

Access to Health Services for Persons Having International Protection Status in Turkey

Bekir Güzel*

Abstract

Situated in the Anatolian geography between Asia and Europe, Turkey actually has a long migration history. For many years, Turkey has been involved in immigration studies as a transit country with a focus on international migration. In this study, however, Turkey will be analyzed as a destination country. The rights granted to persons having international protection status in Turkey are explained in detail in the Law on Foreigners and International Protection. For instance, according to this law, all international protection status applicants or holders can benefit from primary, secondary and tertiary healthcare services free of charge. So, within the scope of this study, health services provided to persons having international protection status will be evaluated in detail.

Keywords: *International protection, health services, migration, immigration, Turkey.*

* Research Asst., Recep Tayyip Erdoğan University, Faculty of Economics and Administrative Sciences, Department of Social Work, e-mail: bekir.guzel@erdogan.edu.tr, bekirguzell@gmail.com

Türkiye’de Uluslararası Koruma Statüsü Sahibi Kişilerin Sağlık Hizmetlerine Erişimi

Bekir Güzel*

Öz

Coğrafi olarak Asya ve Avrupa kıtaları arasındaki Anadolu topraklarında yer alan Türkiye’nin uzun bir göç tarihi bulunmaktadır. Türkiye uluslararası göç çalışmaları içinde uzun yıllar boyunca transit bir ülke olarak ele alınmıştır. Ancak bu çalışmada Türkiye hedefülke olarak ele alınacaktır. Türkiye’de uluslararası koruma statüsü altında bulunan bireylerin çeşitli hakları, 2013 yılında kabul edilen Yabancılar ve Uluslararası Koruma Kanunu (YUKK) ile garanti altına alınmıştır. Örneğin, bu kanuna göre tüm uluslararası koruma statüsü başvuru sahibi kişiler birinci, ikinci ve üçüncü basamak sağlık hizmetlerinden ücretsiz olarak yararlanabilmektedir. Bu çalışmada, uluslararası koruma statüsü sahibi kişilere sağlanan söz konusu sağlık hizmetleri detaylı bir şekilde değerlendirilecektir.

Anahtar Sözcükler: *Uluslararası Koruma, sağlık hizmetleri, göç, göçmenlik, Türkiye.*

* Araştırma Görevlisi, Recep Tayyip Erdoğan Üniversitesi, İktisadi ve İdari Bilimler Fakültesi, Sosyal Hizmet Bölümü, e-posta: bekir.guzel@erdogan.edu.tr, bekirguzell@gmail.com

INTRODUCTION

Migration history is as old as the history of mankind. Archaeological studies in different parts of the world show that people have migrated from one point to another for thousands of years. The anthropological data obtained as a result of the studies reveal that people participate in migratory movements due to various reasons. Natural disasters, wars, scarcities of food or thirsts in various periods are among the factors leading to migration movements. Apart from these, it can be seen that different specific reasons belonging to the regions or countries have emerged over time. For example, the main reason for migratory movements in Europe since the end of the Middle Ages, is the problem of unemployment arising from the lack of adequate arable land in rural areas. This migratory movement, which has taken place mainly from rural areas to urban areas for economic reasons, can also be regarded as the beginning of modern migration movements. In the following centuries, immigration movements, both internal migration and external migration, in advanced industrialized Europe have been carried out principally for economic purposes. The European continent is now a center of attraction for international migration as a continent that has completed its industrialization process and European states have been among the regions which are in the developed countries category¹. By definition in the migration literature, European countries are now considered as destination countries. However, in order to define the term destination country, two definitions were combined: the source country and the transit country. The source country is used to refer to the country of emigration. The transit country is generally used to refer to the country where immigrants visit along their travels from the source country to the destination country during the international migration movement. In the same way, transit migration is commonly taken to mean the temporary stay of migrants in one or more countries, with the purpose of reaching a further and final destination (OHCHR, 2015: 5). For many years, Turkey has been involved in immigration studies as a transit country with a focus on inter

1 It is possible to make theoretical explanation of this situation within the scope of international migration theories. However, a detailed analysis has not been conducted in this section; since this issue is beyond the scope of the study.

national migration. Obviously, it is well documented that Turkey is one of the transit countries for irregular migrants coming to Europe (İçduygu, 2011: 1). In the last two decades, transit migrant flows to Europe through Turkey have become a really big problem for European countries; especially Germany, Australia, France, Holland and Belgium. This is one of the most important agenda items of the European Union in the recent period. In particular, international developments in 2010 and after, have led to an increase in immigration movements towards Europe. Parallel to this, there has been a significant increase in the migration movement towards Turkey both as a transit country and as a destination country, and it still continues. According to the Frontex Risk Analysis Report for 2017, for example, EU Member States reported over half a million (511 371) detections last year; but when it was compared with 2015, which was 1.8 million, it represents a 72% decrease. In the same report it is stated that cooperation with migrants' countries of origin and transit is one of key elements of a successful migration management for the EU. As it could be seen above, the migratory pressure at the EU's external borders with Turkey has been easing since 2015. However, the readmission agreement which came into force in March 2016 between EU and Turkey is a considerably important factor regarding this point. Within the scope of this agreement, Turkey agreed to tighten the security of its maritime and land borders and also to accept the return of irregular migrants from Greece (Frontex, 2017: 18).

On the other hand, since the early years of the 21st century, Turkey has gradually moved away from being a transit country due to its changing political, economic and sociological structure and has gradually started to become a destination country. Recent academic studies in this field also confirm this change. Turkey is also becoming a destination not only for regular and irregular migrants from former Soviet Bloc countries and Asian & Middle Eastern countries but also for EU professionals and retirees. Moreover, a growing number of transit migrants are stranded in Turkey. (Kirişçi, 2007: 91). On the other hand, as it was indicated by İçduygu & Aksel, if the European countries have become the main sights of attraction as a result of their economic development, countries such as Turkey that share with borders of European countries, will continue to be affected

by the irregular migration flows both as destination and transit countries (İçduygu & Aksel, 2012: 7).

Situated in the land of Anatolia between Asia and Europe, Turkey has actually a long migration history. Especially the Ottoman Empire, which was the predecessor of Turkey, had a long history of immigration and emigration. When it comes to Turkish Republic, in the period after 1923, we see immigration movements carried out by immigrants who are located in the former Ottoman geography and who have Turkish ethnic origins. Most significant of these was the forced exchange of population between Greece and Turkey in the mid-1920s and between Bulgaria and Turkey after 1950s. Most of them were Muslims and Turks living as citizens (millet) of the Ottoman Empire. Subsequently, the Turkish Republic established an immigration program encouraging Muslims and Turks from other countries in the Balkans to settle in Turkey. However, almost all of these migration movements were carried out within the framework of the Resettlement Law, which was promoted by the state in 1934. Therefore, it had been performed in a regular, controlled and systematic manner. Moreover, almost all immigrants who came to Turkey during this period came to settle permanently in Turkey. According to the official statistics, more than 1.6 million migrants from former Ottoman territories came to Turkey between 1923 and 1997 and most of them came from Bulgaria, Greece, Romania and Yugoslavia (Danış, Taraghi & Pérouse, 2009: 460).

On the other hand, in the wake of economic and political crises that occurred after the oil crisis of 1973, there was a wave of migration to Turkey beginning in 1975 that fell within the context of irregular migration and continued through the following years. Migration movements after this period have generally occurred outside the control and desire of the Republic of Turkey. Although Turkey was considered as a transit country in the early periods of these migration movements, it has become a destination country for many immigrants. If we look at the history of irregular immigration in Turkey, it is possible to divide this type of migration into four periods, each of which has different characteristics related to migrants and the migratory flows. The first period can be considered as an initial period during 1979-1987; the second one as a maturation period during 1988-1993; the third one as a saturation period during 1994-2000; and the last one can be called

as a degeneration period since 2001 onwards (İçduygu, 2005; İçduygu & Sert, 2012; İçduygu & Aksel, 2012: 12). In the recent period defined as the degeneration period, the mass migration movement experienced with the Syrian civil war is truly a special field of study in immigration research for Turkey. However, this mass migration movement from Syria has not been included in this work, which has been carried out within the scope of international protection, while the Syrian migration is assessed in the framework of temporary protection by the Republic of Turkey.

Particularly as a result of the immigration movements in 2001 and afterwards, there have been intensive asylum and international protection demands for Turkey from countries such as Iraq, Iran, Afghanistan and Somalia. According to the migration report of the Ministry of Interior Directorate General of Migration Management (DGMM) in 2015, the total number of international protection applications for the Republic of Turkey from 2005 to the end of 2015 is 216,351. In 2005, 2,935 international protection applications were made; 3,550 in 2006; 8,932 in 2010; in 2014, 34,112 international protection applications were made. In 2015, the number of international protection applications increased to 64,232 an increase of 64% compared to 2014 (DGMM, 2016). When these numbers are compared to the numbers of foreigners applying for international protection in EU and EFTA Member States in 2015, Turkey ranks 6th. The first place belongs to Germany with 476,510 applications while the second place to Hungary with 177,135 applications; Sweden is ranked 3rd with 162,450 applications (EUROSTAT, 2016). This data increases the validity of the hypothesis that Turkey has gradually changed its position over time as a transit country to a destination country.

Due to the fact that Turkey is becoming a destination country within the international migration movement, this study will discuss some of the basic rights provided to individuals under international protection status in the country. In this context, access to health services and the right to benefit from health services will be discussed in detail because health is one of the priority welfare issues for which most of the individuals involved in international migration movements need the most support. However, most of the migrants, asylum seekers or refugees in many countries in the world are not able to access primary health care free of charge. This deficiency is a

huge existential question for the immigrant population of over 250 million today, according to the United Nations. On the other hand, this is an important social policy and welfare issue for host countries. In the following sections, this issue will be discussed in more detail within the Turkish context starting with the international protection status and related legislation.

INTERNATIONAL PROTECTION STATUS IN TURKEY

In essence, international protection, which is considered as an immigration phenomenon in the context of migration studies, is actually a human movement that is assessed separately from other migration movements due to some specific reasons. International protection is needed due to the lack of protection provided by states; for example; some states are not able to protect their citizens or some of them do not prefer to protect them. International protection was defined as; “all actions aimed at ensuring the equal access to and enjoyment of the rights of women, men, girls and boys of concern to UNHCR, in accordance with the relevant bodies of law (including international humanitarian, human rights and refugee law).”(UNHCR, 2005: 7). International protection can also be defined as a form of protection that maintains the protection that each country provides for its citizens. In this case, however, international protection applicants must be provided with certain conditions. In international protection applications, the main responsibility is the country of application for asylum.

Moreover, within the framework of international protection, all states have an obligation to provide international protection for asylum seekers within the framework of international law. On the other hand, international protection, which is the result of social, political and cultural conjectural phenomena and which has religious, ethnic, social, ethical, cultural, economic and human dimensions, still maintains its significance for the world and for humanity. As an indication of this, the concept of international protection is mainly found in international human rights documents. For example, Article 14 of the Universal Declaration of Human Rights states that “Everyone has the right to seek and to enjoy in other countries asylum from persecution.” But “this right is not invoked in the case of prosecutions genuinely arising from non-political crimes or from acts of the

United Nations.” (United Nations-UDHR, 2015). In addition, the Geneva Convention in 1951 relating to the Status of Refugees and the additional protocol in 1967 relating to the Status of Refugees (New York Protocol) are among the international instruments regulating and guaranteeing the international protection of individuals. Apart from these documents, there are also different international documents such as the European Convention on Human Rights, International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Right (ICESCR), the Convention relating to the Status of Stateless Persons and the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT). Besides, every country that is a party to these international agreements has legal documents related to international protection in their national legislation. When it comes to Turkey, it is a party to all of these international conventions which have great legal influence and legal priority on national law and legislations (Mardin, 2017: 3). For example, Article 16 of the Constitution of the Republic of Turkey states that “the fundamental rights and freedoms of foreigners shall be realized in accordance with the international law”.

According to the laws of the Republic of Turkey, in order to benefit from the right of international protection; people must first be subjected to persecution, torture or oppression in their own countries for reasons such as their ethnic origins, language, religion or political views. The fact that people are not safe in their country due to reasons such as war or internal conflict and have to leave their countries because of non-discriminatory violence are among the reasons sufficient for people to benefit from international protection. Apart from that, if people are returned to their countries, the possibility of being sentenced to death or the possibility that their death penalties will be executed or subjected to torture or other dishonorable acts, are also sufficient reasons for them to benefit from international protection².

² However, people coming to Turkey because of the events in Syria are not considered within the scope of international protection. Due to the massive and ongoing mass migration movement, people coming from Syria are considered under the “temporary protection”.

Regarding these people seeking international protection in Turkey, the most comprehensive and updated document on legal legislation is the Law on Foreigners and International Protection, which was adopted in 2013. As stated in the fourth article in the second part of this law, the procedures of all foreigners seeking asylum in the Republic of Turkey are basically carried out in accordance with the principle of non-refoulement.

Article 4

(1) No one within the scope of this Law shall be returned to a place where he or she may be subjected to torture, inhuman or degrading punishment or treatment or, where his/her life or freedom would be threatened on account of his/her race, religion, nationality, membership of a particular social group or political opinion.

According to the Law on Foreigners and International Protection, there are three different groups of people who can be evaluated under the international protection status. These are refugees, conditional refugees and subsidiary protection. This kind of classification can differ in the international documents. Therefore, the definition of these groups also varies in among countries. In this law, a refugee is defined as;

A person who as a result of events occurring in European countries and owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his citizenship and is unable or, owing to such fear, is unwilling to avail himself or herself of the protection of that country; or who, not having a nationality and being outside the country of his former residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it, shall be granted refugee status upon completion of the refugee status determination process.

Conditional refugees are defined as;

A person who as a result of events occurring outside European countries and owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself or herself of the protection of that country; or who, not having a nationality and being outside the country of former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it, shall be granted conditional refugee status upon completion of the refugee status determination process. Conditional refugees shall be allowed to reside in Turkey temporarily until they are resettled to a third country.

Subsidiary Protection is also defined as;

A foreigner or a stateless person, who neither could be qualified as a refu-

gee nor as a conditional refugee, shall nevertheless be granted subsidiary protection upon the status determination because if returned to the country of origin or country of [former] habitual residence would:

- a) be sentenced to death or face the execution of the death penalty;
- b) face torture or inhuman or degrading treatment or punishment;
- c) face serious threat to himself or herself by reason of indiscriminate violence in situations of international or nationwide armed conflict;

and therefore is unable or for the reason of such threat is unwilling, to avail himself or herself of the protection of his country of origin or country of [former] habitual residence.

The definition of refugees under the Law on Foreigners and International Protection is used only for people who come from European countries and seek asylum. However, there is no similar kind of limitation in the national legislation of European countries and many other countries in the world. This situation stems from the geographical limitation (restriction) that Turkey put into the Geneva Convention, which was adopted in 1951. This geographical limitation is frequently criticized both by individuals, institutions and organizations in Turkey as well as internationally. However, as stated above, international protection is a form of protection that maintains the protection usually provided by each country to its own citizens. Therefore, each country is obliged to grant all rights granted to its citizens to the people who have been recognized as refugees. With its geographical location, the Republic of Turkey is a bridge between Asia and Europe and is the center of almost all migrations in the east-west direction. Moreover, due to the geographical, sociological and cultural conditions on the eastern border, it is not easy to control the borders of Turkey. Therefore, although humanitarian criticisms towards Turkey are justified; it should not be overlooked that Turkey still needs a great deal of structural reforms as a developing country. Moreover, as of 2017, European Union countries, which have increased their investments in border security systems such as *Frontex* and *Eurosur* and have tightened their controls, are also seen to put in practice the geographical limitation to the asylum seekers coming from Asia and Africa.

The rights granted to persons having international protection status in Turkey are explained in detail in the Law on Foreigners and Internation-

al Protection. However, within the scope of this study, health services provided to persons having international protection status will be evaluated.

In Section 2 of Article 89 of the Law on Foreigners and International Protection, under the title of “Access to assistance and services”, international protection beneficiaries who:

- a) are not covered with any medical insurance and do not have financial means [to afford medical services] provisions of the Social Security and Universal Medical Insurance Law № 5510 of 31/05/2006 shall apply. For the payment of the premiums on behalf of persons to benefit from the universal medical insurance, funds shall be allocated to the budget of the Directorate General. Persons, whose premiums are paid by the Directorate General, shall be asked to contribute fully or partially in proportion to their financial means.

According to the Law on Foreigners and International Protection, persons with international protection status are guaranteed access to health services free of charge under this article. However, in order to obtain this right, the people who are requesting to access health services free of charge, must first apply for international protection to the Provincial Directorate for Migration Management. The legal process that must be followed by the applicants to obtain international protection status in Turkey can be realized in two ways. The first way for persons to apply for international protection is to apply to the Provincial Directorate for Migration Management at the border crossing point. If they don't use the border gate, they have to apply to the Provincial Directorate for Migration Management, that is located the nearest to the point where they are passing Turkish border. Later on, they should visit the United Nations High Commissioner for Refugees (UNHCR) registration center in Ankara and also complete their UNHCR registration in the system. The second way is the opposite of the first one. Those who want to apply for international protection should first visit UNHCR registration center in Ankara and then complete their UNHCR registration. They are then directed by the authorities at the UNHCR registry center to the Provincial Directorate for Migration Management, to officially apply for international protection. Afterwards, they are required to go to the Provincial Directorate for Migration Management, which is addressed to them by the UNHCR registry center, to complete the international protection application process within 15 days of UNHCR registration.

The important point here is that applicants must have a foreigners' ID number starting with 99. Immediately after the interview, during the period while the international protection application is being processed, an International Protection Applicant Identity Certificate is issued to the applicants. Therefore, full access of health services for international protection applicants begins after they have received the International Protection Applicant Identity Card, in which the foreign identification number starting with 99 is written. More precisely, if the person seeking international protection in Turkey needs to access health services indicated in the Law on Foreigners and International Protection, official registration is a requirement. In the following section, the access to health services of people having international protection status (applicants or holders) in Turkey will be evaluated in detail.

ACCESS TO HEALTH SERVICES FOR INTERNATIONAL PROTECTION APPLICANTS AND HOLDERS

Access to health services is a fundamental social policy service that countries around the world are obliged to provide to their own citizens. This obligation is guaranteed by the legislation of the respective countries. When looked at Article 56 of the Turkish Constitution, it states that "Everyone has a right to live in a healthy and balanced environment". Accordingly, the state is responsible for ensuring that everyone's life is maintained in physical and mental health. However, as mentioned above, countries are obliged to provide many rights to people with international protection status, such as health, education or care, due to various international agreements to which they are parties. In Turkey, the Ministry of Health is responsible for the delivery and coordination of healthcare services for international protection applicants or holders. The stakeholders in this context are the Directorate General of Migration Management; Disaster and Emergency Management Authority (DEMA); Public, University and Private Hospitals; National and International NGOs; and United Nations Organizations such as UNHCR, WHO and UNFPA.

There have been changes in the delivery of health services in Turkey, especially after 2002, which can be considered as a reform of the health

sector. Health politics were presented in Turkey in 2003 under the title “Health Transformation Program” (HTP), which introduced health reforms as an extension of the neoliberal economic policies of the post-1980s (Erol & Özdemir, 2014: 12). Today, after this health transformation program, there is a gradual health service delivery in Turkey, including primary, secondary and tertiary healthcare services. Family physicians are the primary health care institutions; public or private hospitals are the secondary health care institutions; universities and educational research hospitals are referred to as the tertiary care institutions.

This transformation and reform in the field of health in Turkey has led to changes in the access of health services, not only for the citizens of the Republic of Turkey but also for the people having international protection status in Turkey. Prior to the adoption of the Law on Foreigners and International Protection in 2013, access to health services proceeded as follows:

The person who was sick and wanted to benefit from health services must first have international protection status. Then, he/she had to apply with a petition to the Governorate of the province where he/she wanted to benefit from the healthcare services. The Governorate first handed this petition to the Provincial Security Directorate (police department) which referred it to the Department of Foreigners within the Provincial Security Directorate. The Department of Foreigners also referred it to the Social Aid and Solidarity Promotion Fund which was active in the same province. The most important point that should not be forgotten at this point is that; all of the units mentioned above actually coordinated with a single office; namely, the governor’s office. Each Social Aid and Solidarity Promotion Fund had a board of trustees headed by the governor of the province to which it is affiliated. If the Social Aid and Solidarity Promotion Fund found the request was valid and acceptable, it was submitted for approval by the board of trustees, which met in certain periods. If this board decided to cover the health expenditure of the person having international protection status, he/she could access to the health services free of charge from a public health institution located in the same province. After the treatment, this public health institution made out an invoice on behalf of the Social Aid and Sol-

idarity Promotion Fund. Naturally, the board of trustees also had the right to limit the amount of health care services that the international protection status holder may have received free of charge.

However, this has changed in the post-2013 period. For those who have international protection status, the right to access to health services is guaranteed under the Law on Foreigners and International Protection. The process practically takes place as follows;

First of all, foreigners who want to benefit from health services in Turkey should be legally required to apply for international protection status. This differs from the previous period, when only international protection status holders could benefit from health care services free of charges. In the post-2013 period, a foreigner who has not applied for international protection can only benefit from emergency medical services free of charge. Anyone, who has officially applied and received Foreigners' ID Number starting with 99 can apply a public health service and benefit from the health services free of charge. For this, it is sufficient to apply only by visiting a primary, secondary or tertiary health institution. However, it is recommended to take an appointment using the 182 phone number, especially before applying to secondary and tertiary health institutions as the number of patients in these institutions is more likely to be high.

All individuals who have applied for international protection status in Turkey can benefit from diagnosis, treatment and rehabilitation services at primary health care institutions. Community health centers, health centers, centers for maternal and infant health, centers for family planning, and tuberculosis dispensaries are accepted as primary health care institutions. Besides, these healthcare institutions also provide screening and vaccination services for infectious disease risk; services for infants, children and adolescents; and women and reproductive healthcare services. In addition to primary health care institutions, healthcare services can also be accessible from secondary and tertiary health care institutions. As mentioned before, public hospitals in Turkey are considered as secondary health care institutions while research and application hospitals and university hospitals are considered as tertiary institutions. However, international protection applicants shouldn't directly apply to research and application hospi-

tals and private hospitals. Health service can only be accessible from these health institutions after an applicant is referred by other health institutions such as primary or secondary health care institutions. However, in case of emergency, it is possible to access health services free of charge without being referred to these institutions.

The most important point that should not be forgotten here is that health expenditures of international protection applicants or holders are covered under the Health Implementation Directive (Sağlık Uygulama Tebliği - SUT). Although many health care services and disease treatments are covered by the Health Implementation Directive (HID), some services and treatments may be chargeable for beneficiaries. So it is beneficial for beneficiaries to get necessary financial information prior to treatment. Another important issue is that treatment costs related to the losses of organ and limb that occurred before entry to Turkey are not covered by the HID. The health institution, treating the international protection status holders or applicants, makes out an invoice in the name of the governorship where the person is registered (Akkoca, 2015: 19). In addition, medicines that will be required during the treatment process can also be obtained free of charge from pharmacies with which the Ministry of Health has an agreement under the HID. However, in some cities, pharmacists may request a patient's share of the medicines from the beneficiaries. It is therefore advantageous for all beneficiaries to be informed about this issue in advance.

In addition to healthcare services provided within the HID, international protection applicants or beneficiaries can also apply to receive mental health support. Besides, according to "the Implementing Regulation on the Law on Foreigners and International Protection" which was published on 17 March 2016, international protection status holders can benefit from victim support services or voluntary repatriation program as well as a psychological health service. The victim support services and voluntary repatriation program are "provided based on the principle of briefing and consent, taking into consideration the security, health, special condition of the victim during and after the reflection period" (UNHCR, 2016: 2). In this respect, it is also useful to state that there is also free access to the services provided by non-governmental organizations in Turkey. Even in

this regard, we can point out that the most comprehensive and sophisticated services in Turkey are presented by non-governmental organizations.

DISCUSSION AND CONCLUSION

Since the foundation of the Republic of Turkey in 1923, Turkey has always attracted large numbers of immigrants due to geographical, historical, cultural and social reasons. In particular, international political events and wars have led to an increase in irregular migratory movements towards Turkey since the 1970s. Turkey, which is geographically a bridge between Asia and Europe, has been the most affected country by these migratory movements. Turkey, which was initially a center of transit migration, has started to become a destination country after the 2000s. This transformation is easily observed and verified when statistical data are analyzed. The number of people requesting international protection status from Turkey increases regularly every year. For example, in 2015, the number of people applying for international protection status increased by over 60% to 64,232. Moreover, the number of international citizens in Turkey is increasing every year. According to Turkish statistics, the population of Turkey was about at 80.810.525 in 2017, of whom 1.592.437 were migrants. If we add to this figure nearly three million Syrian refugees registered in the country, a minimal estimation of the number of immigrants in Turkey's total population would be 5,6 percent (De Bel-Air, 2016: 1). In 2006 this ratio was about 0.3% in Turkey, which had a population of 70,586,256 at the time. It is not possible to explain this increase in the population ratio of both population and foreigners within a short period of 10 years, except for the intense migratory movements towards Turkey which is increasingly seen as a destination country for many migrants from Middle East in the recent years. When this increase in population is evaluated with increasing irregular migration flows towards Turkey, it is not considered to be an effect on the decrease in the percentage of immigrants in the total population of Turkey.

In previous academic studies on Turkey, some criticisms have been made about the lack of a systematic application procedures and systems for foreigners coming to Turkey. For example, according to Daniş et al., (2009: 444), there is a lack of reception policies concerning foreigners due to the

limited financial and institutional capacities in Turkey. Accordingly, this lacuna of official reception mechanisms obliges people to seek their own ways to survive in Turkey. However, in 2018, Turkey has developed new official reception mechanism and institutions such as Interactive Recording System and the Directorate General of Migration Management. Therefore, the conditions of foreigners such as international protection status applicants or holders, asylum seekers and migrants are getting better from day to day. However, these are not sufficient as well; further work needs to be done and progress must be made on this subject in Turkey.

In this regard, new legal arrangements have been made in Turkey as a result of increasing international protection requests and international migration movements in recent years. The Law on Foreigners and International Protection, which was first adopted in 2013, is a very important legal development on this issue. Within the scope of this law, foreigners who under international or temporary protection status are granted access to various rights such as health, care, education, employment and residence. In this study, various aspects of access to healthcare services for international protection status holders has been examined in detail. According to the law, anyone who applies for international protection within 15 days after entering Turkey or has a foreigners' ID number starting with 99, has access to health services free of charge. However, if he/she didn't legally apply, it is only possible to benefit from emergency medical services. In addition, the Ministry of Health has implemented a translation line (444 47 28) in order to facilitate the access of health services for persons with international protection status. Thus, they can get translation services in 6 languages including English, French, Farsi, Arabic, Russian and German. However, when they want to have an appointment from hospitals, the language barrier remains a major obstacle to access health care services. Because the Ministry of Health's appointment system line number (182) continues to operate only in Turkish. Therefore, if an international protection status applicant or holder doesn't speak Turkish and wants to take an appointment by phone from the hospital, he/she should address another person who speaks Turkish. This problem has also been addressed in the country report of the Asylum Information Database (AIDA) prepared by the European Council on Refugees and Exiles (ECRE).

“Language barrier is another key problem encountered by asylum seekers in seeking to access to healthcare services. A major practical obstacle for refugees is that hospitals in Turkey give appointments to patients over telephone. Since hospital appointment call centers do not serve prospective patients in any language other than Turkish, foreign nationals need the assistance of a Turkish speaker already at appointment stage.” (The Asylum Information Database (AIDA), 2017)

As a result, it is useful to note that, despite all these regulations and practices, there are still some disruptions and various problems in accessing the health services for those having international protection status due to high levels of regional and provincial workload. For example, in a field survey conducted by Refugees International (RI) in February 2017, a participant having international protection status residing in Kayseri points out his problem as follows;

“We are having difficulty in negotiating with doctors. Sometimes we have a health problem but we cannot consult because we cannot communicate.” Eşref, a 46-year-old asylum seeker in Kayseri (RI, 2017: 11)

The topic of communication is a very important issue that comes to mind in almost every field. When it comes to health, it becomes vital. Therefore, in order to avoid the problems and victimizations that may arise due to this issue, it is useful to take necessary measures and develop risk management plans by the provincial governorships or health directorates. Moreover, within the implementation regulations issued within the scope of legal legislation, these authorities also have special authorities and responsibilities on various matters. For example, in “the Implementing Regulation on the Law on Foreigners and International Protection”, it is stated that “governorates shall make necessary regulations, considering the conditions of disabled and persons with health problems in residence permit applications” (UNHCR, 2016: 8). Such studies will provide a significant contribution to the access of healthcare services to both international protection status applicants or holders and the citizens of the Republic of Turkey. Finally, as it is stated in the report of the research mentioned above by Refugees International, “Turkey provides a very generous access to the public health service system under international protection status” (RI, 2017: 11); however, it is very important that these services continue to be developed and upgraded to higher standards.

REFERENCES

- Akkoca, M. (2015). Kitlemel Göçlerde Sağlık Hizmetleri. T.C. Sağlık Bakanlıđı Acil Sağlık Hizmetleri Genel Müdürlüğü http://file.atuder.org.tr/_atuder.org/fileUpload/yPzoaCXEGWOL.pdf [Access Date: 26.04.2017]
- Biner, Ö. (2016). *Türkiye'de Mültecilik - İltica, Geçicilik ve Yasallık*. İstanbul: İstanbul Bilgi Üniversitesi Yayınları.
- Castles, S. & Miller, M. J. (2008). *Göçler Çađı – Modern Dünyada Uluslararası Göç Hareketleri*. (çev: Bülent Uğur Bal ve İbrahim Akbulut). İstanbul: İstanbul Bilgi Üniversitesi.
- Danış, D., Taraghi, C. & Pérouse, J. F. (2006). Integration in Limbo. Iraqi, Afghan, Maghberi and Iranian Migrants in Istanbul. *Land of Diverse Migrations Challenges of Emigration and Immigration in Turkey* (2009) edited by Ahmet İçduygu and Kemal Kirişçi. İstanbul: Bilgi University Press.
- De Bel-Air, F. (2016). Migration profile: Turkey. Migration Policy Centre: http://cadmus.eui.eu/bitstream/handle/1814/45145/MPC_PB_2016_09.pdf?sequence=1 [Access Date: 28.04.2017]
- DGMM (Ministry of Interior Directorate General of Migration Management) (2016). http://www.asylumineurope.org/sites/default/files/resources/_2015_goc_yillik_rapor_18_04_16.pdf [Access Date: 27.04.2017]
- Erdoğan, M. M. & Kaya, A. (2015). *Türkiye'nin Göç Tarihi 14. Yüzyıldan 21. Yüzyıla Türkiye'ye Göçler*. İstanbul: İstanbul Bilgi Üniversitesi Yayınları.
- Erol, H. & Özdemir, A. (2014). Türkiye'de Sağlık Reformları ve Sağlık Harcamalarının Deđerlendirilmesi. *Sosyal Güvenlik Dergisi*, 4(1), 9-34.
- European Statistical System (EUROSTAT) (2016). http://appsso.eurostat.ec.europa.eu/nui/show.do?dataset=migr_asyappctza&lang=en [Access Date: 27.04.2017]
- Frontex Risk Analysis Report (2017). http://frontex.europa.eu/assets/Publications/Risk_Analysis/Annual_Risk_Analysis_2017.pdf [Access Date: 24.04.2017]

İçduygu, A. (2011). *The Irregular Migration Corridor between the EU and Turkey: Is it Possible to Block it with a Readmission Agreement?* EU-US Immigration Systems, Robert Schuman Centre for Advanced Studies, San Domenico di Fiesole (FI): European University Institute.

Kapuy, K. (2009). *European and international law in relation to the social security of irregular migrant workers*. Belgium: Intersentia Publication.

Kirişçi, K. (2007). *Turkey: A Country of Transition from Emigration to Immigration, Mediterranean Politics, Volume 12:1*, p. 91-97.

Mardin, D. F. (2017). *Right to Health and Access to Health Services for Syrian Refugees in Turkey*. https://mirekoc.ku.edu.tr/wp-content/uploads/sites/22/2016/11/PB_Right-to-Health.pdf [Access Date: 23.04.2017]

OHCHR (The Office of the United Nations High Commissioner for Human Rights) (2015). http://www.ohchr.org/Documents/Issues/Migration/StudyMigrants/OHCHR_2016_Report-migrants-transit_EN.pdf [Access Date: 26.04.2017]

Refugees International Saha Araştırması Raporu (2017). <https://static1.squarespace.com/static/506c8ea1e4b01d9450dd53f5/t/58af29369f7456d9c60c1c3c/1487874364480/2016.2.8+T%C3%BCrkiye.pdf> [25.04.2017]

The Asylum Information Database-AIDA (2017). <http://www.asylumineurope.org/reports/country/turkey/health-care> [Access Date: 28.04.2017]

The Turkish Red Crescent (2017). https://www.kizilay.org.tr/Upload/Dokuman/Dosya/89056060_goc-istatistik-raporu-mart-2017.pdf [Access Date: 27.04.2017]

United Nations Universal Declaration of Human Rights (2015). http://www.un.org/en/udhrbook/pdf/udhr_booklet_en_web.pdf [Access Date: 26.04.2017]

UNHCR (United Nations High Commissioner for Refugees) (2016). http://www.unhcr.org/turkey/uploads/root/implementing_regulation_of_lfip_17_03_2016_eng.pdf [Access Date: 29.04.2017]

UNHCR (United Nations High Commissioner for Refugees). (2005). *An Introduction to International Protection Protecting persons of concern to*

- UNHCR Self-study module 1. <http://www.unhcr.org/3ae6bd5a0.pdf> [Access Date: 25.04.2017]
- <http://www.asylumineurope.org/reports/country/turkey/health-care> [Access Date: 24.04.2017]
- <http://www.migrationpolicy.org/article/turkey-transformation-emigration-immigration> [Access Date: 26.04.2017]
- <http://bggoc.blogcu.com/balkanlardan-turkiye-ye-goecler/3470085> [Access Date: 27.04.2017]
- <https://www.tbmm.gov.tr/anayasa/anayasa82.htm> [Access Date: 27.04.2017]
- <https://www.saglik.gov.tr/TR,11472/tcanayasasi-56madde.html> [Access Date: 27.04.2017]
- <http://www.un.org.tr/humanrights/vp/resources/refugees.php> [Access Date: 27.04.2017]
- http://www.mhd.org.tr/assets/ip_booklet_eng.pdf [Access Date: 28.04.2017]
- <http://www.memurlar.net/haber/2665/birinci-ikinci-ve-ucuncu-basamak-saglik-kurumlari-hangileridir.html> [Access Date: 28.04.2017]
- http://www.mhd.org.tr/assets/ip_health_tr.pdf [Access Date: 28.04.2017]
- <http://www.worldometers.info/world-population/turkey-population/> [Access Date: 28.04.2017]
- <http://focus-migration.hwwi.de/Turkey.1234.0.html?&L=1> [Access Date: 28.04.2017]
- http://focus-migration.hwwi.de/uploads/tx_wilpubdb/CP_05_Turkey_2009.pdf [Access Date: 28.04.2017]

