A Scale Development Study on Examining Individuals' Migration Intention and Reasons in the COVID-19 Pandemic

COVID-19 Pandemisinde Bireylerin Göç Niyeti ve Nedenlerinin İncelenmesine Yönelik Bir Ölçek Geliştirme Çalışması

Doç. Dr. Mehmet YORULMAZ [1], Dr. Öğr. Üyesi Burhanettin UYSAL [2], Doç. Dr. Mustafa DEMİRKIRAN [3]

Abstract

In this study, it was aimed to develop a scale by determining the reasons for the migration intentions of individuals concerning the COVID-19 pandemic and to bring this scale to the literature. The research is in the type of quantitative research, a two-stage data collection method was used to achieve the purpose of the research. In the first stage, there are basic data collection stage statements, including demographic characteristics and two-option (yes-no) statements. The questionnaire created in the second stage comprises 10 questions created on the investigation of the reasons for the Intention of Migration Related to the COVID-19 Process. SPSS 22.0 program was used for the analysis. In the factor analysis, the KMO value was found to be 0.935 and the Cronbach's alpha coefficient to be 0.937. In this analysis was used items greater than 0.50 and Eigenvalue above of 1 for factor loads using the principal component with the varimax, Extraction method, as the rotation method. As a result of factor analysis, it was observed that the scale consisting of 10 items combined into one factor. As a result of the study, a scale of migration adaptation was developed; Since there is no other similar scale in the literature, the scale is a reference for studies to be carried out on epidemics and related migration.

Keywords: Migration, COVID-19, migration behavior, scale development, social structure, society, intention.

Paper Type: Research

Öz

Bu çalışmada, COVID-19 pandemisi ile ilişkili olarak bireylerin göç niyetlerinin nedenlerinin belirlenerek bir ölçek geliştirmek ve literatüre kazandırmak amaçlanmıştır. Araştırma nicel araştırma türünde olup, araştırmanın amacını gerçekleştirmek üzere iki aşamalı bir veri toplama yöntemi kullanılacaktır. İlk aşamada demografik özellikler ve iki seçenekli (evet-hayır) ifadelerinin yer aldığı temel veri toplama aşaması ifadeleri yer almaktadır. İkinci aşamada oluşturulan anket ise, COVID-19 Süreci İle İlişkili Göç Niyeti Nedenlerinin araştırılması üzerine oluşturulmuş 10 sorudan oluşmaktadır. İfadeler 5'li Likert tipinde olup "kesinlikle katılıyorum", "katılıyorum", "kararsızım", "katılmıyorum" ve kesinlikle katılmıyorum" şeklinde oluşturulmuştur. Analiz için SPSS 22.0 programı kullanıldı. Yapılan faktör analizinde KMO değeri 0.935 Cronbach's alfa, 0.937 olarak iyiydi. Bu analizde döndürme yöntemi olarak varimax ile temel bileşen olan Çıkarma yöntemi kullanılarak faktör yükleri için 0,50'den büyük ve Özdeğer 1'den büyük maddeler kullanılmıştır. Faktör analizi sonucunda 10 maddeden oluşan ölçeğin tek faktörde toplandığı görülmüştür. Çalışma sonucunda göç uyumuna ilişkin bir ölçek geliştirilmiş olup literatür de buna benzer başka bir ölçeğin olmaması sebebiyle salgınlar ve buna bağlı göç durumu ile ilgili yürütülecek çalışmalar için referans teşkil edecek niteliktedir.

Anahtar Kelimeler: Göç, COVID-19, göç davranışı, ölçek geliştirme, sosyal yapı, toplum, niyet.

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[1] Selçuk Üniversitesi, Sağlık Bilimleri Fakültesi, mtyorulmaz@hotmail.com
[2] Bilecik Şeyh Edebali Üniversitesi, Sağlık Bilimleri Fakültesi, burhaneddin.uysal@gmail.com
[3] Isparta Uygulamalı Bilimler Üniversitesi, Isparta Meslek Yüksekokulu, mustafademirkiran@isparta.edu.tr

Makale Türü: Araştırma

Introduction

Although migration is as old as human history; it can also be defined as the collective and compulsory displacement of people from areas where lifestyle is difficult to areas that are easier and more liveable. To get rid of negative situations that endanger their lives, people are in the behavior of relocating to areas where they think they will be safe or that they can maintain their lives in better conditions. The best example of this situation in the recent period can be given as the movements of Syrian refugees to migrate to various countries, especially Türkiye, by escaping the civil war in their country. This migration movement is because of the war, conflict, and turmoil in the country where these people live. Every negative situation that will endanger people's lives and originate from the geography they live in brings the phenomenon of migration to the minds of these people. One of these negative situations is pandemic diseases that can affect the entire world and scare all humanity. After the 1918 Spanish Flu, the most important of the emerging pandemics was the COVID-19 pandemic, which affected the entire world. The COVID-19 pandemic, which broke out at the end of 2019 and emerged in the Wuhan Province of China and spread all over the world, has changed the lifestyle of humanity. The COVID-19 pandemic has pushed humanity into great uncertainty and chaos. It is more difficult to think healthy and make the right decision in a chaotic environment than in normal conditions. Especially the new variants (Omicron variant), which have emerged recently, give rise to the prediction that these uncertainties will remain on the agenda for a long time and that they will cause necessary changes in the lifestyles of the society. E.g.; Social distance, hygiene, mass movements, use of protective equipment, increased consumption of supplementary food, visits, accommodation restrictions, lockdown, and intentions to migrate from crowded living areas to rural areas are some of the important changes that have occurred.

1. Conceptual Framework

A virus is an infecting agent that has no potential to replicate if it has not entered a living cell. COVID-19 is an infectious disease caused by a newly discovered coronavirus (WHO, 2020). Shortly after it emerged in China, COVID-19, which affected many countries because of its rapid contagion feature and was declared a pandemic by the World Health Organization (WHO) on March 11, 2020, has been met with different reactions in different countries since that date. COVID-19 disease, which emerged as a severe respiratory disease, spread to over 100 countries in a short time and gained a pandemic feature. Although it is known that the containment measures taken in China reduced the epidemic rate by 90%, the epidemic showed a strong spread, especially in Italy, and then affected all countries (Remuzzi and Remuzzi, 2020, p.1225). The COVID-19 pandemic is still spreading to new regions around the world. Against this situation, health professionals continue to work tirelessly to develop and implement effective strategies, especially in the treatment of patients, organizational management, and public health measures. Societies now have to think beyond the epidemic of a redesigned and improved health system, not just the "new normal" (Lourenço, 2020, p.280). To delay and prevent the spread of Covid-19, governments have aimed to protect their citizens from the epidemic of interventions such as social quarantine and social distance (Balasa, 2020, p.2). Health professionals have emphasized that quarantine in infected diseases is an important social measure in terms of epidemiology (Balasa, 2020, p.3).

Scientists do not yet have obvious information about the behavior, transmission rate, and full extent of the virus. This situation makes it difficult for people to plan for the future. Because of the pandemic, economic uncertainty emerges as a worrying situation for companies and employees. For a foreseeable future, this problem, unfortunately, a human tragedy, must be eliminated (Segal and Gerstel, 2020). The uncertainties brought by the pandemic in human life have pushed individuals to show different behaviors. The most important of these behaviors is people's intention to migrate. Migration mentioned here is as internal migration and covers the

movement of people from crowded environments to less crowded environments. In regions with high populations, it is more difficult for people to access health services because of the supply demand issue (Adela, 2020, p. 1-4). Using restrictions aimed at preventing intense human movements with COVID-19 has caused people to experience significant problems in their workplaces and even to be dismissed (Yorulmaz et al., 2021, p.162).

Conceptually, migration is defined, migration is one of the important factors that damage the bond between people and places. Individuals and communities leave the place they are in for various reasons and go to another place. (Ekici and Tuncel, 2015, p. 10) Natural events, disasters, wars, and famine were the most important reasons for the migration phenomenon that existed in the ancient times of humanity. Today, however; economic, political, social, and cultural reasons are the main reasons for migration (Oral and Çetinkaya, 2017, p.3). While migrations are divided into two as internal migration and external migration according to physical dimensions; According to the intention, they are evaluated in two categories as compulsory and non-compulsory migrations. Internal migration is defined as the movement of interregional displacement within the borders of the country (TUIK, 2020). According to the "Migration Theories" in the literature, migrations are examined in three categories. First, macro-level migration theory; is migration that compels people to leave no choice. Second, in the meso-level theory, common and social ties have come to the fore. Finally, according to the micro-level theory, which was first put forward by Lee (1966); The view that individuality is at the forefront and that personal preferences and intentions cause migration has come to the fore (Faist, 2000, p.120; Hagen-Zanger, 2008). In particular, it has been observed that the epidemic has economic, social and political effects on society. Social policies to be followed by the state are of vital importance in reducing the economic and psycho-social problems of the society (Ataman et al., 2021, p.236).

In the changing century, there have been many situations affecting people's preferences. One of them is the COVID-19 pandemic, which emerged in 2019 and terrified humanity. In this study, it was aimed to investigate the displacement intentions caused by the pandemic to create more comfortable living conditions. Although the factor causing migration is macro-dimensional, the sampled society was investigated in terms of individual preferences and intentions. The dense human population hinders the accessibility of health services. In addition, because of public health practices, curfews (lockdown) are applied more strictly in largely populated cities. Because of these situations, people intend to migrate to destinations where they can access health services more easily and which are economically cheaper. In this study, the migration intentions of people were investigated through micro-level migration theory. Although safety and perceived threats to health are the most important reasons forcing people to migrate (Esses et al., 2017, p.380), it is thought that people's intention to migrate in terms of their health may be more than all other effects.

2. Method

2.1. Design of the Study

Quantitative data design was used in the research. In this context, a scale was developed by the researchers.

2.2. Population and Sample of the Study

The universe of the study is composed of people those who included in the population of metropolitan municipality in Türkiye, who are 15 and older. According to the Turkish Statistical Institute (2019), there are 63.9 million people in the specified age range. Since the legislation (Turkish Labor Law No. 4857, Regulation on the Principles and Procedures for the Employment of Children and Young Persons) defines the 15-18 age group as a young worker, the lower age limit of the sampling was determined to be 15. Since the universe contains many people, it is impossible to reach the entire universe due to reasons such as cost and time limit, so

it was preferred to choose a sample from the universe. When analyzed the literature, it is seen that a sample of 384 people represents a population between 1.000.000-100.000.000 people with a %95 confidence interval and % 5 error margin (Yazıcıoğlu and Erdoğan, 2004, p.75). Those involved in the study are people who are considering immigration. Therefore, people who did not intend to migrate were not included in the study.

In the literature, it is stated that a sample size between 100 and 200 is sufficient, especially when the factors are strong and prominent and the number of variables is not too large (Büyüköztürk, 2002, p.480). If there are strong, reliable relationships and few significant factors, the sample size is determined as 50, provided that it is more than the number of variables (Tabachnick & Fideli, 2001). Kline (1994) states that a sample of 200 will usually be sufficient to extract reliable factors, this number can be reduced to 100 in cases where the factor structure is clear and few, but it would be useful to work with a larger sample for better results.

Since the scales adapted in the pre-study were used in the original study without changing them, all analyzes were performed on 707 participants, using data from the participants of both studies, so that analyzes were based on a larger sample.

2.3. Data Collection Tools

To collect data related to the research, the survey method was preferred. In this context a migration scale, which consists of 10 items, was developed by the researchers. The questionnaire used for the research comprises two parts. In the first part, there are five questions to determine the participants' personal and socio-demographic characteristics. In the second part of the survey, The COVID-19 Migration Intention Scale (COVID-19 MIS), which consisted of 13 items after literature review, was sent to three academicians and two experts who were experts in the field before the final form was given, and after some statements were removed and some statements were corrected, the scale became final that created 10 general items about the COVID-19 MIS and prepared in a 5-point Likert type (1 = Never agree, 5 = I totally agree). The highest score that got on the scale is 50 and the lowest is 10. The data collection tool created was delivered to the participants using the online survey method and filled in by the participants. The total number of participants surveyed is 752. For this research, permission was obtained from the ethics committee of the Faculty of Health Sciences of Selcuk University (Date: 24/06/2020-Decision Number:2020/639).

3. Results

Before starting data analysis, lost data was checked on the data set. Since the questionnaire was conducted online, it was observed that there was no missing data in the scale by arranging the questions. Afterwards, Mahalanobis method was preferred to determine the extreme values of the data (McLachlan, 1999, p.22; Field, 2009, p.75). Accordingly, 45 questionnaires were excluded from the study and analyses were done with 707 data. Subsequently, the scale's validity and reliability analysis were done. SPSS 22.0 program were used in the analysis of data.

Table 1. Findings related to socio-demographic characteristics of the participants (n=707)

Age Range	n	%	Place of Residence	n	%
18-25	193	27.3	District Center	165	23.3
26-35	228	32.2	Provincial Center	486	68.7
26-45	163	23.1	Village-Town	56	7.9
46-65	123	17.4	Employment Status	n	%
Gender	n	%	Public Sector	426	60.3
Male	347	50.9	Private Sector	108	15.3
Female	360	49.1	Unemployed, Not Working	173	24.5
Marital Status	n	%	Total	707	%100
Married	402	56.9			
Single	305	43.1			

Table 1 presents the findings regarding the socio-demographic characteristics of the participants. Accordingly, the majority of the participants (59.5%) are in the 18 to 35 age range. The proportion of female participants (49.1%) is nearly equal to the proportion of male participants (50.9%). The participation of marrieds (56.9%) is considerably higher than singles people (43.1%). The highest participation in terms of place of residence is of those provincial centers (68.7%). The ratio of employment status is very high in the public sector, according to the others.

3.1. Pre-Test of the Migration Scale

A pre-test application was carried out in order to test the prepared questionnaire's compatibility with the public. In this context, the findings obtained as a result of the trial application performed on 50 participants are shown in the table below.

Table 2. Pre-test reliability and validity statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items	Kaiser-Meyer-Olkin Measure of Sampling Adequacy		.735
.721	.730	10	Bartlett's Test of Sphericity	Approx. Chi-Square	5434,060
				df	45
				Sig.	.000

According to the result, when each item was deleted, the Cronbach alpha values were examined, and no item was deleted from the questionnaire because there were items that would not change the reliability of the scale. On the other hand, the Cronbach alpha value of the pre-test was found to be at a good level of 0.721. KMO value was found to be at a good level of 0.735 (Table 2).

Table 3. Reliability and normality analysis

Reliability Statistics			Normality Analysis (Shapiro Wilk)		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items	Statistic	df	Significance value
,937	,938	10	.931	707	.000
Item Statistics (N=707)					
Items			M	SD	Cronbach's Alpha if Item Deleted
1. With the COVID-19 process, I am thinking of migrating to another city due to the lack of healthcare services where I live.			4.13	.876	.936
2. I am thinking of migrating to another city due to the high rate of spread of the COVID-19 pandemic in metropolitan cities.			3.79	1.127	.935
3. I am considering migrating to another city as I understand the importance of a healthy lifestyle with the COVID-19 process.			3.83	1.092	.930
4. I am thinking of immigrating to another city as I started experiencing psychological problems with the COVID-19 process.			4.08	.947	.929
5. I am thinking of migrating to another city as I have started to experience financial difficulties with the COVID-19 process.			4.11	.953	.927
6. With the COVID-19 process, I am thinking of migrating to another city due to the high cost of living in metropolitan areas.			3.91	1.081	.926
7. I am thinking of immigrating to another city as I started to worry about unemployment with the COVID-19 process.			4.06	.997	.929
8. I am thinking of immigrating to another city, as I have security concerns with the COVID-19 process.			4.11	.934	.928
9. With the COVID-19 process, I am thinking of immigrating to another city due to the inadequacy of social facilities where I live.			4.00	1.024	.929
10. I am thinking of immigrating to another city due to the curfews introduced in metropolitan cities with the COVID-19 process.			4.12	.959	.933

In order to test the reliability of the scale, Alpha coefficient was used as a model. Alpha (α) coefficient was found to be a very high value of .937 for the scale. On the other hand, in the analysis conducted for the items in the scale, the highest average is the item which is "With the COVID-19 process, I am thinking of migrating to another city due to the lack of healthcare services where I live." with 4.13. The standard deviation of this item (.876) is also the lowest (Table 3).

3.2. Validity Analysis

KMO (Kaiser Mayer Olkin) to test the adequacy of the sample size to determine the suitability of the scale for factor analysis; Bartlett's test of sphericity was used to measure whether the data derived from multivariate normal distribution (Table 4).

Table 4. KMO ve Bartlett's test for validity analysis

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.935
Bartlett's Test of Sphericity	Approx. Chi-Square	5434,060
	Df	45
	Sig.	.000

3.3. Factor Analysis

Principal components analysis (PCA) and factor analysis (FA) are used to test the factors under which the items in the scale combine by forming sub-sets independently from each other (14).

Figure 1. Scree plot chart for scale
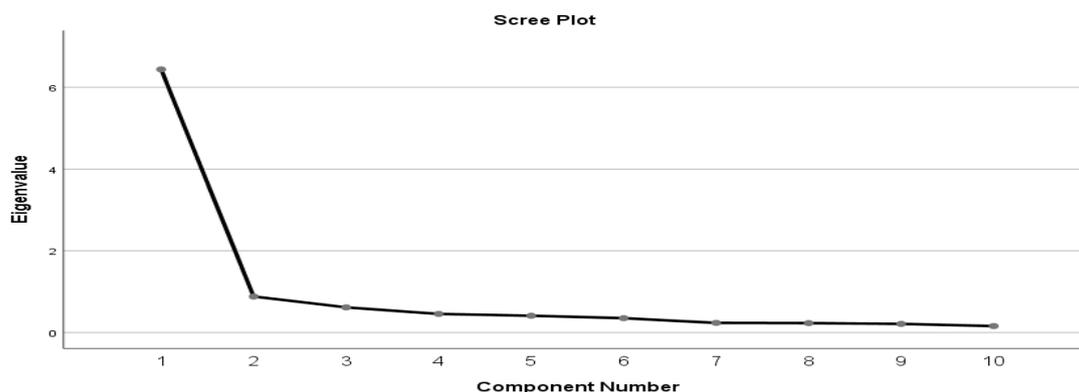
The Scree plot used in factor analysis contributes significantly to the stable formation of factors. Looking at the values in Figure 1, only the Eigenvalue of the first dimension is greater than 1. According to this information, the scale consists of one dimension.

Table 5. Total variance explained

Item Number	Eigenvalue			Extraction Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	6.438	64.384	64.384	6.438	64.384	64.384
2	.882	8.819	73.203			
3	.617	6.171	79.374			
4	.457	4.567	83.941			
5	.412	4.118	88.059			
6	.353	3.528	91.587			
7	.237	2.371	93.957			
8	.232	2.319	96.277			
9	.213	2.128	98.405			
10	.160	1.595	100.000			
Extraction method: Principal Component Analysis.						

Firstly, the scale was applied as web-based on 27.06.2020 and validity and reliability analysis were made with the data obtained after about 12 hours. Accordingly, the Cronbach's alpha value of the scale was 0.721; KMO value 0.935, p <.000; df 45 and Bartlett sphericity test were found to be 5434.060 and the questionnaire was ended on 29.03.2020 due to the validity and reliability analysis results being acceptable (Table 5).

Table 6. Results of the exploratory factor analysis (EFA)

Items	Rotated Component Matrix		
	After Number	Before Number	Item Loads
With the COVID-19 process, I am thinking of migrating to another city due to the high cost of living in metropolitan areas.	1	6	.867
I am thinking of migrating to another city as I have started to experience financial difficulties with the COVID-19 process.	2	5	.860
I am thinking of immigrating to another city, as I have security concerns with the COVID-19 process.	3	8	.856
With the COVID-19 process, I am thinking of immigrating to another city due to the inadequacy of social facilities where I live.	4	9	.830
I am thinking of immigrating to another city as I started to worry about unemployment with the COVID-19 process.	5	7	.830
I am thinking of immigrating to another city as I started experiencing psychological problems with the COVID-19 process.	6	4	.818
I am considering migrating to another city as I understand the importance of a healthy lifestyle with the COVID-19 process.	7	3	.803
I am thinking of immigrating to another city due to the curfews introduced in metropolitan cities with the COVID-19 process.	8	10	.744
I am thinking of migrating to another city due to the high rate of spread of the COVID-19 pandemic in metropolitan cities.	9	2	.717
With the COVID-19 process, I am thinking of migrating to another city due to the lack of healthcare services where I live.	10	1	.675

The construct validity of the scale was analyzed according to exploratory factor (EFA) and scree plot values (Figure 1) with data obtained from 707 samples. In this analysis was used items greater than 0.50 and Eigenvalue above of 1 for factor loads using the principal component with the varimax, Extraction method, as the rotation method. As a result of factor analysis, it was observed that the scale consisting of 10 items combined in one factor (Table 6). As shown in Table 6, factor loads for the items vary between 0.675 and 0.867 and consist of one factor and 10 items. No items were not removed from the scale after factor analysis.

The value of factor load was taken as 0.50 for factor analysis. The scale was determined to be very good with a KMO value of 0.935 and explaining 64.384% of the total variance. Cronbach's Alpha (α) coefficient, which determines the level of reliability, was found to be very good with 0.937, and according to these results, it is seen that the scale has an adequate level of reliability. The highest score that can be taken obtained from the scale is 50, and the lowest score is 10. Calculations for the mean were made according to the total score of the scale.

Discussion

For this developed scale, the existence of similar studies in the literature was reviewed. As a result of the scans, we found no scientific study on the Intention to Migration Associated with the Covid-19 Process. Researching people's epidemic-induced displacement intentions to create more comfortable living conditions will be a guide for knowing individual behaviors for such large extraordinary epidemics that may occur in the future. Although the factors that cause migration are in the macro-dimension, the research was evaluated on the sampled society to reveal individual preferences and intentions.

We used the alpha coefficient as a model to test the reliability of the scale. Alpha (α) coefficient for the scale was got as a very high value of 0.94. In this developed scale, 5 scientists who are experts in their fields were consulted in terms of the content validity of the statements. Based on the feedback, a 10-item draft scale was created by considering the corrections and improvements suggested by the scientists.

Before the general application of the scale, the researchers made a pilot application (pre-test). As part of the pre-test, a questionnaire applied to 50 participants using the online method. According to the findings got as a result of the trial test, some statements were deleted and Cronbach's alpha values were examined, and as a result, we removed no statements from the questionnaire as it did not affect the reliability of the scale. The Cronbach's Alpha value of the pre-test was found to be at a good level at a rate of 0.72. In the last case, reliability and validity analyses were made on the draft scale, which was rearranged for 10 items. The alpha coefficient was used as a model for the analyses. The alpha (α) coefficient was very high at the level of 0.935 for the scale. The highest average (4.13) in the analysis for the items on the scale was the expression "I am thinking of immigrating to another city because of the lack of healthcare services I have experienced with the COVID-19 process". Exploratory factor analysis test was performed for the construct validity of the whole scale. Construct validity refers to compatibility of the scale, which measures a subject with the relevant subject, how compatible the theory and practice are. Factor analysis and KMO and Bartlett sphericity tests were used to measure construct validity in our study. KMO is used to measure the adequacy of sample size in factor analysis, and Bartlett's test is used to measure the state of a sufficient relationship between variables.

The KMO value can vary between "0" and "1". A better factor analysis result is got as the value moves away from 0. It is accepted that the KMO value is higher than 0.80. In the other test, Bartlett's sphericity test, the "p" value is lower than 0.05 shows the existence of a sufficient level of relationship between the variables for factor analysis.

In the scale, it was observed that the expressions with an Eigenvalue greater than 1 were collected in the same dimension. While an item's factor load value of 0.45 or higher in the scales may be an excellent result, reducing the load value to 0.30 is an acceptable result.

Within the study, a scale with high validity and reliability was developed by the researchers to examine the Intention and Reasons for Migration Associated with the Covid-19 Process. According to the results got, it has been proven by the test results that the scale is suitable for determining the Intention and Reasons for Migration Associated with the Covid-19 Process. This scale, which was developed by the researchers, is extremely important for finding the Intention and Reasons for Migration Associated with the Covid-19 Process, and it is thought to contribute to the literature. In addition, this scale will serve as a reference for studies to be carried out on epidemics and related migration, since there is no other scale like this in the literature.

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ETİK ve BİLİMSEL İLKELER SORUMLULUK BEYANI

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Tarih: 24/06/2020

No: 2020/639

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1. yazar katkı oranı : %34

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