turkey's average (9%). Of adolescent Syrian girls, 39% are already mothers or pregnant with their first child¹⁹. Similarly, migrant agricultural workers have a maternal mortality rate ten times the national average of 14 per 100,000, and the adolescent fertility rate is twice the national average.

Covid-19 may add to these challenges as human and financial resources are diverted to respond to the infectious disease outbreak. The closing of borders and constraints in manufacturers' delivery flows may negatively affect the import and in-country availability and distribution of contraceptives, essential maternal health medicines and other essential medicines including antiretroviral (ARV) drugs. Modern Contraceptives Commodities and Supplies, including menstrual health and hygiene items, are central to adolescents and women's health, empowerment, and the exercise of sexual and reproductive health and rights. Consequently:

1. The **continuity** of maternal and newborn health and SRH services and the availability of modern contraceptives commodities and supplies needs to be ensured.
2. Pregnant women with **respiratory illnesses** need to be treated with utmost priority. Antenatal, neonatal and maternal health units must be segregated from identified Covid-19 cases.
3. Strict adherence to infection prevention and control measures is essential. In particular, **midwives, nurses, obstetricians and anesthesiologists** should be provided with personal protective equipment if treating patients with Covid-19.
4. Special attention should be given to **vulnerable populations** such as persons with disabilities, people living with and affected by HIV, adolescents, the elderly, refugees and migrants.

1.2.4. Youth and Adolescent Health

The Covid-19 outbreak and the measures taken to counter it exacerbate risks to the health and wellbeing of young people and adolescents. Educational opportunities have been seriously affected for young people as well as children (see Pillar 2). This also reduces their access to social engagement with peers and comprehensive health/sexuality education. Movement restrictions can lead to additional emotional unrest and anxieties. If caregivers are infected, quarantined, or pass away, protection and psychosocial issues for adolescents need to be addressed. Young people from lower socioeconomic backgrounds and young refugees have more limited access to technology and alternative forms of education and information than other segments of society in Turkey, including on how to mitigate exposure to Covid-19. Young people living with HIV, who bear a disproportionate burden of the global HIV epidemic, are at greater risk due to weak immune systems and dependency on regular supplies for antiretroviral medication and other services, which may not be prioritized. The

17 Re family planning and abortion, see: <http://www.tapv.org.tr/wp-content/uploads/2019/06/Sisteme-De%C4%9Fil-%C4%B-Oste%C4%9Fe-Ba%C4%9Fl%C4%B1-Hizmet-Sa%C4%9Fl%C4%B1k-%C3%87al%C4%B1C5%9Fanlar%C4%B1-G%C3%B6z%C3%BCn-den-%C4%B0stanbulda-K%C3%BCrtaj-ve-Aile-Planlanmas%C4%B1.pdf>

18 Re unwanted pregnancies, see: <https://korona.hasuder.org.tr/gunun-konusu-yeni-koronavirus-hastaligi-covid-19-salginive-istenmeyengebelikler>

19 Demographic Health Survey, 2018

activities of youth organisations have been affected by the physical closure of universities, travel limitations and the prohibition of sport and social activities. (See also above for SRH and family planning services, and Pillar 2 for violence against children and violence against women, which particularly affects young women and adolescent girls, including early forced and child marriage). Accordingly:

1. **Normal delivery of all services aimed at adolescents and young people** needs to be maintained and may require reinforcement, including youth-friendly health and SRH and mental health services, gender-based violence prevention and protection services, education services and social protection.
2. While addressing digital inequalities on the one hand, more use can be made of creative and flexible outreach strategies to **reach young people through electronic media and the internet**. The ease of young people with technology has helped to keep communication channels open and ensure that they are informed and supportive of each other and the larger community during the period of social distancing and lockdown. These channels can play a critical role in disseminating **accurate information** on Covid-19 and support information sharing on risk reduction, national preparedness and response efforts. The gaps and needs cited above can be bridged through **telemedicine**, online services and remote mental health services and counselling.
3. Customized outreach measures will be required to protect **vulnerable groups** such as young migrants, young refugees, youth in detention, youth with disabilities, youth living with HIV and young people living in poverty.

1.2.5. Child Health

According to the DHS 2018, within the national sample 67% of children age 12-23 months had received all age-appropriate vaccines, 93%, 79% and 94% had received Penta-1, Penta-3 and MMR (24-35 m), respectively. Among Syrians 60% had received all age appropriate vaccines, 84%, 69% and 83% had received Penta-1, Penta-3 and MMR (24-35 m), respectively. As part of the Covid-19 containment measures, health care centers discouraged visits for people that were not severely ill. While this was the appropriate measure to decrease the risk of disease transmission and the burden on already stretched health services, it also resulted in a decrease in the demand for vaccination of children. Missing these treatments may have a particularly significant negative effect on the most vulnerable populations like refugees, who already have difficulties in accessing and utilizing these services, jeopardizing progress towards achieving set targets for child health.

Accordingly;

- Strengthen vaccination programs: The disruption of vaccination programs due to Covid-19 creates a need for urgent population-level actions. To secure public health, vaccination programs should include the identification and collection of data on children and other risk groups with missed vaccinations coupled with the implementation of a strengthened vaccination program that will ensure catch up on missing vaccination doses.







Photo: ILO Turkey



Pillar 2. Protecting People

2.1. Social Protection

Social protection systems are an indispensable part of a coordinated policy response to the unfolding crisis, ensuring that people can effectively access health care while supporting jobs and income security for those most affected. They increase resilience and are powerful economic and social stabilizers that can contribute to a swift recovery. The Covid-19 crisis threatens to derail many countries' economic and social progress, including their achievement of the Sustainable Development Goals (SDGs). SDG targets 1.3 (social protection), 3.8 (universal health coverage) and 10.4 (fiscal, wage and social protection policies) are direct trackers of the implementation of nationally appropriate social protection systems and measures for all, including floors, to achieve substantial coverage of the poor and the vulnerable by 2030.

Turkey has a range of established social protection mechanisms. Persons continually in formal employment (i.e. paying social security contributions) - and implicitly members of their households - benefit from state-run retirement pension schemes and other benefits such as illness/accident insurance, disability pensions and survivor benefits. They also have rights to unemployment benefit, subject to certain conditions and time limits, and to severance payments or bonuses on separation. Moreover, they are contributors to and beneficiaries of the General Health Insurance System, providing them with access to health services, subject to some user benefits, and possible local supply constraints or associated costs. Employers/self-employed persons who keep up their social security contributions also benefit from pension rights and General Health Insurance. All children as well as other persons paying the premium benefit from General Health Insurance.

Many persons are unable to qualify for these social insurance arrangements - notably because they are not continually employed, are not formally employed (a widespread phenomenon - for example in agriculture and in casual day labour in construction, catering, domestic services, etc.) and/or are too poor to make regular contributions. These persons widely benefit from other forms of means-tested social assistance, including the payment of their General Health Insurance premiums by the state, old-age pensions, disability support, and the cash transfers and other support provided by the Social Assistance and Solidarity Foundations. Further, social and economic support and conditional cash transfers linked to take-up of health and education services are available for children and mothers (See below for children). The social protection management infrastructure is strong, with a well-developed, consolidated database of beneficiaries.

Notwithstanding these arrangements, social protection for the large number of workers in informal employment and low-income self-employment, who also lack legal safeguards for job security, is an issue that significantly inhibits progress towards achieving the SDGs (in particular, SDG1-End Poverty, SDG2- Zero Hunger, SDG3-Good Health and Well-Being, SDG5-Gender Equality, SDG8-Decent Work and Economic Growth, SDG10-Reduce Inequalities and SDG16-Peace, Justice and Strong Institutions) by 2030.

If working formally, Syrians under Temporary Protection and other refugees benefit from the social insurance schemes mentioned above. If not working formally, subject to meeting eligibility criteria, they benefit from some of the forms of social assistance referred to, and from General Health Insurance. In addition, regular cash assistance is provided under the donor-funded Emergency Social Safety Net programme. Conditional cash transfers for health and education are paid to Syrians under Temporary Protection on a par with Turkish households making use of donor funds.

The Covid-19 crisis has significantly added to the needs for social protection. The temporary closure of some sectors (see Pillar 4) as part of the mitigation measures adopted in March and April 2020, together with the general downturn in the economy, has resulted in a threat of increased unemployment and underemployment and declining incomes for the self-employed. Among those at risk, together with their families, are self-employed workers, informal workers, refugees and migrants, and workers in non-standard employment.

As these groups are neither eligible for social protection programmes nor entitled to sick leave, they have also been obliged to **continue working if at all possible regardless of health risks**. Workers who cannot rely on sickness benefits and/or paid sick leave entitlements may be forced to report to work while sick or be reluctant to self-isolate, thereby potentially passing on the virus to colleagues and clients. This is of major concern in Turkey, as many workers including cleaners, transport and delivery workers, domestic workers, seasonal agricultural workers (including internal migrant workers) and self-employed workers are affected. Women workers are particularly subject to risks due their high levels of informal employment.

Undoubtedly, **refugees and migrants in vulnerable situations**, their families, and communities have also suffered disproportionately from the adverse impact of the Covid-19 pandemic. Those in informal or unstable employment, entrepreneurs and those working in services (a majority of whom are women) are most affected, with only 1 in 5 unemployed persons able to access unemployment benefits²⁰.

All components of social protection services in Turkey have remained operational during the Covid-19 epidemic, and many changes and additions have been made in response to the crisis.

Globally, three categories of social policies (in the wider sense) have been implemented in place in response to Covid-19 – namely, Social Assistance; Social Insurance, and Labour Market policies²¹. In Turkey, social assistance (non-contributory) measures were initially the most-used interventions. Additional social insurance measures were then introduced. The following examples provide an indication of the types and dimensions of the measures adopted in these areas (However, see also Pillar 3 for labour markets. See below for children)²²:

- The emergency **short-time work allowance** scheme was invoked to deter redundancies. Lay-offs were banned and unpaid leave permitted, with monthly benefits for those on unpaid leave).
- Additional one-off **cash transfers** of TRY1,000 (around USD150) were made in three phases. The first and second payments reached 2.1 million and 2.3 million households respectively. All existing social assistance beneficiary households were eligible without need for a separate application and cash payments were delivered to the households. In the third phase, 1.6 million households were reached as of 13 June 2020. This time, the transfers were offered to households adversely affected by the Covid-19 outbreak but not benefiting from any other social insurance or assistance, partly capturing groups disproportionately affected by the pandemic such as informal workers and the self-employed. Applications were evaluated on a case-by-case basis. Overall, around 6 million households benefitted from the one-off cash transfers as of 13 June 2020.
- For some cash transfers paid to women, the **amounts were increased**. Amounts of conditional cash transfers were increased by 29% for health, postnatal and pregnancy payments. Cash transfers for new mothers were increased to TRY100 (around USD15) and monthly transfers for women who have recently lost their husbands to TRY325 (around USD50). The amounts of the conditional cash transfers for education (benefitting both Turkish and refugee families) were increased by 10-30%, effective from July 2020 onwards.
- The **monthly budget** allocated from the central budget and special funds to the Social Assistance and Solidarity Foundations (more than 1,000 locations of social assistance application, evaluation and delivery across the country) was increased from TRY135 million (around USD21 million) to TRY180 million (around USD27 million). This allowed the Foundations to provide ad-hoc social assistance to applicants in a relatively more flexible manner.
- **Criteria were eased** for social assistance payments to the elderly and disabled, and in the health system periods for renewal of ongoing prescriptions were extended.
- The **lowest retirement pension was increased** to TRY1,500 (USD230) per month. The holiday

20 IOM (2020) Integrating Migration into COVID-19 Response and Recovery, A Guide & Toolkit for Development Partners. (draft)

21 For an international perspective and comparisons, see Gentilini et. al. (2020), Social Protection and Jobs Responses to COVID-19: A Real-Time Review of Country Measures https://www.ugogentilini.net/wp-content/uploads/2020/05/Country-SP-COVID-responses_May22.pdf and <https://socialprotection.org/discover/publications/social-protection-and-jobs-responses-covid-19-real-time-review-country>.

22 Some of the measures can be found here (Turkey heading): <https://socialprotection.org/discover/publications/social-protection-and-jobs-responses-covid-19-real-time-review-country>



bonus due to be paid to retirement pensioners just before the religious holiday on May 23 was paid at the beginning of April.

- Testing and treatment related to Covid-19 was made **free of charge** regardless of the social security or migration status of the person concerned through Presidential Decree.

Besides the above, **in-kind benefits**, such as food items or meals, were scaled up. Additional support was provided for particularly vulnerable populations, such as the provision of safe places for homeless persons and nursing homes for elderly persons and persons with disabilities with a three-month waiver of eligibility criteria.

Local administrations (municipalities) also provide several forms of cash and in-kind support to the unemployed, small enterprises, and vulnerable segments of society, including those making a living out of casual work such as street vendors and waste collectors. Services provided by municipalities have included food and hygiene packages, one-off cash assistance, regular food supply, payment of essential bills (water, local transportation and internet), suspension of payment of municipal taxes and rents, the matching of philanthropists with people in need, and care services for homeless persons (See also Pillar 5 for local government services).

As the health and economic consequences of Covid-19 persist, social protection measures may need to be repeated or extended. In addition, further steps may also need to be taken in areas like the following:

1. Aligned to the current conditions, following the lifting of most of the social distancing measures, and for the remainder of the emergency period, eligibility for **paid-sick leave** could be enhanced and the requirement to submit a health report waived. Similar sickness benefits and social protection support schemes could be extended to workers who would not otherwise be entitled (self-employed and informal workers including seasonal agriculture workers, temporary agency workers, domestic workers, refugees and migrant workers, waste pickers, street vendors and freelancers) and financed from general taxation.
2. **Care policies and practices** could make an important contribution to wider social protection. In the context of school and childcare closures, domestic care responsibilities for working parents, especially women, increased considerably during the crisis, in Turkey as in other countries²³. The crisis has also shown the importance of services for the elderly and persons with disabilities. Employment and income protection, paid leave to care for family members, flexible working arrangements and access to quality, emergency care services including children, elderly persons and persons with disabilities are important measures that enable workers to protect and care for themselves, their children and their relatives. Care policies are particularly important for those who cannot telework in an initial situation when many support structures are closed. Examples of such policies include: introducing or expanding special family leave to support working parents affected by the closure of schools²⁴; subsidizing employers for providing paid family leave or providing cash transfers or vouchers for babysitting or other childcare services, especially for health-care workers; maintaining childcare facilities for children of all essential workers including health-care workers, and supporting those who provide long-term care for older family members who may be particularly vulnerable to the coronavirus. With the normalization and return-to-work process, the types of care required are changing. Flexible working arrangements have been partially removed and workers who also have care responsibilities have had to go back to work. As the schools have not reopened fully, new burdens have been created for families with children of school age. Therefore, the emerging needs of families and individuals with care responsibilities need to be taken into consideration to facilitate care services at this stage of the crisis. All civil servants above 60, except special cases, will stay home until further notice. A circular was issued that allows civil servants for flexible and tele-working. Flexible working and tele-working options are possible and encouraged in private sector as well.

23 https://www.ilo.org/wcmsp5/groups/public/---europe/---ro-geneva/---ilo-ankara/documents/publication/wcms_741792.pdf

24 Social Security Institution has implemented three large scale EU funded projects with a budget of over 100 million Euro to promote childcare facilities and formal employment for domestic workers. Lessons learned of those projects could be considered in designing new programmes and policies.

Lessons can be drawn from the Covid-19 crisis in order to “build back better” and make social protection more resilient and relevant to existing, emerging and potential future challenges.

Some points to note in this context are:

1. Expanding **health insurance** is a key policy area to support people during a public health crisis by providing financial risk protection. Lack of financial protection in relation to health services during the emergency may rapidly undermine individuals’ health-service access and exacerbate health inequalities.
2. In this context, the number of persons falling in between the **cracks between funded and unfunded health insurance coverage** may have risen as populations like daily workers and small entrepreneurs find it difficult to pay General Health Insurance premiums, and enterprises which fail may lay off staff who will no longer have insurance coverage. Further, costs in accessing health services, including payments for some prescription drugs and some outpatient services, may have become a financial burden for more people due to the economic stress created by Covid-19.
3. **Cash transfers** could be better connected to other social services; community-based programming should be a strategic goal, even if it cannot be attained immediately.
4. The health and socio-economic effects of Covid-19 are being experienced by both **Turkish citizens and refugees**. Therefore, any comprehensive social protection response roadmap should find ways to include refugees. This would also contribute to social cohesion and stability.
5. The **communication** of social protection programmes (content, amount, criteria, duration, roll-out and termination phases) for citizens and refugees should be communicated carefully, without contributing to stereotypes and without creating false-expectations. During the pandemic, this is not only a social cohesion measure but also a health risk mitigation measure.

ILO’s international standards on social security²⁵ offer a framework for an improved social protection system. These standards are the result of international consensus between governments and employers’ and workers’ organisations. ILO Recommendation on Social Protection Floors (No-202)²⁶ is of particular importance when implementing measures to address the economic and social impact of the Covid-19 pandemic as it calls on governments to undertake the following steps as quickly as possible in responding to crisis situations:

- seek to ensure basic income security, in particular for persons whose jobs or livelihoods have been disrupted by the crisis and for persons of active age who are unable to earn sufficient income, in particular in cases of sickness, unemployment, maternity and disability,
- seek to ensure basic income security for children, providing access to nutrition, education, care and any other necessary goods and services, and for older persons,
- seek to ensure effective access to essential health care and other basic social services, in particular for population groups and individuals who have been made particularly vulnerable by the crisis including refugees and migrants.

The **financing** of universal social protection systems needs to be ensured through the progressive taxation of wealth, income and/or consumption, based on social consensus.

2.2. Children

Although children are less directly affected by infection, **the secondary socio-economic impacts** of the crisis on the health and wellbeing of the most vulnerable families and their children are likely to be significant. In recent months, meanwhile, **school closures** have affected children in several ways: curtailing their access to education, risking their social development, depriving them from school lunches and increasing their exposure to child protection risks. The harmful effects of the pandemic on children are expected to be most severe for children in the **poorest communities** and for those in already disadvantaged or vulnerable situations including refugee children, homeless children, children at institutional care, children with disabilities and chronic illnesses.

25 Relevant standards include the ILO Social Security (Minimum Standards) Convention, 1952 (No. 102), the Social Protection Floors Recommendation, 2012 (No. 202) and the Employment and Decent Work for Peace and Resilience Recommendation, 2017 (No. 205).

26 https://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:12100:0::NO::P12100_INSTRUMENT_ID:3065524



2.2.1. Social Conditions

A considerable proportion of children in Turkey face poverty and multiple deprivations. According to the statistics of the Turkish Statistical Institute (TurkStat) on income poverty – calculated on the basis of 60% of median equivalized household income – 32.1%²⁷ of children in Turkey are considered poor. This does not include the 1.7²⁸ million Syrian children and 120,000²⁹ non-Syrian refugee children. Child poverty in Turkey has been persistently and considerably higher than total poverty³⁰. Monetary poverty and income are not the only measure of vulnerability, particularly for children. Measurements of material deprivation, such as adequacy of shelter, heating, clothing etc. also indicate the potential impacts of public health and socio-economic crises. Taking these factors into account, about 36.1% of children in Turkey face severe material deprivation, according to TurkStat (Table 2-1)³¹. Once again, this does not include **Syrian refugee children**, who are likely to be worse off in terms of both income poverty and material deprivation.

Table 2-1: Ratio of Individuals and Children with Severe Material Deprivation (%)

	2012	2013	2014	2015	2016	2017	2018
Proportion of individuals who have material deprivation	55,0	43,8	29,4	30,3	32,9	28,7	26,4
Porportion of children who have material deprivation	69,3	59,8	44,9	29,0	41,7	38,1	36,1

Source: Turkstat, Statistics on Child, 2019

Looking at the impacts of past economic crises and contractions, Covid-19 is likely to increase child poverty and material deprivations. Social protection and child protection policies have developed but their transformative potential for vulnerable children and families is limited by issues of quality, coverage and integration. Covid-19 has undoubtedly created additional vulnerabilities. For example, an impact assessment conducted in May 2020³² examined the situation of Syrian and other households during the Covid-19 pandemic. The findings demonstrate that the primary barrier to continuing education during the pandemic was the lack of internet access or television access. These are essentially socio-economic challenges reflecting household incomes and the domestic distribution of scarce resources. Moreover, 16% of the Syrian households participating in the assessment reported facing the threat of eviction, which is again strongly related to income and earnings.

The risk of child labour may also increase as families struggle to cope with the economic challenges resulting from the pandemic³³. According to TurkStat's 2019 Child Labour Force Survey³⁴, an estimated 720,000 children, or 4.4% of children aged 5-17, are engaged in an economic activity. Of all child labourers, 45.5% are in the services sector, 30.8% in agriculture and 23.7% in industry. Moreover, 34.3% of child labourers do not attend school. Although data is lacking, child labour is also reported to be widespread among refugees, with children engaging in an economic activity in order to support their families. During a period of crisis or an economic downturn, the risk of resorting to negative coping strategies such as child labour will be particularly heightened for children from disadvantaged social groups, and for those already living in poverty and deprivation, including refugees and migrants, children of agricultural workers and others living in poor or marginalized households.

27 Turkish Statistical Institute, Statistics on Children, 2018. <https://biruni.tuik.gov.tr/medas/?kn=203&locale=tr>.

28 Directorate General of Migration Management, 2019. <https://en.goc.gov.tr/temporary-protection27>.

29 Directorate General of Migration Management, 2019. <https://en.goc.gov.tr/temporary-protection27>.

30 In 2018, while total poverty rate was 21.2%, the child poverty rate was 32.1%. The same trend is observable across decades. 23.4% vs 30.6% in 2002; 25.3% vs 35.2% in 2010.

31 Turkish Statistical Institute, Statistics on Children, 2018. <https://biruni.tuik.gov.tr/medas/?kn=203&locale=tr>.

32 <https://data2.unhcr.org/en/documents/download/76384>

33 https://alliancecpha.org/en/system/tdf/library/attachments/covid-19_and_child_labour_annex_final.pdf?file=1&type=node&id=38122

34 <http://www.turkstat.gov.tr/PreHaberBultenleri.do?id=33807>

One of the worst and most persistent forms of child labour is **agricultural labour**, particularly seasonal agricultural labour. Agricultural work is the most important economic activity for households without any access to alternative sources of income, which are crowded and have low levels of education, and with a rural socio-economic history³⁵. The challenging living and working conditions of many seasonal migratory agricultural worker families are well documented. In the the context of Covid-19, these challenges will be multiplied. Such conditions also heighten the risk of child labour as these children, who had limited access to education even before Covid-19, now lack access to distance education and suffer from loss of income and increased economic uncertainty.

In some respects, the social assistance measures introduced in response to the Covid-19 outbreak (see above) have benefited children as well as adults. The conditional cash transfers for education programmes for Turkish citizens and refugees have remained operational during the pandemic, benefiting approximately two million Turkish children and more than half a million refugee children. The amounts of the transfers have been increased by 10-30%, effective from July 2020 onwards. The amounts of conditional cash transfers provided in return for take-up of mother-and-child health services were also increased. On the whole, however, the selection criteria and targeting of the policies and programmes were primarily defined at the level of households or adult workers (i.e. they target deprivations defined at the level of household and/or adult individual) rather than children.

Turkey would also benefit from the below policies in improving the social conditions of children in its response to the Covid-19 crisis:

- Linking its child labour elimination efforts to social protection measures addressing poverty,
- Using cash transfer programmes to enhance families' income security,
- Strengthening workplace inspection practices enforcing business practices upholding child rights with a particular attention to the periods when schools reopen to avoid school drop-outs,
- Strengthening public finance response for social policies and increasing the fiscal space for child-sensitive and shock-responsive social protection.

2.2.2. Education

The outbreak of the Covid-19 pandemic on March 10, 2020 in Turkey complicates an already challenging education context for the 18.1 million Turkish children (pre-primary to grade 12) and more than 684,000 Syrian children already enrolled in school. Efforts to achieve the targets of Sustainable Development Goal (SDG) 4 (Quality Education) may need to be redoubled.

In order to ensure the safety of students, Turkey's Ministry of National Education (MoNE) extended the semester holiday in March for one week affecting all primary schools, middle schools, and high schools in Turkey. School closures followed and will remain in effect until September, according to the Minister's announcement of 18 May.

The key educational response to school closures due to Covid-19 has been to ensure the continuity of learning by implementing a two-fold strategy for distance learning: primarily broadcasting lessons on television, and secondarily utilizing online platforms such as the "Education Information Network (EBA)" to deliver curricula. This strategy went into effect on March 23rd and encompassed grades 1-12.

According to available data, 99.7%³⁶ of children live in households with televisions and 88.3% of households³⁷ in Turkey have access to hardware and internet connectivity at home. Every week, MoNE has been publishing a weekly schedule of lessons available through EBA-TV for primary, middle and high school students, both on the EBA website and on social media. Every day, MoNE delivers lessons via three channels of EBA-TV (3 channels). Courses include 30-minute lessons (for each subject) that cover the general curriculum including key subjects (Turkish, Life Sciences, English, Mathematics, Science, PIKTES adaptation courses for refugee

35 Development Workshop-UNICEF (2019), The Socio-Economic Profile of Seasonal Agricultural Worker Households Study <http://www.ka.org.tr/dosyalar/file/Yayinlar/Raporlar/%C4%B0NG%C4%B0L%C4%B0ZCE/05/SOSYO-EKONOM%C4%B0K%20EN.pdf>

36 TurkStat SILC, Survey of Income and Living Conditions, 2017. <http://www.turkstat.gov.tr/PreHaberBultenleri.do?id=30755>

37 Turkiye Istatistik Kurumu, 2019. <http://tuik.gov.tr/PreHaberBultenleri.do?jsessionid=0n3SpzgB0zGzyXFBQJj2nJLpfhjJhppnPyxymg-2Mllrqf6Uro!-1159824127?id=30574>



children, and religion courses). In addition, the **Remedial Education Programme** also regularly airs lessons on EBA-TV. Associated materials and activities for each lesson are available on the EBA online system.

In late April 2020, MoNE released a mobile application to facilitate **remote special education** called ‘I’m in Special Education’. The application was developed for all students in special education (and their parents). Students with hearing and visual impairments, mild, moderate, or severe mental disabilities or autism spectrum disorders and/or with learning difficulties are able to benefit from all the special education content in the application free of charge. The application contains training videos covering cognitive issues, literacy, mathematics, daily life, communication skills, social skills, all special education lessons and supplementary resource books, activity recommendations, and information videos for families. Guidelines for families on how to use the resources are provided as well. Anyone can download the application as it is available to the general public.

Furthermore as part of the ‘2020 the Accessibility Year’, **Turkish Sign Language teaching videos** prepared by the Ministry of Family, Labour, and Social Services were broadcast on EBA TV during Disability Week (May 10-16). In April 2020, MoNE released psychosocial support guidelines for adolescents and launched a PSS hotline targeting students and parents. At the same time, for Syrian students in PIKTES adaptation classes, “**Turkish Language for Harmonization**” courses were released on the TRT-EBA and PIKTES Youtube channels.

According to recent EBA User Statistics (May 2020), **9.7 million students** had accessed EBA online as of April 17th. There was a decrease as of May 2, 2020, with a little over 9 million students accessing the online system. Lower secondary students make up the highest proportion of users. The extent to which different social groups have access to and make use of these remote learning opportunities has yet to be fully ascertained; the available studies offer relatively diverse findings, depending on the survey size, sample and communities covered. Still, observation points to the need to improve the accessibility and content of distance education.

Between 23 March and May 8, 2020, in its efforts to reach all children with distance learning, MoNE reports:³⁸

- 1,034 hours broadcast on the three EBA channels,
- 674 teachers (93 subjects) taught via remote learning,
- 196 extracurricular activities broadcast.
-

Despite this robust strategy, initial assessments and data expose significant gaps, identified through multiple sources including surveys and assessments, in the continuity of learning for children in Turkey. While all students are affected, particularly hard hit are:

- Children with no access to television or internet
- Young learners
- Refugee students
- Children with disabilities
- Migrant children, working children and other vulnerable children.

School closures also affected more than 684,000 Syrian and other refugee children enrolled in education in Turkey. Through a variety of surveys throughout Turkey, large portions of the refugee population report that access to remote education services is limited for them³⁹. As a large number of refugees were already out of school before the pandemic⁴⁰, there is therefore a risk that the number of out-of-school children among the refugee population will grow further as a result of the pandemic.

All in all, the Covid-19 crisis is exacerbating existing education system weaknesses and will likely result in a **loss of students** and in **learning losses** for the most vulnerable. There will also be longer-term impacts including retention issues and dropout. The longer marginalized children are out of school the less likely they are to return.

38 <https://twitter.com/tcmeb/status/1259494966004461574?s=20>

39 The impacts on refugee children’s access to education are elaborated further under Pillar 5, below.

40 400,000 Syrian school-aged children under temporary protection (37% of the total school-aged population) still remain out of school according to MoNE. The gender disaggregation overall is 50.82% for boys and 49.18% for girls and it is common to all levels of education.

Schools are due to reopen in September 2020. An evidence-based approach ensuring the continuity of learning through **safe school operations**, and promoting the wellbeing and protection of learners in schools has the potential to maximize the learning outcomes for children and mitigate the negative effects.

Meanwhile, the Covid-19 crisis has provided educators with an opportunity to rethink how teaching and learning work. **A “blended approach”, combining traditional face-to-face learning with online modalities, could very well be the “new normal”.** This modality could offer many marginalized learners new opportunities for increased and more equitable inclusion in education. At the same time, the use of online modalities, even within a blended approach, carries risks. It will be important to understand the context and situation of the 12% of households that have no internet connectivity, the number of children/students in these households that will be affected by blended/online learning, and what new policy measures/strategies need to be introduced to support them, to ensure that no one is left behind. Moreover, early studies suggest that even for the online mode of learning, there is unequal access to knowledge and interaction with teachers to digest information⁴¹.

Maximising learning opportunities and outcomes for all children through accessibility and quality of both face-to-face and remote learning modalities will depend on factors such as:

- Providing **financial resources** to MoNE to reduce barriers in accessing online learning for all children and ensuring that the strategy of television broadcasts and online platforms (EBA) can reach all children, especially the most vulnerable including refugee children and adolescents and those at risk of dropping out, through ensuring that sufficient technical infrastructure is in place and **connectivity** is free and/or affordable,
- Supporting remote learning options for **non-formal learners**, girls and boys under risk of early school leaving and out-of-school refugee and Turkish children,
- Providing children and students with essential **learning materials (stationary, pens and notebooks)** for remote learning including those in non-formal education programmes and other vulnerable learners,
- Developing targeted, age-appropriate **communication messages** for Turkish and refugee (Syrians and other nationalities) students, families and teachers to support children’s physical and mental wellbeing, the importance of education, and access to distance learning,
- Developing comprehensive **Back-to-School campaigns** targeting both Turkish and refugee families.

2.2.3. Child Protection

While economic stress and isolation among households and children may have increased the need for child protection services and safeguards, particularly among vulnerable groups, social distancing measures have made the provision of services more difficult.

The authorities have worked to **maintain provision** in various ways. For example:

- State child protection services have been implemented by the Ministry of Family, Labour and Social Services (MoFLSS) via a network of 332 Social Services Centres—albeit with reduced capacity and a strict prioritization of activities to mitigate the spread of infection.
- The social work departments at the local level have stopped undertaking proactive social work but continue to work on **emergency family support cases**. Social work case management has shifted to online, phone, and other forms of remote communication to ensure children and families continue to receive follow up. **Hotlines for domestic abuse and violence** cases are being strengthened.
- The Ministry of Family, Labour and Social Services is currently establishing a **psychosocial support counselling hotline**, which will allow up to 100 counselling calls to take place – in both Turkish and Arabic – at any one time. The nationwide hotline will be able to receive up to 4,000 calls per day. Hotline staff are currently being trained on psychosocial support in the context of Covid-19.
- **Day care services**, including for children with disabilities, have been suspended. The MoFLSS plans to gradually open selected day care centres from June onwards.
- **Child Protection NGOs** have had to significantly reduce their community-based services, with continued counselling and case management provided through phone communication and virtual consultations with beneficiaries.
- Access to **detention facilities** (for visitors, service providers) has been restricted. Until 15 June, the

⁴¹ <https://blogs.lse.ac.uk/politicsandpolicy/home-schooling-covid-19/>



courts held face-to-face sessions only for urgent cases. All **probation**-related Psychosocial Support services were postponed until June and resumed on the 1 June.

- **Some 750 children were released from prison** following the amendment of the Law on Enforcement of Sentences (See Pillar 5). The Ministry of Justice has been working to sustain support services.

Given continued health concerns, the focus is currently on the safe continuation of services to the most at-risk, including through the effective use of new delivery modalities. Some key areas are:

1. Ensuring adequate care and access to protective equipment and other hygiene and health services, for **children in all kinds of institutions** and closed facilities, including detention and removal centres
2. Maintaining outreach and case management for the **follow up of medium and high risk cases**, as well as provision of psycho-social support, with the aid of alternative communication channels and approaches, including virtual counselling through email, text messaging, online chats and mobile phones,
3. Maintaining psycho-social support (PSS) through various channels to **refugee children** who have been benefiting from community-based child protection programme in provinces with the highest number of refugees.

In the medium term, there is room for the expansion of quality and coverage and for building back better based on lessons learned during the crisis. Support for parents may be an important aspect of preparedness and resilience. More information is needed on the impacts of the Covid-19 outbreak on violence against children.

2.2.4. Adolescents and Young People

Covid-19 has seriously affected opportunities and services for adolescents and young people. It has affected their community skills development opportunities, challenged the participation of young people in community support structures, and affected young people in employment too. It has also brought young people out of employment, with men showcasing a 22.3 per cent NEET (neither in employment nor in education or training) rate in the second quarter of 2020 while that of young women stood at 36.1 percent⁴². Among the services which have been affected are those provided by the nationwide youth centres and camps of the Ministry of Youth and Sports (MoYS), which mobilise and equip young people with skills and volunteerism opportunities. All in all, the conventional reliance on physical spaces for engagement and skills building for young people has been challenged in ways never experienced before, leading to a total closure of physical youth development activities in youth centres and youth camps. The majority of adolescent and youth development spaces closed down or shifted to online, phone, and other forms of distance communications.

In response, programmes have been reoriented to address the crisis conditions. Another focus has been to spread correct, factual and timely information on the pandemic to adolescents and young people via official communication platforms and other networks. Currently, as in other sectors, the safe restoration and continuity of existing services, including through online channels, is the main priority. Meanwhile, the Covid-19 experience has highlighted the importance of the following priorities for supporting the resilience of adolescents and young people to shocks and pandemics:

1. Building collaborative, critical thinking and other key **skills and competencies** that enable young people to adapt to rapidly changing situations and disruptions,
2. Supporting and engaging with young people's associations carrying out **localized actions** towards future preparedness and response,
3. Working with government counterparts and young people to build their **connectedness** to communities and peers while facilitating youth-led agency,
4. Developing national **virtual youth networks** with government counterparts and partners,
5. Amplifying the voices of youth so as to inform government policies and the reforms needed to promote young people's development and participation making use of the existing **participation structures** (Provincial Child Rights Committees and the upcoming National Youth Council),
6. Supporting youth engagement in support of **social cohesion** (See also Pillar 5).

42 https://www.ilo.org/ankara/publications/research-papers/WCMS_771428/lang-en/index.htm

2.3. Gender Inequalities and Gender Based Violence

The Covid-19 pandemic is exacerbating gender inequalities and gender-based violence. These are already major concerns. Turkey ranks 130th among 153 countries in the World Economic Forum's Gender Gap Report (2020), based on levels of economic participation and opportunity, educational attainment, health and survival and political empowerment. Health crises like Covid-19 have disproportionate effects and devastating social and economic consequences for women and girls. These effects range from the loss of access to basic services and income opportunities to additional unpaid care responsibilities and increased exposure to gender-based violence. Global evidence so far, pending in-depth analysis and research, demonstrates that marginalized women such as women with disabilities, rural women and women from Roma communities are also affected at different scales and intensities. These circumstances aggravate the risks to the achievement of Sustainable Development Goal (SDG) 5 (Gender Quality) and to related SDGs such as SDG1 (End Poverty), SDG3 (Good Health and Well-Being), SDG8 (Decent Work and Economic Growth) and SDG10 (Reduce Inequalities).

The socio-economic impact of Covid-19 cannot be addressed through gender-blind policies and measures. A strong gender lens is required in all fields of the response. Measures are needed to prevent the widening gender gap and to protect women at risk. Lack of sex- and age-disaggregated data, as well as gender-differentiated data on the impact of Covid-19, may pose challenges in this respect.

2.3.1. Gender Based Violence

During the Covid-19 crisis, violence against women and girls has become the shadow pandemic. As evidenced from previous health crises, women and girls become more vulnerable to domestic and sexual violence as a result of quarantine and isolation policies, coupled with deepening economic and social stress. Women at risk of domestic violence are exposed to their abusers for longer periods of time in the household and they are mostly unable to leave their home or call hotlines to seek help.

Despite the difficulties faced by women in reporting and disclosing violence, available. Data so far reveal a dramatic surge in domestic violence cases worldwide during the Covid-19 outbreak. Groups with special needs are also negatively affected, as they may be deprived of their already-limited access to services and support mechanisms. At the same time, considerations of gender-based violence may not receive the attention they deserve in policy responses, in the drive to respond to the pandemic.

Women are also exposed to violence on the Internet. In low-and middle-income countries, 433 million women⁴³ are unconnected and 165 million fewer women⁴⁴ own a mobile phone compared with men. Boys are 1.5 times more likely⁴⁵ to own a phone than girls in many countries, and among those who do own phones, boys are more likely than girls to own smartphones. The global Internet user gap is 17%⁴⁶, and the digital gender gap exists in all regions of the world. In Turkey, households' internet access rate is 88.3%, and internet usage among men aged 16-74 is 81.8% while for women it is 68.9%⁴⁷. However, women and girls have used the internet with greater frequency during the pandemic for work, school and social activities due to confinement measures⁴⁸. Given the lower digital literacy levels of women and girls, they are at a higher risk of cyberviolence (physical threats, sexual harassment, stalking, zoombombing, sex trolling etc.). This may restrict women's access to online services during Covid-19 and may censor women's voices and participation as active digital citizens⁴⁹.

There is the risk of gender-based violence (GBV) in Turkey too. Prior to the Covid-19 crisis, 36% of ever-

43 Connected Women: The Mobile Gender Gap Report 2019, <https://www.gsma.com/mobilefordevelopment/wp-content/uploads/2019/03/GSMA-Connected-Women-The-Mobile-Gender-Gap-Report-2019.pdf> accessed on 1 June 2020.

44 Connected Women: The Mobile Gender Gap Report 2019, <https://www.gsma.com/mobilefordevelopment/wp-content/uploads/2020/05/GSMA-The-Mobile-Gender-Gap-Report-2020.pdf> accessed on 1 June 2020.

45 Real girls, real lives, connected, Vodafone Foundation 2018, https://static1.squarespace.com/static/5b8d51837c9327d89d936a30/t/5bbe7cbe9140b7d43f282e21/1539210748592/GE_VO_Executive+Summary+Report.pdf accessed on 1 June 2020.

46 Measuring Digital Development Facts and Figures, ITU Publications 2019 <https://www.itu.int/en/ITU-D/Statistics/Documents/facts/FactsFigures2019.pdf> accessed on 1 June 2020.

47 Information and Communication Technology (ICT) Usage Survey on Households and Individuals, TURKSTAT, 2019.

48 Online and ICT* facilitated violence against women and girls during COVID-19, UN Women 2020 <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/brief-online-and-ict-facilitated-violence-against-women-and-girls-during-covid-19-en.pdf?la=en&vs=2519>

49 Ibid.



married women between the ages of 15 and 59 reported having experienced intimate partner physical and/or sexual violence at least once in their lifetime⁵⁰. In view of these high rates, combatting violence against women is included as an objective in Turkey's Eleventh Development Plan for 2019-2023.

In some countries with available data, reports indicate that calls to domestic violence helplines, police and shelters have significantly increased during the COVID-19 outbreak. In other cases, reporting, calls and service use have decreased as women find themselves unable to leave the house or access help online or via telephone⁵¹. There is no official data on the increase of violence against women and girls during COVID-19 in Turkey. While some data is available, including from women's organizations providing services, records of law enforcement and service-providers since the beginning of the pandemic, they have not yet been compiled and consolidated to provide an overall estimate of the extent to which emergency measures had adversely affected domestic violence, or other forms of VAWG. It should also be kept in mind that even before the pandemic, a high percentage of VAWG incidents went unreported to authorities for various reasons and thus posed limitations on administrative data to illustrate the prevalence. While available data and information are sufficient to alert duty-bearers to the problem, reliable incidence and prevalence data on all forms of VAWG are still needed once it is possible to conduct such research.

According to the Rapid Gender Assessment on the Impact of Covid-19 conducted by UN Women Turkey in April 2020, based on a telephone-based survey of a nationally representative sample of 1,500 women and men over the age of 15, 14% of the respondents were aware of an increase in domestic violence since the spread of Covid-19⁵². The same study revealed that 25% of women do not know where to go for help and support if exposed to domestic violence. Specific groups of women are at higher risk of domestic violence, such as women with disabilities, refugee women, and undocumented migrant women. This risk is also valid for female health workers, particularly in cases where they continue to work while their partner stays home, disrupting longstanding gender norms.

It appears that the COVID-19 pandemic has also exacerbated the risks of specific forms of violence. With social distancing and lockdown measures in place, work, education and socializing have been transferred to digital spaces, resulting in a much greater number of people relying on ICT than ever before. This, in turn, has corresponded with surges in ICT-facilitated violence against women and girls around the globe, and a need for greater focus in assessing and responding to this particular type of violence in Turkey as well.

The incidence of child marriage, as a form of violence against women and girls, may also increase in times of crisis as a negative coping mechanism adopted by families to deal with worsening economic problems. Limited access to resources, the closure of schools (which may lead to an unseen increase in dropping out among girls) and additional socio-economic burdens can exacerbate girls' vulnerability. Globally, Covid-19 is expected to disrupt planned efforts to end child marriage and result in an additional 13 million child marriages between 2020 and 2030⁵³.

According to the Demographic and Health Survey (DHS) conducted in 2018, 14.7% of all women in Turkey aged 20-24 had been married or in union by the age of 18⁵⁴. The situation is worse among the Syrian refugee girls living in Turkey. According to the 2018 DHS, 55% of Syrian women in the 25-49 age group had been married by the age of 20, 38% had married by the age of 18 and 12% had entered into marriage before their 15th birthday⁵⁵.

Public services for GBV survivors continued to be provided during the pandemic, subject to the remote and/or reduced working modalities adopted by the Government of Turkey. These included shelters, Violence Prevention and Monitoring Centres (SONIMs), helplines and online applications and referral mechanisms in

50 Hacettepe University Institute of Population Studies, Ministry of Family and Social Policies, 2015. Research on Domestic Violence against Women in Turkey. Ankara, Turkey.

51 <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/vawg-data-collection-during-covid-19-compressed.pdf?la=en&vs=2339>

52 UN Women Turkey, Rapid Gender Assessment on Impacts of Covid-19, April 2020. Ankara.

53 UNFPA interim technical report: Impact of the Covid-19 Pandemic on Family Planning and Ending Gender-based Violence, Female Genital Mutilation and Child Marriage". <https://www.unfpa.org/resources/impact-covid-19-pandemic-family-planning-and-ending-gender-based-violence-female-genital>.

54 <http://www.hips.hacettepe.edu.tr/eng/tdhs2018/> accessed on 9 May 2020.

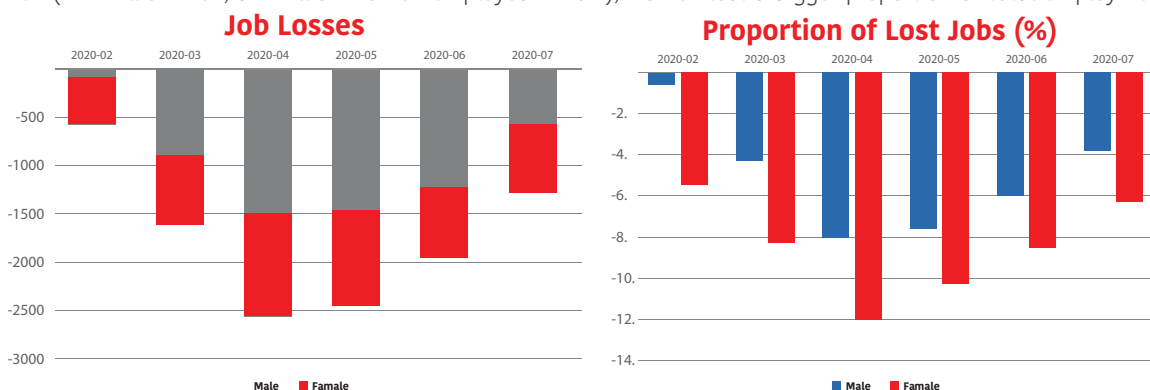
55 http://www.hips.hacettepe.edu.tr/eng/tdhs2018/TDHS_2018_SR.pdf accessed on 9 May 2020.

the police, justice and health sectors. A digital application, KADES⁵⁶, has been introduced by the government for the reporting of domestic and gender-based violence. ALO 183 is the general public Social Support Helpline that also covers violence against women cases. During the Covid-19 period, as part of Government's response to a possible increase in emergency calls for domestic violence, a special function has been added to the line that prioritize domestic violence calls. In addition to these measures, considering the specific challenges posed by the pandemic, further holistic and urgent efforts are needed to ensure victims/survivors are safe and receive the support and services that they need in a timely manner. Civil society organizations have reported disruption in referral mechanisms and delays in services. Due to linguistic, economic or social barriers, refugee women and girls face additional challenges and risks of being unable to access essential services during this period. **It remains important to enhance measures for the prevention of all forms of violence (at home and work)** through increasing availability of counselling services including psychosocial services, and protection services including law enforcement and judiciary. Persistent needs during and beyond the crisis include:

1. The full functioning of **public services** for the benefit of GBV survivors, as well as ensuring sustainable funding for **civil society organizations** offering support to GBV survivors, not only as an immediate intervention but also as a long-term preventive and protective measure.
2. Specifically targeting the **most vulnerable groups** of women and girls
3. The increased availability and active use of **digital and online support mechanisms** to reach GBV survivors unable to seek help due to the confinement and social distancing measures adopted during and after the pandemic. These solutions should not depend on high-end technologies, further marginalizing girls and women without those resources. A two-pronged approach is needed: to assure full connectivity for everyone and to cater to those who are not online⁵⁷. Disseminating reliable information about the available services and support mechanisms is as essential as the services themselves, including in languages spoken by migrant communities in Turkey.
4. Further strengthening the implementation of policies and programmes to combat **child, early and forced marriage**.
5. Collection of data for improvement of GBV services and programmes (always ensuring survivor-centered and ethical safety standards).

2.3.2. Gender Equality in Labour Markets

The participation and status of women in labour markets in Turkey is low, and the situation caused by the pandemic jeopardises the slow progress that has been made. This issue is discussed in the context of labour markets under Pillar 3 below. Briefly, women work mostly in insecure, low paid, and informal jobs, making them more likely to lose their jobs and incomes. Women are losing jobs in higher proportions than men, and it will be harder for them to find new employment. Looking at the gender composition of job losses, it can be observed that women accounted for more than 40 % of the job losses during the pandemic. At the peak of the job losses in April 2020, women lost 1.1 million jobs while men lost 1.5 million jobs compared to the same month of the previous year. Even though the number of jobs women lost is smaller in absolute terms than that of men, these figures still reflect a disproportionate effect on women's employment. As the employment levels of women is much less than that of men (19.2 million men, 8.9 million women employed in 2019), women lost a bigger proportion of total employment



Source: Turkstat

⁵⁶ Women Support Application of General Directorate of Security. For more information see <https://www.icisleri.gov.tr/kadin-des-tek-uygulamasi-kades>

⁵⁷ Op-ed by UN Women Executive Director and Plan International CEO, May 2020 <https://www.unwomen.org/en/news/stories/2020/5/op-ed-ed-phumzile-covid-19-and-the-digital-gender-divide> accessed on 1 June 2020.



during the pandemic (Figure 2.1)⁵⁸.

Figure 2-1: Gendered Impacts of the Pandemic on Labor Market

There are already significant gender gaps and inequalities in accessing to decent work, wages and promotion. The **gender pay gap** is 12.9% based on factor-weight ILO methodology, and the **motherhood pay gap** (the pay gap between working mothers and women without children) is particularly high at 29%⁵⁹. Mothers tend to have lower wages compared to non-mothers due to a host of factors, including labour market interruptions, reductions in working time, employment in more family-friendly jobs with lower wages, or discrimination in hiring and promotion.

Recent research, identify that **women experienced more severe pandemic-triggered employment disruption** in the case of Turkey⁶⁰. While 51% of women experienced employment disruption due to the pandemic, the same ratio was 42% for men. Women are also represented disproportionately among the workforce laid off during the Covid-19 period. Among those experiencing employment disruption, 26% of women were laid off compared to 21% of men. Furthermore, women have benefited less from paid leave measures, with 5% of women experiencing employment disruption benefitting from paid leave as opposed to 9% of men.

Consequently, **medium and long-term** social and economic policies developed for struggling with the consequences of the pandemic need to contain enhanced measures for ensuring women's access to decent work and gender equality in the world of work. Meanwhile:

1. It is important to secure the income of women employees, especially those working informally, by extending **access to unemployment benefits** and providing financial support.
2. Financial and technical support concerning digital platforms needs to be provided to **self-employed women** to enable their businesses to survive the crisis⁶¹.
3. Women who have lost their jobs in high-risk sectors could be provided with **online skill development opportunities** for increasing their employability in the sectors expected to grow after Covid-19.
4. For all workers, especially those working on the front line, including domestic workers, **occupational safety and health** standards should be met, including hygiene equipment, and training should be provided⁶².
5. The rise of violence and harassment beyond physical workplace needs to be addressed and a full protection for those exposed to violence and harassment in certain sectors, occupations and work arrangements should be ensured.

2.3.3. Gender Parity in the Health Sector

Women globally make up over 70% of workers in health, including those working in care institutions (100 million female workers)⁶³. **In Turkey two-thirds of healthcare providers are women**. Women are therefore in the front line of the fight against Covid-19. Because of the pandemic, they are facing several challenges⁶⁴:

- Heightened risk of contracting Covid-19 due to high levels of exposure and lack of adequate personal protective equipment (PPE). This is a risk for all frontline healthcare workers. However, as women overwhelmingly provide direct care, they are disproportionately affected. Close to 100.000 healthcare workers around the globe have contracted Covid-19⁶⁵. According to a statement made by the Minister of Health on 29 April 2020, 7,428 healthcare workers in Turkey had been infected with Covid-19 (See Pillar 1). The majority are likely to be women.

58 UN RCO, Economic Update Report, 2020-III

59 https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms_650553.pdf

60 İlkkaracan and Memiş (2020), The Gender Gaps in the Care Economy under the Covid-19 Pandemic in Turkey, Research Brief, UNDP Turkey Country Office

61 OECD, UN Women (2020), "COVID 19 and Gender: Immediate Recommendations for Planning and Response in Jordan".

62 See Economic Recovery section for more information on women's employment.

63 ILO, 2020.

64 GBV AoR, Social Development Direct, 2020 - https://gbvguidelines.org/wp/wp-content/uploads/2020/04/202003-securing-safety-and-wellbeing-of-women-frontline-healthcare-workers-covid-19_final_version.pdf

65 ICN, 2020 - <https://www.icn.ch/news/icn-calls-data-healthcare-worker-infection-rates-and-deaths>

- Longer shifts at work and additional care work at home due to the closure of schools and childcare and other care facilities (and lack of compensatory support mechanisms).
- Increased risk of workplace violence, including violence on the way to work, violence from patients and/or patients' families partly attributable to their acute stress and fear, and domestic violence. Even before the crisis, according to a study conducted by Hacettepe University in 2017, around 95% of health care workers were exposed to verbal violence, 10% of doctors and 16% of nurses faced physical violence, and 27% of nurses faced sexual violence⁶⁶. According to the Family Medicine Journal study⁶⁷ (2019) female health care workers are at higher risk of violence than male health care workers.
- Workers who do not have paid sick leave have to make choices between their own health, the health of others, and the need to continue to provide for their families. With regards to mental and psychosocial support, in times of crisis, care and wellbeing for ourselves, staff, volunteers or others tend to get overlooked for the more "urgent" work of saving lives. However, this leads to fast burn-out, decreases the quality of healthcare, exacerbates stress, creates challenges to maintaining the response in the long run, and can have long-term harmful consequences for frontline workers, who are mostly women.

In health facilities, the specific needs of women are overlooked by gender-neutral policies, or by a response that is designed and managed primarily by men⁶⁸. However, additional health precautions, social protection measures, mechanisms for protection from gender based violence, and psychosocial support measures are necessary to support female health care workers, particularly those working in sectors involved in the emergency response who are less likely to be able to work from home.

2.3.4. Unpaid Care and Domestic Work

Globally, women and girls perform three times more unpaid care work than men⁶⁹. This is exacerbated during times of crisis due to overburdened healthcare systems and disrupted public services. Measures such as confinement, closure of schools and childcare facilities, and telecommuting arrangements imply a shift of care work onto households. Rising demand for care in the context of the Covid-19 crisis and response will likely deepen already existing inequalities in the gender division of labour, placing a disproportionate burden on women and girls with potential long-term implications for their health, wellbeing and economic empowerment.

In Turkey, according to the 'Time Use Survey' of 2015, women do five times more care work than men, regardless of their employment status⁷⁰. This difference also affects women's ability to engage in paid employment: only 34.4% of women are in the labour force, compared to 72% of men, mainly due to traditional gender roles⁷¹.

The Covid-19 outbreak has added to the burden on women. In fact, the time allocated to home and home-related activities has increased remarkably among both women and men. However, UN Women's Rapid Gender Assessment of the Covid-19 outbreak⁷² revealed that measures such as the introduction of distance education and curfews for persons above 65 and below 20 years of age and persons with chronic diseases have exacerbated women's care responsibilities to a larger degree than those of men, reflecting traditional roles and the gendered division of labour. According to the survey, two thirds of women respondents stated that they were spending more time cooking and serving meals compared to a quarter of men. "Cleaning and maintaining own dwelling and surroundings" was the most time-consuming activity for 56.1% of women and 27% of men. There are some positive signs of increased engagement of men in the household. The engagement of daughters and to a lesser extent sons in home-related activities was also found to have increased.

66 http://acibadem.dergisi.org/uploads/pdf/pdf_AUD_686.pdf accessed on 9 May 2020.

67 <http://www.turkailehekderg.org/makaleler/arama/saglik-kuruluslarinda-doktorlara-yonelik-siddet-maruziyetinin-degerlendirilmesi/> accessed on 9 May 2020.

68 https://gbvguidelines.org/wp/wp-content/uploads/2020/04/202003-securing-safety-and-wellbeing-of-women-frontline-healthcare-workers-covid-19_final_version.pdf

69 <https://www.unwomen.org/en/news/stories/2020/4/news-heforshe-launches-heforsheathome-campaign> accessed on 30 May 2020.

70 <http://www.turkstat.gov.tr/PreHaberBultenleri.do?id=18627> accessed on 9 May 2020.

71 Turkstat, Household Labour Force Survey, 2019 figures

72 Rapid Gender Assessment on Impacts of Covid-19, UN Women Turkey, April 2020.



İlkkaracan and Memiş (2020)⁷³ also report that women's daily work in paid and unpaid realms combined have expanded from previous 4,54 hours (in April 2018) to 5,54 hours (in May 2020), while those figures declined from previous 5,44 hours to 4,3 hours for men. The **time use gap** in paid and unpaid work combined for men and women are is even larger for those in employment. For employed women, this figure has increased from 7,72 hours in 2018 to 9,17 in 2020 while it decreased by 0,1 hours and stands at 7,7 hours for employed men.

On the positive side, the research indicates that there is **an increase in men's time used for unpaid work**, on average amounting to 1,1 hours per day from previous 0,2 hours. Working from home and for reduced hours along with the pressing care needs possibly have pushed men to increase their contribution to unpaid work at home, giving clues about some relevant policy measures that would effectively contribute to the equalization of unpaid domestic labour shares of women and men in the post-pandemic period.

The harmonization of work and family life by facilitating access to care services in order to increase women's participation in the labour force and employment is a policy objective in Turkey⁷⁴. Since the start of the Covid-19 outbreak, one third of women and one quarter of men have taken leave from their work (paid, partially paid, or unpaid) mostly due to increased care responsibilities. For half of the women who went on leave, the leave was unpaid (15.7%), exceeding the share for men (11.2%)⁷⁵. Consequently:

1. it is essential that medium- and longer-term crisis response measures prioritize **investment in the care economy** for children, older persons, persons with disabilities as well as those who fall sick with a view to ease the burden of unpaid care work. The aim should be to create integrated care systems that rely less on the unpaid work of stretched families and individuals and more on **collective and solidarity-based solutions**.
2. Furthermore, **flexible working arrangements**, reduction of working time, and increased paid leave for employees with care responsibilities, both for women and men, are critical during and after the pandemic.
3. Media campaigns need to be widened to raise awareness about the sharing of care responsibilities and to promote **men's involvement in domestic work**, in partnership with civil society and the private sector.

2.3.5. Leadership and participation

Women's leadership and participation is essential to ensure that Covid-19 response and recovery is efficient, effective and inclusive. In many parts of the world, women leaders and women's organizations are already demonstrating their skills, knowledge and networks to effectively lead the Covid-19 response. With women taking part, the needs and interests of women and girls affected by the pandemic and its socio-economic impacts are being better addressed. In Turkey, there is significant room to enhance women's leadership and participation in the Covid-19 response and recovery efforts at both the national and local level, in line with the national policy to ensure further involvement of women in management and decision-making bodies in the public and private sectors⁷⁶.

- Women leaders can be instrumental in increasing women and girls' access to services by voicing their needs, and can call for action for the benefit of survivors of violence and of women's CSOs.
- Women leaders can also advocate for equal sharing of domestic and care work between men and women.
- Women's leadership that advocates for **gender-responsive budgeting** at the national and local levels will be particularly important with respect to governments' post-Covid-19 exit strategies.

In view of the above:

1. **Equal representation** of women in each and every aspect of planning and decision-making in the response to Covid-19 is important, as are response mechanisms which are managed in a participatory and gender sensitive manner to ensure that gendered needs of women and girls do not become invisible.
2. Messages targeting **men and boys** to challenge gender stereotypes, speak up against gender-based violence and to practice equitable division of labour at this point in history could have a long-lasting transformative impact.

73 İlkkaracan and Memiş (2020), The Gender Gaps in the Care Economy under the Covid-19 Pandemic in Turkey, Research Brief, UNDP Turkey Country Office

74 Eleventh National Development Plan of Turkey

75 UN Women Turkey, April 2020

76 Eleventh National Development Plan of Turkey, http://www.sbb.gov.tr/wp-content/uploads/2020/03/On_BirinciPlan_ingilizce_Son-Baski.pdf accessed on 1 June 2020.



Photo: Berke Araklı / ILO Turkey



Pillar 3. Economic Response and Recovery

3.1. Labour Market Implications of the Covid-19 Crisis⁷⁷

3.1.1. Employment and Unemployment Dynamics

Throughout the world, the Covid-19 pandemic has caused enterprises of all sizes to cease business, at least temporarily, due to recommended or required workplace closures, or has reduced the level of business, with severe impacts on incomes and jobs. The economic impact of the crisis will cause these problems to linger on into the future. **Women** are likely to be most affected as they are over-represented in employment in high-risk sectors and in the informal economy. **Informal workers** are severely affected due to their lack of social protection and the sectors in which they work. **Migrants and refugees** are typically in this category and particularly vulnerable. **Young workers** are often in the informal economy and commonly working in sectors and industries that are particularly vulnerable to the Covid-19 pandemic. In the case of **domestic workers, home workers, workers in non-standard forms of employment, agricultural workers** and others, exclusion in many countries stems from the fact that labour law does not regard them as workers. As a result, there is a high risk of poverty and inequality, with particularly adverse effects for children, older persons, women and girls, persons with disabilities and chronic diseases, migrant workers and forcibly displaced people. Progress towards Sustainable Development Goal (SDG) 1 (End Poverty), SDG 5 (Gender Equality), SDG 8 (Decent Work and Economic Growth) and SDG 10 (Reduce inequalities), among others, is seriously jeopardized.

The effects of the Covid-19 pandemic apply equally to Turkey, where the crisis has threatened to cause a deterioration in labour market. Turkey entered the crisis with relatively low employment rates, particularly for women, relatively high unemployment and a very significant level of informality, including among refugees. Informal employment is highest in agriculture, among the precariously self-employed, unpaid family workers, refugees and migrants, women and youth. In 2019, on average, the labour market participation rate among women (age 15+) was 34.4% as opposed to 72.0% for men. The proportion of working women in informal employment was 42.2% compared to 30.9% of men. Women's informal employment in agriculture was 95.7% compared to 79.5% for men. Women's informal employment outside agriculture was 24.2% compared to 22.4% for men (TurkStat, Labour Force Statistics). **Youth unemployment will also be one of the most urgent problems in the post-Covid-19 era.** The total share of youth which are neither in employment nor in education or training (NEET) stands at 26% in 2019 in Turkey, which increases to 33.6% for females (TurkStat, Labour Force Statistics, 2019)⁷⁸. According to the ILO report on the labour market situation of Syrian workers in Turkey, which uses data from the TurkStat Household Labour Force Survey from 2017, out of two million Syrians of working age, 930,000 were part of the labour force and 813,000 were employed, largely informally (including 130,000 self-employed)⁷⁹.

Some scholars now anticipate a 10-13% decrease in employment⁸⁰. Others estimate that the unemployment rate could climb up to 20% and that 2 million people could become unemployed⁸¹. The Covid-19 measures adversely affect small companies who mostly employ low wage workers. A recent academic study posits annualized declines of over 20% in GDP, employment and private consumption due to the the initial economic impact of the restrictions introduced to contain the Covid-19 pandemic⁸².

77 Globally, ILO has proposed key policy responses to fight Covid-19 under four pillars as (1) Stimulating the economy and employment, (2) Supporting enterprises, jobs and incomes, (3) Protecting worker in the workplace and (4) Relying on social dialogue for solutions. These key policy areas also include possible policy actions for the world of work in each of the three distinct phases of the Covid-19 crisis, which it defines as: (1) general reduction in economic activity due to measures to prevent spreading (potentially a recurrent phase); (2) re-activation of business activity once the virus is contained; and (3) recovery of economic growth, promoting enterprise sustainability and resilience. More information is given in Annex 2 to this report.

78 <http://www.turkstat.gov.tr/PreHaberBultenleri.do?id=33784>

79 https://www.ilo.org/wcmsp5/groups/public/---europe/---ro-geneva/---ilo-ankara/documents/publication/wcms_738602.pdf

80 Prof. Dr. Erol Taymaz at <https://sarkac.org/2020/03/covid-19-tedbirlerinin-ekonomik-etkileri-ve-politika-onerileri/>

81 <https://www.dw.com/tr/istihdam-koronavir%C3%BCs-y%C3%BCz%C3%BCnden-tehdit-alt%C4%B1nda/a-52957002>

82 https://yeldane.files.wordpress.com/2020/05/covid_voyvodayeldan_v2_31mayis.pdf

It is difficult for official statistics to reflect the true impact. The statistics do not consider workers receiving short-time benefit and unpaid leave allowances (see below) to be unemployed, as their work contracts continue and they are not actively looking for work. Moreover, a significant proportion of workers who are not receiving the short-time work allowance, or have become unemployed while working informally or on their own account, are not currently looking for work due to the prevailing conditions: they have therefore dropped out of the labour market and are not considered unemployed either⁸³. According to ILO research, hours of work may have been reduced by 44.9 per cent in April and 40.8 per cent in May 2020⁸⁴. These losses coincide with the period with the stringent anti-Covid-19 measures. Since June most groups have attested a recovery in terms of hours worked.

Women's employment, business and incomes are likely to suffer most. The pandemic could deepen the gender gap in employment. According to UN Women's gender assessment of the impact of Covid-19 conducted in April 2020 the rate of job losses among the self-employed was 20% for women compared to 8.7% for men. Among those employing others/employers, it was 26.9% against 16% for men. When it comes to those employed in the private and public sector, 17.6% of women and 15.5% of men had lost their jobs⁸⁵.

Turkey has introduced stimulus packages to support the economy, protect jobs and keep cash flowing to workers and businesses. These measures are described under Pillar 4, below. In addition, **specific measures have been taken to maintain employment:**

- The use of the existing, but rarely used, **short-time work allowance** was greatly expanded. The allowance provides income support for formal employees who, due to a crisis situation, are working limited hours, or whose workplaces have been temporarily closed. According to the Ministry of Family, Labour and Social Services (MoFLSS), as of 13 June 2020, short-time work benefits totalling TRY10.6 billion were being paid in respect of 3,490,069 registered employees. However, despite easing of the eligibility criteria and application procedures, a worker is only eligible for the allowance if s/he has paid unemployment insurance contributions for at least 450 days in the last 3 years, and was employed for 60 days prior to the application⁸⁶. In addition, the short-term work allowance only compensates for the regular wages up to a certain limit. As per the figures, 80% of the applicants are from micro enterprises (52% 1-3 employees, 28% 4-9 employees). Short-time work allowances were extended up to the end of 2020 and the President is authorized to make further adjustments for those dates. Therefore, the measures taken by authorities to mitigate Covid-19 pandemics on employment were strengthened by the new initiatives announced throughout the year.
- The government has permitted formal employees unable to benefit from the short-time work allowance to be put on **unpaid leave without consent with monthly cash support** of TRY1,170 from 15 March 2020. This figure is sharply criticized by the trade unions as it is below the daily hunger threshold for a family, which they put at TRY78.14⁸⁷. According to the MoFLSS, as of 13 June 2020, 1,358,375 employees had received cash support amounting to TRY 1.7 billion.
- The government also **banned layoffs for three months** initially to secure employment and aims to protect employees who are not eligible for short-term work allowance and are put on unpaid leave. The new legislation, however, allows employers to put their workers on unpaid leave without having the consent of the worker⁸⁸. Unpaid leave linked to banned layoffs are extended to the mid-January 2021, and the President is authorized to make further adjustments for those dates. Therefore, with the aim of protecting people from losing their jobs and providing cash support during this period, corresponding timeline has been extended until normalization

83 <http://disk.org.tr/wp-content/uploads/2020/06/Haziran-2020-Is%CC%A7sizlik-Istihdam-Raporu-Revize.pdf>

84 ILO Research Brief, https://www.ilo.org/wcmsp5/groups/public/---europe/---ro-geneva/---ilo-ankara/documents/publication/wcms_766572.pdf

85 UN Women Turkey, April 2020

86 The requirement of 600 days of contribution was reduced to 450 days, while the requirement of service contract for the last 120 days was reduced to 60 days within the measures to respond to the impacts of the Covid-19 pandemic.

87 <http://www.turkis.org.tr/MART-2020-ACLİK-VE-YOKSULLUK-SINIRI-d388750>

88 With adoption of a new bill by the Grand National Assembly of Turkey on 23 July 2020, the President of Turkey has been authorized to extend the ban for layoffs by three months each time until June 2021 and to extend the scope of short-term work allowance on a sectoral basis and to approve additional payment of social security premiums from the Unemployment Insurance Fund for three months to private sector companies that returned to normal working hours after benefiting from the short-term work allowance or cash support system.



can take place.

- Social security premiums of workers in the affected sectors were postponed by 6 months, so the labour tax burden on the employers was eased during the Covid-19 period.
- For the employees who benefited from the short time work allowances and unpaid leave, the government introduced a new incentive including to pay their social security premiums for three months until the end of 2020 in case employees return to their regular working scheme. Therefore the process of transition to normalization is encouraged.

These steps have helped to prevent permanent lay-offs, which have been banned, but do not fully compensate for lost income and do not cover the informally employed at all. Workers on short-time or unpaid leave need to know how and when they will be able to return to work. Furthermore, the uncertainty of work and changes in the work processes can have negative consequences on workers' well-being and mental health resulting in psychological disorders. As for the informally employed, their needs have only been addressed, to some extent, by the social protection measures outlined in Pillar 2, above⁸⁹.

The most vulnerable groups include informal workers, casual workers, the self-employed, care workers, domestic workers, refugees, migrants, seasonal agricultural workers and other seasonal workers.

- A first assessment of the impact of Covid-19 on **refugees** has shown that 69% of Emergency Social Safety Net (ESSN) beneficiary households reported lost employment due to Covid-19⁹⁰.
- The recently published Rapid Assessment, Possible Impact of COVID-19 on Seasonal Agriculture Workers and their Children and Agriculture Production, prepared by the Development Workshop Cooperative and the ILO⁹¹, identifies **seasonal agricultural workers** among the most vulnerable workers, along with their children.

Income inequality may well increase. Some scholars⁹² have suggested that the share of the lowest 20% of the population in income could drop from 6.5% to 5.6% as a result of the effects of the Covid-19 crisis. As cited above, available data suggest that one third of women and one quarter of men have taken leave from their work (paid, partially paid, or unpaid) during the Covid-19 crisis. Importantly, for half of the women who went on leave, the leave was unpaid (15.7% of the total survey), exceeding the share for men (11.2%)⁹³. The ratio of women who took part-paid and unpaid-leave (24.7%) was higher than for men (19.8%)⁹⁴.

The government is known to be preparing further measures to “shield employment” in the face of the crisis.

1. Existing **arrangements to retain jobs may need to be extended**, alongside additional social protection policies and continued financial/tax and other relief for enterprises (see also below, and Pillar 4).
2. Specific supportive measures need to be taken to limit the impact of the precautions taken against Covid-19 on **vulnerable groups**, including migrants and refugees, and young people.
3. Given the disproportionate adverse impacts that the crisis has had on women, **gender equality** concerns should be embedded in the design of national policy responses. Response packages need to be subject to a gender analysis, and systems need to be put in place to track and monitor results through sex-disaggregated data.
4. Support is also needed for the creation of **new employment** opportunities⁹⁵.

89 Some groups such as informal workers and self-employed are more vulnerable in the labor market due to Covid-19, but the coverage of 1000 TL household aids have also been extended substantially with the aim of capturing those groups. Around 6 million households benefitted from the one-off cash transfers as of 13 June 2020.

90 Turkish Red Crescent Society (TRC) and International Federation of Red Cross and Red Crescent Societies (IFRC): Impact of COVID-19 on refugee populations benefitting from the Emergency Social Safety Net (ESSN) programme. <https://reliefweb.int/sites/reliefweb.int/files/resources/Assesment%20Report%20-%20Impact%20of%20Covid19%20on%20Refugee%20Population%20benefiting%20from%20the%20ESSN%20April%202020.pdf>.

91 https://www.ilo.org/ankara/areas-of-work/covid-19/WCMS_743368/lang--tr/index.htm

92 Istanbul Political Research Institute (IstanPol)

93 UN Women Turkey, April 2020

94 UN Women Turkey, April 2020

95 Open vacancies generated by the private sector in April 2020 declined by 74% compared to April 2019.

5. The need for **active labour market policies and for special employment programmes** targeting the most vulnerable and particular groups affected by Covid-19 will continue in future, in line with the principle “Leave no-one behind”.
6. Attention should also be paid to those at risk of **long-term unemployment**, and to training for the **types of jobs** that will be needed after Covid-19.
7. The crisis has highlighted the need for greater efforts to **reduce informality**. On this matter, some scholars suggest⁹⁶ that the government can use its emergency measures as a means of transition to formality. Making excluded groups eligible for benefits and cash supports, combined with further incentives like exemptions from social security debts, could give informal workers the opportunity to formalize themselves. This approach could help to resolve one of the main structural problems of the labour market.

3.1.2. Working Conditions

Besides the loss of jobs and income, the Covid-19 outbreak has had significant impacts on working conditions for large numbers of people in employment. For example,

- Workers at the front-line of the Covid-19 outbreak response are exposed to hazards that put them at risk of infection⁹⁷. Hazards stemming from the Covid-19 related measures include long working hours, reduced rest periods, poor working conditions with limited protective equipment, a lack of adequate physical distancing, psychological distress, occupational accidents, declining mental health, occupational burnout, and physical and psychological violence. This can also affect the quality of services. Covid-19 has also exacerbated **violence and harassment in some sectors**, occupations and work arrangements. These issues particularly affect women and have been discussed under Pillar 2 above.
- Even if not at the front-line, workers in the health sector and other sectors that have seen increased demand due to Covid-19 (cargo delivery, for example, and some other public service jobs) have had to work **longer or irregular hours** because of the increasing demand. There is a high risk of **non-compensation of overtime** worked during the Covid-19 crisis. Many workers are at a risk of taking involuntary unpaid annual leave. The rights of health workers to **annual leave** and to resign have been strictly restricted. Turkey is already one of the countries with the longest working hours, with almost half regularly working over 50 hours per week and nearly a fifth of employees working what is described as “long hours”⁹⁸.
- Due to their professions or working environments, workers in many sectors, including informal workers, may face an **increased risk of contagion** due to the difficulty of complying with health precautions such as physical distancing, hand washing or self-isolation, hence increasing the risk of contagion if not provided with adequate support.
- Workers, including some care workers who are not considered among the essential personnel, have to **work without or with limited protective equipment** under non-decent working conditions and in unsafe working places due to a lack of provision of necessary protective measures.
- **Domestic workers** face particular challenges due to Covid-19 measures as reported by EVID-SEN⁹⁹ (the trade union of domestic workers). The majority have lost their jobs, but those having to work are at high risk of contagion, as they are required to work inside homes – often in multiple homes – and in close contact with individuals and objects that may be carrying the virus.

96 <https://www.tesev.org.tr/research/kayit-disi-istihdam-kovid-19/>

97 Front-line workers at risk of COVID-19, include, but are not limited to, workers in the following occupations: 1) police, fire personnel, emergency medical technicians, or paramedics and all individuals employed and considered as first responders; 2) health care providers engaged in patient care; 3) stores that sell groceries and medicine; 4) food and beverage production and agriculture; 5) property services, cleaners and housekeepers and security; 6) organisations that provide charitable and social services; 7) petrol stations and businesses needed for transport; 8) financial institutions; 9) hardware and supplies stores; 10) critical trades; 11) mail, post, shipping, logistics, delivery, and pick-up services; 12) educational institutions; journalists and news media workers; 13) telecommunication and internet technical operations; 14) laundry services; restaurants for consumption off-premises; 15) supplies to work from home; 16) supplies for essential businesses and operations; 17) transport workers; 18) electricians and workers engaged in construction, maintenance and infrastructure projects; 19) home-based care and services; 20) residential facilities and shelters; 21) professional services; 22) day care centres for dependents of front line workers; 23) manufacture, distribution, and supply chain for critical products and industries such as personal protective equipment, pharmaceuticals, and materials and equipment used in essential industrial processes; 24) critical trade union functions; 25) hotels; 26) funeral services.

98 <http://www.oecdbetterlifeindex.org/topics/work-life-balance/>

99 <http://www.evid-sen.org/2020/04/23/evid-sen-covid-19-raporu-peki-en-alttakiler/>



- **Seasonal agricultural workers and their children** also face significant additional challenges in terms of hygiene due to their high mobility and poor, temporary living conditions. The consequences can affect local populations as well. In addition, the costs of adequate means of transportation has risen. According to the FAO Assessment of Social Protection and Employability for Syrian Refugee and Host Communities in Agricultural Structure of Turkey¹⁰⁰, seasonal agricultural workers, particularly women, face difficulties in accessing basic social and infrastructural services because of their geographical segregation.
- There is a risk of **discrimination** due to the crisis. Women, people with disabilities, people living with HIV, indigenous peoples, migrant and refugee workers, and those in the informal economy risk being disadvantaged as a result of the pandemic and its aftermath. Furthermore, the crisis has the potential to exacerbate unacceptable forms of work, such as child labour and forced labour.
- **Working from home** can result in feeling isolated, working longer hours and blurring of the lines between work and family life. Flexible working hours can become excessive working hours, without breaks and can continue through the night, resulting in associated risks of insomnia. With the ongoing “**return to work**”, on the other hand, many more workers will be at high risk of exposure to infection in their workplaces or while travelling to work.
- **Trade union affiliation** is likely to decline due to lay-offs and discontinuity in working life. This would affect social dialogue mechanisms and trade union membership rates, which are already very low (13.84%, as of January 2020)¹⁰¹. There could be less collective bargaining in the private sector.

Workplace health and safety measures have been strengthened. The Ministry of Family, Labour and Social Services – Directorate General of Occupational Health and Safety (DGOHS) has set up a web page on Covid-19 and introduced guidelines for workplaces in various sectors. This web page also contains guidelines for OSH professionals on measures to be taken in the workplace, the establishment of preparedness teams, the adoption of emergency plans and risks assessments, precautions to control the spread of the pandemic, hygiene issues, personal protective equipment and procedures on how to respond if any employee shows signs of sickness¹⁰².

Circulars about agricultural production and seasonal agricultural workers during Covid-19 have been issued by the Ministry of Agriculture and Forestry (MoAF) and the Ministry of Interior (MoI) (No. 89780865153E.6202), albeit without specific reference to refugee and migrant workers. As a result, provincial authorities and commissions have taken various measures for the safe transportation of the workers, provided health scanning and disinfection services, and improved the workers’ living conditions through infrastructural facilities and clean water.

More needs to be done to safeguard working conditions now and in the future. In this context:

1. **Safe and healthy working conditions** are fundamental for decent work and are the foundation for a safe return to work. Every effort should be made to keep the risk of workplace contamination as low as possible. Anti-contagion measures could be adopted permanently.
2. All high-risk workers should have access to **personal protective equipment (PPE), regular health checks and related training**. A wide definition of high-risk workers should be adopted, extending not only to all front-line health workers but to care workers and others working in risky professions or conditions.
3. Globally and in Turkey, trades unions are calling for SARS-CoV-2 to be recognized as an occupational hazard, and Covid-19 as an **occupational disease**¹⁰³. Such recognition would ensure the right to worker representation and occupational safety and health (OSH) rights as well as the implementation of agreed measures to reduce risk. The rights in question include the right to refuse to work under unsafe working conditions, access to full medical care, and

100 “Assessment of Social Protection and Employability for Syrian Refugee and Host Communities in Agricultural Structure of Turkey” by AKCAM on the behalf of FAO Turkey in 2019.

101 <https://www.ailevecalisma.gov.tr/media/35790/2020-ocak.pdf>

102 <https://ailevecalisma.gov.tr/covid19>

103 <https://www.ituc-csi.org/covid-19-occupational-disease> and <http://disk.org.tr/wp-content/uploads/2020/05/Covid-19-ve-DI%C87SK-Yol-Haritas%C4%B1.pdf>

compensation for victims and their families¹⁰⁴. Under the latest decision taken by the Social Security Institution, dated 7 May 2020, Covid-19 is not classified as an occupational disease in Turkey¹⁰⁵.

4. OSH measures and regulations need to apply to **all workplaces and workers**, and to be **enforced** through effective inspection and complaints mechanisms. While aiming to reduce informal employment, special arrangements may be needed for the continued protection of some groups of informal workers, including targeted health services, the distribution of hygiene kits and awareness-raising programmes.
5. Besides the risk of contagion, the need persists to strengthen and broaden the implementation and enforcement of other aspects of OHS in all settings. Attention should also be paid to workers' **mental health**.
6. To **mitigate risk of expansion of discrimination**, it is essential to enhance and enforce laws and policies on equality and non-discrimination in employment. Targeted measures for groups in situations of vulnerability to ensure that these groups are covered by mainstream responses to the crisis, including access to care, benefits and services.
 - **Application of international labour standards and respect for labour rights for all**, such as their rights to paid leave, defined working hours and decent working conditions, should be reinforced.

3.1.3. Social Dialogue

- **A complex crisis like the Covid-19 Pandemic calls for effective tripartite social dialogue** and cooperation, bringing together governments and employers' and workers' organizations to design effective strategies and policies to mitigate the socioeconomic consequences of the crisis, protect workers and their families, especially the most vulnerable, from the loss of jobs and income, save enterprises from bankruptcy, and promote decent work for all¹⁰⁶. In this context:
- The **Economic and Social Council of Turkey**, which has not convened since 2009, and the Tripartite Advisory Council could be mobilized to reach an inclusive and participatory consensus on how to respond to the adverse socio-economic impacts of Covid-19 on the economy and society.
- At the **enterprise level**, it is important for the occupational health and safety committees, work councils, trade union and workers' representatives, if available, to be able to raise issues concerning working conditions. Collective bargaining agreements are also critical bipartite mechanisms for protection of labour rights.

Positively, **some collective bargaining agreements are being revised** (in the metal industry, for example) to address the urgent needs of workers and to protect workers from unhealthy working conditions.

On the other hand, a recently adopted regulation (Act No: 7244) **restricts trade union rights** by suspending for three months the issuance of certificates of competence for negotiating with employers, mediation procedures, collective labour disputes and strike ballots. The regulation has been criticized by workers organisations for hindering union activity during the Covid-19 crisis¹⁰⁷.

Meanwhile, **workers' and employers' organizations and civil society organisations are actively mapping the impact of the crisis** on their members, in order to better understand their concerns and needs, influence policy discussions related to the Covid-19 crisis, and reach bipartite and tripartite consensus, when possible. OHS issues, paid-leave arrangements, business continuity plans, the expansion of unemployment benefits and social protection measures are among the core topics. With this in mind:

1. Social dialogue will benefit from the **active engagement of the social partners** within the

104 In this vein, the European Commission has recently adopted an update of the update of the Biological Agents Directive to include SARS-CoV-2 among the list of biological agents it covers. This update takes into account new risks in the workplace and offers additional protection to all workers, particularly those working in direct contact with the virus in hospitals, industrial processes and laboratories
<https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32020L0739&from=EN>

105 <https://www.bbc.com/turkce/haberler-turkiye-52817389>

106 See also the joint statement of the International Organisation of Employers and International Trade Union Confederation
https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/---actrav/documents/genericdocument/wcms_739522.pdf

107 <http://disk.org.tr/2020/04/toplu-is-sozlesmesinin-ve-grevin-yasaklanmasina-ucretsiz-izin-dayatmasina-ve-sefalet-odeneğine-hayir/>



tripartite structures of labour policy networks such as the boards of management of the Social Security Institution (SGK), the Public Employment Agency (ISKUR) and the Provincial Employment and Vocational Education Boards (İİMEKs).

- Workers' and employers' organisations should also be encouraged to express their advisory views to the Provincial Pandemic Boards and the Advisory Scientific Board.

3.2. Impact on Businesses

Two online enterprise surveys have been conducted by Business for Goals (B4G) Initiative to assess the immediate economic impact of Covid-19 on enterprises¹⁰⁸. The surveys aimed to monitor the impact of the crisis on different types of enterprises; identify their coping strategies, expectations and needs and propose possible areas of support. The first survey was conducted on 23-27 March 2020 and the second survey on 11-22 May 2020.

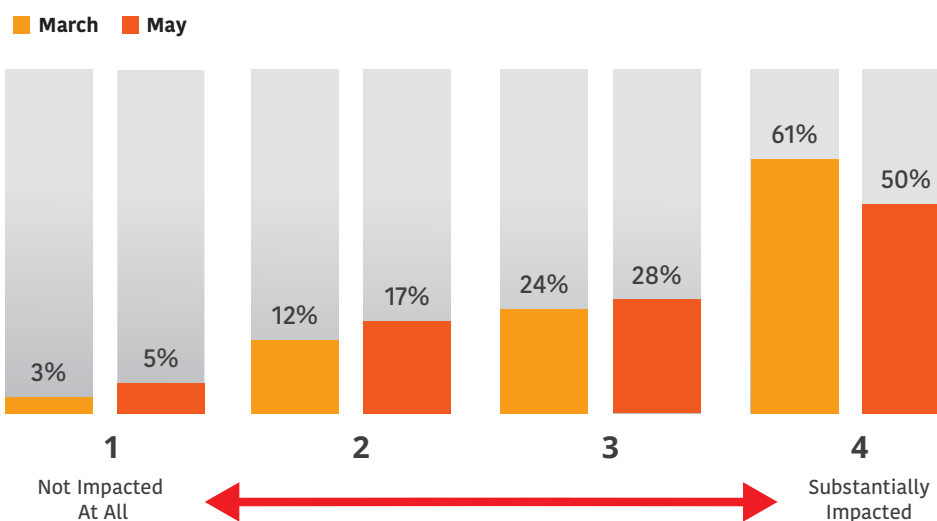
Impact of the crisis

The impact of crisis on enterprises has been remarkable. In March, 86% of enterprises reported adverse impacts, whereas 78% did so in May. The share of enterprises *substantially* impacted by the Covid-19 crisis was also smaller in May (50%) than in March (61%). **The crisis affected smaller enterprises disproportionately.** As of May, the proportion of enterprises reporting substantial impact was highest among micro enterprises at 69%. For large enterprises, this figure was 31%. Based on the survey results, two factors might explain this slight improvement from March to May: (i) rapid expansion in credits to private sector and (ii) short-term work allowance mechanism.

Figure 3-1:

March* and May surveys To what extent has COVID-19 Crisis impacted your enterprise?

*March data were weighted to the May sample to make both comparable.



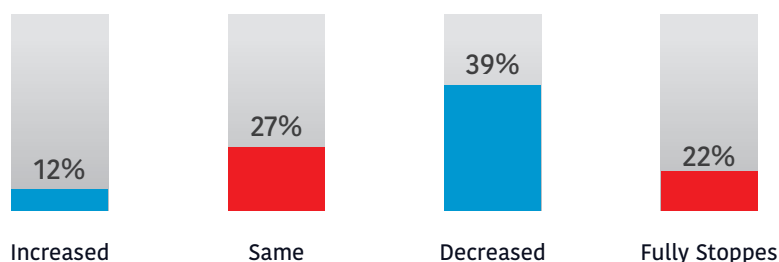
The proportion of enterprises which had completely halted operations declined between March and May. As of May, 61% of respondents had either halted or reduced their operations. In March, 31% of enterprises reported that they had come to a complete halt. This fell to 22% in May. As of May, 38% of the respondents had reduced operations, 27% were continuing their business at the same level whereas 12% had increased their activities. Once again, **micro- and small-scale enterprises fared worse than medium- and large-scale enterprises.** Business was at a standstill at 35% of micro- and 24% of small-scale enterprises. The sector in which the highest proportion of enterprises had halted their operations was Accommodation and Food Services, with 72%, followed by Education (50%) and Construction (27%). Businesses selling to consumers (B2C) were worse affected than other businesses.

108 NB: Results of the survey for Syrian-owned businesses are reported under Pillar 5.



Figure 3-2:

Operational status of enterprises compared to April 2020

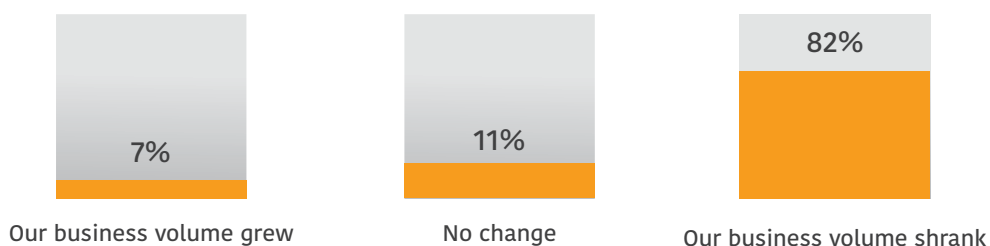


Enterprises in general saw their volume of business decline on account of the crisis, and 54% said their business had shrunk by more than half. As many as 82% of the respondent enterprises reported a lower volume of business in March and April than in the same months of the previous year. This percentage was 89% for small-scale enterprises and 75% for medium- and large-scale enterprises.

The impact of supply chain disruptions proved to be weaker than had been expected at the beginning of the crisis. In the March survey, 82% of companies considered that their supply chains would be affected considerably¹⁰⁹. In the May survey, however, the threats posed by supply chain disruptions were found not to have materialised. Just 22% of firms reported severe problems in accessing goods and materials required for production. This ratio was even lower for large scale firms. The respondents also stated that any future disruptions in supply chains were likely to be caused primarily by financing and payment problems.

Figure 3-3:

How did your business volume in March and April change on a year-on-year basis?



Half of the enterprises were having difficulty making payments. As many as 17% were having serious difficulty making obligatory payments such as salaries, taxes, rent, utilities, whereas 29% reported no difficulty. **Micro- and small-scale enterprises were worst affected.** A third (33%) of micro enterprises reported that they were having serious difficulties making payments compared to 2% of large-scale firms. Difficulty making payments was particularly common among enterprises in the Accommodation and Food Services sector.

About half (48%) of the enterprises surveyed reported that they had sufficient working capital for at most another quarter if the COVID-19 crisis continued. Some 22% reported that their working capital was insufficient or would suffice for one month at most.

Coping strategies and use of support schemes

Of the enterprises surveyed, 64% had deferred new investments and growth plans in order to alleviate the effects of the crisis, and 47% had obtained new loans or restructured existing ones. In addition, 42% had reduced their input costs and 26% their labour costs. In this context, 44% of enterprises reported making use of the short-time work allowance from the State. Meanwhile, 34% reported that they had received support from banks and payment institutions.

v109 Ratio of firms responding 3 and 4 on a scale of 1-4.



The short-time work allowance was quickly taken up at small and medium-sized enterprises, whereas micro enterprises had less access. The proportion of enterprises benefiting was 51% for small and medium-scale enterprises and 56% for large enterprises, but only 27% for micro-enterprises. Overall, of the enterprises which reported that their business had diminished, 50% took advantage of this option.

Firms with adequate infrastructure and digital means adapted themselves rapidly to remote working. More than half of the workforce at 41% of enterprises was able to telework. This ratio was as high as 61% in Istanbul and as low as 13% in the Mediterranean region.

The Covid-19 crisis was observed to impact women workers more adversely due to increased domestic responsibilities such as child care, the care of ailing family members, and ensuring hygiene and food safety. A third (33%) of enterprises reported that their employees were having difficulty in carrying out their work due to growing responsibilities at home as a result of the epidemic. Of the enterprises in question, 34% indicated that women workers were affected by this situation more than men, whereas 21% indicated that men were more affected than women.

More than 70% of enterprises had taken basic physical measures. However, they said they needed to step up these measures for a safe “return to work”. About 70% of enterprises had made it mandatory for employees to wear protective equipment, provided information on hygiene rules, and disinfected common areas, and 68% had moved events and meetings to online to the extent possible. In 51% of enterprises, the occupational health and safety committee had become more active. In addition, 48% were keeping workers with symptoms away from the workplace, 43% were trying to identify potentially infected workers by temperature-taking and testing, and 42% disinfected products. However, only 40% of enterprises had taken some of the physical measures identified in the survey as basic elements for the “return to work”, pointing to a need for capacity building. Occupational health and safety capacity was needed for identifying potentially infected workers, implementing maximum capacity limits and so on.

Diversifying sales channels and engaging in e-commerce will be leading strategies for enterprises to cope with the crisis in the future. When enterprises were asked what they were planning to do during and after the Covid-19 crisis, 58% said they wanted to diversify sales channels, 34% to strengthen professional networks and build partnerships with other enterprises, and 32% to engage in e-commerce. Of the 619 respondent enterprises, 76% reported that they had never engaged in e-commerce to date, and 5% that they had started to engage in e-commerce upon the outbreak of the Covid-19 crisis.

Expectations and needs for support

In March, enterprises were expecting a rapid recovery but by May they were predicting a slower one. The March survey revealed a general perception that there would be steep decline followed by a swift recovery. As many as 53% of the enterprises expected the impact to be reduced by no later than September 2020, and only 11% of enterprises predicted that it would extend into 2021. When asked the same question in May, only 29% of the enterprises were expecting to see the impact reduced by no later than September 2020, whereas the proportion predicting that the impact would extend into 2021 was 48%.

Based on their current risk perceptions, enterprises view the crisis as a crisis of domestic and foreign demand, rather than a financial one. In the May survey, the enterprises were asked to assess a number of risk factors for the May-September period. This question was asked with a view to eliciting inputs for the prioritisation of short-term responses. Overall, low domestic and foreign demand stood out as the highest risk areas. On the other hand, most enterprises rated inability to repay debt or obtain loans as low risks. The enterprises viewed disruptions to supply chains as medium threats, in contrast to the strong expectations of disruptions which they held in March.

Most enterprises (59%) report that they are not prepared for a second wave of the pandemic, possibly magnifying the potential impacts of a second wave.

A large majority of enterprises called for the postponement of mandatory public payments. The enterprises surveyed were also asked what they expected from the state and what advisory services they would like from the private sector. These questions too were asked with a view to eliciting inputs for the prioritisation of short-term responses. As many as 62% of enterprises said they needed postponement of mandatory payments, and 38% of enterprises said they needed injections of short-term working capital.



The latter percentage went up to 57% for enterprises which reported that they had insufficient working capital, and 56% for enterprises which reported that they had only enough working capital for one month at most. Meanwhile, 38% of enterprises said that they needed the short-time work allowance to be extended. As for advisory services for recovery, about 30% of enterprises said that they needed advice on business continuity, the prevention of potential infections, the diversification of products and services, and workers' right, while 22% of enterprises needed advice on foreign trade and logistics restrictions and requirements.

Figure 3-4:



Of the enterprises surveyed, 68% believed their sectors would undergo significant change after the Covid-19 pandemic. Only 5% thought nothing would change. Small-scale enterprises, in particular, had high expectations of change. As many as 39% of micro enterprises thought everything would change, compared to 9% of large enterprises.

The B4G survey results highlight the following needs of enterprises in the areas of capacity building for a safe return to work, business continuity and digitalization.

1. **Capacity-building for a safe “return to work”:** Introducing guidance and digitalisation measures to minimize workforce interactions and address emerging occupational health and safety needs is a critical domain for assuring a safe return-to-work process.
2. **Business continuity:** There are striking differences among companies’ levels of strategic preparedness for such a crisis. It is therefore still important to support and provide guidance to enterprises in their business continuity efforts to increase their resilience to crises.
3. **Digitalisation:** While the practice of remote working (telecommuting) was adopted by some firms, it remained impossible for the majority of the companies, with striking differences between sectors and regions. Supporting enterprises’ efforts at digitalisation and putting technology to work to alleviate the effects of the health crisis emerges as an important area for increasing both their resilience and their productivity.



3.3. Covid-19 and the Agri-food Sector

Recent analyses suggest that a Covid-19-induced global food crisis is not on the horizon¹¹⁰. Initial measures to contain the pandemic put strains on food supply chains but these have since eased¹¹¹. Global production levels for the three most widely consumed staples (rice, wheat and maize) are at or near all-time highs. International food prices are low, costs of bulk transportation are depressed, fertilizer and input prices remain stable, energy prices have collapsed, and competition from biofuels is substantially reduced.

Nevertheless, some risks persist. Depending on how the coronavirus crisis unfolds, domestic food supply chains may yet be disrupted, and loss of incomes and remittances may create strong tensions and food security risks in many countries. **Labour shortages** (due to pandemic morbidity, movement restrictions, and social distancing rules) are starting to impact producers, processors, traders and trucking/logistics companies in food supply chains – particularly for food products that require workers to be in close proximity.

As an example from Turkey, Covid-19 mobility restrictions and the closure of border gates has resulted in **labour supply shortages in six Black Sea provinces**, where migrant workers from Georgia have been employed in tea- and hazelnut-picking in recent years under a work permit exemption scheme known as YUMINET¹¹². The authorities have sought to use the available migrant labour potential in the region to compensate.

A study on trade, quality and standards amid the Covid-19 pandemic published in April 2020¹¹³ refers to a similar set of **emerging issues**: food export limitations, restriction of movements of agricultural workers leading to food loss, border delays for food containers resulting in food waste, food supply chains distorted by border closures and trade restrictions, problematic hygiene practices, food safety issues, lack of certification, food decay in markets, and nutritional insecurity for the poor from the perspective of achieving the Sustainable Development Goals, including SDG 2 (Zero Hunger).

Overall, Turkey has witnessed some disruption to supply chains but stocks and production are adequate. According to the Rapid Survey of Food Supply Chains in Europe and Central Asia conducted by FAO in five rounds since April¹¹⁴, medium to severe transportation and storage problems continued during the pandemic. The most affected chain was the aquaculture fish sector, followed by livestock and dairy products. However, the price fluctuations that occurred in the first few weeks settled over time. Taking wheat production as a proxy for overall food security at national level, early production prospects point to a near-record global wheat output in 2020 based on analysis from the FAO Global Information and Early Warning System (GIEWS). The wheat production estimate for Turkey in 2019 is 19 million tons, and the 2020 forecast is 20 million tons¹¹⁵. Turkey's staple stocks also demonstrate adequate levels for 2020¹¹⁶.

Food loss and waste remains a major ongoing concern, which is also referred to in Turkey's Eleventh Development Plan¹¹⁷. Prior to the pandemic, according to the Turkish Grain Board (TMO) Bread Waste and Consumer Habits Survey, 1,500 tons of bread go to waste every day and 550 thousand tons every year. In

110 FAO. 2020 Food Outlook - Biannual Report on Global Food Markets: June 2020. Food Outlook, 1. Rome. <https://doi.org/10.4060/ca9509e> pp. 70

111 Given the status of global food supplies, unlike the 2008 Food Crisis, where governments responded with full export restrictions across the board, the current export restrictions imposed by major exporting countries including Russia and Ukraine are mostly based upon quotas for traditional buyers and have therefore played a smoothing role for avoiding any disruptions in the global food supply chains for now. This encouraging sign of paying attention to the lessons of past food price crises is also supported by agreement among Agriculture Ministers from the G20 on the need to keep global food markets open and refrain from imposing new trade barriers so that food is not in shortage (G20 `Ministerial Statement on COVID-19 Virtual Meeting at G20 Extraordinary Agriculture Ministers Meeting, April 21 2020. <http://www.g20.utoronto.ca/2020/2020-g20-agriculture-0421.html>)

112 <https://yuminet.ailevecalisma.gov.tr/#/app/giris>

113 UNIDO 2020 `Quality and Standards and their Role in Responding to COVID-19` <https://www.unido.org/sites/default/files/files/2020-04/Quality%20and%20Standards%20and%20their%20Role%20in%20Responding%20to%20COVID-19.pdf>

114 FAO. 2020. Europe and Central Asia: Regional food market situation and policy bulletin in response to the COVID-19 pandemic. Rome. <http://www.fao.org/documents/card/en/c/ca8869en>

115 FAO/GIEWS (March 2020). FAO. 2020. Europe and Central Asia: Regional food market situation and policy bulletin in response to the COVID-19 pandemic. Rome <http://www.fao.org/documents/card/en/c/ca8869en>

116 AMIS 2020 `Market Database > Supply and Demand Overview` <https://app.amis-outlook.org/#/market-database/supply-and-demand-overview>

117 President`s Office for Strategy and Budget, 2019, 11th Development Plan (2019 - 2023) , Policy Target No. 411, pp. 95.

other words, 2.17 billion loaves of bread are wasted annually¹¹⁸. An FAO study analysing Food Losses and Waste (FLW) in Turkey underlines the worrisome fact that 53% of the fresh fruit and vegetables produced in Turkey is lost or goes to waste. Of the loss and waste, 20% occurs in agricultural production, 8% during post-harvest handling and storage, 10% during processing and packaging, 10% during distribution, and 5% at the consumption stage. The biggest losses occur during agricultural production due to structural problems such as small and fragmented farms and traditional methods, habits and practices¹¹⁹. In addition to existing mispractices, the Covid-19 pandemic mitigation measures, which led to logistic bottlenecks and the temporary closure of hotels, cafes and restaurants, increased the risk of an increase in loss and waste in perishable food items.

The Government has taken steps to support the production and distribution of food while relieving the impacts of the pandemic on the agri-food sector and rural areas:

- Restrictions on the **movement of persons** were relaxed earlier for farmers and agricultural workers than for other citizens (See above for health and hygiene precautions for seasonal agricultural workers).
- **Farmers' credit repayments** and the collection of rent on state lands under agricultural production were postponed.
- Idle **state lands** have been made available for the production of strategic crops for food security.
- The **distribution of seeds** for cereals and legumes which are considered strategic, has been subsidized.
- **Information campaigns** have been launched on Covid-19 related hygiene and handling practices.
- A **Digital Market Place (DİTAP)** has been introduced for agri-food products with the aim of matching producers and processors/retailers through contract farming, to be supported by special credit lines.
- **Fertilizer stocks** are being monitored to avoid any shortages.
- **Support has been extended to aquaculture, as demand from hotels, restaurants and caterers (HORECA) has collapsed** both in domestic and European markets, and “eat fish at home” campaigns have been launched¹²⁰.

Attention should be paid to the following issues, as well as monitoring the above risks, and the affordability of food for low-income groups and those worst affected by the pandemic:

1. Product and target group-specific good **hygiene and handling guidance** is needed for the harvest season when physical contact among farmers/producers, workers and others intensifies.
2. There is a need to **clear any surplus products** in the markets in order to **sustain the incomes** of hard-hit farmers/producers. This can be done by distributing them through food banks or – particularly for fruits, vegetables and dairy products – processing them into products with long shelf lives. This would also prevent food loss and waste and strengthen the coping capacity of the agri-food sector towards the achievement of the Sustainable Development Goals.
3. Smallholders, 40% of whom are over 50 years old, need **support in adopting costly new hygiene and handling practices** as well as selling their products through novel channels in response to the more stringent standards of the retailing sector in the post-pandemic period. This would also support diversified food supply by articulating local and regional short food supply chains to strengthen the agri-food system.
4. The positive shift in consumer behaviour towards **foods with long shelf lives** provides an opportunity for the Turkish agri-food industry to supply more such foods both in the domestic market and to export markets.
5. Last but not least, there is a need and opportunity to accelerate efforts to reduce **food loss and waste**. A policy framework and greater capacity for implementation are needed. The measures taken to avoid the spread of the pandemic at wholesalers and retailers – notably, the pre-packing of products – can help to reduce the loss with more concrete awareness raising.

118 <http://www.tmo.gov.tr/Upload/Document/ekmek/tmobrosuryeni2.pdf>

119 Tatlıdil F.F., Dellal İ., & Bayramoğlu Z., 2013, Food Losses and Waste in Turkey: Country Report FAO <http://www.fao.org/3/a-au824e.pdf>

120 <https://www.resmigazete.gov.tr/eskiler/2020/05/20200527-14.pdf>
<https://www.resmigazete.gov.tr/eskiler/2020/06/20200612-8.htm>



3.4. Pathways for a more inclusive, environmentally sustainable and resilient recovery

3.4.1. Environmental Sustainability and Green Economy

Turkey faces very significant environmental challenges in the areas of climate change mitigation and adaptation, the generation of clean energy, and the preservation and management of natural resources that obstruct progress towards the achievement of Sustainable Development Goal (SDG) 6 (Clean Water and Sanitation), SDG7 (Affordable and Clean Energy), SDG 11 (Sustainable Cities and Communities), SDG 12 (Sustainable Consumption and Production), SDG 13 (Climate Action), SDG 14 (Life below Water) and SDG 15 (Life on Land). The Covid-19 response and recovery process must seek to **avoid a return to business-as-usual** practices that increase emissions and other environmental externalities that put pressure on wildlife and biodiversity. On the contrary, **greening the recovery effort** can be a key to creating jobs, reducing inequalities, combating environmental health risks and increasing resilience to future crises. For example, **investments in renewable energy and in improving energy efficiency** in industry and buildings have great potential for reducing greenhouse gas emissions, cutting household electricity bills, stimulating the construction sector and creating jobs.

The **main policy tools** towards green growth and green job creation include:

1. Macroeconomic **market-based instruments** and regulations which influence prices and thus economic activity,
2. Sectoral policies and support to enterprises to stimulate greener economic activity through support to investments and innovation and promotion of **green entrepreneurship**,
3. **Skills and education policies** to facilitate structural transformation by aligning the demand and supply of skills,
4. **Social protection policies** to mitigate adjustment costs and enable and promote environmental protection, and social dialogue for managing structural change¹²¹,
5. New **business models** as economic instruments to foster the engagement of the financial sector, including for small and medium-scale enterprises (SMEs),
6. **Phasing out** tax exemptions for fossil fuel consumption and supporting the transition to cleaner alternatives,
7. Enhancing **water efficiency** in agriculture, industry and energy,
8. Enhancing policies for **eco-innovation** by increasing finance for environmental research and development, clean technology incubators, and skills and education programmes,
9. Increasing **financial support** to SMEs for energy efficiency and small-scale decentralized photovoltaics to end-users at household level,
10. Strengthening the Intended National Determined Contribution of Turkey with a long-term **climate change strategy** integrating carbon-intensive sectors such as energy, industry, agriculture and transport,
11. Supporting **local authorities** in preparing climate change adaptation plans with a focus on social and economic value-adds such as youth employment, gender mainstreaming, fiscal resilience, and public and private partnerships.

3.4.2. Sustainable consumption and production

The Covid-19 crisis has added to the challenges and opportunities when it comes to promoting Responsible Production and Consumption (SDG12) through efficient management of resources and the circular economy. It has had contrasting impacts on lifestyle behaviour with environmental impacts. For example:

- It has reduced **travel** (to work and meetings, and between countries) but led to greater reliance on private rather than **public transport**. Furthermore, the increase in **online purchases** and meal deliveries has not only resulted in the disposal of more packaging but has required more fossil fuels to be burned for the distribution of goods. In the first five weeks of the pandemic, online shopping expanded by 171% compared to the same period of last year. Almost half (49%) of

¹²¹ World Employment and Social Outlook 2018: Greening with jobs, https://www.ilo.org/global/publications/books/WCMS_628654/lang-en/index.htm

- Turkish consumers indicated that they will continue to buy online in the medium and long term¹²².
- There has been an increase in **waste including medical waste**. Much of the personal protective equipment that healthcare professionals are using can only be worn once before being disposed of. Difficulties have been experienced in containment, temporary storage, transportation and handling at sterilization units (Moreover, waste management practitioners have been severely affected by Covid-19). The increase in professional, public and private use of **single-use plastics and other single-use items** (e.g. protective face masks) will continue to present a considerable waste management challenge with environmental consequences such as increased marine pollution¹²³. However, the Covid-19 pandemic has led to the suspension of some municipal recycling programmes and some countries have banned infected residents from sorting their waste at all¹²⁴.

It is therefore necessary to:

1. **Mainstream sustainable consumption and production** into all aspects of Covid-19-related economic stimulus plans.
2. **Consider waste management a priority sector** like the health and sanitation sector. Ensure that recycling programmes and the sorting of waste continue, resume and expand. Provide the sector and its employees with all necessary protective equipment and containers, especially for workers in medical waste facilities and hospitals but also for workers in municipal waste management facilities in municipalities with limited resources.
3. Provide **training and awareness-raising activities** for waste management workers and the public in the safe disposal of potentially infectious wastes. Effective training and awareness activities may be as important as providing equipment and making sanitary equipment and supplies available in the continued battle against Covid-19.
4. Reinforce and resume measures to **reduce waste**, especially the single use of plastics, in all relevant sectors. Reverse any backsliding in this respect. Moving away from an extract-manufacture-use-discard economy will create new jobs in waste management, the re-processing of materials, and services like rental and repair¹²⁵.
5. Develop communication campaigns to **promote responsible consumer behaviour** and lifestyle-choices that reduce demands on the environment. This includes encouraging a shift towards **nutritious and safe diets** with a lower environmental footprint.
6. Promote sustainable, resource efficient, resilient and inclusive **value chains**¹²⁶ in conjunction with business, industry and government, including targeted support for small enterprises.
7. Integrate sustainability criteria into national and local **public procurement** procedures.

3.4.3. Clean energy transition

While the Covid-19 pandemic has initially reduced carbon emissions, it could also slow the transition to renewable energy. The demand for energy for industry and transport, and therefore carbon emissions, have fallen. Global oil demand is expected to decline by a record 9.3 million barrels per day in 2020 compared to 2019¹²⁷. The resulting low prices for fossil fuels, combined with reduced investment in renewable energy and additional financial constraints, add to the challenges facing the longer-term transition to renewables in terms of financing, policy uncertainty and grid integration. It is therefore important to preserve the clean energy sector and all associated jobs, and to make investment in renewables a key part of economic recovery efforts. To this end, an analysis of the impact and prospects for the Turkish energy sector within the Covid-19 context is important to identify opportunities for the recovery phase.

122 https://www.nielsen.com/wp-content/uploads/sites/3/2020/03/Global-Survey_Impact-of-COVID-19-on-Consumer.pdf
<https://www.gidaperakendecileri.org/?p=2018>

123 <https://www.theguardian.com/environment/2020/jun/08/more-masks-than-jellyfish-coronavirus-waste-ends-up-in-ocean>

124 <https://www.acrplus.org/en/municipal-waste-management-covid-19>

125 World Employment and Social Outlook 2018: Greening with jobs, https://www.ilo.org/global/publications/books/WCMS_628654/lang-en/index.htm

126 A relevant tool in this context is the Hotspot Analysis Tool for Sustainable Consumption and Production (SCP-HAT): <http://scp-hat.lifecycleinitiative.org/>

127 <https://www.iea.org/reports/oil-market-report-april-2020>



Turkey's objectives on clean energy are clearly set out in the Eleventh Development Plan, the National Energy Efficiency Action Plan (NEEAP) and the National Renewable Energy Action Plan for Turkey (NREAP). Therefore:

1. Recovery efforts should be **linked with the climate change agenda**, and stimulus measures should not lose track of medium and long-term environmental sustainability considerations.
2. Green **fiscal policy instruments** like carbon taxation and fossil fuel subsidy reform may be used.
3. Enhanced **access to finance** and more attractive financial solutions/products may be needed to accelerate the clean energy transition, alongside **planning support** and **technological innovation**.
4. As in other countries, the priority should be on sectors that offer early opportunities to create jobs and economic activity while developing more efficient and resilient energy systems and reducing emissions. This includes a **focus on buildings and transport**, which would support both renewables and energy efficiency at the same time¹²⁸.
5. Investments in climate-friendly actions can stimulate economies, create employment opportunities, and increase **resilience** to a recurrent zoonotic threat.

3.4.4. Nature-based solutions

Nature-based solutions can be an important component of a green recovery from the Covid-19 crisis. This involves developing and demonstrating the co-benefits that can be derived from nature-based solutions, commonly employed for climate change mitigation and adaptation. It is crucial that environmental regulations and standards are not eased during the pandemic and recovery, since this could aggravate current biodiversity crises and lead to additional threats to human health. Steps need to be taken in the direction of greater integration of grey, green and blue infrastructure systems to build resilience to climate and zoonotic threats.

Nature-based solutions, which can contribute to the achievement of SDG11 (Sustainable Cities and Communities) as well as SDG 10 (Climate Action), the other environmental SDGs and several non-environmental SDGs, could include the following:

1. **Ecosystem management** and conservation, including, but not limited to afforestation/ reforestation, wetland restoration, peatland restoration,
2. Employment-intensive investments delivering **public goods, public works and green works,**
3. **Green cities**, including the expansion of green urban spaces, urban farming and biomimicry in buildings,
4. Promoting **sustainability in agriculture**, farmland productivity and food systems including crop breeding, the use of perennial grasses in farms to avoid run-off, and regenerative agricultural practices,
5. Innovative conversion of plant material into **biofuel**, and the compression of plant material for use in the production of **biodegradable packaging** to replace plastics.

3.4.5. Natural resources management

Emerging diseases are often the results of encroachment into natural ecosystems and changes in human activity. It is no coincidence that the destruction of ecosystems has coincided with a sharp increase in such diseases. Outbreaks of invasive pests and diseases are another common cause of nature loss that threatens the survival of commercially important crop species with low genetic diversity.

Public services in agriculture have been disrupted during the pandemic. These include extension diagnostics, training, field visits, and pest monitoring and surveillance. The support received through these services is crucial for crop production and sustainable farming.

Water quality and availability remains a key challenge. In Turkey, 74% of annual freshwater is used for irrigation, and 13% for drinking and utility purposes¹²⁹. The management of water resources is a field

128 <https://www.iea.org/news/the-covid-19-crisis-is-hurting-but-not-halting-global-growth-in-renewable-power-capacity>

129 11th National Development Plan of the Republic of Turkey, Water Resources Management And Security Special Expertise Commission Report, Ankara 2018

of activity that links the economic, environmental and social dimensions of sustainability. It includes ensuring sustainable access to water and sanitation, pollution control, and resilience to risks like scarcity and floods. Turkey is not a severely water-stressed country, but water shortages already exist at a regional level, and given the trend towards increased usage, the situation is likely to deteriorate in the near future¹³⁰.

Covid-19 is likely to be present in domestic and urban wastewater, whether treated or untreated.

The use of this water in the irrigation of vegetables that are consumed raw carries with it a risk of Covid-19 contamination¹³¹.

Nature loss is particularly dire for the rural poor, who are often directly and heavily dependent on nature for their food, shelter, income, fuel, health and way of life. They are more vulnerable to nature loss since substitutes are often unavailable or too costly.

In the light of the above:

1. The **protection and management of the natural resource base** should be included in Covid-19 recovery efforts, since the performance and resilience of socio-economic systems depend on the availability of natural resources and health of the natural environment.
2. **Trends in natural resources should be monitored closely**, including for any possible changes related to Covid-19. This may extend to indicators such as the percentage of biomes in protected areas, the percentage of protected areas (terrestrial and marine) and the distributions of species within protected areas.
3. Water quality needs to be monitored and assured with reference to Covid-19. A multi-sectoral approach to **integrated water resources management** under the One Water One Health concept must continue to be promoted.
4. **Air quality** should be monitored and assured due to the impacts of air pollution on respiratory health and the immune system. High levels of air pollution might exacerbate the risk of Covid-19.
5. Sustainable **forest** management, protection of sensitive **ecosystems**, sustainable land management and **climate-friendly agriculture** also remain core issues of the sustainability agenda post-Covid-19.
6. **Local communities** that directly depend on natural resources for their food supply and livelihoods should be supported in their safe and sustainable use of these resources.

130 Turkey: Water along the food chain, FAO, 2016, <http://www.fao.org/3/a-i5991e.pdf>

131 Evaluation of the Risk of Covid-19 (sars-cov-2) Virus Transmission through Waste Water from the Perspective of Reuse of Used Water, Ministry of Agriculture and Forestry, April 2020, Ankara https://www.tarimorman.gov.tr/SYGM/Belgeler/covid%20-19%20arde%20duyuru/KS_Covid_19_Raporu.pdf







Photo: Emrah Gürel / UNHCR Turkey



Pillar 4. Macroeconomic Response and Multilateral Collaboration

There is widespread consensus among economists and international institutions that the world economy has entered the worst recession since World War II due to the Covid-19 crisis¹³². What started as a health crisis very soon turned into one of the most severe economic crises witnessed in recent history, changing the global economic landscape dramatically within a matter of weeks. Unlike many previous economic crises, which emanated from financial shocks, supply shocks, demand shocks or commodity price shocks, the Covid-19 crisis is a perfect-storm: many countries are facing these major disruptions simultaneously and very brutally.

Another distinctive characteristic of this period is the unprecedented level of uncertainty. The Covid-19 crisis itself is unprecedented. There are still many unknowns regarding the possible course of the pandemic. Future projections are highly uncertain – and have become more pessimistic as the crisis has unfolded.

Most recent projections for the global economy indicate a decline in economic activity of more than 5% in 2020. The World Bank projects that the world economy will contract by 5.2% in 2020, the OECD foresees a contraction of 6% in its single-hit scenario and the IMF projects a 4.9% contraction (Table 4-1). All these projections points towards a worse crisis than during the 2008-09 financial crisis.¹³³

Table 4-1. Growth Prospects for 2020

Institution	Report	Release	Growth Projections for 2020	
			Global	Turkey
IMF	World Economic Outlook	14.04.2020	-3.0%	-5.0%
EC	European Economic Forecast	06.05.2020	-3,5%	-5.4%
UN DESA	World economic situation and Prospects -mid 2020	13.05.2020	-3,2%	---
World Bank	Global Economic Prospects	08.06.2020	-5.2%	-3.8%
OECD	Economic outlook 2020	10.06.2020	-6.0%	-4.8%
IMF	World Economic Outlook	24.06.2021	-5.0%	-5.0%

The Turkish economy is expected to face a challenge in 2020. The magnitude of the impact in each country will depend on the capacity of the health infrastructure to contain and respond to the pandemic, the country's dependence on the sectors that are hit hardest by the crisis, the fiscal space available to respond, the coverage of employment and social protection systems, the social fabric, the degree and nature of connectedness with the world economy, and the specific transmission channels to which the country is exposed. For Turkey, the IMF projects a contraction of 5%¹³⁴, the World Bank a contraction of

¹³² World Bank, Global Economic Prospects, June 2020 <https://www.worldbank.org/en/publication/global-economic-prospects>

¹³³ The New Economy Programme projects a positive GDP growth rate of 0.3 % for 2020 as a baseline scenario, while GDP is projected to contract by 1.5 % for 2020 as a pessimistic scenario. These projections became available much later than the cut-off date for the analysis in this report, taking also into consideration the developments in the third quarter.

¹³⁴ IMF, World Economic Outlook, June 2020, A Crisis Like No Other <https://www.imf.org/en/Publications/WEO/Issues/2020/06/24/WEOUpdateJune2020>

3.8%¹³⁵, the OECD a contraction of 4.8% (under its single-hit scenario)¹³⁶ and the European Commission a contraction of 5.4%¹³⁷ (Table 4-1).

Along with the contraction in the economy, unemployment rates are expected to surge. The IMF's World economic Outlook for Spring 2020 suggests that the unemployment rate may increase to 17.2% in 2020 from 13.7% in 2019, while the OECD projects an unemployment rate of 15.6% in its single-hit scenario.

4.1. Transmission channels of the Covid-19 crisis

Covid-19 affects economies in various inter-related ways from lockdowns or disruptions in supply chains and collapsing export and tourism markets to domestic demand shocks resulting from high levels of unemployment and income losses, and from financial shocks resulting from capital flight to increasing uncertainty. These transmission channels are closely intertwined. As an upper middle-income country with a sophisticated and diversified economy, Turkey is being affected particularly through the external demand channel, the domestic demand channel, the financial distress channel, and uncertainty¹³⁸.

4.1.1. External Demand Channel

The decline in external demand will have a negative effect on the Turkish economy mainly through the decline in exports and loss of tourism revenues.

The Turkish economy is highly integrated into global value chains. Exports of goods and services account for 31.6% of GDP. One of the most important export markets for Turkey has traditionally been the European Union, which accounted for 49% of exports in 2019¹³⁹. The share of exports to the European Union has been fairly stable for decades. Furthermore, Germany, the United Kingdom and Italy are Turkey's top three export markets, collectively accounting for more than 20% of exports.

The European Union has been one of the epicenters of the Covid-19 pandemic, with severe implications for the EU economy. **The EU economy is expected to contract by 7.4% in 2020** according to the Spring 2020 forecasts of the European Commission¹⁴⁰ and this has been further revised downwards in IMF's latest projections. These forecasts are much more severe than the contraction of the EU economy in 2009 during the Global Financial Crisis (4.3%). Turkey's exports to the EU can therefore be expected to contract significantly, implying also that the production of export-oriented sectors will decline in tandem.

Turkey is at the same time one of the world's top tourism destinations. According to World Tourism Organization figures, Turkey ranked sixth in 2018 by the number of arrivals¹⁴¹. The number of arrivals in Turkey for 2019 was recorded as 51.7 million¹⁴², while travel revenues in 2019 amounted to USD34.5 billion¹⁴³, roughly corresponding to 4.7% of GDP. In terms of the countries of origin of the visitors, the Russian Federation, Germany, Bulgaria and the United Kingdom are the top four countries. These countries, with the exception of Bulgaria, have also been heavily affected by the Covid-19 pandemic. Even though some of the travel restrictions imposed have been lifted as of June, Turkey will witness a significant loss of tourism revenues for Turkey in 2020 in line with the expectation of a very significant fall in global tourism revenues¹⁴⁴.

135 World Bank, Global Economic Prospects <https://openknowledge.worldbank.org/bitstream/handle/10986/33748/211553-Ch01.pdf>

136 OECD, Economic Outlook, June 2020. The contraction is projected as 8.1% under the double-hit scenario. <https://www.oecd-ilibrary.org/sites/0d1d1e2e-en/index.html?itemId=/content/publication/0d1d1e2e-en>

137 EC, European Economic Forecast, Spring 2020. https://ec.europa.eu/info/publications/european-economic-forecast-spring-2020_en

138 External demand and domestic demand channels are also stated as most important risks by the enterprises responding to the B4G survey, elaborated under Pillar 3 of this study.

139 Calculated from Exports According to Country Groups, Trade Statistics, Turkstat, http://www.tuik.gov.tr/PreTablo.do?alt_id=1046

140 European Commission, European Economic Forecast, Spring 2020

141 <https://www.e-unwto.org/doi/pdf/10.18111/9789284421152>

142 Ministry of Culture and Tourism, Tourism Statistics

143 Turkstat, Tourism Statistics

144 <https://www.unwto.org/international-tourism-and-covid-19>



4.1.2. Domestic Demand Channel

Containment measures were imposed against the spread of the Covid-19 pandemic from the second half of March onwards. Restrictions were imposed on the activities of enterprises in many services sectors including transportation, restaurants, the entertainment industry, personal services and recreation. Schools and other educational institutions were closed, which was followed by a shift to remote education modules. However, **the government did not opt for a complete lockdown**, recognising that the costs for the economy could be unbearable. Despite the relatively narrow range of mandatory restrictions on economic activities, there was an initial suspension of activities in many sectors, including retail trade and manufacturing, due to health considerations and for economic reasons¹⁴⁵. Closures of shopping malls and widespread production breaks in the automotive industry are examples of these “voluntary” suspensions of economic activity¹⁴⁶.

The disruption to economic activity resulted in loss of confidence, loss of jobs and loss/reduction of incomes, even when employees were kept on contract (See also Pillar 3, above). Enterprises have lost revenues too. Lower earnings compounded with the impact of containment measures and loss of consumer confidence has translated into lower domestic demand. Household consumption, which accounted for roughly 57% of GDP in Turkey in 2019, is declining with feedback loops on economic activity. On the other hand, lower capacity utilization in many sectors, combined with financial distress and unparalleled uncertainty about future prospects, is leading to a sharp decline in investment demand¹⁴⁷. Thus, the decline in domestic demand is acting as another important downward factor on economic activity.

4.1.3. Financial Distress Channel

The Covid-19 crisis has triggered large capital outflows from emerging market economies¹⁴⁸, putting downward pressure on asset prices and domestic currencies in these countries. Furthermore, increasing risk aversion in financial markets has increased the cost of borrowing considerably for many developing countries, limiting their capacity to borrow from international financial markets at a time when access to finance is critical for keeping the economies afloat in many countries. Turkey has been no exception.

One of the structural challenges of the Turkish economy has been the persistent domestic savings-investment gap¹⁴⁹, which leads to a dual hardship for the economy. Inadequacy of domestic savings to fully finance investment demand implies that investment expenditures have to be partially financed by external savings, i.e. capital inflows, which translates into persistent current account deficits for the economy in good times. At the same time, this dynamic leads to a close correlation between capital inflows and the growth rate of the economy, implying that the growth of economic activity is reliant on the availability of external finance. During times of financial distress which result in abrupt declines in capital inflows (“sudden stops”), economic activity is bound to lose momentum.

One of the consequences of these dynamics is that **the non-financial corporate sector in Turkey has accumulated a considerable amount of external debt over the past years** (USD139 billion as of the first half of 2020). Furthermore, some of the sectors with the largest shares in the external debt, such as the energy and construction sectors, do not have foreign currency revenues. This leads to currency mismatches in their balance sheets and increases their exposure to exchange rate risks. On the other hand, the external debt of the non-financial corporate sector has decreased by USD 21.4 billion (13.3%) for the last two years which has partially decreased the external debt pressure on this sector.

145 The impacts of the Covid-19 crisis for the continuity of business activities discussed in detail Under Pillar 3.

146 Most of these measures were eased starting from 1 June 2020 leading to a rebound in confidence and economic activity.

147 The Business Tendency Statistics of the Central Bank of the Republic of Turkey provide some evidence regarding expectations of businesses for future investment opportunities. Companies receiving the survey provide answer to the following question: Compared to the last 12 months, how do you expect your fixed investment expenditure to change over the next 12 months? The ratio of firms which expect that their fixed investment expenditure will decrease over the next 12 months sees a sharp increase in April 2020 with a slight reduction in May 2020 overall indicating a sharp decline in investment demand.
<https://www.tcmb.gov.tr/wps/wcm/connect/d30e33f0-c048-4cbe-b804-03517b7a669d/%C4%B0YA-RaporTablo-Int.pdf?MOD=AJPERES&-CACHEID=ROOTWORKSPACE-d30e33f0-c048-4cbe-b804-03517b7a669d-mHzvLOa>

148 IIF, Capital Flows Report: Sudden Stop in Emerging Markets, April 2020

149 Presidency of Strategy and Budget, 2020 Annual Program of the Presidency, p73

https://www.sbb.gov.tr/wp-content/uploads/2019/11/2020_Yili_Cumhurbaskanligi_Yillik_Programi.pdf

Total debt repayment obligations are considerable. The ratio of total public and private sector external debt to GDP, which stood at 58% as of the end of 2019, is not very high compared to many emerging market economies. Even so, Turkey had USD437 billion worth of external debt as of the end of 2019¹⁵⁰ and a negative net international investment position (the difference between the country's external liabilities and its external assets) of USD352 billion¹⁵¹. When short-term debt based on time-to-maturity¹⁵² is considered, the total debt obligations for 2020 amount to USD168.2 billion. These obligations also increase the exposure of the country to exchange rate risks and hikes in borrowing costs.

4.1.4. Uncertainty Channel

Uncertainty leads to behavioral changes on the part of economic actors. Consumers tend to spend less and increase their precautionary savings given the unclear prospects for jobs and incomes, while investors tend to postpone investment projects given the gloomy projections about businesses. For these reasons, uncertainty also tends to limit the effectiveness of fiscal stimulus measures. Under circumstances of extreme uncertainty, it becomes more important than ever to create confidence in economic policies and to coordinate and implement agile responses.

4.2. Early Impacts of the Covid-19 Crisis

4.2.1. Economic Activity

The Turkish economy was recovering from the protracted effects of the 2018 currency slide when the Covid-19 pandemic began. The growth rate of GDP had accelerated to 6.4% in the last quarter of 2019 compared to the same period of the previous year. The pace of growth was driven mainly by strong domestic demand. Private consumption increased by 8.2% and imports by 27.8% in the same quarter. Even though gross fixed capital formation was still contracting on a year-on-year basis, it had bottomed out and was gaining momentum¹⁵³.

The growth in economic activity persisted into the first quarter of 2020. Turkey registered its first Covid-19 case in mid-March, so the normal functioning of the economy continued almost until the end of the first quarter. The indirect effects of the crisis had started to be felt through increasing uncertainty, declining demand in trading partners and tighter financial conditions. However, these factors were not yet fully in play, and disruptions in domestic production due to containment measures only started towards the end of the quarter. **GDP grew by 4.4% in the first quarter of 2020** compared to a year earlier. The momentum in domestic demand continued to be the driving force of strong growth. Private consumption increased by 4.5%, while government consumption increased by 3.2% compared to the same quarter of the previous year. Imports also registered a surge of 21.9% albeit over a very low base in the first quarter of 2019. However, investment started to lose momentum and contracted by 0.3% and exports of goods and services increased marginally by 0.3% in the same period¹⁵⁴.

The impacts of the Covid-19 crisis became more evident in sectorial data for April. The effects on industry and services, which accounted for 24.8% and 62.1% of total sectorial production in 2019 respectively, were quite dramatic. In addition to their importance in terms of their productive capacities, the industry and services sectors also generated 19.8% and 56.5% of employment respectively as of 2019.

Developments in Industry

- **Industrial production saw a very rapid contraction after February 2020.** The industrial production index receded very rapidly from 119.8 in February 2020 to 77.7 in April (Figure 4-1: panel a).

150 Ministry of Treasury and Finance, External Debt Statistics of Turkey, <https://www.hmb.gov.tr/kamu-finansmani-istatistikleri>

151 Central Bank of the Republic of Turkey, International Investment Position, <https://www.tcmb.gov.tr/wps/wcm/connect/cb23c98d-d9a5-465f-8c9c-9f84b533aaf8/uyp.pdf?MOD=AJPERES&CACHEID=ROOTWORKSPACE-cb23c98d-d9a5-465f-8c9c-9f84b533aaf8-mRdu7rb>

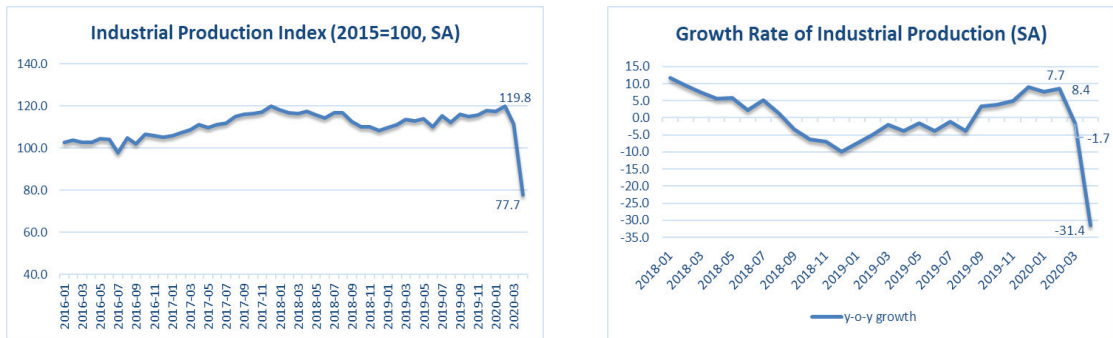
152 Debt that is maturing in the coming 12 months, independent of the original maturity of the debt.

153 Turkstat, National Accounts data

154 Turkstat, National Accounts data



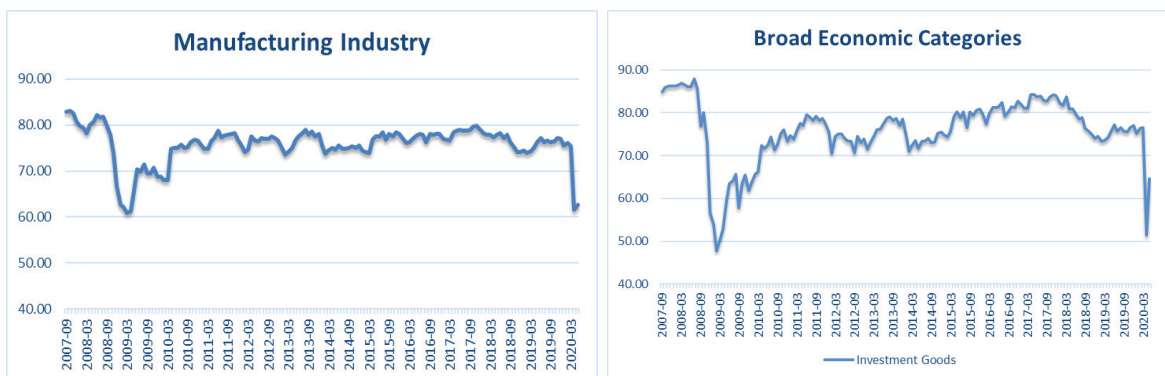
Figure 4-1: Developments in Industrial Production



Source: Turkstat

- **The industrial production index (calendar adjusted) declined by 31.4% in April 2020 compared to April 2019, pointing to the severity of the contraction in production** (Figure 4-1: panel b). Regarding the components of industrial production, mining and quarrying contracted by 14.5% in April compared to the same month of the previous year, manufacturing industry contracted by 33.3% and electricity and gas contracted by 14.9%.
- **The capacity utilization rate for manufacturing industry displayed a major decline in April followed by a marginal up-tick in May.** The overall capacity utilization rate registered a decline of about 14 percentage points from 75.3% in March to 61.6% in April. This historically sharp decline¹⁵⁵ was an early indicator of the severe contraction in industrial production in April. The capacity utilization rate increased only marginally to 62.6% in May, implying that industrial production is likely to have seen a severe year-on-year contraction in May as well (Figure 4-2 panel a).
- **Some categories of production were affected more severely than others.** In terms of broad economic categories, production of investment goods was hit the hardest in April. The decline in the capacity utilization rate for investment goods production was 25 percentage points. Capacity utilization losses in consumption goods production and intermediary goods production was relatively less (Figure 4-2 panel b).
- **However, investment goods production showed moderate signs of recovery in May.** The capacity utilization rate in investment goods production increased from 51.4% in April to 64.6% in May.

Figure 4-2: Capacity Utilization Rates (%)



Source: Central Bank of the Republic of Turkey

¹⁵⁵ To put the observed decline in perspective, it can be mentioned that the decline in manufacturing industry capacity utilization rate was around 20 percentage points during the 2009 Global Financial Crisis episode from peak to trough; however this happened in 6-7 months.

Available data suggests a major decline in production in important sectors. In the automotive industry, the number of vehicles produced in Turkey declined by 91% in April and by 53.7% in May 2020, compared to the same months of the previous year¹⁵⁶. The decline in production is the result of a combination of factors including the decline in external demand, the decline in domestic demand and temporary closures of many automotive plants starting from the second half of March. Based on these figures, total production in the first five months of 2020 declined by 33.6%.

- **The probability that Turkish industry will experience a rapid recovery within 2020 is quite low.** The above data indicate that the second quarter of the year is likely to have seen a very sharp decline in industrial production (and consequently in GDP). The magnitude of the contraction throughout the year will depend on the course of the pandemic in Turkey and in major export markets, and the pace of the recovery in domestic and external demand. However, the prospects for the world economy and the EU economy, which is a major export partner for Turkey, are quite pessimistic.

Developments in Services

- **Services sectors were also severely affected by the Covid-19 crisis.** The seasonally adjusted services turnover index declined by 16.7% in March and 22.7% in April on a monthly basis, carrying the loss in two months to more than one third (35.6%) of the turnover. Wholesale and retail trade also experienced a similar cumulative loss of turnover (30.5%) in these two months¹⁵⁷.
- **Services sectors directly affected by containment measures were hit the worst.** The most affected sub-sectors were: *Air transport* (42.6% decline in March followed by a 50.2% decline in April), *Accommodation* (40% decline in March followed by a 73.7% decline in April), *Food and beverage sector activities* (30.9% decline in March followed by a 55% decline in April), and *Travel agency, tour operator and other reservation services and related activities* (52.9% decline in March followed by a 83.7% decline in April)¹⁵⁸.
- **The tourism sector, an important source of foreign exchange earnings, also contracted rapidly in March and April 2020.** The number of foreign visitor arrivals declined by 68% in March 2020 compared to March 2019, while in April there was a contraction of 99% compared to the same month of last year¹⁵⁹. For the first quarter of 2020, tourism revenues declined by 11% compared to the first quarter of 2019, to a level of USD 4.1 billion. For the whole of 2020, the prospects for the tourism sector are not optimistic either¹⁶⁰.

There are mild indications that the worst months of the crisis might have been left behind. The Economic Confidence Index which plummeted from 91.8 in March to 51.3 in April 2020, recovered to 61.7 in May (Figure 4-3). The index had reached its lowest level ever in April 2020.

All the components of the index (consumer confidence real sector confidence, services confidence, retail trade confidence and construction confidence) displayed some improvement in May compared to April.

Both business and consumer confidence seem to have been affected positively by the easing of some of the containment measures starting from May. A continuation of this trend will depend on several internal and external economic and non-economic factors, including the course of the pandemic following the normalization process.

156 Automotive Manufacturers Association, Automotive Industry Monthly Report, April-May 2020.

157 Turskstat, Trade and Services Turnover Indices

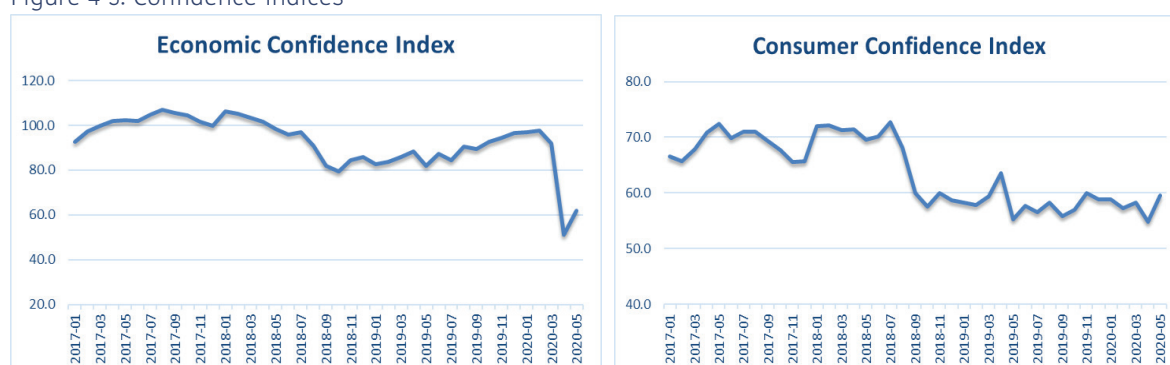
158 Turskstat, Trade and Services Turnover Indices

159 Ministry of Culture and Tourism, Tourism Statistics

160 Loss of revenues from the tourism sector is expected to be around USD 25 billion. A majority of the executives in the tourism sector expect the recovery process to start in the last quarter of 2020. <https://www2.deloitte.com/tr/tr/pages/consumer-business/articles/turkiye-de-turizm-ve-konaklama-sektoru-covid-19.html>



Figure 4-3: Confidence Indices



Source: Turkstat

4.2.2. External Balances

Exports

There was a considerable loss of export revenues in the first five months of the year. The total value of exports declined to USD56.6 billion in January-May 2020 from USD70.4 billion in January-May 2019, corresponding to a decline of 19.7% and a loss of USD13.8 billion¹⁶¹.

After registering positive annual growth in 2019, exports started to decline starting from January 2020, compared to the same period of the previous year. It can be inferred that the declines in January and February were fundamentally driven by the contraction in external demand as Turkey had not registered its first Covid-19 case until mid-March and there were no disruptions in production.

The decline in exports became more pronounced and widespread starting from March 2020. The contraction in exports reached 17% in March, 40% in April and 42% in May 2020 (Table 4-2). By May, the contraction in exports to Turkey's top ten markets of Turkey was well beyond one third, with the exception of Iraq.

Table 4-2: Growth of Exports in Top Ten Export Markets

	January	February	March	April	May	Jan.-May
Germany	-5.7%	-2.8%	-12.6%	-34.6%	-40.2%	-17.5%
United Kingdom	-0.9%	-6.5%	-8.5%	-58.4%	-36.7%	-22.7%
Italy	-14.3%	-29.9%	-38.9%	-50.9%	-56.3%	-30.0%
Iraq	1.8%	-40.8%	-40.4%	-29.2%	-23.5%	-14.7%
USA	3.7%	6.1%	5.1%	-20.7%	-34.2%	-7.6%
Spain	3.9%	-22.2%	-37.3%	-57.6%	-65.2%	-37.0%
France	-2.2%	-22.9%	-32.1%	-66.9%	-45.1%	-38.4%
Netherlands	-10.9%	9.0%	13.9%	-24.4%	-39.2%	-6.4%
Israel	3.2%	3.6%	-13.0%	-32.9%	-35.8%	-11.9%
Romania	-4.5%	1.9%	-15.5%	-45.8%	-36.4%	-18.4%
Total	-0.7%	-7.3%	-17.0%	-40.5%	-42.0%	-19.7%

Source: Turkish Exporters' Association

¹⁶¹ This section uses the data of the Turkish Exporter's Association, which is released earlier than the official Turkstat figures. Thus, the data might show small discrepancy with respect to the final official figures.

When the country-profile of the contraction in exports is considered, it can be observed that the course of trade was closely linked to the course of the Covid-19 pandemic. The contraction in exports started in those trading partners which had a high incidence of Covid-19 cases –Italy, Spain and France, in particular – and then spread to cover all the top ten export markets, which together accounted for 47.5% of Turkey’s exports in 2019. Even though, the overall contraction in May was sharper than in April, there were weak signs of an improvement in exports to a few countries (UK, Iraq, France and Romania) – i.e., the contraction in May was softer than the contraction in April.

Some sectors were affected more severely than others. Exports of industrial goods contracted by 47% in April and 45% in May 2020 compared to the same period of the previous year. The leading exporting sectors – the automotive industry; garments and apparel; electrical and electronic goods; machinery and equipment; metals, and steel – all contracted very significantly in April and May¹⁶² (These sectors jointly accounted for 54% of Turkish exports in 2019). However, the declines in exports of automotive industry products and of garments and apparel were less marked in May than in April (Table 4-3).

Table 4-3: Growth of Exports by Economic Sectors (Value, USD)

	January	February	March	April	May	Jan.-May
AGRICULTURE	8.7	4.5	4.4	-6.0	-21.4	-2.2
INDUSTRY	4.9	1.1	-20.6	-46.9	-45.2	-22.6
Agriculture Related Processed Goods	5.4	4.4	-15.9	-58.9	-53.8	-25.3
Chemicals	10.5	-8.0	-15.3	-27.4	-39.0	-17.1
Industrial Goods	3.7	2.5	-22.1	-49.4	-45.4	-23.4
Garment and Apparel	5.4	7.4	-27.6	-61.8	-48.2	-26.1
Automotive and Industry	3.0	-1.8	-28.5	-77.2	-56.3	-33.1
Vessels and Yachts	18.3	94.9	-31.0	-74.7	7.8	-5.4
Electric-Electronic	3.3	-2.8	-16.2	-33.8	-35.5	-18.2
Machinery and Equipment	6.7	5.5	-10.5	-30.9	-44.6	-16.6
Iron and Non-Iron Metals	7.9	5.3	-5.7	-26.6	-39.7	-13.2
Steel	-4.6	-15.7	-24.8	-27.0	-39.7	-22.9
Cement, Products Glass, Ceramics, Soil Prod	14.3	16.1	0.1	-25.6	-29.3	-6.9
Jewelry	8.0	49.6	-22.5	-43.5	-37.4	-11.8
Defence and Aerospace Industries	-4.3	10.3	-49.8	-18.5	-54.8	-28.7
Climatization	8.0	7.0	-4.4	-26.9	-41.1	-13.5
Orther	-2.6	-4.8	-38.2	-45.6	-41.9	-29.2
MINING	8.3	-3.9	-11.9	-14.7	-40.6	-15.1

Source: Turkis Exporters' Association

The export figures for April and May might represent the trough, as trading partners have since started to open up for business and the disruption to economic activities is moderating. However, it will

162 Automotive industry accounts for 18.4% of export revenues as of 2019, followed by garment and apparel with 10.7%; steel with 8.4%, electric-electronic with 6.8%; iron and non-iron metals with 4.9%; and machinery and equipment with 4.7%. Calculated from Turkish Exporters Association sector level data for comparability reasons.



take time for all countries to recover from the crisis and the prospects for the world economy are still deteriorating¹⁶³.

Imports and the trade deficit

Imports started to decline sharply in April, although not as much as exports. Imports increased from USD47.6 billion in the first quarter of 2019 to USD52.5 billion in the first quarter of 2020, in line with strong domestic demand. As exports were declining year-on-year, this resulted in a deterioration in the goods trade deficit from USD2.7 billion in January-March 2019 to USD9.6 billion in the same period of 2020. In April, imports declined by 25% compared to April 2019. The goods trade deficit nevertheless went on declining, reaching USD13.4 billion for the first four months of 2020 compared to USD4.2 billion in the same period of 2019.

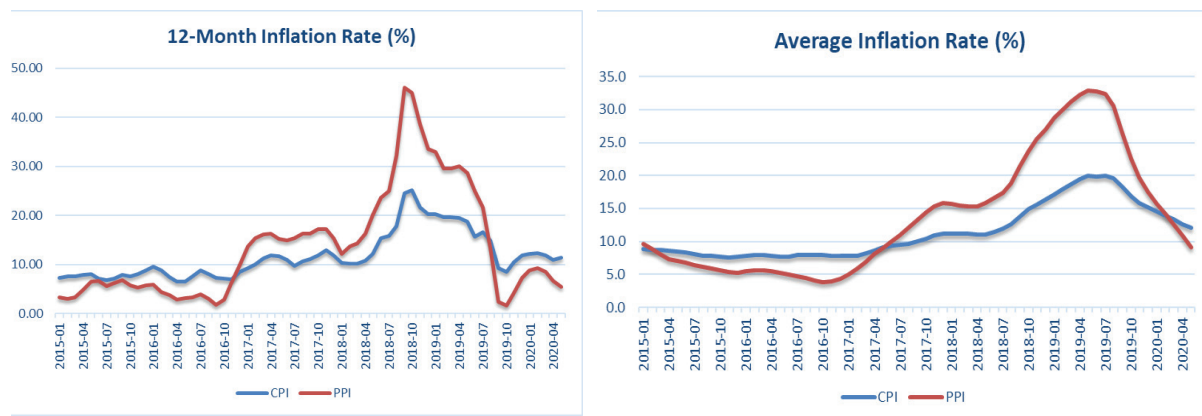
In the remainder of 2020, lost export and tourism revenues may be largely offset by the contraction in imports. According to the Spring projections of the European Commission, the current account deficit will be only 0.5% of GDP in 2020¹⁶⁴, while the OECD projects a current account surplus of 0.9% of GDP¹⁶⁵.

4.2.3. Price Dynamics and Monetary Policy

The inflationary impact of the currency slide in 2018 had been contained before the onset of the Covid-19 crisis. The 12-month consumer price inflation (CPI) rate had receded back to around 10% after an interlude of considerably higher inflation between May 2018 and August 2019, and inflationary expectations were reasonably anchored.

Furthermore, **declines in commodity prices and weak domestic demand due to the slowdown in economic activity are relieving inflationary pressures**, creating some policy space for the monetary authority even at a relatively high level of inflation by international standards.

Figure 4-4: Price Dynamics



Source: Central Bank of the Republic of Turkey

Consumer price inflation (CPI) has been relatively stable since late 2019. The 12-month CPI inflation rate stands at 11.4% as of May 2020 (Figure 4-4 panel a) and inflationary expectations for the coming 12 months ahead are anchored at 9.4%. The annual average inflation rate continues to decline both for consumer prices and producer prices (Figure 4-4, Panel b).

The Central Bank has adapted a proactive stance towards the Covid-19 crisis. The Monetary Policy Committee (MPC) held an unscheduled meeting on March 17 just a few days after the first Covid-19 infection was identified in Turkey and decided on a 100 basis points interest rate cut. The regular meetings in April and May resulted in further interest rate cuts, bringing the policy rate from 10.75% in February to 8.25% in May. Table 4-4 summarizes the policy decisions of the MPC in different episodes.

163 <https://www.imf.org/en/News/Articles/2020/06/13/sp061320-Italy-Europe-and-the-Global-Recovery-in-2021>

164 EC, European Economic Forecast, Spring 2020. https://ec.europa.eu/info/publications/european-economic-forecast-spring-2020_en

165 ECD, Economic Outlook, June 2020. The contraction is projected as 8.1% under the double-hit scenario. <https://www.oecd-ilibrary.org/sites/0d1d1e2e-en/index.html?itemId=/content/publication/0d1d1e2e-en>

Table 4-4: One-Week Repo Rates

2018 Economic Turbulence	01.06.2018	16.50
	08.06.2018	17.75
	14.09.2018	24.00
Recovery from 2018 Turbulence	26.07.2019	19.75
	13.09.2019	16.50
	25.10.2019	14.00
	13.12.2019	12.00
	17.01.2020	11.25
	20.02.2020	10.75
Covid-19 Crisis	17.03.2020	9.75
	23.04.2020	8.75
	22.05.2020	8.25

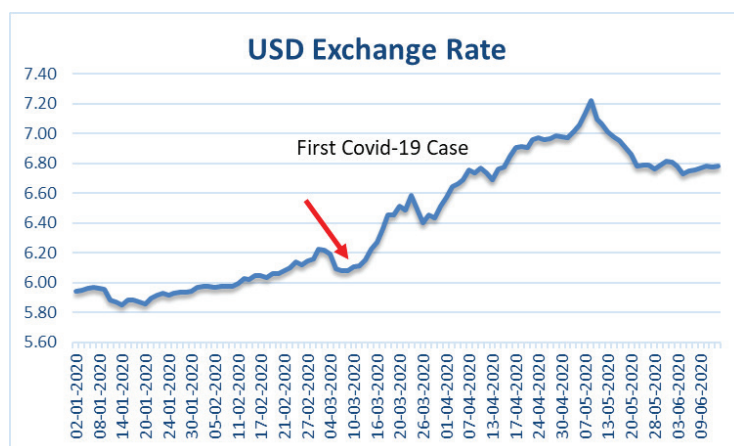
Source: Central Bank of the Republic of Turkey

Real interest rates turned negative in 2020 and the gap between CPI inflation and the the policy rate has since increased. Negative real interest rates can increase the vulnerability of the domestic currency to changes in market sentiment. More important than the exact value of the currency, however, would be maintaining financial stability in the case of increasing exchange rate volatility.

4.2.4. Financial Markets

The lira depreciated by around 11% after the first Covid-19 case was detected and there was a further period of financial distress in early May. The TRY/USD rate, which was 6.11 on 10 March, reached a historical high of 7.22 in the first week of May before retreating to around 6.78 in late May and early June (Figure 4-5). The relative stabilization was ensured following several measures taken by the Banking Regulation and Supervision Agency (BRSA) and the Central Bank of the Republic of Turkey (CBRT).

Figure 4-5: Exchange Rate Developments



Source: Central Bank of the Republic of Turkey

The depreciation of the Turkish lira has the potential to worsen the balance sheets of firms which have currency mismatches in their balance sheets (i.e., foreign exchange-denominated liabilities and lira-denominated assets). Given that the non-financial corporate sector in Turkey also has a considerable amount of external debt, the implications of abrupt losses in the value of the domestic currency might lead to solvency problems (The currency slide in August 2018 was followed by widespread concordats in many sectors). Thus, preventing excessive fluctuations in the exchange rate is expected to be high on the agenda of the authorities.

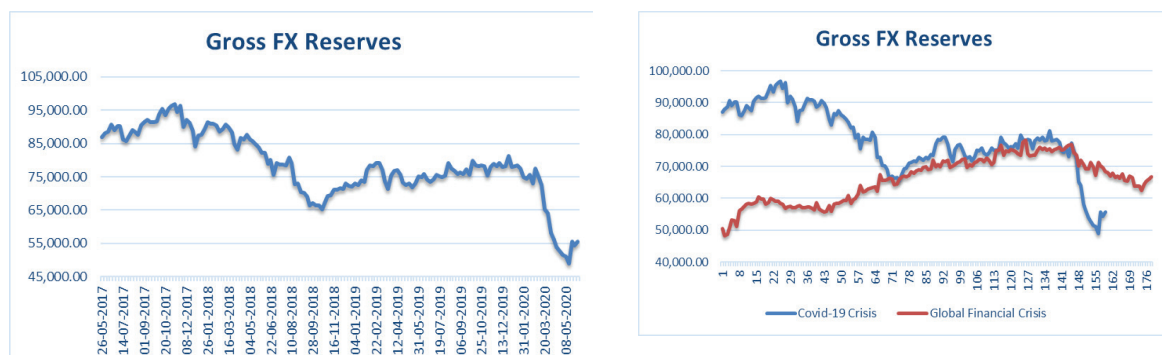


The Istanbul Stock Exchange Index (XU 100) fell by about 30% between 21 January and 23 March. This compared to a 60% loss over 11 months during the Global Financial Crisis. The losses accelerated after the detection of the first Covid-19 case in Turkey. The market has since bounced back to some extent.

The Covid-19 crisis triggered a new wave of capital outflows. The Covid-19 pandemic has caused a sudden deterioration of market sentiment towards emerging market economies world-wide, accompanied by significant capital outflows from emerging market economies. Turkey has not been an exception to this trend and there have been significant outflows from the security portfolio of non-residents since January 2020. The outflow from equity and debt instruments, amounted to USD10.3 billion between 3 January and 5 June.

The capital outflows have put downward pressure on the foreign currency reserves of the Central Bank, which were already somewhat depleted. The gross foreign currency reserves of the Central Bank declined from USD77.4 billion on 28 February to USD48.9 billion on 15 May (Figure 4-6 panel a). Following the expansion of an existing currency-swap agreement between Qatar and Turkey, the reserves displayed a moderate increase. The loss in reserves was very severe compared to the decline during the Global Financial Crisis (Figure 4-6 panel b). Given the external financing needs of the economy, the reserve position of the Central Bank has led to hesitation about Turkey’s ability to meet its external obligations, contributing to the volatility of financial markets.

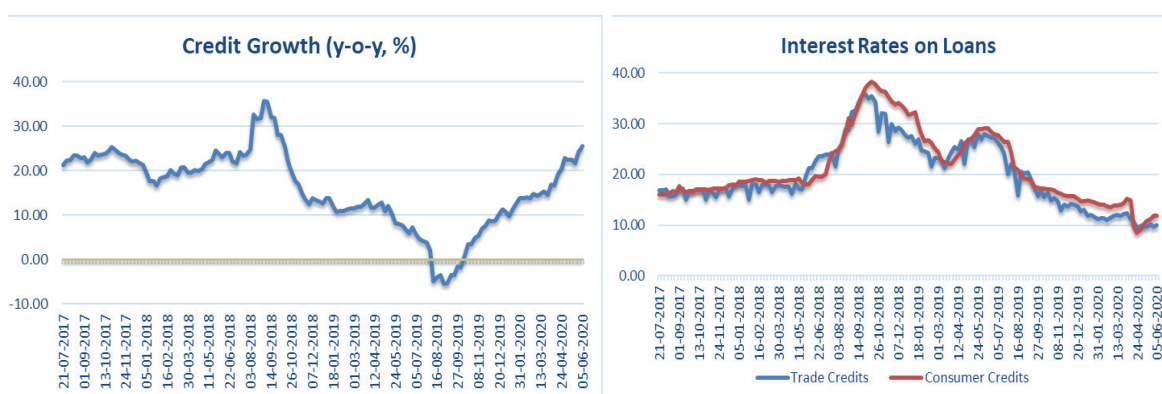
Figure 4-6: Gross Foreign Exchange Reserves of the Central Bank



Source: Central Bank of the Republic of Turkey

The pace of credit growth in Turkey was still quite slow at the onset of the Covid-19 crisis. In 2018, the authorities had to respond to the abrupt loss of value in the domestic currency and the accompanying deterioration in inflationary expectations with a significant hike in the policy interest rate (a 625 basis points increase in September 2018, Table 4-4). The annual rate of credit growth rate had recovered to about 10% again by the end of 2019 in line with falling inflation and interest rates (Figure 4-7).

Figure 4-7: Developments in Credit Markets



Source: Central Bank of the Republic of Turkey



The availability of credit has taken on great importance for the continuity of businesses following the onset of the Covid-19 crisis, given the disruption of economic activity due to containment measures, the contraction in external and domestic demand, and severe losses of revenues in some sectors. The Central Bank and the Banking Regulation and Supervision Agency have taken several measures to increase the availability of credit for both businesses and consumers. Despite accelerating credit growth beyond historical averages, the ratio of non-performing loans stayed relatively low and the capital adequacy ratio is still quite high. **However, a prudent stance is still important to protect the health of the banking system.**

4.2.5. Public Finances

The Covid-19 crisis has had a series effect on public finances. The slow-down in economic activity and decline in consumption have been putting downward pressure on both direct and indirect tax revenues, while expenditures, including social protection expenditures, have increased.

- In the three months from March to May, 2020, the **revenues** of the central government declined by 4.8% compared to the same period of 2019, mainly driven by the decline in tax revenues¹⁶⁶.
- Central government **expenditures** increased by 19.6% in the three months from March to May, 2020 compared to the same period of 2019. Primary expenditures (non-interest expenditures) of the central government increased by 18% and 29% year-on-year in March and April respectively but increased by only 2% in May. The increases in primary expenditures were mainly due to current transfers, which include the social assistance expenditures that formed part of the fiscal measures announced by the government on March, 17 to mitigate the impact of the Covid-19 crisis on citizens. Current transfers increased by 24% in March and 54% in April. The fall in expenditures in May was driven by declines in expenditures on goods and services and current transfers.
- As a result of these developments, **the central administration budget deficit reached TRY90 billion in the first five months of 2020.** This figure corresponds to 65% of the planned budget deficit for the whole year (TRY138.9 billion according to the 2020 Budget Law) (Table 4-5).

Table 4-5: Central Government Budget Balance in 2020

	January	February	March	April	May	Total
Expenditures	100,669	93,499	91,162	108,443	85,446	479,219
1-Primary Expenditures	87,924	79,336	79,822	91,396	75,782	414,259
Personnel Expenditures	29,222	22,920	23,671	23,915	23,303	123,032
Social Sec. Inst. Gov. Premium Exp.	4,918	3,891	3,962	3,829	3,875	20,475
Expenditure on Goods And Services	4,078	7,532	6,733	6,650	5,227	30,219
Current Transfers	37,078	37,193	39,466	51,485	35,422	200,644
Capital Expenditures	9,183	3,094	3,838	3,659	5,090	24,864
Capital Transfer	20	336	438	523	562	1,879
Lending	3,424	4,370	1,715	1,333	2,304	13,146
Contingency appropriations	0	0	0	0	0	0

166 This section is based on Ministry of Treasury and Finance, Central Government Consolidated Budget Accounts



2-Interest Expenditures	12,745	14,162	11,340	17,048	9,664	64,960
Revenues	122,170	86,136	47,443	65,245	68,145	389,139
1-General Budget Revenues	120,792	81,114	44,604	63,410	66,691	376,611
Tax Revenues	67,416	71,729	36,954	49,125	55,281	280,506
Property Income	42,498	1,147	971	1,233	5,470	51,320
Grants and Aids and Special Revenues	2,263	735	997	227	651	4,873
Interest, Shares and Fines	8,344	7,231	5,266	11,894	4,811	37,546
Capital Revenues	235	215	222	849	351	1,872
Collections From Loans	36	57	193	82	126	494
2-Special Budget Institutions Revenues	1,006	2,664	2,327	1,329	1,020	8,345
3- Regulatory and Supervisory Institutions Rev	372	2,359	512	506	434	4,183
Budget Balance / Borrowing Requirement	21,501	-7,363	-43,719	-43,198	-17,301	-90,080
Primary Budget Balance	34,247	6,800	-32,379	-26,151	-7,637	-25,120

Source: Ministry of Treasury and Finance

A deterioration in public finances is expected overall for 2020. According to the projections of the European Commission, the general government deficit is expected to widen significantly from 3% in 2019 to 7.8% in 2020¹⁶⁷. Tax deferrals announced within the context of the fiscal measures against the Covid-19 crisis in mid-March may not have a substantial impact on the annual revenues since the deferrals were originally planned for six months. However, declining economic activity and domestic demand will continue to constrain tax revenues compared to 2019. Meanwhile, social assistance expenditures will remain high, including automatic stabilizers and discretionary measures.

So far, the fiscal deficit has been financed through domestic borrowing. In April and May, the level of domestic borrowing considerably exceeded the financing needs¹⁶⁸ (Table 4-6). This can be regarded as a precaution for future financing needs. Net government external borrowing was negative during this period, which might be interpreted as a reflection of increasing borrowing costs in international financial markets and limited ability to borrow from external markets.

Increased public borrowing will cause a significant increase in the public sector debt stock. According to the projections of the European Commission, the gross debt general of the government is expected to increase from 33% of GHP in 2019 to 43% of GDP in 2020. Approximately two thirds of the public debt stock is composed of external debt and one third is composed of domestic debt. As Turkey's public debt is lower than the debt levels of many advanced and developing economies, debt sustainability is not of particular concern.

¹⁶⁷ EC, European Economic Forecast, Spring 2020. https://ec.europa.eu/info/publications/european-economic-forecast-spring-2020_en

¹⁶⁸ The figures in Tables 4-5 and 4-6 display some discrepancies due to differences in coverage.

Table 4-6: Cash Balances of the Treasury in 2020

(Million TL)

	January	February	March	April	May	Total
1. Revenus	119,847	87,348	53,861	65,803	75,251	402,111
2. Expenditures	97,164	96,120	94,362	112,839	85,279	484,764
3. Primary Balance	30,249	4,112	-29,459	-30,559	-1,015	-26,672
4. Privatization and Rev. from Funds	63	59	57	787	300	1,266
5. Cash Balance (1+4-2)	22,747	-8,713	-40,444	-46,249	-9,727	-82,387
6. Financing	-22,747	8,713	40,444	46,249	9,727	82,387
7. Borrowing	5,202	41,891	16,213	53,235	46,278	162,818
7.1 External Borrowing	-371	23,545	-699	-739	-15,950	5,786
7.2 Domestic Borrowing	5,573	18,346	16,912	53,974	62,228	157,033
8. Other	-27,949	-33,178	24,231	-6,985	-36,551	-80,432

Source: Ministry of Treasury and Finance

However, the cost of borrowing and access to financial markets will have to be taken into consideration. Tightening financial conditions in international markets are currently not very supportive of emerging market economies. The risk premium of Turkey, indicated by CDS rates, is currently close to 600 basis points (six percentage points), increasing the cost of external borrowing considerably. Domestic Treasury bill rates are at reasonably low levels and this situation is expected to continue in view of the Central Bank's low policy rates and expansionary monetary policies.

4.2.6. External Financing Needs

Turkey's total external public and private debt stock is not very high, but the financing needs for 2020 are considerable and meeting these needs remains a priority for mitigating the negative consequences of the Covid-19 crisis. As noted above, Turkey's total gross public and private external debt stock was USD436.9 billion at the end of 2019, corresponding to 58% of GDP. Details are given in Table 4-7. When short-term debt based on time-to-maturity¹⁶⁹ is considered, total obligations for 2020 amount to USD168.2 billion and USD129.3 billion of these obligations belong to the private sector (Figure 4-8).

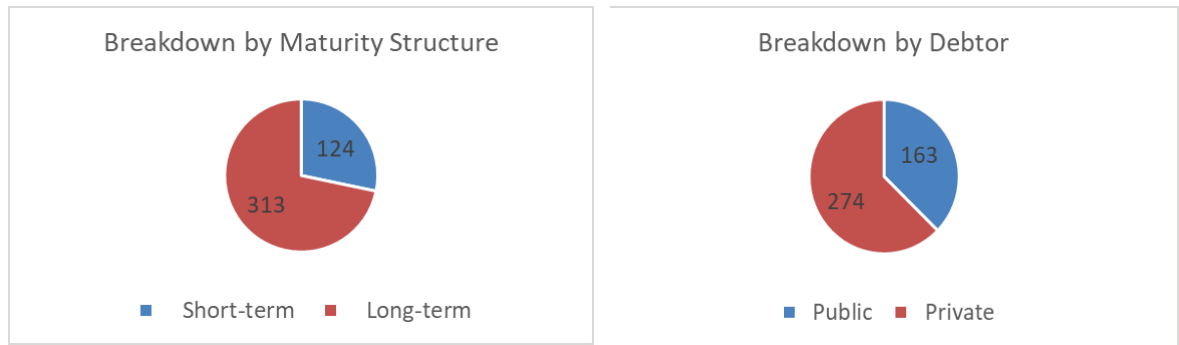
Table 4-7: Gross External Debt Stock of Turkey at the end of 2019

	Billion USD	% of GDP
Total	436.9	58.0
Short - term	123.6	16.4
Long-term	313.3	41.6
Public	163.2	21.7
Short-term	30.2	4.0
Long-term	133.0	17.6
Private	274.7	36.3
Short-term	93.4	12.4
Long-term	180.3	23.9

Ministry of Treasury and Finance

169 Debt that is maturing in the coming 12 months, independent of the original maturity of the debt.

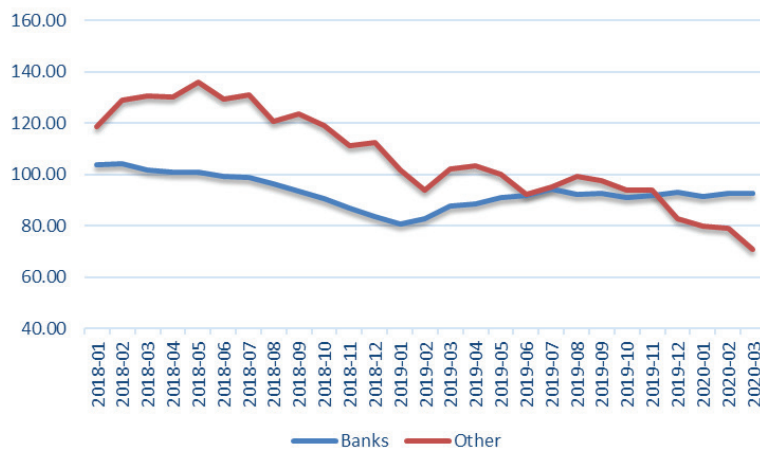
Figure 4-8: Composition of External Debt



Ministry of Treasury and Finance

Both the financial and non-financial sectors in Turkey have been net payers of external debt. The external debt roll-over ratio (ratio of new borrowing to debt paid off) fell below 100% for banks in the second half of 2018 and for other sectors in the second half of 2019 (Figure 4-9). The roll-over ratio for other sectors (primarily non-financial companies) has declined particularly rapidly and is quite close to the levels observed during the Global Financial Crisis.

Figure 4-9: Debt Rollover Ratios on External Debt



Source: CBRT

Continued net external debt redemptions could have negative consequences for the economy at large. Low roll-over ratios for the financial sector could undermine their capacity to extend credits to the private sector. Low roll-over ratios for the non-financial corporate sector might put some companies under pressure in meeting their obligations or otherwise divert much-needed resources for the continuity of businesses to financiers.



4.3. Government Response and Policy Options for a Resilient Economy and Better Recovery

The Government has taken substantial steps to counter the economic and social impacts of the Covid-19 outbreak. As early as 17 March, just one week after the first Covid-19 case was identified in Turkey, it announced a TRY100 billion initial economic response package, corresponding to about USD15 billion or roughly 2% of GDP, based on 2019 GDP realizations¹⁷⁰. Some of the measures introduced were as follows (Additional measures followed. A more detailed list is provided in Annex 1. See also Pillars 2 and 3 for social protection and labour market measures):

- Six-month deferral of the value added tax and social security payments of the sectors most affected by the outbreak,
- Extension of personal and corporate income tax filing deadlines,
- Three-months postponement of loan repayments for firms affected by the outbreak measures for three months and provision of additional financial support if needed,
- Postponement of the implementation of the recently-introduced accommodation tax,
- Three-month postponement of repayments to Halkbank (a public bank) on loans to small traders and artisans with no interest,
- Two-month postponement of repayments to Ziraatbank (a public bank) on loans to farmers with no interest,
- An increase in the lowest monthly retirement pension to TRY1,500,
- An increase in the maximum amount of the value of a home that can be financed by a mortgage loan, from 80% to 90% of the property value, for homes worth less than TRY500,000,
- An increase in the overall limit on loan guarantees from the public sector Credit Guarantee Fund from TRY25 billion to TRY50 billion,
- Postponement of easement right fees and revenue share payments regarding hotel rentals for six months,
- Expanding the coverage of short-time work benefits for workers in enterprises that reduce or temporarily halt their activities,
- A TRY 2 billion increase in the budget allocated to cash transfers for low income households,
- Recruitment of 32,000 additional medical staff.

Meanwhile, the Central Bank has acted to improve liquidity and credit conditions. The Bank reduced the policy rate by a cumulative 250 basis points in consecutive meetings in March, April and May. It has also taken other steps. On 17 March 2020, CBRT has announced that it will provide banks as much liquidity as they need and it started to offer targeted additional liquidity facilities with a lower cost than its policy rate and with longer maturities to secure uninterrupted credit flow to the corporate sector. On 31 March 2020, it took measures to (i) strengthen the monetary transmission mechanism by boosting the liquidity of the Government Domestic Debt Securities (GDDS) market, (ii) enhance banks' flexibility in Turkish lira and foreign exchange liquidity management, and (iii) secure uninterrupted credit flow to the corporate sector, and broadly support the goods and services exporting firms, which are affected by the pandemic, with an approach focused on small and medium-sized enterprises. These measures are fundamentally oriented towards providing liquidity to the markets, facilitating credit flows to exporting firms and maintaining their employment levels.

Both the Central Bank and Banking Regulation and Supervision Agency (BRSA) have taken a very active stance in financial markets to ensure financial stability, avoid financial disruptions and excessive volatility in financial markets.

More policy measures will be required to mitigate the ongoing crisis and to ensure a better recovery and a resilient economy. In this context:

1. **Even though the measures taken by the government are quite comprehensive in nature,**

¹⁷⁰ With the new measures added to the package thereafter, the size of the package has increased to TL 494 billion, which corresponds approximately 10 percent of GDP.



the magnitude of the response might be relatively small compared to the actual needs.¹⁷¹

Many countries around the world have introduced fiscal measures in the order of 10% of GDP and the UN Secretary General has made a call for a large-scale, coordinated and comprehensive multilateral response amounting to at least 10% of global GDP¹⁷².

2. **There might be need to extend the coverage of the measures taken, especially towards supporting the vulnerable segments of the society,** which are hit hardest by the crisis and lack resources to shore the negative effects on their lives, in order to avoid negative coping strategies which might have persistent impacts on these groups, including those benefitting from one-off social assistance. (See also Pillars 2, 3 and 5.)
3. **What governments do today will shape the initial conditions for the recovery phase.** The efforts made to protect jobs and businesses today will be critical for a faster recovery once the pandemic is contained. Protecting jobs, production networks and businesses will reduce the adjustment costs that will be borne and the adjustment time that will be needed in the recovery period.
4. **Smart stimulus measures will be called for following the mitigation measures that are currently in place.** When the pandemic is contained, governments are still likely to have to play an active role in an effort to stimulate their economies. Together with the measures taken during the crisis, the choice of post-crisis interventions will shape countries' futures for many years to come.
5. **Addressing structural problems of the economy could help Turkey to reposition in the new normal.** Turkey has a diversified and sophisticated economy which is well integrated into global production networks and located close to many advanced economies. However, the economy is hindered by certain structural problems, such as low productivity levels, the low share of high-tech sectors in both production and exports, persistent domestic savings-investment gap, and reliance on external financial resources. A holistic, consistent and persistent approach to these closely intertwined structural challenges is likely to unleash the potential of the economy.
6. **Post-crisis fiscal interventions can be oriented towards prioritizing decarbonization, digitalization and the technological enhancement of industries as well as gender-equitable and job-rich growth.** The Covid-19 crisis has demonstrated the weakness of the world economy against natural disasters making a strong case for the need for decarbonization. The energy sector needs to be transformed and decarbonization of industries hastened for more resilient economies. Meanwhile, digitalization and technological enhancements can strengthen the capacity of economic sectors to adapt to a changing business environment as well as increasing value-added. Gender-equitable and job-rich growth is crucial in addressing poverty, inequality and the root causes of economic crises (See also Pillars 1, 2, 3 and 5 for issues of environmental sustainability, gender equality, decent work, social cohesion and protection of vulnerable groups, among others).
7. **A medium-term exit strategy incorporating both a macroeconomic and developmental response needs could play a vital role in guiding all economic agents towards common aspirations.** A medium-term exit strategy developed through a consultative approach could provide the society with elements of a new social contract and define common development aspirations. An inclusive, fair, green recovery in line with the spirit of the Sustainable Development Goals, supported by relevant fiscal tools, could offer the ground for common aspirations of the society (See also Pillars 1, 2, 3 and 5).
8. **Sharing the costs of developmental interventions fairly could be an important element of a new social contract.** Even though countries can raise funds externally for a certain period of time, a resilient and fair tax structure is the ultimate source of financing for development. Tax systems can also play an important redistributive role that reduces income inequality and other inequalities that undermine long-term development. Options including wealth taxes, which have the advantage of being progressive and non-distortionary, can be scrutinized as possible sources of financing for new interventions.
9. **Coordination and communication of macroeconomic and development policies will have a critical role.** Coordinating macroeconomic and development policies for a better recovery from the the Covid-19 crisis will require the collective efforts of many public entities in each country as well

¹⁷¹ Initial economic response package was expanded considerably throughout the year.

¹⁷² UNSG Report, SHARED RESPONSIBILITY, GLOBAL SOLIDARITY: Responding to the socio-economic impacts of COVID-19, March 2020, <https://unsdg.un.org/sites/default/files/2020-03/SG-Report-Socio-Economic-Impact-of-Covid19.pdf>

as strong international coordination and advocacy to ensure that pathways for better recovery are not undermined by competition between countries which might lead to a downward spiral for all.

4.4. Multilateral Collaboration and Covid-19

The Covid-19 pandemic has been a strong reminder of global interconnectedness and common vulnerabilities, demanding for a coordinated, transparent, robust and inclusive global response and concerted global action based on solidarity. According to 2020 Financing for Sustainable Development Report¹⁷³; the immediate focus in response to Covid-19 should be a combination of both economic and system-wise measures. Rapid response measures should be coordinated at the global level to ensure maximum impact and to maintain economic and financial stability, promote trade and stimulate growth at the global level.

International organisations have recognized the need for international solidarity. While developed countries and some upper-middle income countries have been able to implement a wide range of fiscal and healthcare policies and support for households and enterprises, many developing and least developed countries have less fiscal space, and multilateral collaboration is vital to protect hard won progress. Key global and regional actors such as the OECD, G20 and EU have declared their commitment and global support. Similarly, the international financial institutions (IFIs) and multilateral development banks (MDBs) have launched and subsequently scaled up their own Covid-19 response programmes and schemes. A summary table of the scope of the support provided by MDBs and IFIs in response to the Covid-19 crisis along with budget allocations is provided in Annex 3¹⁷⁴.

At the same time, it is important that individual countries share their experiences. Countries have to design their own pathways in mitigating the health and socio-economic impacts of the crisis. The lessons they have learned and solutions they have found are important for others. Beyond traditional financial development assistance channeled to the developing countries, both developed and developing countries can share their knowledge, skills, expertise, networks and partnerships through South-South and Triangular Cooperation.

In this context, Turkey is in a position to export knowledge and expertise to other developing countries, especially given its evolving role as a key player in international development cooperation and the experience and know-how generated through its well-structured institutions and networks. Examples could include:

1. taking part in the **Technology Access Partnership** of the United Nations, which aims to establish a global platform to support local production and technology transfer for health technologies required for the Covid-19 response,
2. exploring joint capacity building opportunities to transfer know-how on manufacturing **personal protection equipment (PPE)** to the Least Developed Countries and Developing Countries through South-South cooperation with the aim of meeting the unmet demand for PPE,
3. facilitating exchanges of experience and know-how on effective **health crisis management** and on ongoing clinical investigations and health-related response actions, and sharing lessons learned during the management of the Covid-19 crisis with other countries in its region and beyond.

173 United Nations, Inter-agency Task Force on Financing for Development, Financing for Sustainable Development Report 2020. (New York: United Nations, 2020), available from: <https://developmentfinance.un.org/fsdr2020>.

174 As of 22 May 2020







Photo: Yaser Derviş / UNFPA Turkey



Pillar 5. Social Cohesion and Community Resilience

Strengthening social cohesion between citizens and the state, as well as within and across social groups, is central to achieving SDG 16 (Peace, Justice and Strong Institutions) and to promote and sustain peace within and between communities and societies. The Covid-19 pandemic has encouraged and obliged people to **communicate and cooperate** with one another and the authorities towards common aims. Indeed, it has led to widespread social expressions of **solidarity and support across different groups within society**, regardless of socio-economic status and background. At the same time, it has laid bare structural inequalities and vulnerabilities within society and put **strains on social bonds** through its economic and psychological impacts and through physical separation. As time passes, demonstrations of social solidarity could give way to increased tensions and conflicts and reinforce the social exclusion of disadvantaged groups.

The following pages consider the effects which Covid-19 has had on some specific aspects of social cohesion and community resilience in Turkey – namely, **public service delivery and governance at local level, human rights** and community dynamics, and the situation of some **specific population groups** facing vulnerabilities. This is followed by an assessment of the situation of **refugees and migrants**, a group also affected by the pandemic. Finally, some observations are included on how to **share responsibility for preparedness and resilience to crises and disasters**.

5.1. Public Service Delivery and Governance at local levels

Municipal services have continued to operate throughout the Covid-19 crisis. Like other public institutions, municipalities have also responded actively to the crisis by taking a variety of additional decisions and precautions such as:

- Disinfecting **public spaces**, including public transport vehicles, stations, government offices and small private businesses, and reorganizing them to ensure social distancing;
- Providing **free public transport** to health employees and assisting them with accommodation, and **waiving water bills** for those whose livelihoods were affected due to Covid-19 measures and workplace closures,
- Extending **their social assistance** schemes – for example by extending durations, enlarging beneficiary coverage, and providing free meals for the disadvantaged, as well as helping with the needs of citizens and refugees over 65 years old who were under lockdown;
- Introducing **innovative forms of social assistance** with the help of civil society – e.g.: distributing food hampers purchased by citizens for the needy; enabling philanthropists to pay the utility bills of persons (who remain anonymous) who have reported being in financial difficulties, and calling on citizens to close poverty-stricken citizens' arrears to grocery shops.
- Supporting **small businesses** – for example, by paying off their debts to the market, and procuring goods and services from them (procuring goods from public market traders, procuring transport services, contracting tailors to produce protective equipment – and donating seedlings, compost and other agricultural materials to **farmers**).
- Developing **digital content** for the arts, culture, and entertainment and supporting education, and **raising awareness** about the pandemic.

Some measures first taken by individual municipalities in the early days of the outbreak were later **scaled up by government circulars**, such as free public transport for health employees, and deferring rents for municipal properties.

The **Union of Municipalities of Turkey** (UMT) has facilitated the exchange of know-how between municipalities by disseminating news on municipal good practices regarding Covid-19 and publishing

links to international good practices. It has also organized a series of general and peer-to-peer teleconferences for sector managers in municipalities.

Municipalities have actively engaged in the response to the pandemic, especially in the collection of cash donations for distribution to households and individuals suffering due to shutdowns and the distribution of masks (Wearing masks in public spaces has increasingly become compulsory).

One of the municipal services most affected by the crisis has been public transport (See Pillar 3 for waste management and water issues). During the initial containment measures, passenger capacity dropped to 20-25% and transportation receipts plunged by 80%. Public transport staff are among the groups most at risk of being exposed to virus. Social distancing has been difficult/impossible to implement in public transport. Air-conditioning systems on public transport vehicles have been a hygiene concern. Pre-payment systems and temperature-taking and quick response coding of passengers before boarding are presently under consideration in Istanbul.

With the lifting of containment measures and the “return to work”, public transport companies are faced with further challenges such as crowd control, and regulating mask wearing and hand hygiene. Pricing policies may be used to encourage citizens to use services at different time slots during the day to avoid problems at rush hours.

Pressures on municipal finances have increased greatly due to Covid-19. Transfers of revenues from central government have seen significant falls¹⁷⁵. The municipalities’ own revenues have declined in parallel with the economic contraction. In the months ahead, the continued decline in economic activity coupled with tax deferrals could cause municipal income to decline substantially. As a result, municipalities may be unable (a) to maintain their responses to the Covid-19 crisis, (b) to maintain other social services such as aid to migrants and refugees under temporary protection, and (c) to maintain physical investment spending necessary to avoid serious maintenance problems and costs in the medium term. Large deficits may cause municipalities to resort to borrowing.

The central government has already initiated some measures to relieve the burden on municipalities, such as suspending deductions made from the municipalities’ shares of national tax revenue due to their overdue tax liabilities and postponing new tax liabilities falling due. In addition:

- Municipalities will need to review their existing **spending plans** and rationalize non-essential spending.
- More targeted **financial assistance** packages financed through the central government budget will also be needed.
- The **dialogue** between central government and the municipalities needs to develop a constant dialogue for constructive cooperation in response to the crisis. The UMT can play a mediating role in this regard.

5.2. Human Rights and Community Dynamics

States need to respond to the Covid-19 pandemic effectively, whilst ensuring that the measures they take remain proportionate and do not undermine human rights, democracy and the rule of law. Key protective measures required to fight the virus, such as confinement, inevitably infringe rights and freedoms that are an integral and necessary part of a democratic society governed by the rule of law.

5.2.1. Right to Liberty and Security of Person/Right to Life, Health and Safety of Persons Deprived of Liberty/Judiciary/Access to Justice

Numerous obligations and bans have been imposed by the Turkish government to slow the spread of the Covid-19 virus outbreak, including weekend lockdowns in 31 provinces¹⁷⁶, a lockdown for persons aged over

175 Ministry of treasury and finance municipal budget statistics - <https://en.hmb.gov.tr/local-government>

176 Circular of the MoI on lockdown at weekends, <https://www.icisleri.gov.tr/24-ilde-852020-saat-2400-ile-1052020-saat-2400-arasin-da-uygulanacak-olan-sokaga-cikma-kisitlamasi> (accessed on 06 May 2020). The number of the provinces was reduced in May.



65 and with chronic diseases¹⁷⁷, and a lockdown for persons under 20¹⁷⁸. As of 10 June, persons above 65 and over were allowed to go out between 10 a.m. and 8 p.m. every day, with restrictions for those under 18 completely lifted on condition that they are accompanied by their parents. Regular weekend lockdowns have ended too, although partial lockdowns were announced on the dates of national high school and university entrance examinations in late June.

The Government has adopted the measures on the basis of Articles 27 and 72 of the Public Sanitation Law No.1593¹⁷⁹ (*Genel Hifzısıhha Kanunu*) and Article 11/c of the Provincial Administration Law No. 5442¹⁸⁰ (*İl İdaresi Kanunu*). While the need for serious measures to combat the pandemic has been widely acknowledged, the use of powers based on these pieces of legislation has been criticized for not engaging the Grand National Assembly of Turkey (GNAT, the national parliament) and on the grounds that state-of-emergency powers are being used through the issue of presidential decrees and ministerial circulars¹⁸¹.

It has also been suggested that the GNAT could have been asked to amend the General Sanitation Law No.1593 so as to enable the government to take urgent action, including the imposition of lockdowns, for health reasons without declaring a state of emergency.

5.2.1.1. Right to Life of Persons Deprived of Liberty

Large numbers of prisoners have been released to reduce overcrowding in prisons, but not all prisoners have benefited. The state has a positive obligation to protect the health of persons living in closed institutions such as prisons and residential institutions for children and the elderly. In April, the Grand National Assembly of Turkey amended the Law on Execution of Penalties and Security Measures and Some Other Laws to ensure the immediate release of at least 90,000 prison inmates – either temporarily or permanently¹⁸².

5.2.1.2. Safety and Right to Health of Prisoners

Temporary restrictions have been imposed on movement of prison staff and on prison visits. As part of the Covid-19 measures, the movement of prison staff has been limited, as they are not allowed to leave the prisons. Visits to prisons were suspended in March and this was later extended until 15 May¹⁸³. Another measure was to allow visits by relatives by decision of the Public Prosecutor in mandatory cases and lawyers in mandatory cases were allowed to conduct visits with wearing masks and gloves. The rights of convicts and detainees in penitentiary institutions and detention houses to talk with the relatives by phone once a week was doubled. It was made clear that open and closed (behind-glass) visits to detainees and convicts would be resumed without any loss of entitlement in the future. As of 1 June, closed visits to prisons have been resumed and inmates are allowed to receive one person at a time; however, open visits are still not allowed.

Despite precautions, there are reports of Covid-19 outbreaks in prisons. All courthouses, ministry buildings and penal institutions are constantly disinfected, and personnel are being trained on the proper guidelines for disinfection. However, there are reports that prisoners are still unable to practice social distancing due to overcrowding, and lack of hygienic products and face masks, in addition to the poor nutrition¹⁸⁴.

177 Circular of MoI on lockdown of persons over 65 and with chronic diseases, <https://www.icisleri.gov.tr/65-yas-ve-ustu-ile-kronik-rahatsızlıgı-olanlara-sokaga-cikma-yasagi-genelgesi> (accessed on 05 May 2020)

178 Circular of MoI on lockdown of persons under 20, <https://www.icisleri.gov.tr/sokaga-cikma-yasagi-bulunan-18---20-yas-arasindaki-genclerle-ilgili-istisnalar> (accessed on 05 May 2020).

179 Umumi Hifzısıhha Kanunu, available at <https://www.mevzuat.gov.tr/MevzuatMetin/1.3.1593.pdf> (accessed 10 May 2020).

180 İl İdaresi Kanunu, available at <https://www.mevzuat.gov.tr/MevzuatMetin/1.3.1593.pdf> (accessed on 10 May 2020).

181 As of 15 April, the parliament has gone into recess for six weeks as part efforts to slow the spread of the coronavirus. The recess comes despite the objection of the main opposition CHP and HDP, which demand greater scrutiny over how the Covid-19 crisis is being handled. It is scheduled to be reopened on 2 June 2020.

182 The Law Execution of the Sentences and Security and Some Other Laws, <https://www.resmigazete.gov.tr/eskil-er/2020/04/20200415-15.pdf> (accessed on 05 May 2020)

183 MoJ Decision on Extension of the Covid 19 Measures in Prisons <http://www.basin.adalet.gov.tr/Etkinlik/ceza-infaz-kurumlarinda-koronavirus-tedbirleri-15-mayisa-kadar-uzatildi> (accessed on 04 May 2020)

184 CISST Report on Covid19 related complaints from Prisons, <http://cisst.org.tr/raporlar/hapishanelerden-gelen-koronavirus-covid-19-kaynakli-sikayetler-15-28-nisan/> (accessed on 10 May 2020).

According to official figures, the number of prisoners or convicts who have been diagnosed with Covid-19 and recovered in Penal Execution Institutions is 374. 6 convicts/prisoners who had chronic disease died due to the effect of corona virus. The number of active positive cases is 72 and Ministry of Justice (MoJ) noted that all of them are in good health and there is no intensive care or intubated patient¹⁸⁵. Considering the lack of protective products and the impossibility of maintaining social distance, there is fear of Covid-19 spreading in the prisons and rights organizations, unions and professional organizations have urged the government to take measures immediately^{186,187}.

As stated in the Interim Guidance on Covid-19: Focus on Persons Deprived of Their Liberty prepared by the WHO and OHCHR¹⁸⁸, all health tests and measurements should be carried out carefully and reasonably without violating prisoners' basic rights. While it is legitimate and reasonable to suspend non-essential activities, the fundamental rights of detained persons during the pandemic must be fully respected. Further, any restrictions on contact with the outside world, including visits, should be compensated for by increased access to alternative means of communication (such as telephone or Voice-over Internet-Protocol communication) without any discrimination. Special attention will need to be paid to the specific needs of detained persons with particular regard to vulnerable groups and/or at-risk groups, such as older persons and persons with pre-existing medical conditions.

5.2.1.3. Monitoring of prisons and detention centres

Monitoring of prison conditions has been affected. The Human Rights and Equality Institution of Turkey has been designated Turkey's National Preventive Mechanism (NPM). Due to the Covid-19 measures, the institution has operated at limited capacity, as most of the staff have been on administrative leave or working from home. As of 1 June, however, the institution resumed normal regular working hours. NPM visits need to continue during the pandemic to ensure guaranteed access for monitoring bodies to all places of detention, including places where persons are kept in quarantine. All monitoring bodies should, however, take every precaution to observe the 'do no harm' principle, in particular when dealing with older persons and persons with pre-existing medical conditions.

5.2.1.4. Access to Justice/the Judiciary

Measures taken to prevent Covid-19 infections and deaths have delayed judicial work. As preventive actions, court staff have been working in shifts and lawyers have been warned not to visit courthouses unless there is an urgent matter. In addition, Law No. 7226, containing provisions on the fight against Covid-19, which entered into force on 26 March 2020¹⁸⁹, extended by six weeks (13 March 2020 to 30 April 2020) all time frames regarding the emergence, use or termination of a right, including the time periods allowed for litigation, the initiation of enforcement proceedings, petitions, complaints, appeals, notices, notifications and submissions, timeout periods, deprivation times, mandatory administrative application periods, Administrative Jurisdiction, the periods determined for the parties in the Procedural Law, the Criminal Procedure Code and the Civil Procedures Law and other laws including procedural provisions, periods determined by judges in this context, and the time limits applicable in mediation and reconciliation institutions.

The law also stipulated that, "In the event of an outbreak, the President may extend the duration of the stay once, for no more than six months, and narrow the scope for this period." In line with this provision, Presidential Decision No 2480 extended the deadlines for filing a lawsuit, petitions, complaints, objections, warnings, down-time and all the terms related to the emergence, use or termination of a right until 15 June 2020¹⁹⁰.

Instructions on restraining orders may have increased risks for women. In a circular of 30 March, the Council of Judges and Prosecutors (HSK) gave instructions that "restraining orders to be issued under

185 MoJ statement on June 17, 2020 <https://cte.adalet.gov.tr/Home/SayfaDetay/ceza-infaz-kurumlarinda-kovid-19-pandemi-sure-cine-dair-kamuoyu-aciklamasi17062020045113>

186 Statement of 9 Organisations on urgent measures for corona in prisons, <https://www.ihd.org.tr/covid-19-salgin-i-ve-hapishanele-rde-acilen-alinmasi-gereken-onlemler/> (accessed on 05 May 2020).

187 Statement of HRA and HRF, <https://www.ihd.org.tr/covid-19-un-cezaevlerinde-onlenmesi-icin-acil-eylem-gerekliyor/>

188 <https://interagencystandingcommittee.org/other/iasc-interim-guidance-covid-19-focus-persons-deprived-their-liberty-developed-ohchr-and-who>

189 <https://www.resmigazete.gov.tr/eskiler/2020/03/20200326M1-1.htm>

190 <https://www.resmigazete.gov.tr/eskiler/2020/04/20200430-1.pdf>



Law No. 6284¹⁹¹ should not put the health of the perpetrator at risk of coronavirus.” These instructions run the risk of impeding barring orders from being imposed on perpetrators of violence and of preventing women from being placed in shelters.

Teleconferencing may help the judiciary to resume and continue its services safely and effectively.

An announcement of 16 March 2020 recommended that for mediation processes that have already been initiated and are pending, mediation meetings should be held by teleconference, whereas for new mediation applications, meeting dates should be set for the last day of the legislative time limit and the meetings should again be held by teleconference. In March 2020, a proposal was submitted to the GNAT to amend the Code of Civil Procedure. It is proposed that in civil cases, the parties and their lawyers, as well as expert witnesses, should be able to attend hearings through audio visual facilities without being physically present in the courthouses. This proposal was not openly linked to the Covid-19 epidemic, but proposals such as these may help mitigate the adverse effects of the virus on the judicial system and reduce delays in litigation.

5.2.2. Right to Freedom of movement/ Freedom of Expression/ Media/Right to Information/Assembly/Association/Civil Society Space/Right to Religion/Right to Privacy

5.2.2.1. Freedom of Movement

Travel restrictions have been imposed and lifted through ministerial circulars. Besides the lockdowns referred to above, restrictions on movement imposed in response to the Covid-19 epidemic in Turkey have included some local quarantine measures and restrictions on intercity travel, So as to prevent the transmission of Covid-19 between cities, travel between 31 provinces was restricted by the ministerial circulars, with essential travel subject to the permission of the governors. As of 1 June, travel restrictions between cities have in general been removed. Children are allowed to travel with their parents and citizens above 65 allowed to travel to their hometown or resorts with the permission of the authorities.

5.2.2.2. Freedom of Media/Expression /Misinformation

Covid-19 has put the roles of the media and the right of freedom of expression under scrutiny.

The Covid-19 pandemic has been accompanied by the spread of misinformation and conspiracy theories about the origin, prevention, diagnosis, and treatment of the disease, and the scale of the pandemic, via social and mass media. The “infodemic” of incorrect information about the virus poses risks to national and global health and the cohesion and social fabric of communities. At the same time, it has to be acknowledged that preventing the spread of the virus requires the media to inform the public without fear and intimidation. The media also has the role of holding governments accountable, while in the absence of transparency and freedom of the media, the scale of the disease may remain unnoticed and the threat to public health may grow. With respect to social media, while people should enjoy freedom of expression, it is important that the state take measures against the use of language that incites stigma and discrimination against certain groups.

The UN Special Rapporteur on Freedom of Expression has declared that governments should provide truthful information in accessible formats to all about the nature of the threat posed by the coronavirus. Journalists should be protected and able to work and question safely in order to disseminate information in a healthy way¹⁹². In addition, the importance of awareness raising about the risks of misinformation around Covid-19 should be taken into account, and the public should be encouraged to double check information with trusted sources such as WHO and ministries of Health. In Turkey, the issues concerning media watchdog and social media use should be taken into consideration in line with the above stated international standards.

191 Law No. 6284 allows judges to rule for interlocutory injunction in case of domestic violation as a mitigation measure, which includes protective custody, removal from the house, no contact order etc.

192 Statement of Mr David Kaye, Special Rapporteur on the promotion and protection of the right to freedom of opinion and expression; Mr Harlem Désir, OSCE Representative on Freedom of the Media and Mr Edison Lanza, IACHR Special Rapporteur for Freedom of Expression <https://www.ohchr.org/en/NewsEvents/Pages/DisplayNews.aspx?NewsID=25729&LangID=E> (accessed on 10 May 2020)

5.2.2.3. Right to Privacy/Protection of the Personal Data

A mobile application has been used to check compliance with self-isolation measures. Covid-19 has generated a global rush to find tools and resources to guide and enable government responses. The most pressing need has been for data, including personal data, and readily available instruments to facilitate authorities to rapidly identify cases and trace contacts so as to control the spread of the virus, and also manage the information stream to provide systematic and considered response. In order to combat the pandemic effectively, states have been considering or using methods which may be contrary to the right to privacy and the protection of personal data. In Turkey, the IDs of Covid-19 patients are not revealed in order to protect the right to privacy. A mobile App “Hayat Eve Sığar” has been introduced to check whether persons suspected of being corona-positive are complying with confinement rules. All data is collected by the MoH through a centralized system. The system permits share of data between different centralized databases, which allows for collecting, processing and sharing data between different authorities. The use of the mobile application is mandatory for individuals that have tested positive for COVID-19 and those in close contact with the verified cases, while it is voluntary for others. Practices which may violate the freedom of communication and the right to privacy need to be regulated and monitored closely to prevent abuse and the restriction of fundamental rights and freedoms.

In compliance with the international standards enshrined in the UN Convention on Civil on Political Rights, UN Resolutions, all citizens have rights to be informed on usages of their data for Covid-19 response by government and private sector while developing/implementing technologies. Such applications should be developed based on the human rights based approach; participatory approach; consent of the user should be received; anonymization/pseudonymization of personal data should be respected; should be on temporary nature of digital ‘tracking’ and surveillance measures; should consider gender dimension and protect groups facing vulnerabilities; strict guidelines should be provided on collection, use and duration of storage of data; legal redress should be provided¹⁹³.

5.2.2.4. Right to Information/Transparency

Case and mortality data has been released regularly, but not at a disaggregated level. The World Health Organisation (WHO) official praised Turkey’s efforts to combat the coronavirus pandemic and noted that Turkey is running this process transparently by sharing accurate case and mortality data electronically¹⁹⁴. While some argue that the crisis has been managed transparently and public trust has been ensured thanks to the presidential system and the Health Minister’s approach to communications¹⁹⁵, some state that the data shared has been limited¹⁹⁶. With a few exceptions, the figures released by the Ministry have not been at a disaggregated level. During the epidemic, healthy internet access is also important in addition to strengthening the technical infrastructure.

Key advisory boards have operated with limited transparency. An Advisory Scientific Board was established on 10 January 2020 under the Ministry of Health. It consists of 38 medical doctors, 14 of them women, specialized in infectious diseases, microbiology, virology, internal diseases, intensive care and chest diseases. Public health specialists were invited to the Board in April. As the pandemic is not purely a health issue, a second Advisory Science Board has been established to examine the psychological, sociological, statistical and sociology-of-religion impacts of the pandemic. The President also announced the establishment of Provincial Pandemic Boards to take specific measures for each province. It is recommended that the advisory decisions and recommendations of the Boards should be made public to ensure transparency.

193 Guidance to UNDP Country Offices on the privacy, data protection and broader human rights dimensions of using digital technologies to combat Covid-19, <https://unstats.un.org/legal-identity-agenda/documents/unlia-guidance-to-undpOffices.pdf>, (accessed on 30 June 2020).

194 <https://twitter.com/DrPavelUrsu/status/1248301843605831681> (accessed on 10 May 2020)

195 Transparency and communication key factors in crisis management, <https://www.setav.org/en/transparency-and-communication-key-factors-in-crisis-management/> (accessed on 10 May 2020).

196 Turkish Medical Union noted that number of cases for each province are not provided and requested more transparency. Moreover, it is reported that comparing the number of deaths of March and April 2020 with previous years, number of deaths due to corona virus are more than the numbers recorded. These reports have been denied by the Ministry of Health (MoH).



5.2.2.5. Right to freedom of assembly/association/civil society space/ volunteerism

Measures taken to prevent the spread of Covid-19 have affected civil society organisations and gatherings. The Ministry of the Interior cancelled all annual meetings and other activities of associations until 1 July. Through a presidential decision, it was announced that all kinds of scientific, cultural, and artistic meetings or activities were being postponed until the end of April¹⁹⁷. The General Directorate of Foundations cancelled all annual meetings of foundations until 1 July¹⁹⁸.

The pandemic is expected to have a negative economic impact on the resources of civil society and to reduce donations¹⁹⁹. CSOs have started to talk more about sharing capacities and logistics so as to reduce the negative impact of the outbreak. It is suggested that some of the support provided to different sectors due to the economic crisis should also be provided to CSOs²⁰⁰. The CSOs play crucial role during crises especially in leaving no-one behind, and services they provide – such as food banks, shelters for victims of domestic violence, knowledge and awareness of health issues, support for migrants and refugees, and solidarity with prisoners and their relatives – are more important than ever.

Civil society participation is important for the response to Covid-19. CSOs and volunteers responding to Covid-19 have contributed to prevention and mitigation. However, informal volunteers aged over 65 and under 20 were unable to continue their volunteering work for many weeks due to the lockdown. This has also affected civil society organizations' business plans. Ensuring the involvement of civil society organizations working in the field in the planning of the measures to be taken against Covid-19 – for example, for healthcare workers, persons over 65, persons with disabilities, and prisoners and detainees – would make it possible to address the issue in a holistic way.

5.2.2.6. Right to Freedom of Thought, Conscience and Religion

Collective prayers were banned to prevent the spread of Covid-19. On 16 March, the Directorate of Religious Affairs announced a nationwide ban on collective prayers in mosques, including Friday prayers, due to the pandemic²⁰¹. Some aspects of funeral ceremonies have been restricted due to the pandemic. Later the government faced criticism for reopening shopping malls but not mosques. The impositions of limitations on freedom of thought, religion and conscience is subject to certain conditions under international law. The principles of equality and proportionality should be followed at every stage, and the duration of the limitations should be clear.

5.2.2.7. Cultural Rights

Cultural and sporting venues and events have been affected by anti-virus measures. On 15 March, the Ministry of Culture and Tourism announced that between 16 and 30 March all libraries in Turkey would be closed²⁰². The football, volleyball, basketball and handball leagues were suspended. Parks and recreation centres were also closed to the public and outdoor activities like jogging and fishing were banned. The state must continue to provide opportunities for cultural life to all citizens even during a pandemic. Television and radio broadcasts and the Internet can be used to realize the right to participation in cultural life. The opening of some museums and libraries free of charge to the public via the Internet, and the arrangement of free online opera, ballet and symphony orchestra performances have been good examples. Bans on recreational sites such as parks, playgrounds and sports facilities should be proportionate.

197 Official Gazette, <https://www.resmigazete.gov.tr/eskiler/2020/03/20200320.pdf> (accessed on 8 May 2020).

198 Circular of the Ministry of Tourism and Culture, <https://www.tusev.org.tr/ustfiles/images/E.48829.pdf> (accessed on 9 May 2020).

199 Sivil Toplumun Korona Krizindeki Rolü Online Çalıştayı, <https://www.sivilsayfalar.org/2020/04/08/sivil-toplumun-korona-krizindeki-rolu-online-calistayda-degerlendirildi/> (accessed on 10 May 2020)

200 Situation of the CSOs during Corona outbreak, <https://www.tusev.org.tr/tr/duyurular/covid-19a-yonelik-alinan-tedbirler-eksinde-turkiyede-sivil-toplum-kuruluslarinin-durumu#.XrZlMJ77RrQ> (accessed on 08 May 2020).

201 Measures by the Diyanet, <https://diyanet.gov.tr/tr-TR/Kurumsal/Detay/29392/diyanet-isleri-baskani-erbas-koronaviruse-ilgili-tedbirleri-acikladi> (accessed on 08 May 2020).

202 Coronavirus: Turkey to shut public libraries, www.aa.com.tr (accessed on 15 March 2020).

5.3. Specific Groups Facing Vulnerabilities

While the pandemic affects everyone across the globe, it has differentiated impacts on different groups of the population based on their age, sex and gender as well as their race, ethnicity, sexual orientation, disability and migrant/refugee status. This increases the need for solidarity with the more vulnerable groups to prevent exclusion, discrimination and/or increased inequalities contrary to SDG10 (Reduced Inequalities). Various vulnerable groups have been referred to throughout this assessment while gender issues and children’s issues are also treated specifically under Pillar 2, and the situation of refugees is assessed separately below.

The Covid-19 pandemic also has specific implications for people in rural areas, particularly those in small-scale agricultural production, both because some 80% of the world’s poorest people live in these areas (SDG1: End poverty), and because of the potential disruption to production chains and agricultural markets. The World Bank has estimated that 71 million additional people could fall into extreme poverty this year as a result of the virus under the baseline scenario of its Global Economic Prospects report, suggesting that global poverty could increase for the first time since 1998, and effectively wiping out progress made since 2017²⁰³.

Poverty in Turkey is higher in rural areas. The proportion of the population living below the national poverty threshold declined from 23.8% to 21.2% between 2010 and 2018, according the Turkish Statistical Institute (Turkstat). The World Bank estimated that the poverty rate at USD5.50 a day was 9.2% in 2018 and that there had been a consistent decline in poverty rates²⁰⁴. However, pockets of poverty remain, particularly in the uplands, and for seasonal migratory agricultural workers – some of the most difficult people to reach with social services and support due to their geographical segregation. The rural population is 24.8% of the total and continues to decline by 2018²⁰⁵. The rural population is also aging: Farmer Registry System data refers to an average age of 55 for the 2.1 million farmers registered²⁰⁶.

The elderly and chronically ill in Turkey, as well as children, were confined to their homes during the Covid-19 crisis (See Pillar 2 for the impact of Covid-19 on Children). According to Turkstat, the population of persons aged over 65 was around 7.5 million in 2019, representing 9.1% of the total population. Of these, 44.2% were men and 55.8% women. From March 22 onwards, a Ministry of the Interior circular banned people over 65 and those suffering from chronic illnesses from leaving their homes as part of Turkey’s efforts to reduce the health impact of the virus, which is particularly life-threatening for elderly people. This blanket ban affected all the elderly as a single group regardless of their health, needs, employment status or place of residence²⁰⁷. Some exceptions were later made and the ban was repealed, except for a night-time curfew, in mid-June. Children were confined to their homes for a similar period to adults. In emergencies, age-appropriate information should be provided to children to help them take steps to protect themselves.

The elderly and chronically ill were affected in other ways too. Some were unable to receive regular **necessary treatment for chronic conditions** due to the lockdown or the concentration of hospitals and health resources on the pandemic. A “**no-visitors**” policy was followed by homes for the elderly. Many municipalities also temporarily revoked elderly citizens’ free **local transport passes**. After the lockdown decision, “**Vefa**” **Social Support Groups** were created within provincial and district governorates to support individuals over 65 years of age without relatives to help them meet their needs. However, these measures were not comprehensive.

Elderly citizens have been the main targets of discrimination. Globally, there have been documented cases of stigma, discrimination and xenophobic attacks related to Covid-19. Some sources have insistently used the term “**Chinese Virus**” for Covid-19. Asians and ethnic or other groups thought likely to be transmitting the virus locally have been targeted. In Turkey, this risk is low, though not to be neglected. On the other hand, the emphasis on “**the elderly**” in the fight against coronavirus in Turkey led to the

203 <http://pubdocs.worldbank.org/en/461601591649316722/Projected-poverty-impacts-of-COVID-19.pdf>

204 World Bank Country Page Turkey <http://data.worldbank.org/country/turkey>

205 World Bank Country Page Turkey <http://data.worldbank.org/country/turkey>

206 http://zmo.org.tr/genel/bizden_detay.php?kod=32785&tipi=24&sube=0

207 Elderly miss their liberties. <https://www.gazeteduvar.com.tr/gundem/2020/04/27/gulustu-salur-yasli-lar-en-cok-bagimsizliklari-ni-ozluyor/> (accessed on 08 May 2020).



social perception that the elderly are “dangerous” rather than at risk. Elderly people have been exposed to disrespectful discourses and even bullying in social media and everyday life²⁰⁸.

The pandemic has posed significant risks for persons with disabilities, especially those who depend on someone else or are cared for in institutions. Education, health and social services may have been interrupted. On the other hand, the Ministry of Health’s widely-disseminated “fourteen measures to prevent the spread of coronavirus” was made available in sign language in all provinces. Persons with disabilities working in public institutions were entitled to take administrative leave.

In view of the issues and experiences described above:

1. Investments in **sustainable agricultural and rural development** can mitigate the impact of severe events, increase rural prosperity, ensure more sustainable food systems and food security, and create greater resilience in communities. Economic growth in agriculture is two to three times more effective at reducing poverty and food insecurity than growth in other sectors.
2. Further, investments in small-scale agriculture can help revive food production and **create jobs** following a crisis and enable rural communities to recover²⁰⁹.
3. Support for farmers (See also Pillar 3) could include **extension services adapted for older farmers** and from support in making use of **online marketing platforms** that enable both individual and collective sales, where users can locate farmers, input dealers, buyers, and warehouses.
4. The **access of persons in rural areas to social protection** is limited by widespread informal employment (See also Pillar 2) but is critical for the resilience of rural communities in emergencies and for the maintenance of food production and supply chains.
5. The **rights and dignity of elderly persons** should be protected²¹⁰. As their numbers grow, conceiving the elderly as active citizens will be important for the economy as well as their own rights.
6. **Connectedness of elderly citizens**, including those in residential care homes and remote areas, needs to be assured.
7. Arrangements need to be made to ensure that the **voices of elderly citizens and children** are heard in public decision-making in emergencies and at other times.
8. States must take all necessary measures to ensure the safety of **persons with disabilities** and ensure that their health and other needs are met even during emergencies.
9. All **public information** such as information about Covid-19 should be accessible and available in multiple languages, including for those with low or no literacy. This should include qualified sign language interpretation for televised announcements, websites that are accessible to people with vision, hearing, learning, and other disabilities; and telephone-based services that have text capabilities for people who are deaf or hard of hearing. Communications should utilize plain language to maximize understanding.

208 Koronavirus Salgınında Yaşlılar Nasıl Hedef Haline Geldi? <https://setav.org/assets/uploads/2020/04/P271.pdf> (accessed on 10 May 2020).

209 IFAD’s Case for Investment, April 2020, <https://www.ifad.org/en/ifad12/>

210 Rights and dignity’ of older people must be respected during COVID-19 and beyond, <https://news.un.org/en/story/2020/05/1063052> (accessed on 08 May 2020). Secretary-General’s Policy Brief: The Impact of COVID-19 on older persons <https://www.un.org/development/desa/ageing/news/2020/05/covid-19-older-persons/> (accessed on 08 May 2020).

5.4. Refugees and migrants

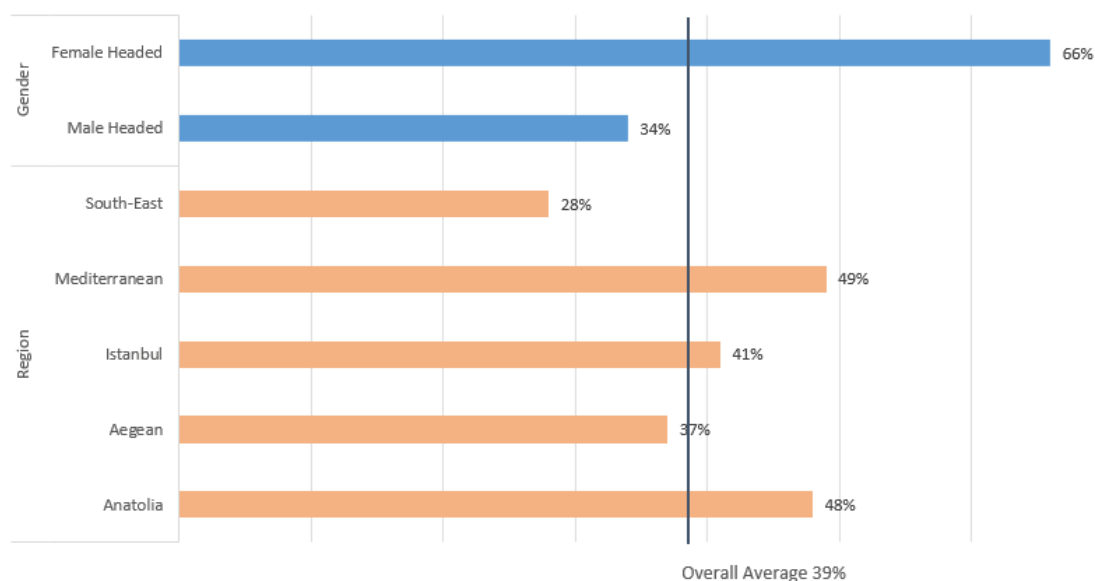
Covid-19 has further increased the importance of ongoing efforts to address the socioeconomic needs of refugees and migrants and include these populations in the recovery from the Covid-19 pandemic. This would continue necessitating that migration and international protection are **integrated coherently across all policy domains** and responded to through a whole-of-government and whole-of-society approach as called for in the 2030 Agenda, Global Compact for Safe, Orderly and Regular Migration (GCM) and Global Compact on Refugees (GCR), and as emphasised in SDG 17 (Partnership for the Goals), SDG 10 (Reduced Inequalities) and SDG 8 (Decent Work and Economic Growth).

Turkey hosts the **largest refugee population in the world**. It is a country of destination, transit and origin and currently hosts over 4 million refugees. Turkey already has **numerous policies in place** under its Eleventh Development Plan for 2019-2023, its Irregular Migration Strategy and National Action Plan, the Law on Foreigners and International Protection, the Harmonisation Strategy and National Action Plan.

5.4.1. Livelihoods and income

Multi-dimensional poverty was widespread among refugees in Turkey even before Covid-19 (SDG1: End Poverty). According to WFP’s Comprehensive Vulnerability Monitoring Exercise (CVME) conducted in February 2020, nearly **two-in-five (39%) refugee households are multi-dimensionally poor** i.e. deprived in one or more of the five dimensions considered (viz.: education, health, food security, income resources, and living conditions) (Figure 5-1). The highest levels were observed in the Mediterranean and Anatolia regions where almost half of the refugee households are multi-dimensionally poor. Among female headed households, two-thirds are multidimensionally poor.

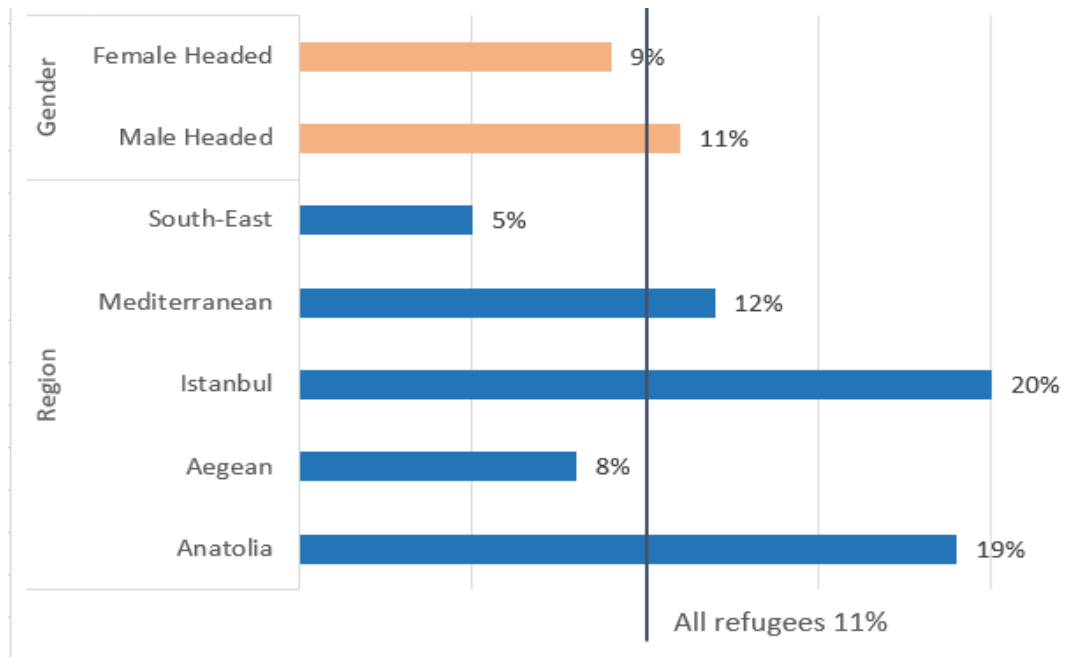
Figure 5-1: Multi-Dimensionally Poor Refugee Households



The CVME showed that 45% of refugees were below the World Bank moderate poverty line (TRY418) and 61% were below the Minimum Expenditure Basket (MEB) threshold of TRY480 on the eve of the Covid-19 outbreak in Turkey. This reflects precarious sources of income and typically low wages for unskilled labour. A combined analysis among all refugees shows that 11% of households had per capita expenditure below the MEB and had **no reliable source of income**, suggesting that they are particularly vulnerable. Not surprisingly, more than half (53%) of refugees reported **being in debt** before the onset of the pandemic up from 49% reported in Q4 2018. Among these, the majority (81%) had borrowed to meet their basic needs such as for food (48%) and rent and utilities (33%). Additionally, it is important to mention that the median debt has increased over time: recorded as 1 000 TRY per household in Q2 2018, 1 271 TRY in Q4 2018, and 1 907 TRY in Q1 2020.



Figure 5-2: Refugee Households below Minimum Expenditure Basket with no reliable income resource



Refugees work mostly for low wages in sectors vulnerable to crises. Refugees with irregular work were earning an average of TRY1,058 per month, while those in regular employment earned an average of TRY1,312 per month in 2019. Unskilled services and agriculture provided the lowest incomes, at TR768 and TRY756 TRY respectively²¹¹. High proportions of working Syrian refugees have been engaged in sectors like construction, tourism and manufacturing – especially textiles and clothing – that were heavily affected by stay-at-home measures and loss of demand after the Covid-19 outbreak. According to the livelihood survey conducted by WFP and the Turkish Red Crescent in 2019, 20% of the refugees in Turkey were working in unskilled services, followed by textiles (19%), construction (12%), and artisanship (10%). Households dependent on unskilled work paid by the day or the hour are most likely to fall into extreme poverty and to become unable to meet their basic needs.

The temporary closure of many businesses (see Pillar 3) has also badly affected refugees. Many Syrians under temporary protection, refugees and international protection applicants had been working informally or without job security (primarily men, as only 11.2% of Syrian women were employed)²¹². This made them particularly vulnerable to dismissal during any economic slowdown. Initial assessments²¹³ indicate a substantial number of Syrian households in Turkey and international protection applicants have one family member who has already lost a job, while the majority of Syrian-run businesses expressed concern over having to shut down in the next few months²¹⁴. Thus, opportunities for refugees to earn any income at all declined considerably, especially given the dearth of new opportunities, especially casual work, and the restrictions on movement during the lockdown period.

211 Turkish Red Crescent and World Food Programme. (2019). Refugees in Turkey: Livelihoods Survey Findings. Ankara, Turkey

212 Syrian Refugees in the Turkish Labour Market, ILO March 2020 available at https://www.ilo.org/ankara/publications/WCMS_738602/lang-en/index.htm

213 IFRC and TRC, Impact of COVID-19 on Refugee Populations benefitting from the Emergency Social Safety Net Programme, Assessment Report, May 2020; early findings of assessments shared by partners in the 3RP Livelihoods Working Group, 15 April 2020. A recent rapid assessment by UNHCR among persons of concern found that 61% of households had lost their jobs as a result of the COVID-19 pandemic; Rapid Migrant Vulnerability Assessment conducted by IOM in cooperation with DGMM in Mid-April 2020 was finalized by early May 2020.

214 Early findings shared by partners in the 3RP Livelihoods Working Group, 15 April 2020

A recent Rapid Migrant Vulnerability Assessment conducted by IOM²¹⁵ in cooperation with the Directorate-General of Migration Management (DGMM) showed that 82% of migrants and refugees had recently lost work due to Covid-19; moreover, the majority (63%) had lost **any hope of finding work** because of the pandemic²¹⁶. Of those who had not been laid off, a vast majority stated that **working conditions had deteriorated**. Substantial numbers reported not having **received their salaries** while working. Similarly, a recent assessment of refugee households undertaken by CONCERN in Sanliurfa showed that at least one family member had lost work in 60% of the households, and that household income had dropped by 50%. As many as 95% stated that they did not have enough income to meet their basic needs²¹⁷. In this sense, later assessments also confirm the initial trends²¹⁸.

The sudden and unexpected loss of livelihood is compounded for most households by a lack of savings, preventing them from covering basic needs, including food, hygiene and sanitary items, including those required to prevent Covid-19 infections. Pending evidence, the already-dire situation of **female headed households** requires particular attention. In the long run, the resulting erosion of purchasing power, without recourse to alternatives, will likely be manifested in the increased adoption of **negative coping strategies** in order to meet basic household needs during this crisis, such as reduced food expenditure. This could include reducing non-essential expenditures, borrowing more money and selling off of valuable items. **Child labour** and **child, early and forced marriages** might also increase in the medium-term as a result of households' negative coping strategies.

Difficulty in accessing services and benefits further exacerbates the vulnerability of the Syrians and other refugees. Due to linguistic, economic and social barriers, Syrians and other refugees were already facing difficulties in accessing livelihoods and support services, public or otherwise, before the outbreak. At a time when the needs are compounded, the ability of Syrians and other refugees to access services has been further constrained due to restricted mobility.

For example, the majority of refugees are unable to benefit from the short-time work allowance, despite being potentially eligible by law²¹⁹. Prior to the pandemic, there had been an increase in the numbers of work permits granted to refugees, indicating that more of them were securing decent working conditions and making progress towards self-reliance. Even so, only a small proportion of refugees and migrants are in formal employment that provides them with social insurance, making them eligible for benefits like the short-time work allowance. Moreover, even the few Syrians and other refugees with formal jobs are unlikely to be able to meet the conditions that apply (e.g.: 450 days of formal employment in the last three years to benefit from the short-time employment allowance, or payment of at least 600 days of unemployment premiums to benefit from unemployment benefits).

Meanwhile, the processing of work permits was interrupted. The Ministry of Family, Labour and Social Services confirmed that it was no longer taking new work permit applications from abroad and closed public relations offices, referring applicants to their call centre (Dial 170). For other foreign workers already present in Turkey, and in particular refugees and migrants, priority has been given to some specific sectors and to extensions of existing work permits, while new applications are on hold²²⁰.

Refugee and migrant entrepreneurs are also severely impacted by the pandemic. According to a survey conducted in cooperation with Business4Goals Platform (See also Pillar 3)²²¹:

215 Rapid Migrant Vulnerability Assessment conducted by IOM in cooperation with DGMM in Mid-April 2020 was finalized by early May 2020. IOM Turkey Migrant Presence Monitoring Unit conducted the work via surveying 26,000 key informants in 25 provinces where nearly 85% of the known migrants and registered refugees live in the country. The assessment covered almost 1 million vulnerable migrants and refugees, consisting mostly of Syrians, Afghans, Iraqis and Pakistanis.

216 Rapid Migrant Vulnerability Assessment conducted by IOM, op. cit.

217 CONCERN, Early findings shared in 3RP Livelihoods Working Group, April 2020.

218 3RP, PWG, Inter-Agency Assessment of the impact of COVID-19 on Refugees, May 2020. Finding: The working status of 83% of the participants changed during the epidemic. 29% of these persons lost their jobs due to closure of the workplace, 21% had to stop working because of COVID-19 measures, 13% were let go by the employer, and 11% were sent on unpaid leave.

219 A total of 132,000 work permits have been granted to Syrians under temporary protection since 2016. MoFLSS DG ILF data, December 2019.

220 MoFLSS DG ILF update shared in 3RP Livelihoods Working Group, April 2020.

221 UNDP, Survey on Impact of COVID-19 on Syrian-owned Enterprises and Needs, April 2020



- 81% of Syrian-owned enterprises reported that **the impact of the Covid-19 crisis on their businesses had been substantial**, and none reported no impact at all. To the same question, 70% of Turkish enterprises of comparable scale reported substantial impact, and 1% no impact.
- The results of the second survey revealed that **Syrian-owned enterprises were hit harder** by the pandemic. In May, 38% of Syrian-owned enterprises fully stopped their operations whereas the rate was 30% for Turkish micro and small enterprises comparable in scale to Syrian ones, and 22% across all Turkish enterprises.
- Almost half of the Syrian-owned enterprises reported they were **not at all prepared for a second wave**, compared to 19% of Turkish micro and small-scale enterprises. Similarly, 41% of Syrian-owned enterprises reported that their working capital was insufficient or would suffice for another month at most if the crisis continued, whereas this percentage was 30% among comparable Turkish enterprises.
- Moreover, 81% of Syrian-owned enterprises said that they were **not aware of the short-time benefit**, whereas 19% stated that they had not applied because they would not fulfil the eligibility criteria.
- **Teleworking is impossible** for the majority of the Syrian-owned enterprises: only 39% have the necessary infrastructure. However, 85% of Syrian-owned enterprises had taken measures to prevent the transmission of Covid-19 in their workplaces. These measures included improving hygiene conditions, canceling domestic trips, and providing disinfectant for workers and customers.
- Overall, **59% of the employees of the Syrian businesses surveyed were at risk of losing their jobs** due to the pandemic at the beginning May, and **59% of the companies were at risk of closing down**.
- A large majority of enterprises called for their **bills, taxes and social security contributions** to be deferred and discounted. The majority also called for **financial support** to small and medium-scale enterprises and the **postponement of repayments** on loans, cheques and commercial debts.
- Enterprises in **Istanbul** were better placed to withstand the crisis than enterprises located in South-eastern Anatolia.
- **Only 55% of Syrian-owned enterprises considered that they had sufficient information** to adjust their business plans in response to the pandemic. Many said that they lacked information – *inter alia* – on Turkish government and international programmes, the support mechanisms and instruments available to increase the capabilities of their companies, grants and low-interest loans available to small enterprises, and the possibility of deferring payments of debts.

All in all, Covid-19 has increased the reliance of Syrian refugees on international assistance.

According to the WFP survey of April, 2020, the primary source of income among the majority (56%) of refugees was unskilled and informal labour such as casual labour, agricultural labour and domestic work, while another 18% were not working prior to the pandemic²²². Currently, approximately 45% of refugees in Turkey receive assistance through the Emergency Social Safety Net programme (ESSN). This vital assistance, like the Conditional Cash Transfers for Education (CCTE), has continued uninterrupted throughout the crisis, even in the absence of face-to-face contact, providing a reliable alternative source of income to vulnerable households²²³. In addition to the regular monthly ESSN cash assistance, a top-up of 1,000 TRY (approximately EUR 133) has been allocated to 301,136 households in two instalments and paid in June and July to help them cope with increasing challenges²²⁴. However, even before Covid-19 the purchasing power of ESSN recipients had been eroded significantly as the transfer value has not increased since June 2017 despite a significant increase in inflation. In this context, the humanitarian assistance provided to date and the potential additional immediate support mobilized through the Covid-19 appeal may not be enough to compensate for the deterioration in the livelihoods of refugees and migrants.

222 WFP, COVID 19 Pandemic in Turkey, Analysis of Vulnerabilities and Potential Impact Among Refugees, April 2020 - https://docs.wfp.org/api/documents/WFP-0000112161/download/?_ga=2.49607270.1118315044.1591089040-1254153530.1591089040

223 3RP Inter-Agency, COVID-19 Response, May 2020

224 This is not an added grant, rather reallocated funds from the existing ESSN budget funded by the EU. ESSN Monthly Report, June 2020. <https://media.ifrc.org/ifrc/document/emergency-social-safety-net-essn-monthly-report-june-2020/>

The livelihoods situation among the Syrians in Turkey has been well understood by the Government. A needs assessment facilitated by the Vice-Presidency of the Facility for Refugees in Turkey (FRIT) Coordination Office stresses that there is a major need for support to refugees and migrants' livelihoods through the Ministry of Family, Labour and Social Services Directorate General for International Labour Force. As priority interventions, the Directorate General has identified financial support to businesses, aid to foreigners who are registered with a workplace but cannot meet the criteria for the short-time work allowance, and the establishment of an incentive mechanism to ensure the sustainability of SMEs²²⁵.

5.4.2. Access to Health

Access to health services has been maintained for refugees throughout the Covid-19 crisis, but with some limitations both in services and in access.

- **All seven Migrant Health Training Centres and 180 Migrant Health Centres** have maintained health service delivery.
- Refugees have had access to **routine essential primary health care services**, but in large cities appointments were limited to emergency cases to reduce the risk of spreading the virus.
- While services related to **NCD prevention and management** that are offered by dietitians and physiotherapists in migrant health training centres have remained available, attendance declined due to movement restrictions, limited public transport and the prioritization of emergency cases.
- For the same reasons, **sexual and reproductive health services, mental health and psychosocial services** that are currently available in 31 migrant health centres have not been fully accessed and utilized despite the stress that Covid-19 is having on individuals and families. However, the **hotlines** established by MoH to offer psychosocial support during Covid-19 do not have language options for refugees and migrants.

According to a variety of surveys²²⁶:

- Refugees also reported reduced use of hospitals and medical facilities due to **fear of Covid-19 infection** on the site, language barriers and the **reduced availability of treatment** of non-urgent illnesses²²⁷. A MUDEM assessment flagged a reluctance among refugees to go to hospital out of **concern that they would lose their jobs or be deported if they tested positive** for COVID-19²²⁸.
- Specifically, women refugees have had **limited access to Sexual and Reproductive Health** services during Covid-19, which poses a risk especially for pregnant women, new-born babies and women requiring immediate postnatal care.
- Refugees have displayed a high **awareness about Covid-19** and measures to prevent infections. However, information about who to contact or what services are available services in case of Covid-19 infection has generally been low. Levels of awareness have been lower in rural areas than urban areas. 70% of refugees report having received relevant information in their own language²²⁹.
- Refugees have also reported an increase in stress levels – particularly due to economic hardship and living in confined spaces. This has led to increased domestic tension.

225 Vice-Presidency Office, FRIT Coordination Office, COVID-19 Needs Assessment for Refugees in Turkey, April 2020.

226 i.a. TRC/IFRC, Knowledge and Information Needs on COVID-19; ASAM, Sectoral Analysis of the Impacts of COVID-19 Pandemic on Refugees Living in Turkey, May 20, p. 12., <https://data2.unhcr.org/en/documents/download/76639>; DRC, COVID-19 IMPACT ON REFUGEES IN SOUTH EAST TURKEY, <https://data2.unhcr.org/en/documents/download/76662>

ASAM, Sectoral Analysis of the Impacts of COVID-19 Pandemic on Refugees Living in Turkey, May 20, p. 18., <https://data2.unhcr.org/en/documents/download/76639>; DRC, COVID-19 IMPACT ON REFUGEES IN SOUTH EAST TURKEY, <https://data2.unhcr.org/en/documents/download/76662>

227 ASAM, Sectoral Analysis of the Impacts of COVID-19 Pandemic on Refugees Living in Turkey, May 20, p. 18., <https://data2.unhcr.org/en/documents/download/76639>; DRC, COVID-19 IMPACT ON REFUGEES IN SOUTH EAST TURKEY, <https://data2.unhcr.org/en/documents/download/76662>. Please note that non-syrian refugees also reported reduced access due to inactivation of medical insurance, 3RP, PWG, Inter-Agency Impact Assessment of COVID-19 on refugees, op.cit.

228 MUDEM, Situation Analysis of refugees during COVID-19, p. 14, <https://data2.unhcr.org/en/documents/download/76421>; also mentioned during the CSO/EU/UN consultation in preparation of The Brussels Conference, session on social cohesion, 02 June.

229 3RP, PWG, Inter-Agency Assessment on the impact of COVID-19 on Refugees, op.cit.



Aside from the full restoration of normal services, the surveys point to needs for:

1. Increased information dissemination of information about Covid-19, and particularly around how to respond to cases,
2. Strengthening of psychosocial support measures, which will be needed for the foreseeable future.
3. Meanwhile, in order to ensure access to health services in pandemics, a shift in modalities may be required, with health counselling provided through community health workers, including via online services, together with the provision of additional hygiene items and equipment to health facilities.

5.4.3. Access to Education²³⁰

In response to the outbreak of Covid-19, the Ministry of National Education (MoNE) announced the **temporary closure of schools** and a strategy for ensuring continuity of learning for all children in formal education via lessons broadcast on television and the activation of the online “Education Information Network” (EBA). According to the results of various surveys, a large proportion of the refugee population report that their **access to remote education services is limited**, because they do not have sufficient TV or internet equipment for all the children of the household. Other challenges included **lack of information** on how to access these online services, and the **language barrier**²³¹.

A large number of refugees were already out of school before the pandemic²³², and there is a risk that the number of out-of-school children among the refugee population may grow further both for economic reasons and because of the interruption to normal schooling brought on by the epidemic. This could contribute to other risks for children, including child labour (mainly for boys) and child marriage (mainly for girls).

The needs of **children with disabilities**, children already at risk of early school leaving and children already out of school require closer and further analysis to ensure that their vulnerabilities are not further exacerbated as a result of the pandemic.

5.4.4. Food Security and agriculture

The majority (96%) of refugees were food-secure just before the onset of the pandemic, according to WFP’s Comprehensive Vulnerability Monitoring Exercise (CVME)²³³ (SDG2: Zero Hunger). The results are based on the Food Security Index which considers household food consumption patterns, the use of negative coping strategies, and household expenditure patterns. Nonetheless, the CVME showed that there were some pockets of food insecurity, particularly among refugees in Istanbul (13%). In addition, female-headed households were more likely to be food-insecure compared to male headed households.

230 See also Pillar 2.

231 For example, the Association for Solidarity with Asylum-seekers and Migrants (ASAM) interviewed 126 refugee households. Interviewees stated that 48% of the children enrolled in schools did not have access to distance education. More than half of the families of children who experienced difficulties in having access to distance education stated that they did not have access to technical means such as a television or computer. ASAM, Sectoral Analysis of the Impacts of COVID-19 Pandemic on Refugees Living in Turkey, May 20, p. 16., <https://data2.unhcr.org/en/documents/download/76639>; CARE, COVID-19 Impact Assessment, <https://data2.unhcr.org/en/documents/download/76384>, “50% of children who were attending school cannot continue their education due to lack of access; in the main due to lack of internet/computer access or access to a television”; WHH, Post-Coronavirus Changing Needs Assessment Report, p4, <https://data2.unhcr.org/en/documents/download/76029>; see also <https://www.duvarenglish.com/human-rights/2020/06/01/syrian-children-face-difficulties-accessing-distance-education-during-pandemic-in-turkey/>. A MUDEM assessment states that 69% of their surveyed refugees have access to distance education, the highest number amongst the surveys, and flags the same barriers to access, MUDEM, <https://data2.unhcr.org/en/documents/download/76421>, p. 16.

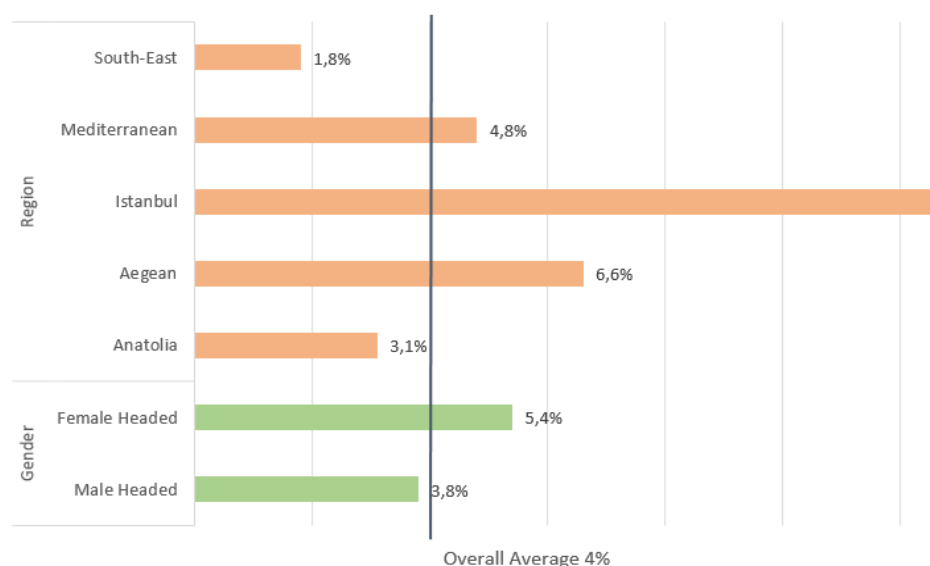
232 400,000 Syrian school-aged children under temporary protection (37% of the total school-aged population) still remain out of school according to the Ministry of National Education. The gender disaggregation overall is 50,82% for boys and 49,18% for girls

and this is common to all levels of education.

233 WFP, op.cit.



Figure 5-3: Food Insecure Refugee Households



Food security before the pandemic was fragile in many refugee households. According to the CVME, one quarter of refugee households (24%) were allocating more than 65% of their total expenditures to food, implying some degree of strain in access to food. Nearly half (48%) reported having borrowed money specifically to buy food, and up to 94% had adopted at least one consumption coping strategy during the week prior to the survey in order to cope with lack of food or lack of money to buy food. These strategies included resorting to the consumption of less preferred, less expensive food (92%), a reduction in the number of meals eaten per day (44%) and the consumption of smaller portions (42%).

Food security is threatened by a drop in purchasing power related to the increase in unemployment and the decline in incomes that have affected many refugee households. Expectations that measures implemented to control the spread of the pandemic would lead to price hikes and shortages have not materialised. However, refugees’ income-earning opportunities decreased considerably with the reduction in labour opportunities, especially in casual work, and restrictions on movements (See above). This in turn has affected the purchasing power and food security of the refugees²³⁴. Once again, this situation could amplify the use of negative coping strategies including a rise in household debt, restricted food consumption, and a possible increase in the incidence of child labour and/or child marriage. Refugees currently not benefitting from the Emergency Social Safety Net (ESSN) (which has been accepting new applications) or other social assistance schemes, and whose only means of livelihood prior to the pandemic was unskilled labour, may be worst affected.

Food assistance to refugees has continued without interruption in the seven remaining temporary accommodation centres²³⁵. The contracted stores have maintained ample supplies and ensured physical distancing in the shops.

Meanwhile, working conditions heighten the health threat posed by Covid-19 for refugees working in agriculture, including migratory seasonal agricultural work (See also Pillar 3). Food and agriculture workers, as one of the “essential” groups of workers, have to continue working to protect the food chain. However, physical distancing is not a viable option. Nearly a quarter of those interviewed in the above survey said that they travel in large groups, in vans or buses, to get from job to job because they are dependent on contractors or crew leaders to transport them²³⁶. Available face coverings may be inadequate. Soap is often not available in hand-washing facilities in the fields. Women farmworkers do not have sufficient access to hygienic materials, including menstrual pads.

234 WFP, op.cit.

235 The official denomination of refugees camp in Turkey, which currently host 2% of the total refugee population

236 Op. cit.



5.4.5. Access to social protection, and protection services including legal services and registration

Refugees and migrants continue to need various kind of social protection and support. According to IOM key informant interviews, the most immediate needs of vulnerable migrant and refugee groups are cash support (51%), access to basic services (19%), employment (18%) and housing (7%). The findings suggest that Syrians mostly need cash support and employment whereas Afghan and Pakistani nationals also need access to basic services, mainly health, as the rate of irregular migrants within these two nationalities is much higher²³⁷. In addition, 92% of migrants and refugees reported an increased need for hygiene kits due to Covid-19.

The need for social assistance has risen (See also Pillar 2). As noted above, refugees losing their incomes are not generally entitled to social insurance and are increasingly in need of social assistance. It has also been noted that while the ESSN is helping to bridge the gap between household income and the refugee-adjusted Minimum Expenditure Basket for some 1.7 million refugees in Turkey, not all vulnerable households are covered, and increases in this kind of support are unlikely to compensate for the losses of work and reduced incomes induced by Covid-19. The Social Assistance and Solidarity Foundations are reported to be facing large numbers of new applications from citizens and refugees who have lost jobs and incomes.

Information may not be reaching the most vulnerable refugees. Organisations working for refugees have maintained their communication with communities, especially with respect to Covid-19 prevention and response messaging, mostly through social media and phone helplines. This is a critical protection tool. Many protection actors switched to teleworking and remote service delivery from mid-March onwards. Information on changed modalities of work, suspension of services or opening of new services is made available through services advisor, an online map-based platform. Yet about one-in-four households (23%) do not have access to internet or a satellite dish, suggesting communication through online media may not necessarily reach the most vulnerable refugees.

Access to legal aid and legal services has been reduced. Most Bar Associations have reportedly operated at reduced capacity or suspended services. With lawyers teleworking, there may have been delays in submitting appeals and following up legal proceedings. This has particularly affected **persons in removal centres** who may not be able to receive legal assistance in time.

Registration of International Protection applicants and Syrians under temporary protection has continued on an exceptional basis, mostly for newly-born babies and persons with urgent medical needs. Registration is a crucial protection service, since access to services depends on it.

5.4.6. Specific community dynamics and social cohesion issues, and relations with local authorities

False information about Covid-19 may be harmful. The ability of refugees to maintain relations with host communities and to access adequate information is undermined by language barriers. In about two-in-five households (38%) heads of households do not have a basic understanding of the Turkish language (although an equivalent number are getting information though Arabic TV Channels). This suggests they may not benefit from Covid-19 information on mainstream media. A recent survey of the Turkish Red Crescent revealed that various false rumours were spreading about Covid-19 both among refugees and local people. These rumours are spread mostly via word of mouth and social media. Misperceptions and rumours in a community can create social tension or lead to harmful behaviour and communities should therefore be **provided with correct information in response**²³⁸.

237 Rapid Migrant Vulnerability Assessment conducted by IOM in cooperation with DGMM in Mid-April 2020, op.cit.

238 World Food Programme, Turkey Country Office, "Social Cohesion in Turkey: Refugees and the Host Community – Online survey findings rounds 1-5", <https://data2.unhcr.org/en/documents/details/78201>

Social cohesion could be harmed due to social conditions – specifically, the increase in overall unemployment and the consequent increased competition for jobs, which may feed resentment against refugees. WFP’s Social Cohesion Report revealed that the social cohesion index, developed to quantify people’s attitudes towards the other community and openness to interact, was improving from July 2017 to January 2018. However, this attitude reversed in the following rounds in February and June 2019 even prior to the Covid-19 crisis, probably influenced by economic and political factors. The financial struggles people face seem to blight social cohesion between the two communities in the labour market. The support for equal payment for the refugee employees declined from 44% in July 2017 to 40% in June 2019, when the unemployment rates and job competition in both communities intensified²³⁹. Some Turkish people believe that the refugees are more favoured in the welfare system, while many refugees state that they earn less than their Turkish co-workers for the same job while working in unfair conditions, and without social security. Thus, disentangling the economic difficulties from presence of refugees, and underlining their contribution to the economy and importance of their self-reliance would contribute to social cohesion in the current situation.

Municipalities have been active in the response to Covid-19 crisis. Various municipalities have established “solidarity and support” organisations to reach out to vulnerable and at-risk groups, including host communities, refugees and international protection applicants, obtain information on their needs and provide necessary assistance.

Municipalities from south east Turkey, which have the largest proportions of refugees in their populations, have taken part in the Covid-19 **needs assessment for refugees** facilitated by the Vice Presidency of the Facility for Refugees in Turkey (FRIT) Coordination Office. The municipalities identified the following six priority interventions²⁴⁰:

1. Food aid, meals, personal assistance, aid checks
2. Purchases of vehicles and equipment to maintain future community health services
3. Purchases of goods for municipal workers to sustain municipal services and to support poor local communities
4. Purchase of devices for use in local authorities’ health services such as ventilators, X-rays, thermal cameras and chemicals
5. Purchases of services in order to increase public awareness and provide new kinds of public services with new short-term workers
6. Projects to improve the quality of municipal services in order to meet basic hygiene requirements including effective and accessible water and sanitation services.

5.5. Resilience to Disasters and Emergencies, and Shared Responsibility

Turkey has regularly experienced small and large-scale emergencies, and there is substantial national capacity for humanitarian response. With the establishment of the Disaster and Emergency Management Presidency (**AFAD**), it has moved towards an integrated disaster risk management system focused not only on seismic risk and the immediate response but on multiple hazards with a multi-phase perspective. During the first two months of the Covid-19 outbreak, the country displayed its strong health care capacity.

The Covid-19 pandemic is an opportunity to learn about managing compound risks. An essential element of a resilient society is the ability to learn from crises and apply that knowledge to better anticipate and prepare for future shocks. In consequence, evaluating the COVID-19 response is essential to further improve national disaster management. Particular focus should be placed on the links between preparedness and response activities, emergency coordination mechanisms, as well as risk communication and warning systems.

239 World Food Programme, Turkey Country Office, “Social Cohesion in Turkey: Refugees and the Host Community – Online survey findings rounds 1-5”, <https://data2.unhcr.org/en/documents/details/78201>

240 VPO Needs Assessment, Op. Cit.



Moreover, as long as COVID-19 continues to pose a risk, there is a need to align different risk management systems and consider the interplay of natural hazards and public health work. The disaster response to natural hazards, such as earthquakes and flooding, must be managed in a way that also protects both responders and affected people from the risk of infection. For instance, earthquake or flooding-related evacuations might be difficult to align with Covid-19-related measures. Thus, Covid-19 adds a layer of complexity to hazard risk management systems.

There is an opportunity to address climate and health-related risks in a more integrated manner and to develop new multi-hazard approaches. Translating such approaches into integrated contingency and preparedness plans will contribute to societal resilience. Disaster preparedness will increasingly need to consider the interrelationships between environmental, animal and human health to recognize how infectious diseases are linked to environmental changes.

Despite the current challenge of Covid-19 and the focus on the risk of pandemics, it is important to maintain progress on climate resilience. Climate change can exacerbate existing public health risks – for instance, by affecting the occurrence of infectious diseases and increasing the exposure of some communities to vector-borne diseases. Climate-related natural hazards can also disrupt essential public services, such as water and sanitation systems, which are crucial to managing public health emergencies. Thus climate change adaptation also plays a role in pandemic preparedness, and a renewed focus on cross-sectoral risk frameworks that include the impacts of environmental change is required.

Businesses have played a critical role in the immediate response to Covid-19, both by taking prompt action to help prevent the spread of Covid-19 and by producing and delivering health care equipment during the first phase. The decisions which businesses take from now on will be even more critical, supporting the implementation and defining the “new normal”.

The private sector has considerable capacity to share responsibility for building societal resilience:

- It has a strong a **well-established network of intermediary organisations**, such as regional federations, sectoral associations and professional chambers, which can mobilise quickly to reach over 3.3 million established businesses and consequently the whole of society.
- Private sector-run infrastructure and public utilities, such as **roads, energy supply, water systems and telecommunications**, play a key role in social, economic and environmental well-being.
- With their **expertise and ability to adapt and innovate**, companies can play an integral role in ensuring that lives and assets are saved, and that nations are able to recover from shocks more rapidly.

The resilience of the private sector itself is also important. At an expected impact of around 5% of GDP, the Covid-19 crisis is on par with the 1999 Marmara earthquake, during which 60% of affected small and medium-scale enterprises (SMEs) closed down and the remaining faced an average of 40 days of business disruption. As SMEs account for over two thirds of employment, and consist mostly of family businesses, their resilience translates directly into societal resilience.

SMEs need support in making the right decisions at the right time during crises. This is one of the lessons learned from the 1999 Marmara earthquake, the 2011 Van earthquake and the 2020 Elazig earthquake. Recent in-depth interviews suggest that only around 60% of businesses have taken the right decisions in the right time during the Covid-19 crisis (March 15 to May 29), and around 50% are making the right decision planning for the recovery period (June 1 to December 31). There is thus a concrete need for business associations to develop capacity and tools to support SMEs in crisis management and business recovery²⁴¹.

241 UNDP has developed a new decision-making tool consisting of a dashboard with key decisions businesses need to take at each stage of the crisis. It is impact-based, and can be used for multiple hazards, from climatic events to complex emergencies, and earthquakes to technological incidents. The tool consists of three separate modules: (1) crisis management (first 2 months), outlining the key decisions to take under uncertainty, in order to reduce the losses; (2) business recovery (months 3-9), focusing on decisions to be taken to reduce impact and rebuild competitive advantage, and (3) risk-informed development (3 years), to shift from impact to aspirations, and come back to normal, old or new. UN agencies can combine their expertise and mandate in the arena of recovery with their longstanding partnerships with business associations to make an impact on phase 2. The UN contribution could entail: building organisational and operational capacity within business associations so that they can mobilise and lead in activities such as scenario development, damage and needs assessments, and support for business decision-making; leveraging international expertise, know-how and best practices through the UN global network, and (3) strengthening business recovery capacity through recovery frameworks, financial mechanisms, advisory services and innovation.





Photo: Levent Kulu / UNDP Turkey



Conclusion

The Covid-19 pandemic poses important risks to progress on the 2030 Agenda both globally and in Turkey. What started as a health crisis, hence much of the initial focus on SDG3 (Good Health and Well-Being), has quickly developed into a major **socio-economic challenge**. On the one hand, the pandemic triggered an **economic downturn** with serious implications for SDG8 (Decent Work and Economic Growth), SDG1 (No Poverty), SDG2 (Zero Hunger) and SDG10 (Reduced Inequalities), as well as SDG9 (Industry, Innovation and Infrastructure). Simultaneously, the COVID-19 crisis led to serious **social challenges** with particularly noticeable repercussions for SDG4 (Quality Education), SDG5 (Gender Equality) and SDG16 (Peace, Justice and Strong Institutions). The crisis has had particularly noticeable repercussions for **vulnerable groups** and increased the importance of the principle of “leaving no-one behind”.

The pandemic has underlined the importance and interconnectedness of all of the SDGs. The importance of SDG6 (Clean Water and Sanitation) has become obvious to all. With respect to SDG12 (Responsible Consumption and Production), Covid-19 has resulted in **lifestyle changes and re-visited behavioural patterns**, not all of which have been positive (e.g.: increased use of plastics, physical inactivity). Under SDG11 (Sustainable Cities and Communities), it has added to challenges in waste management, including medical waste, and raised new issues regarding public transport, green areas and smart infrastructure. With respect to SDG7 (Affordable Clean Energy) and SDGs 13-15 (Climate Action, Life below Water, Life on Land), the pandemic may temporarily have reduced **carbon emissions**, but it has also threatened to reduce **investments in clean energy**, highlighted the **impact of the environment on public health**, and demonstrated the need to mitigate **climate change** while adapting and preparing for **future disasters and emergencies**.

* * * * *

The health sector ensured a robust health response to the pandemic, benefiting from Turkey’s strong healthcare and health insurance systems. However, health workers, facilities and services were under undeniable strain with implications on health workers. The provision of some other health services was affected due to the prioritisation of the pandemic and the mitigation/distancing policies taken to slow it down. Routine maternal and child health services like vaccination and antenatal/postnatal care are particularly affected by the mitigation/distancing policies. The virus is likely to have increased the need for health provision in some areas, such as mental health, especially for young people, adolescents and elderly. Moreover, the pandemic continues to demand resources: large numbers of Covid-19 cases are still occurring, and its future trajectory is unknown.

Economic life has been severely disrupted. Some 30% of businesses were closed temporarily due to containment measures or demand shortages, with important variations depending on the line of business. Micro and small businesses have been particularly hard hit and are struggling to sustain employment and payments with limited working capital. Investment and growth plans have been postponed with possible implications also for potential growth.

Employment has also declined considerably. While bans on dismissals have been effective in protecting jobs in formal sectors, there has been a remarkable decline in informal employment. Women, youth, refugees and migrants have been disproportionately affected from employment losses. Additionally, income losses are expected to be more severe than job losses, since many workers who stayed on employment contracts also experienced decline in their incomes. Fiscal measures have been taken to support companies, retain employment and compensate households for lost work and incomes, monetary policy has been accommodative and the availability of credit to companies and consumers has been increased. Nevertheless, GDP growth is likely to have plummeted in the second quarter of the year.

A “normalization” or “reopening” process is now under way however the risk of spikes in new infections as a result of the reopening and the potential impact on the return to normalization remains

looming. It is also unclear how long it will take for businesses (particularly the most affected sectors, from industries like textiles and clothing to services like catering, tourism or retailing) to recover, or how much permanent damage will have been done to employment and incomes. The economy has not only suffered a domestic demand shock due to the lockdown measures taken to prevent the spread of the coronavirus between mid-March and May 2020; it is also facing a decline in external demand – for goods and tourism services – and challenges with respect to external finance.

The fiscal measures taken by the government might need expansion depending on the course of the pandemic and the magnitude of the impacts. It is likely that they will need to be extended, possibly with an increasing focus on protecting jobs and businesses in the most vulnerable sectors of the economy, and on supporting the poorest and most vulnerable populations, households and individuals. Current and planned response packages need to be subject to gender analysis, and systems need to be put in place to track and monitor results through sex-disaggregated data. Despite Turkey’s relatively low public debt, fiscal space is narrowing, and financing constraints will need to be borne in mind. A medium-term strategy outlining both macroeconomic and developmental response needs could play a vital role in guiding all economic agents towards common aspirations and offer an opportunity for consultation, consensus-building and the reinforcement of developmental goals.

* * * * *

There is much to be done for Turkey to recover and build back better and to accelerate progress towards the SDGs.

With regard to **health**:

- The processes of testing, tracing, treating and isolating need to continue to counter Covid-19. Regular communication to promote social and behavioral change to the public, including refugees and migrants, about social distancing, hand-washing, the use of masks, how to avoid Covid-19 infection, and what to do in the event of symptoms, also needs to continue.
- Vulnerable workers outside the health sector (including care workers) must also be able to use protective equipment. Special attention needs to be paid to all those involved in the processing of waste, including medical waste, in order to avoid contagion and ensure their safety through the provision of the necessary support including protective equipment and guidance.
- Health and hygiene in public spaces and public transport is another concern. Efforts need to continue to prevent overcrowding in public spaces and disinfect key locations. Crowd control and the regulation of mask wearing and hand hygiene in public transport constitutes a challenge. Pricing policies for public transport can be adjusted to spread demand more evenly across the day.
- Meanwhile, all health services, including those not related to Covid-19, as well as outreach services need to be safely restored to previous levels, including vaccination and other maternal and child health (MCH) services, treatment of non-communicable diseases, support for the elderly and the disabled, sexual and reproductive health services, youth and adolescent health, mental health and psychosocial support services. Some of these services need to be enhanced where gaps existed before the pandemic and/or extra needs have arisen since the start of the outbreak. Backlogs of appointments need to be addressed. Remote health services such as telemedicine will help to restore and enhance services.
- Special attention needs to be paid to the safe restoration and where necessary expansion of health services accessible to refugees and migrants (bearing linguistic and other barriers in mind) and members of other vulnerable groups.
- During all these processes, the rights, concerns and capacities of health workers, particularly front-line workers need to be taken into account, given that health workers have themselves been victims of the disease, and may be suffering from occupational burnout. Arrangements may need to be made for rest and recuperation and for psychological support. Hiring of more personnel and conducting more training may be required. Plans need to be developed for possible future “waves” of Covid-19 or other potential pandemics.
- In this context, particular attention needs to be paid to women. Women make up a high



proportion of health workers, especially front-line workers, and therefore face a higher risk of infection. The risk of burnout is also higher for female health workers given additional domestic and care responsibilities due to gendered division of domestic labour.

- The primary health care system needs strengthening for behaviour change communication while monitoring and disease surveillance need to be optimal. It will also be useful to review and address any barriers to access to health services for refugees and other vulnerable groups, and revisit the coverage and financing of health insurance to ensure that nobody is “falling between the cracks”.
- Good health and wellbeing will never depend solely on the efforts of the health sector. Investing in efforts to tackle the social, economic and environmental determinants of health, such as unemployment, stress, levels of income, education, pollution and lack of exercise, is as important as ever.

Regarding **employment**:

- Similar to the measures introduced to support the survival of enterprises, the measures taken so far to preserve jobs – such as the activation of the short-time work allowance and payments to workers on unpaid-leave – may need to be extended/expanded and/or additional measures may need to be introduced. The phasing out of these measures will need to be timed and handled carefully to avoid large-scale lay-offs. These measures need to be aligned with those aiming to increase domestic demand.
- Due to banned layoffs, many of the micro and small enterprises did not cease contracts with their employees. Nevertheless, the severe impact of the crisis on employment is expected to be experienced in the third and fourth quarter of the year. Hence, measures should consider alternative policies to retain employment in the long run. Specifically, micro and small enterprises are in the most urgent need.
- Targeted measures are needed to preserve employment among women, who are more likely to lose their jobs than men and have more difficulty finding new employment. Gender equality should be embedded in the policy response. Special efforts need to be made to ensure that women, who are working in the informal sector, have access to benefits related to lost employment.
- Targeted measures are also needed to preserve employment among vulnerable groups, including all those in informal and/or irregular employment who have not benefited from the labour market measures adopted so far, including the self-employed, care/domestic workers, refugee workers and those working in agriculture, including seasonal agricultural workers, and other seasonal workers. The policies and incentives can also aim to facilitate formalization of informal workers.
- The impact of Covid-19 Pandemic on the economy and employment is geographically imbalanced. Targeted policies and incentives should consider the geographical disparities and should seek to reverse this adverse trend.
- With more people losing jobs, there will be an increased need for active labour market policies and special employment programmes, including policies and programmes targeting women, youth and vulnerable groups, aimed at preventing long-term unemployment, and training for jobs and skills which will be in demand following Covid-19. Trainings in online skills might help facilitate access to employment during and after the crisis as well as bridge the digital divide.
- Targeted measures, active labour market policies and employment programmes should also encompass refugees and migrant women and men, who have been very heavily affected by the loss of work and jobs, due to the generally informal and tenuous nature of their work. In addition, interventions to increase the access of refugees to decent work need to be redoubled. The procedures for issuing work permits to refugees needs to be fully resumed and accelerated.
- Another major issue is working conditions for those in employment. In some sectors, offices and businesses, employees have faced additional stresses or had to work extra hours (with or without overtime, whether home-working or at the enterprise). Therefore, awareness of workers’ rights needs to be reinforced and respect for these rights promoted and enforced.
- Although there have been signs of men taking greater responsibilities for care-giving and domestic chores in the extraordinary conditions created by social distancing measures, school closures and homeworking, the main burden of unpaid work – already disproportionately high in pre-pandemic times - continues to fall on women. Flexible working arrangements and rights to paid/unpaid leave should be explored to enable both women and men for work-life balance and prevent the loss of employment for women.

- Meanwhile, efforts need to continue to combat the health risk, and other physical risks, faced by working people. One step would be to consider recognising SARS-CoV-2 as an occupational disease so that those contracting it have automatic entitlements. In any case, sick persons should not be required or financially obliged to go to work. Occupational safety and health information, arrangements and equipment need to be implemented not only in the health sector and formal workplaces, but for those working in the community, for those in the informal sector, and for particularly vulnerable groups such as domestic workers and seasonal workers, including migrants and refugees.
- A major effort is needed to end all kinds of informal employment (especially common in agriculture, among women and children, and among migrants and refugees), so as to reduce inequalities and vulnerabilities and ensure comprehensive access to social insurance, thereby increasing the resilience of individuals, households and society to adverse events and emergency situations. Innovative incentives may be used to promote formal rather than informal employment.

In the area of **social assistance,**

- The emergency measures introduced during the “lockdown” period to provide material support to persons not covered by social insurance – such as the TRY1,000 payment to vulnerable households, including to ESN beneficiaries and refugees residing in temporary accommodation centers, and the various kinds of assistance provided by municipalities, humanitarian actors and philanthropists – may still need to be increased, extended and broadened to prevent consequences such as exclusion, poverty and loss of food security.
- The social assistance provided to refugees may need to be increased, as they have been among the hardest hit by the crisis due to their low incomes, low savings and reliance on informal jobs. For the time being, refugees will continue to need social assistance schemes which are more inclusive and targeted to meet increasing needs, funded through international assistance, pending their integration into national social security and social assistance systems.
- Overall, the social protection system could be reviewed in the light of the pandemic to ensure that all those in need or who fall on hard times due to an emergency or any similar crisis are reached quickly. Social protection mechanisms need to be expanded and cover not only formal workers and employers but also vulnerable groups and informal workers including women, youth, persons with disabilities, refugees and migrants and small business mostly operating informally.
- Social policies need to be designed with a gender lens. The closure of schools and the isolation of elderly persons added care burdens on women. Greater public involvement in caring for the elderly, persons with disabilities and children will increase women’s access to labour markets and income-earning opportunities.
- While conditional cash transfers continue to be paid, social policies may need to be more child-sensitive and specifically address child poverty including among migrants and refugees. Children are more likely to be living in poverty than adults, and may have felt the socioeconomic backlash of the Covid-19 crisis the most. Poverty among families with children increases risks including malnutrition, learning gap, school drop-out, child labour and child marriage, which have lifetime and cross-generational consequences.
- Social policies also need to reach rural areas, where poverty is higher than urban areas, among them small farmers and agricultural workers, including migrants and refugees.

In the area of **public and community services,**

- All social services, protection services and outreach systems provided by government institutions or other organisations need to be safely restored to pre-crisis levels and made accessible for vulnerable groups. The necessary materials, equipment, information, guidance, training and institutional arrangements need to be put in place.
- Social services and protection services need to be intensified where gaps existed before the pandemic and/or extra needs have arisen during it. Programmes addressing early and child marriage and child labour need to be accelerated in response to the added risk posed by increased economic hardships among Turkish citizens and migrants/refugees.
- The safe restoration and expansion of services (including legal aid, psychosocial support, referrals etc.) to refugee and migrant women, men, girls and boys is particularly important, given their



outstanding needs and the impact of the crisis. Refugee registration services also need to be safely resumed and restored.

- The likelihood of increase in gender-based violence calls for a rapid adaptation and expansion of response services for survivors and women and girls at risk, wider prevention measures and uninterrupted and effective law enforcement and justice responses. Specific programmes are needed to protect most vulnerable groups. In general, response and recovery plans should include evidence-based measures to address violence against women and girls, and adequate resources to ensure their full implementation.
- Efforts to integrate and expand social services as a whole need to resume vigorously. It is important that all these services reach and are accessible to refugees (bearing linguistic and other barriers in mind) and members of all other vulnerable groups that have been hardest hit by Covid-19. Some services may be provided more effectively or efficiently through the use of communications technology. There is scope to build on the use of helplines and mobile- and web-based applications during the crisis period.

In the area of **education**:

- The closure of schools since March 2020 has resulted in lost learning, notwithstanding the rapid introduction of distance learning programmes. School closures have also deprived children of opportunities for physical, emotional and cultural development, and weakened certain lines of protection from violence, abuse, exploitation and neglect. Children from households with the least domestic resources, including migrant and refugee children, have been most affected. It is now a priority to reopen schools safely when possible by providing the necessary materials, equipment, information, guidance, training and institutional arrangements.
- Until schools can be reopened safely, work needs to continue to increase the effectiveness of distance learning programmes and particularly their accessibility for children in large or deprived households, lacking necessary internet access or facing barriers of language or disability. Refugee children in particular require support in areas like connectivity, equipment and materials in order to benefit from remote education. Provided such conditions can be met, a form of “blended” education which provides the benefits of school attendance and individual technology-assisted learning, may be explored for the future.
- These considerations apply not only in formal primary and secondary education, but also in child day care, preschool education, non-formal education, language education, vocational training, higher education, and youth centres and services.
- Together with the economic effects of the crisis, school closures have increased the risk that children from the poorest groups may drop out, or never be included, in education. Besides other negative consequences, school drop-outs have the risk of resulting in child labour and child marriages. This is especially true of refugee children, approximately 400,000 of whom are already out of school. Besides sustained support to the education sector,, extensive back to school/learning campaigns will be needed to combat this risk.

With respect to **enterprises**:

- There is likely to be a need for further support (tax relief/deferrals, employment-related support, access to credit, loan extensions etc.) to enable micro-, small and medium-sized businesses, and businesses in the most affected sectors, to survive the crisis. Priority should be given to enterprises that have been hardest hit by the crisis and least able to benefit from the support that has been made available so far.
- Smaller businesses in particular also require support to ensure a safe return to work. This may include information and advice, hygienic supplies and equipment, or technical support to build capacity both for occupational safety and health and for teleworking and digitalisation.
- These businesses may also need support in order to operate in the post-Covid-19 environment by developing new e-commerce and other sales channels, and also in developing their own business continuity plans and preparing for future emergencies.
- Special efforts need to be made to support women entrepreneurs, migrant and refugee entrepreneurs and self-employed people in their efforts to stay in business.



In the **agri-food sector:**

- Continued vigilance is needed concerning the risks of supply chain disruptions, labour shortages and price volatility, although these risks have largely not materialised, or have been averted, so far. Low demand from consumers and from the hotel-restaurant-café sector could cause prices to drop, affecting the incomes of small producers. Markets might need to be cleared in case of excess supply or low demand.
- Healthy and hygienic environments need to be established for agricultural production and supply chains. Besides information and guidance, protective materials and equipment, and regulation, financial incentives may be needed.
- Food waste remains a burning issue at all stages of the food chain, headed by losses at the agricultural production phase. Environment-friendly packaging or processing might be used to preserve fresh food and reduce waste.
- Agricultural extension services need to resume in a safe, controlled manner, without spreading infections, with a focus on small producers, including elderly farmers.
- New forms of marketing including digital marketing need to be developed further. Producers and food enterprises may need support in responding to shifts in consumer demand such as the shift in favour of products with a longer shelf-life.
- Adaptation of food systems, in an environment-friendly way, to the emerging behaviour change in food shopping and consumption can further be supported.

In terms of the **environment:**

- The Covid-19 crisis has highlighted the vulnerability of human societies and the need for resilience. Efforts to mitigate and adapt to climate change and preserve natural resources need to be redoubled. Trends in natural resources needed to be monitored carefully. Conservation, afforestation, sustainable agriculture and nature-based solutions like livable and green cities are just some of the means available to preserve and improve the environment.
- Incentives for investment in renewable energy and energy efficiency need to be reinforced, particularly in view of the risk of these issues being neglected due to cheap fossil fuels and a shortage of funds for investments. A long-term climate change strategy could be adopted, and municipalities and businesses could be supported in adopting their own climate change strategies and plans. One focus could be on green buildings. Another focus could be on public and private transport, especially given changing patterns of use as a result of Covid-19.
- Greening the economy can create jobs and reduce vulnerability to further disasters ranging from emerging diseases to extreme weather events. Incentives may be provided for eco-entrepreneurship and eco-innovation. Skills and education policies with attention to gender-based and other inequalities, need to be developed with this aim in mind. Employment-intensive investments can be made delivering public goods, public works and green works.
- Water is the key to healthy and hygienic living now and in the future, but resources are limited and risks are high (floods, pollution, over-use and now contagion via waste water). There is a need to redouble efforts and investments towards integrated water management, the prevention of water pollution, improved water quality and responsible and efficient use of water resources in agriculture, industry and households.
- Lifestyle adjustments due to Covid-19 provide an opportunity to promote responsible production and consumption in industry, services and households. Besides reducing carbon footprints and food waste, and conserving water and other natural resources, aims would include minimising the generation of waste and increasing recycling levels through a mixture of investment, regulation, incentives, public information and awareness-raising. Public procurement arrangements can also be used to support the circular economy and sustainability.

* * * * *

A wide range of strategies and actions are required to respond to the above needs. These range from macroeconomic measures and regulations to the provision of cash support and supplies to small enterprises and individuals. National and local systems, institutions and organisations need to be strengthened in key areas, technical knowledge, know-how and information need to be disseminated,



and practitioners trained. A great deal of communication may be required with the general public and with specific groups to ensure correct information, make people aware of opportunities, reinforce hygiene and safety messages, and inspire behavioural change in other respects.

Innovative use of information technologies will accelerate recovery and resilience, but requires connectivity. Already, the Internet, digitisation, helplines and mobile telecommunications tools are being used for many purposes such as maintaining business continuity, delivering health, education and protection services, telecommuting, distributing social assistance and gathering and disseminating information. The use of such options needs to be improved and expanded, without replacing face-to-face interaction where it is necessary and beneficial. Investment in new capacities may be necessary. At the same time, it is crucial that the digital divide is addressed, including gender digital divide, and women and the most vulnerable groups in society including refugees have the equipment, connectivity and skills to benefit. Indeed, as life increasingly moves online, connectivity in itself becomes an important measure of equality.

Recovery and development efforts need to focus on inequalities, including gender inequalities. Many of the challenges that have been exacerbated by the Covid-19 outbreak stem from pre-existing inequalities. A more equal society will be more resilient in future crisis. Accordingly, further promotion of gender equality—whether through targeted support to feminized sectors, occupations and women-owned/led enterprises; strengthening social protection systems to cover all working women; investing in social care services and infrastructure; or promoting flexible working arrangements for both women and men, is fundamental to all aspects of recovery and development. Measures for preventing and responding to gender-based violence, women’s leadership in the response, gender-responsive budgeting and equal representation in decision-making should be reinforced and extended. Likewise, targeted social policies that support and empower the most vulnerable groups can contribute to the solution of multiple challenges. The most vulnerable groups need to be identified and monitored.

The challenges of response, recovery and building back better require the engagement of all kinds of institutions and organisations, in line with Sustainable Development Goal (SDG) 17 (Partnership for the Goals). In addition to government institutions, private sector, professional groups, academia and civil society organisations with specific expertise and/or local knowledge, and media organisations involved in disseminating information, have roles to play. All institutions and organisations can help to establish healthy and hygienic conditions internally and within their areas of influence. Companies, corporate foundations and business organisations are strong and essential partners not only in the areas of employment, decent work and the production of goods, services and technological solutions, but also for reducing carbon emissions, cleaning the environment and preserving natural resources. Municipalities, despite their dwindling resources due to extra spending and the loss of revenues during the pandemic, are key actors for healthy and sustainable local environments and reaching vulnerable groups.

Participation, consultation, engagement and collaboration are essential. The social dialogue between employers’ and workers’ organisations can form a sound basis for progress in business and working life. The social partners should be consulted on the Covid-19 response, the Economic and Social Council and other national tripartite mechanisms should operate, and occupational health and safety committees, work councils and workers’ representatives should be mobilized and empowered. Women’s organisations should be fully and equally involved in the design, implementation and monitoring of all measures taken as part of the Covid-19 response and recovery effort at national and local level. This will ensure that gender issues are properly addressed. The inclusion of children, young people, elderly, people with disabilities, refugees and migrants and members of vulnerable groups in consultative decision-making processes will also result in better policies and programmes. All individuals can adjust their habits and contribute to public health and hygiene and responsible production and consumption.

Social cohesion should be maintained and enhanced. The response and development effort will benefit from trust and a sense of common purpose among and between institutions and organisations and the various elements of society. The sense of solidarity created during the crisis can be useful in promoting cooperation among individuals and convening organisations. At the same time, social distancing and the economic and social pressures induced by the pandemic pose risks. This calls for the



safe restoration and reinvigoration of the social cohesion programmes under way prior to the epidemic, using communications technologies as appropriate, and for careful attention to social adaptation and inclusion and the do-no-harm principle in actions for refugees. Separately, since specific restrictions were imposed on the movements of elderly persons in the initial response to Covid-19, steps may be needed to prevent elderly persons, persons with chronic illnesses and persons with disabilities from being regarded as a health risk and/or a burden on society and there may an increased need to promote and encourage their active participation in society.

Rights should be safeguarded. During the COVID-19 period, concerns on implementation of core labour rights including ensuring safe and healthy working spaces, provision of PPEs to employees, application of KOD-29 condition for dismissals, overtime and suspension of strikes have been expressed by workers' organisations and CSOs. There have been prosecutions for social media posts about the pandemic, and public information has not been fully disaggregated. All individuals should be able to enjoy their human and civil rights, and transparency and accountability needs to be maintained.

Disaster risk reduction efforts need to be pursued in the light of the Covid-19 experience. The response should be evaluated to prepare for similar crises in future, to learn about responding to compound risks, and to integrate infection risk into responses to other disasters and emergencies such as earthquakes and floods, and into climate change adaptation efforts. All humanitarian and development efforts should aim to increase the resilience of individuals and society. All key institutions, including the private sector, need to enhance their resilience and readiness for emergencies.

Experience and expertise should be shared across borders. States and other actors within different countries need to document and share their experience with one another in support of the Covid-19 response and recovery efforts. Turkey can contribute to the development of the capacities of other countries through the supply of equipment and know-how. To this end, Turkey can integrate Covid-19 interventions into its international development assistance and engage in south-south and triangular cooperation.







Photo: Murat Karakuş / WFP Turkey



Annex 1: Key Macroeconomic Policy Responses²⁴²

Background. Turkey has reported 199,906 Covid-19 cases and 5131 deaths as of June 30 2020, with over 3.3 million tests completed. The government adopted multiple containment measures to address the pandemic including: social distancing, curfews, travel bans along with quarantines for returning nationals, and the closures of schools/universities, stores, and entertainment venues. The Health Minister announced that the government will launch nationwide coronavirus antibody tests on June 15, covering some 153,000 randomly selected people across all 81 provinces, GDP rose by 4.5 percent y-o-y over the first quarter of 2020, slowing down from 6.0 percent y-o-y over the last quarter of 2019.

Reopening of the economy. On May 4, following reported improvements in Covid-19 statistics, the government announced a phased approach to lifting lockdown measures from May to July. In the first phase, certain retail shops opened from May 11, while plans were announced regarding universities and the judiciary resuming their activities in mid-June. In late May, the authorities announced their intention to lift most of the COVID-related restrictions, effective from June 1, including: removal of travel restrictions between 15 major cities, reopening of restaurants, cafes, sporting facilities and government institutions, and the resumption of domestic flights. On June 10, a new reopening measures were announced, including the phased resumption of international flights, with plans to fly to 40 countries by the end of June; curfews on people aged below 18 and over 65 were eased; and opening times for restaurants, cafes, and similar businesses were extended. Primary and secondary schools will start the 2020-2021 education year on Aug 31. On June 12, Turkey opened all of its land borders, with the exception of Iran. All those entering Turkey will undergo medical screening upon entry into the country. In mid-June, the authorities announced some targeted measures in response to an uptick of reported Covid-19 cases, including: the mandatory use of face masks in public areas in Istanbul, Ankara and Bursa, and the reinstatement of limited weekend curfews (related especially to nationwide high school and higher education entrance exams). On June 25, restrictions on travel for tourism purposes by citizens aged 65 were eased. On June 30, the nationwide ban on layoffs was extended by one month, following the expiration of the current ban on July 17.

Key Policy Responses as of July 1, 2020

FISCAL

- A TL100 billion package was announced. This consists of TL75 billion (\$11.6 billion or 1.5 percent of GDP) in fiscal measures, as well as TL 25 billion (\$3.8 billion or 0.5 percent of GDP) for the doubling the credit guarantee fund. Key support measures included (i) raising minimum pension and cash assistance to families in need, (ii) increased employment protection by loosening short-term work allowance rules (iii) reduced/postponed taxes for affected industries (eg. tourism), and also for citizens over 65 or with chronic illnesses, (iv) extension of personal and corporate income tax filing deadlines, (v) easing of households' utility payments to local governments, (vi) a ban on layoffs, initially, for three months, with a state subsidy for affected staff, (vii) state payment of two-thirds of workers' salaries in affected firms, (viii) debt relief for local governments' earmarked revenues, (ix) 32,000 additional medical staff hired and performance payments maximized, (x) allowances of social assistance and solidarity foundations increased, including accelerating support for farmers, (xi) direct support to Turkish Airlines and other affected entities, and (xii) Turkey Wealth Fund (TWF) given new rights to buy stakes in distressed firms, (xiii) TWF was assigned to inject a core capital of 0.4 percent of GDP into three state banks, funded by issuance of Treasury bonds. In June the authorities indicated that with additional policy measures, total measures to counter the effect of the Covid-19 pandemic rose to over TL 498 billion (US\$ 72 billion or 10.8 % of GDP), including deferred loan repayments. The Banking and Insurance Transaction Tax rate on real persons' foreign exchange and gold purchases was raised to 1% from 0.2%, and the withholding tax on interest income on banks' commercial bonds was raised to 15% from 10%, according to a statement in the Official Gazette on May 24. On June 19, a new law raised the upper limit of the Treasury's special-purpose domestic government bond issuance to 5 percent of the 2020 budget revenue forecast (previously the limit was 3 percent). On June 30, the short-work allowance system that provides income support to employees of fully or partially closed businesses due to force majeure was extended by one month.

MONETARY AND MACRO-FINANCIAL

- The CBRT has lowered the policy rate by a cumulative 250bps to 8.25 percent as of May 21. A package of financial measures was introduced at the onset of the Covid-19 pandemic. Specifically, liquidity facilities were augmented, including with longer-term instruments and at discounted rates. The reserve requirements on foreign currency deposits were reduced by 500 bps for banks meeting lending growth targets. A new TL lending facility for SMEs in the export sector was set up. Exporters' inventory financing is being supported by extending maturities for existing and new export rediscount credits. A second package of CBRT measures (March 31) allowed for an increase in outright purchases of sovereign bonds, and broadened the pool of assets for use as collateral in CBRT transactions. A third package of measures of CBRT increased the upper limit for CBRT's funding through Open Market Operations and regulated the primary dealer banks outright sovereign bond sales to the CBRT to maintain market depth, strengthen the monetary policy transmission mechanism and support the Primary Dealership system. The bank regulator announced forbearance measures, primarily to limit the accounting impact of TL depreciation and fall in securities' prices. The LTV limit on mortgages was raised from 80 to 90 percent. The minimum payment for individual credit cards was reduced to 20 percent, and banks postponed repayments on credit card loans for housing, consumer and vehicle purchases. Bank regulator implemented a new regulatory ratio incentivizing banks support for the real economy and government financing Public banks granted firms affected by the crisis a 3-month moratorium on bank loan repayments (principal and interest). Debt enforcement and bankruptcy proceedings (except in alimony cases) have been suspended. Firms' dividend payments limited to 25 percent of 2019 profits. Exporters will be provided with inventory financing, and reimbursement of rediscount credits have been extended by 90 days.
- On May 20, the CBRT announced that the overall limit of the bilateral swap agreement between Turkey and Qatar was increased from US\$ 5 billion to US\$ 15 billion equivalent. On May 29 the BRSA amended the calculation of the Asset Ratio (AR), imposed on banks to be effective as of May to encourage domestic lending through long term funding. On June 1, Public deposit banks Ziraat Bank, Halkbank and Vakifbank launched new retail loan campaigns for house purchases and consumer spending. On June 3, the withholding tax on returns from FX mutual funds was raised to 15 percent from 10 percent for real persons and zero for legal persons, and the Capital Markets Board (SPK) imposed some limitations on the portfolio composition of FX mutual funds. On June 5, the CBRT announced the reallocation of TL 20 billion of the TL 60 billion TL rediscount credit facility for exporters towards advance loans for investment in support strategic projects. On June 9, BRSA raised the upper limit on instalment plans for credit card purchases of services from airlines, travel agencies and hotels to 18 months from 12 months. In June, the Capital Markets Board lifted the ban on short-selling transactions for the top 30 shares on Borsa Istanbul (BIST).

EXCHANGE RATE AND BALANCE OF PAYMENTS

- No Measures



Annex 2: Possible policy actions for the world of work under a three-phased policy response approach^{243 244}

Given huge impact of the Covid-19 on the world of work, ILO calls upon all governments, employers and workers organizations and the global community to take urgent measures for strengthening countries' capacities to protect occupational health and safety of all workers, to respect rights of workers to decent working conditions, to extend social protection floors for all, particularly those in vulnerable situation to leave no one behind and to develop national programmes to protect workers through social dialogue mechanisms²⁴⁵.

Turkey has also introduced comprehensive policy actions and programmes to respond to the immense impact of the Covid-19 on the economy and society as a whole. As detailed in the above sections, the crisis response programmes taken by the government focused on extension of social protection coverage, employment retention measures, sustaining business operations and safe return to work. However, considering the overall policy programme recommendations detailed above, the current policy actions and programmes could be further strengthened under the three phased policy response approach and the scope of the programme could be further extended with the notion of "leave no one behind".

Phase 1: General reduction in economic activity due to measures to prevent spreading: Immediate support for workers, enterprises, jobs and incomes

- **Extension of social protection:**

Inclusive and well-designed social protection measures would contribute to the livelihoods and resilience of all workers who have lost their jobs or been put on unpaid leave for a long period and to the stability of all enterprises affected by lockdown measures. However, it is critical to design special **social protection measures to protect** not only formal workers and employers but also **all vulnerable groups and informal workers** including women, youth, persons with disabilities, refugees and migrants and small business mostly operating informally. Particular attention could be given to women-led micro, small and medium-scale enterprises (MSMEs), own account operators and cooperatives. Given that workers and enterprises in the informal economy are often outside the purview of common government policies and programmes, tailored responses are needed to reach and support them in dealing with the shock and to pave the way for transitioning to the formal economy, including social protection systems. Microfinance and semi-formal financial institutions can also be a safe bridge to reach to the informal economy, not only with financial services and social transfers but also with information and recommendations.

Operators in the solidarity economy are a vital enterprise network to support marginalised and vulnerable populations. Maximizing their use, in coordination with other measures, would provide the widest possible coverage of economic units.

- **Employment retention:**

Wage subsidies are the most widely used means for this purpose. However, the conditions for **wage subsidies should be designed in an inclusive way to cover all vulnerable groups** disproportionately hit by the Covid-19 crisis including informal workers, women, youth, elderly people, people with disabilities and refugees and migrants, so as not to further increase inequalities. It is also critical to integrate retention measures with active labour market policies that are triggered as quickly as possible, even when partial lockdowns are still in place. Furthermore, special attention needs to be paid to individuals and families with care responsibilities including child and elderly care by providing quality, accessible and decent care services. The sustainability of care services also requires public and private investments in terms of both care policies and service provision in the medium and long term.

- **Sustaining business:**

Enterprises operating in the informal economy have limited capacities and resources to cope with the impacts of the crisis. Given that they are often outside the purview of common government policies and

243 https://www.ilo.org/wcmsp5/groups/public/---ed_emp/---emp_ent/documents/publication/wcms_741870.pdf

244 https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/genericdocument/wcms_748428.pdf

245 https://www.ilo.org/global/topics/coronavirus/impacts-and-responses/WCMS_739048/lang--en/index.htm

programmes, tailored responses are needed to reach and support them. **Micro and small enterprises, own account operators and those operating in the informal economy** are the least likely to have cash reserves to cover their fixed costs and hence are the most vulnerable. Fixed operating costs include rent, utilities, other overheads, servicing of debts, tax payments, social security contributions and wages of essential staff.

Workplace adjustments, alternative work modalities, teleworking arrangements and similar changes could be incentivised for business. Access to IT tools and platforms could be facilitated so that enterprises could use these for sourcing locally and for maintaining communications with customers. Platforms could be established for business owners to network with peers, share information and avoid isolation. Web-based training could be provided on digital marketing and service delivery to increase online capabilities.

- **Protecting rights and social dialogue**

Tripartite social dialogue between government, worker and employer organizations is a key tool for developing and implementing sustainable and effective responses at the enterprise, sectoral and macroeconomic level, as demonstrated by historical economic crises. **Social dialogue is an irreplaceable tool of balanced crisis management** and accelerating recovery as well as an essential governance instrument with regard to change.

On the other hand, protecting workers, employers and their families at the workplaces is of crucial importance to minimize the direct effects of Covid-19. Protective measures should be introduced and strengthened at the workplace and across communities, requiring large-scale public support and investment.

Phase 2: Ensuring a comprehensive approach to returning to work

- **Business support**

Once the pandemic has run its course, many enterprises will need support to reinitiate operations and to gradually restore and reinvigorate productivity growth. Until revenues improve, enterprises will require a whole array of financial services including access to credit. Access to credit could take various forms including: low or no-interest loans via public and private financial institutions; lines of credit for trade activities; partial underwriting of risk to ensure loans also go to the smallest enterprises; and guarantees and emergency insurance.

Stimulating demand is crucial for recovery of businesses. Unconditional cash transfers may be needed throughout the crisis until the economy starts recovering. Governments could also boost employment and thereby further stimulate demand. Measures could include **employment-intensive investment, providing opportunities to MSMEs in public procurements**, paying particular attention to women-led MSMEs, and tax incentives to stimulate local sourcing by multinational enterprises.

- **Safe return to work**

The Covid-19 virus is likely to continue circulating in our communities. Physical distancing measures, increased hygiene and other precautions will therefore have to be maintained to contain infections, including those in the workplace. Preventive actions are necessary in order to prepare companies and workers for a safe return to work and a gradual restart of business activities. Such preventive actions require **improvement of occupational health and safety measures** including social distancing, the provision of protective equipment (especially for health and allied workers, volunteers and others in permanent contact with people), hygiene procedures and new forms of work organization (supported by information and awareness campaigns). All this can be achieved through social dialogue between employers and workers and their representatives – for example through occupational health and safety committees.

General guidance and sector-specific information needs to be provided to employers on how to prevent the spread of Covid-19 in the workplace in order to enable workers to return to work safely while keeping the risk of contamination as low as possible. Implementing protective and preventive measures may require significant changes to workplace processes and practices. To help with the transition, incentive schemes specifically for the implementation return-to-work arrangements could be designed and provided to



MSMEs. Practical guidance and practical support should be provided specifically to occupational health and safety professionals to ensure a smoother transition and make sure risks are identified and assessed; and ensure that necessary measures are taken to mitigate risks at workplace level.

In designing return-to-work policies at both the national and enterprise level, the needs of workers with higher risk of severe illness should be taken into account. These include older workers, people with disabilities, pregnant workers, those with pre-existing medical conditions, refugees, migrants and workers in the informal sector. Special attention will be needed to ensure that **return-to-work policies do not create discrimination** related to gender, health status, or other factors. Special arrangements may be required for workers with care responsibilities and persons with disabilities, such as priority to work from home or be placed in paid leave.

- **Sustaining employment**

Labour markets have dramatically worsened and will take years to recover. Some sectors will take a very long time to recover. Therefore, **solid and inclusive employment policies** have a critical role in sustaining employment and creating new jobs. Inclusive and well-designed active labour market policies including public employment programmes are important tools for creating new jobs and matching workers with enterprises. Public employment programmes (PEPs) could be a key tool in guaranteeing employment. PEPs should be aligned with unemployment protection and other social protection measures including health coverage, maternity protection, child and family benefits, and protection in the case of work injury, disability, sickness and old age.

- **Social dialogue**

It is essential to start the social dialogue process as early as possible in order to maximize its impact. The social partners need to be involved at all stages of the return to work from initial needs assessment to the formulation of measures, their implementation, and monitoring and evaluation.

Measures adopted through social dialogue at national level may need to be followed up by complementary **bipartite dialogue and collective bargaining** at the sector and company levels to better respond to the needs of particular worker and enterprises during the return-to-work processes.

Phase 3: Recovery of economic growth and rethinking new ways of doing business to create decent jobs

- **Social protection and promoting transition to formality**

The Covid-19 crisis has once again shown the importance of ensuring universal access to social protection systems that provide comprehensive and adequate benefits that meet people's needs. But at the same time, the Covid-19 crisis has revealed the consequences of coverage and adequacy gaps in social protection for some categories of workers including informal workers, part-time and temporary workers, women, refugees and migrants. It has also highlighted the importance of ensuring adequate social protection coverage including sickness benefits and unemployment protection for workers in all forms of employment.

It is critical that **governments prioritize support for those who are particularly vulnerable to the crisis**, including workers in the informal economy, and continue to promote the transition to formality through targeted programmes. This can include subsidies enabling workers to access health, unemployment and inability-to-work insurance, together with maternity protection, and should extend to workers in the informal economy.

- **Creation of decent and productive jobs**

Like other global economic crises, the COVID-19 crisis has demonstrated the necessity and importance of designing an inclusive and sustainable recovery with the creation of decent and productive employment opportunities for all, particularly vulnerable groups. Previous recessions have shown that fiscal policy through increased public expenditure is likely to be effective, and that well-designed and coordinated macroeconomic, employment and social policies have mutually reinforcing effects in promoting economic and employment recovery. This also requires a long-term, targeted investment in active labour



market policies, labour law reforms and special employment programmes targeting particular groups badly affected by the adverse effects of Covid-19. Conducting gender-responsive employment impact assessments of national recovery programmes for the socio-economic reintegration of persons who have been affected by a crisis, including through training programmes that aim to improve their employability could be critical for designing employment policies.

There will be a need for **increased expenditure on active labour market programmes** and subsidies for education and skills development to mitigate the negative effects of unemployment, raise productivity and incomes, reduce discouragement and ensure that education and training policies and systems respond better to the current and future demands of the labour markets. Special attention needs to be paid to young people in education and training, to those not in employment, education or training (NEETs), and to as well as young informally employed workers and other worst-affected groups, such as young women and young migrant and refugee workers. This includes supporting young people's (re-)entry into education/training or the labour force, especially for those belonging to the hardest-hit groups. Since the worst-affected sectors typically account for a high share of women and young people in employment, targeted sectoral measures, aligned with the national post-pandemic development vision (including emerging areas such as renewable energy, new technologies, etc.), could constitute the basis of a women- and youth-friendly economic revival and a shift towards a more sustainable and equitable labour market²⁴⁶. Such inclusive employment policies also require investment in designing economic recovery packages that recognize and place a value on unpaid care work and care jobs, provide adequate levels of quality childcare and create decent jobs in the care economy.

Occupational health and safety measures should also be further strengthened to prevent and reduce psychosocial risks, including violence and harassment, and promote workers' mental health and well-being.

- **Supporting the private sector and promoting sectoral policies**

Some enterprises that survive the impact of Covid-19, will likely remain vulnerable as they only slowly regain revenues and start to manage accumulated debts and deferred payments. Support to enterprises should target women-owned micro, small and medium-sized enterprises, as well as hard-hit sectors and occupations where women are over-represented.

Expanding access to ITC and improving services will also help enterprises to access market information and reach more customers. Governments could expand the roles of technical schools in helping entrepreneurs to develop their management capacities, or provide vouchers so that new entrepreneurs and small businesses can access the expertise of business service providers and training programmes, including those affiliated with employers' organizations – and, in collaboration with employers' organizations, support market linkages.

Government measures could also **incentivize enterprises to continue to improve the sustainability of their businesses**, as well as to upgrade their technology and invest in digital transformation (e.g., communications technology, cyber-security)

246

https://www.ilo.org/wcmsp5/groups/public/---ed_emp/documents/publication/wcms_746031.pdf



Annex 3. Scope of support provided by MDBs and IFIs in response to the Covid-19 crisis

Institution	Financing Facility / Scheme	Budget
African Development Bank	Social Bond to provide flexible responses aimed at lessening the severe economic and social impact of this pandemic on its regional member countries and Africa's private sector.	3 B USD
Asian Development Bank	Concessional and grant resources for member states	20 B USD
Asian Infrastructure Investment Bank	Scaled up infrastructure investment supports to help build up economic resilience and mitigate the impact of future health crises.	No specific budget allocation
CAF Development Bank of Latin America	Emergency Credit Line of a countercyclical nature and rapid disbursement for up to USD2.5 billion, which will serve to support and complement the fiscal measures.	2.5 B USD
European Bank for Reconstruction and Development	Coronavirus Emergency Package (CEP) to provide finance to meet the short-term liquidity and working capital needs of existing clients. Resilience Framework and Trade Facilitation Programme for medium to long term recovery and business development.	1 B EUR (CEP)
European Investment Bank Group	Dedicated programme to support European companies through guarantee schemes to banks, liquidity lines to banks and asset-backed securities purchasing programmes	40 B EUR
International Monetary Fund	Rapid-disbursing emergency financing facilities for low income and emerging market countries that seek support; grants for debt relief for the Fund's poorest members; a short-term liquidity line for countries with very strong policies and fundamentals in need of short-term moderate balance of payments support; adjustments to existing lending arrangements	50 B USD
Inter-American Development Bank	Lending programme responding to the health crisis and its consequences.	3.2 B USD
Islamic Development Bank	Strategic Preparedness and Response Facility of USD730 million to mitigate the negative health and socio-economic impact of the COVID -19 pandemic in the form of grants, concessional resources, trade finance, private sector lending and political and risk insurance coverage.	0.73 B USD
New Development Bank	Emergency Assistance Programme Loan to China in combating the outbreak of COVID-19 and it will contribute to China's ongoing efforts to address the health and economic consequences of the outbreak.	7 B RMB
World Bank Group	Grants and financial support over a 15-month period, including over USD50 billion of IDA resources on grant and highly concessional terms, to help developing countries respond to the health, social and economic impacts of COVID-19 and the economic shutdown in advanced countries. – the largest and fastest crisis response in the Bank Group's history	160 B USD



**UNITED
NATIONS**
TURKEY