

## DISABLED MIGRANTS IN THE CONTEXT OF THE SOCIAL MODEL AND PROBLEMS ARISING FROM THE ACCESSIBILITY OF THE PHYSICAL ENVIRONMENT: A QUALITATIVE RESEARCH ON DISABLED MIGRANTS

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### Abstract

*This study examines the problems arising from the accessibility of the physical environment, which is one of the main problems faced by disabled immigrants in mainstream society, based on their experiences and using the social model approach. A snowball sampling technique was used to reach five women and seven men with disabilities living in the city centre of Tokat. Data collected through semi-structured interviews were analysed using content analysis. The findings show that disabled immigrants face significant challenges related to the accessibility of the physical environment, starting from their homes and neighbourhoods, which prevent them from accessing even very basic services such as health care and language training. Migrants with disabilities face problems of accessibility of the physical environment, such as houses, buildings, streets, sidewalks and bus stops that are not adapted to their needs. Inaccessible conditions of the physical environment prevent disabled migrants from going out, participating in social life and accessing services. This situation restricts their individual mobility, reduces their autonomy and limits their opportunities for social participation. Therefore, in identifying and addressing the problems of disabled immigrants, it is necessary to consider the physical determinants of the social environment that create and exacerbate their experience of disability, beyond their functional limitations. Policies targeting disabled immigrants should aim to remove environmental barriers.*

**Keywords:** Disability, International Migration, Disabled Migrant, Social Model, Physical Accessibility.

## SOSYAL MODEL BAĞLAMINDA ENGELLİ GÖÇMENLER VE FİZİKSEL ÇEVRE ERİŞİLEBİLİRLİĞİNDEN KAYNAKLANAN SORUNLAR: ENGELLİ GÖÇMENLER ÜZERİNE NİTEL BİR ARAŞTIRMA

### Öz

*Bu çalışma, sosyal model yaklaşımından hareketle engelli göçmenlerin ana akım toplum yapılarında karşılaştığı temel sorunlardan olan fiziki çevrenin*

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erişilebilirlik koşullarından kaynaklı sorunları, onların deneyimlerine dayanılarak incelemektedir. Tokat il merkezinde yaşayan beş kadın ve yedi erkek engelli göçmene kartopu örnekleme tekniği kullanılarak ulaşılmıştır. Yapılan yarı yapılandırılmış görüşmelerden edilen veriler içerik analizi yöntemiyle analiz edilmiştir. Bulgular, engelli göçmenlerin fiziki çevrenin erişilebilirliği ile ilgili olarak yaşadıkları evler, mahallelerden başlayan ve sağlık, dil eğitimi gibi çok temel hizmetlere dahi ulaşamamalarına neden olan ciddi zorlukları olduğunu ortaya koymaktadır. Engelli göçmenler, gereksinimlerine uygun olmayan evler, binalar, yollar, kaldırımlar ve duraklar gibi fiziksel çevrenin erişilebilirlik sorunlarıyla karşı karşıyadır. Fiziki çevrenin erişilebilir olmayan koşulları, engelli göçmenlerin evlerinden dışarı çıkmalarını, toplumsal yaşama katılmalarını ve hizmetlere erişimlerini engellemektedir. Bu durum, onların bireysel hareketliliğini kısıtlamakta, özerkliklerini azaltmakta ve topluma katılım olanaklarını sınırlamaktadır. Bu nedenle, engelli göçmenlerin sorunlarının tespit edilmesi ve çözümünde, işlevsel kısıtlılıklarının ötesinde onlar için engellilik deneyimini yaratan ve artıran, sosyal çevrenin fiziksel belirleyicilerinin dikkate alınması gereklidir. Engelli göçmenlere yönelik politikalar da çevresel engelleri kaldırmayı amaçlamalıdır.

**Anahtar Kelimeler:** Engellilik, Uluslararası Göç, Engelli Göçmen, Sosyal Model, Fiziksel Erişilebilirlik.

## Introduction

The 21st century represents a period in which international mobility has accelerated into an era of migration. People leave and migrate to other countries for a range of reasons, including the search for better living conditions, education, employment, and in the face of wars, conflicts and poverty in their countries of origin. This has led to a significant increase in the number of migrants<sup>1</sup>. According to the 2022 World Migration Report of

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<sup>1</sup> In the study, the term "migrant" is used throughout the text in a broad context, encompassing expressions such as "refugee," "conditional refugee," "asylum seeker," and "forcibly displaced person." This is due to the fact that the process of international migration and the identification and legal status of international migrants involved in this process vary according to the legal regulations of the countries in which they reside. Each country determines the legal status of migrants based on the reasons for their migration within the framework of its own international migration legislation. For migrants whose lives are endangered due to the lack of safety in their home country because of war, internal conflict, or terrorism, and who are forced to leave their country to survive, each country defines legal statuses such as asylum seeker, refugee, conditional refugee, internally displaced person, irregular migrant, foreigner, secondary protection, or temporary protection according to its legal regulations. Türkiye grants refugee, conditional refugee, subsidiary protection and temporary protection status to persons who migrate from their countries of origin due to the risk of persecution, oppression and inhuman treatment caused by war, internal conflicts and terrorism within the framework of its international migration legislation, in accordance with Law No. 6458 on Foreigners and International Protection. According to this law, "refugee" status is granted to those who have been forced to leave their country as a result of events in Europe; "conditional refugee" status is granted to those who have been forced to leave their country for various reasons outside European countries and are allowed to stay in Türkiye until they are resettled in a third country; and "subsidiary protection" is granted to those who cannot be classified as refugees or conditional refugees, but for whom it would be unsafe to return to their country of origin. Temporary protection is the status granted to people who have been forced to leave their country, who are unable to return to the country they left, and who arrive at or cross our borders en masse or individually during this period of mass influx in order to find urgent and temporary protection. Therefore, according to the legislation, only people from Europe are recognised as refugees in Türkiye, while people from outside

the International Organisation for Migration, the number of migrants has tripled in the last 50 years, reaching 281 million migrants in 2020 (McAuliffe & Triandafyllidou, 2021, p. 23). Migrants face problems such as lack of access to services and rights, social exclusion, unemployment and poverty in the new countries they arrive in. All these problems make it difficult for migrants to adapt to the new environment they migrate to and to live an acceptance based on social inclusion, thus deepening their social exclusion (Yıldırım et al., 2017). Although these difficulties are important for all migrants, the most affected group is disabled migrants (Badu-Boateng, 2020, p. 4). Disabled migrants represent a vulnerable group who experience social inequalities more deeply and exponentially in the countries they go to, who are exposed to multiple discrimination (Duell-Piening, 2018, p. 663; WCRWC, 2008, p. 1).

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) plays an important role in promoting a more inclusive and rights-based approach to disability policy and practice. This Convention does not limit disability to an individual's health condition, but emphasises that it is a result of social factors. Disability is defined as the environmental and behavioural conditions that prevent people with limitations in their physical or mental functioning from participating in society on an equal basis (UN, 2006). These definitions are linked to the social model of disability (Aşkın & Aşkın, 2018). The social model sees disability not only as a result of the physical limitations of the individual, but also as a result of social barriers arising from the socio-cultural, economic and physical environmental conditions of the society in which they live (Oliver, 1996, p. 31; Harris & Enfield, 2003, p. 17; Hirschmann, 2012, p. 398; Hoagland, 2019, p. 13; Smith-Khan et al., 2015, p. 42). Therefore, it is assumed that disabled people can lead normal lives by removing (physical/environmental and social) barriers (Hirschmann, 2012, p. 399). As long as these barriers exist, disabled people face more difficulties in accessing health services, higher poverty rates, lower literacy and education levels, lower insurance coverage and fewer employment opportunities compared to the general population (WHO-WB, 2011, pp. 9-10).

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Europe are granted conditional refugee, subsidiary protection and, in the case of Syrian migrants, temporary protection status, but not refugee or asylum seeker status. (Eryurt, 2017; Uludağ-Güler, 2022). In the study, the reason for the migration of Afghan and Iraqi disabled migrants to Türkiye is the pressure of internal conflict, war and terrorism. Consequently, their legal status in Türkiye (as they themselves mentioned in the interviews) is that of conditional refugees. In many studies, however, the terms refugee, asylum seeker and conditional refugee are sometimes used together or interchangeably, leading to conceptual confusion. To avoid this, the study uses the term 'migrant' as an umbrella term to include people with legal statuses such as conditional refugee, refugee and asylum seeker. This is in line with the general use of the term 'migrant' in the international literature, where it is widely accepted as an inclusive term. Indeed, the United Nations defines a migrant as an individual who resides in a foreign country for more than one year, regardless of the reasons for migration, whether voluntary or involuntary, the migration routes, or whether migration is regular or irregular (T.C. İçişleri Bakanlığı Göç İdaresi Genel Müdürlüğü, 2014; IOM, 2019). According to this definition, the term 'migrant' is an umbrella term that includes individuals who change their country of usual residence, regardless of their legal status (such as refugee, conditional refugee, asylum seeker) or the reasons for their migration (IOM, 2019).

The deficits experienced by disabled people in accessing human rights and participating in society deepen social inequalities resulting from the existence of social barriers (WHO-WB, 2011, p. 9). These social inequalities are even more severe for disabled migrants (Burns, 2020; Chabeda-Barthe et al., 2019; WHO, 2021; Mirza & Heinemann, 2012). Furthermore, the medical model approach and conceptualisations around disabled migrants contribute to ignoring the issues that marginalise them (Hisham & Zuraini, 2020, p. 94; Burns, 2020; Hoagland, 2019). On the other hand, the social model provides an important perspective to more comprehensively assess the difficulties disabled migrants face in participating in society. Using the social model to identify the barriers faced by disabled people can help to address the issues that marginalise them (Grue, 2019, p. 7).

One of the major challenges faced by people with disabilities is the problem of accessibility of the physical environment. People with disabilities face serious difficulties due to inaccessible conditions of the physical environment, such as buildings, houses, roads, public spaces and transport vehicles that are not suitable for their needs and use. However, in the medical model approach, accessibility is not on the agenda (Levine & Karner, 2023; Imrie & Kumar, 1998). In contrast, the social model makes it clear that the accessibility of the physical environment for people with disabilities is a basic requirement that increases access to services and participation in society (Zajadacz, 2015, p. 192). Similarly, the CRPD highlights the need for accessibility of the physical environment for people with disabilities to live independently and participate fully in all aspects of social life. In this regard, critical provisions are made regarding the measures that states should take (UN, 2006).

In this context, the issue of accessibility conditions of the physical environment, which is one of the main problems faced by migrants with disabilities, should not be ignored and the origins of this problem should be examined. Against this backdrop, the social model is an important theory for identifying barriers—primarily physical environmental factors—that affect the participation of disabled migrants in society. It supports the transition to more inclusive policies (Hoagland, 2019; Badali, 2021). Given the lack of data on disabled migrants, research based on the social model approach can provide important information on the needs and social challenges faced by this population. If these studies are not conducted, disabled migrants will continue to be a forgotten and neglected group in society (Hoagland, 2019, p. 19).

In light of these findings, the study examines the accessibility of the physical environment, which is one of the main challenges faced by disabled migrants in mainstream society, based directly on their experiences. Using a qualitative research method, the findings from individual interviews with five female and seven male disabled migrants living in Tokat are discussed from a social model perspective. The study first explains the theoretical

framework and then presents the method and findings of the qualitative research on the problems caused by the accessibility conditions of the physical environment for disabled migrants based on the approach adopted. After the evaluation in the conclusion section, some social policy recommendations for disabled migrants are given.

## **1. THEORETICAL FRAMEWORK: DISABILITY, DISABLED MIGRANTS AND ACCESSIBILITY OF THE PHYSICAL ENVIRONMENT FROM A SOCIAL MODEL PERSPECTIVE**

Disability, which is a complex and multifaceted concept, is addressed through different approaches and perspectives. These different approaches and perspectives influence the social perception of disability. However, there are two basic approaches to defining disability: Medical and Social models. These approaches also determine the services that disabled people receive in the social environment and the rights that are granted to them in society (Badu-Boateng, 2020, p. 10).

The medical model, also known as the individual approach, addresses disability from the perspective of biological impairment and deficiency. Disability is seen as a medical problem or deviation from normal health (Degener, 2016, p. 3; Oliver, 1996, p. 32). This model explains disability as the restriction or lack of a person's ability to perform a normal activity due to physical impairment or deficiency (Thomas, 2004, p. 575). Disability is considered as an individual health problem. The model suggests that physical impairments and deficiencies resulting from certain differences in people's biological systems can be eliminated with adequate medical care and treatment; disability should be eliminated, corrected, improved, minimised or rehabilitated so that the disabled individual can adapt and participate in society (Barnes, 2020; Degener, 2016, p. 3).

In contrast, the social model treats disability not only as a medical condition or health problem, but also as a problem arising from the mainstream social structure. This approach emphasises that if the socio-economic, environmental, physical and psychological discrimination against disabled people embedded in society were eliminated, there would be no restrictions on the participation of disabled people in society (Oliver, 1996; Shakespeare, 2011, pp. 54-55; Rowhedar, 2015, p. 5; Al Ju'beh, 2015, p. 13).

The social model is a powerful tool in explaining the problems faced by disabled people in society by shifting the focus from individuals to social barriers (Grönvik, 2007, pp. 39-40). In the medical model, disability is seen only as an illness. In contrast, the social model allows individuals to move away from this perspective by questioning the social and environmental factors that make people with impairments disabled (Oliver, 1996). In this context, the social model sheds light on effective social policy interventions for an inclusive society and provides a roadmap for policies that focus on

social inclusion to ensure the full and effective participation of disabled people in society. In order to ensure the full and effective participation of disabled people in society and to create a society that is inclusive, it is necessary to identify barriers such as physical environment, communication and attitudes that prevent their full participation in society and to develop policies and practices to facilitate their removal (Özçatal, 2021b, p. 186). The social model helps us understand disability-related trends in contemporary society and facilitates the development of policies and practices to address these trends (Barnes, 2020, p. 20).

The design and implementation of appropriate social policies for disabled migrants should be based primarily on countries' adherence to the social model rather than the medical model approach (UNHCR, 2019a, p. 12; Hisham & Zuraini, 2020; Harris, 2003; Harris & Roberts, 2003; UNHCR, 2019b). In this context, addressing disability in migration policies should be seen not only as a medical barrier faced by migrants, but also as a consequence of environmental, structural and societal shortcomings (Badali, 2021, p. 2). Disabled migrants are at higher risk of social exclusion than the general population in host countries in various aspects of community life, including access to education, employment, health and rehabilitation services, due to physical, environmental and attitudinal barriers (WHO, 2021, p. 22; UNHCR, 2019b, pp. 3, 7).

The medical model approach to disabled migrants lead to their marginalisation and thus exclusion from full participation in society. In this model, disabled people are often seen as patients who benefit from welfare programmes and only need care and rehabilitation. This approach leads to the marginalisation of disabled migrants while ignoring and blocking solutions to the social inclusion problems they face in new countries (Hoagland, 2019, p. 19; Hisham & Zuraini, 2020, p. 94; Smith-Khan & Crock, 2019, p. 3; Pisani & Grech, 2015; Smith-Khan et al., 2015, pp. 23, 25).

In light of all these considerations, addressing the issues of disabled migrant necessitate a more inclusive approach that takes into account social and environmental factors, as emphasized by the social model (UNHCR, 2019a, p. 9; Badali, 2021, p. 2; Hisham & Zuraini, 2020, p. 94; Smith-Khan & Crock, 2019, p. 3; Straimer, 2011, pp. 537-538). The social model provides an important perspective for understanding all the challenges faced by disabled migrants. By using the social model to recognise the barriers faced by disabled people, it is possible to address the problems that marginalise them (Grue, 2019, p. 7).

One of the main problems faced by disabled people in social life is the barriers created by the accessibility<sup>2</sup> of the physical environment. Disabled

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<sup>2</sup> This term is defined as physical accessibility and refers to the ability of an individual to access from one point to another in the built or natural environment, to move around the spaces around him or her

people face significant difficulties due to the inaccessibility of the physical environment, such as houses, buildings, roads, public spaces and transport vehicles, which are not suitable for their needs and use. The environmental elements that make up the physical environment, such as houses, roads, public spaces and transport vehicles, are not designed to include the entire population, including people with disabilities (Özçatal, 2021b, p. 191). Therefore, inadequate physical environments not only render people with functional impairments disabled, but also complicates their participation and integration into society (WHO, 2011). The design of the physical environment for disabled people, such as not being able to use roads and pavements, parks, gardens and green spaces, schools, public buildings and transport, limits their access to opportunities, services and social networks in the economic, political and social spheres of life. In addition, situations arise such as the inability to visit family and friends, engage in shopping activities, and access basic services such as health, education, and rehabilitation facilities (Özçatal, 2021b, p. 195). Accessibility of the physical environment and transport systems for disabled is extremely important for participation in social life and the development of individual life skills. Therefore, the physical environment should be organised from the planning and design stage to meet the use and access needs of disabled people (Tiyek et al., 2016, pp. 255-256).

Although accessibility of the physical environment is an important issue for disabled people, it is not considered a problematic factor in the medical model. According to this approach, disability is caused by the individual's personal deficiencies and therefore the person's condition should be corrected by medical treatment or physiotherapy-rehabilitation. Since disability is considered as an individual health problem, problems in accessibility and the planning and policies required to solve these problems are ignored. This approach excludes disabled people from discussions about the design of the physical environment, hinders accessibility practices and often leads to the creation of separate transport services and facilities (Levine & Karner, 2023, p. 67; Imrie & Kumar, 1998, pp. 361-362).

The social model approach emphasises that the physical environment of mainstream society is inaccessible and states that this situation constitutes a fundamental barrier that excludes individuals with disabilities and creates difficulties in societal participation (Oliver, 1996; Gleeson, 2011; Braddock & Parish, 2011). According to this approach, when the specific impairment causing an individual's disability cannot be altered, ensuring that the external environment, especially physical spaces, are suitable and accessible becomes a fundamental requirement to enable full societal participation for individuals with disabilities (Zajadacz, 2015). The inaccessibility of the physical environment and therefore the restriction experienced by disabled

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independently, on an equal basis with other users, safely and comfortably, without the need for assistance from another person (Sungur-Ergenoğlu & Yıldız, 2013, p. 124).

people in accessing physical environments prevent them from participating fully and effectively in all areas of social life and make them dependent on others (Meyers et al., 2002). Inaccessible physical environment conditions for disabled people limit their independent participation in employment, education, health services, social and recreational activities, resulting in their deprivation of these services and social interactions (WHO-WB, 2011, p. 170). Disability is socially and spatially constructed, so the physical environment of urban areas, such as buildings, roads and transport systems, have features that exclude disabled people and create challenges for their participation in society. However, in a fully inclusive social organisation, impairment - such as physical deficiency or functional limitation - does not result in disability (Al Ju'beh, 2015). However, roads, buildings, houses and means of transport designed for non-disabled people but which do not facilitate the participation of disabled people in social life shall not be made accessible or adapted for their access and use. This situation prevents disabled people from being an active part of the mainstream social order and leads to their spatial exclusion from society (Özçatal, 2021a, p. 18).

The inaccessible built environment both restricts the access and mobility of disabled people and reproduces social inequalities by perpetuating perceptions of disabled people as different and deficient (Imrie & Kumar, 1998, pp. 360-361). Therefore, the levels of physical accessibility in spaces are acknowledged as indicators of social inequality, while simultaneously functioning as mechanisms that perpetuate and reinforce inequalities within society. Disabled people face inequality, discrimination and deprivation in all aspects of social life as they encounter social barriers caused by the physical environment in which they live. The lack of access for disabled people to non-inclusive buildings, open spaces, streets, homes, markets and schools, as well as the unsuitability of transport vehicles and public transport services for disabled people, are among the problems that cause inequalities in social life. These physical environmental barriers, as a result of errors and deficiencies in urban planning, lead to the exclusion and discrimination of disabled people from society (Shakespeare, 2011; Braddock & Parish, 2011; Aşkın & Aşkın, 2018; Kitchin, 1998; Gleeson, 2011; Levine & Karner, 2023).

On a global scale, the CRPD promotes a more inclusive and rights-based approach, grounded on the understanding that social and environmental barriers stemming from interaction hinder the full and effective participation of disabled people in society (Hoagland, 2019; Smith-Khan & Crock, 2019; Hisham & Zuraini, 2020).

In this context, regulations on access to the physical environment that impede or prevent the participation of disabled people in political, economic, social and cultural life, when not made in accordance with specific principles



such as reasonable accommodation and universal design<sup>3</sup>, are considered to constitute a situation of discrimination and exclusion of disabled people (UN, 2006). In this context, the relevant articles of the CRPD emphasise the need to ensure equal access to the physical environment, transport and other public facilities and services in order to ensure the full participation of disabled people in independent living and in all areas of social life. States are required to take the necessary measures to ensure the accessibility of buildings, roads, transport, schools, homes, health care facilities, workplaces and other services to facilitate access. Detailed provisions on the accessibility of buildings and facilities are discussed in detail in the Convention (UN, 2006).

It is noted that challenges related to the exclusion of disabled people persist in the countries to which they migrate, and that discrimination against disabled people continues and is reproduced (Chabeda-Barthe et al., 2019, p.3; UNHCR, 2019b, p. 50). This situation makes disabled migrants more vulnerable than other migrant groups in the international migration process. However, disabled people are among the least considered and data-deficient groups during the international migration process (WHO, 2022; Smith-Khan et al., 2015; Crock et al., 2012; Hoagland, 2019). Due to this lack of data, the conditions and needs of disabled migrants are often unclear. Moreover, this lack of data on disabled migrants leads to a lack of understanding of their needs, inadequate services for them and further experiences of exclusion and disadvantage (Özçatal, 2022, pp. 302-303). Therefore, it is important to use the social model approach to understand the problems and causes of exclusion of disabled migrants. The social model can help in adopting more inclusive policies by highlighting barriers affecting the participation of disabled migrants in society, especially those arising from the accessibility conditions of the physical environment (Hoagland, 2019; Badali, 2021; Meschede et al., 2023).

In this study, the examination of the problems of disabled migrants related to the physical environment is approached through the lens of the social model theory, which emphasises that disability is not only an individual health problem, but rather a social phenomenon that interacts with environmental and behavioural barriers arising from societal structures.

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<sup>3</sup> Universal design is the design of products, environments, programmes and services so that they can be used by everyone, as far as possible, without the need for special additional design or adaptation. Reasonable accommodation is the necessary and appropriate modifications and adjustments that are needed in a given situation to enable persons with disabilities to exercise or enjoy their human rights and fundamental freedoms fully and on an equal basis with others, and that do not impose an undue or excessive burden (UN, 2006).

## **2. PURPOSE, IMPORTANCE AND METHOD OF THE RESEARCH**

This section provides information about the purpose and significance of the study, the methodology used in the research, and the results of the research.

### **2.1. Purpose of the Study**

Among migrant groups, disabled migrants are one of the fastest growing and most vulnerable groups. However, the problems faced by disabled migrants and their rights to participate in social life have not been sufficiently addressed in the international and national literature. This situation indicates a research gap regarding disabled migrants (Smith et al., 2023; Karataş, 2017; Kaya, 2017; Memişoğlu et al., 2021). The main objective of this study is to understand the physical environment barriers faced by disabled migrants, how these barriers affect their participation in social life, and their experiences and problems related to the accessibility of the physical environment in the context of the social model. The aim is to identify the physical environment problems of disabled migrants, to analyse the origins and consequences of these problems and to contribute to the development of more inclusive policies.

### **2.2. Research Importance**

The importance of this study lies in understanding the physical environmental barriers faced by disabled migrants. The study is considered important in terms of highlighting the accessibility problems of disabled migrants and the physical environment they encounter, raising awareness and contributing to the development of social policies and practices for disabled migrants. This research will enable the identification of the difficulties and discrimination experienced by disabled migrants and the development of policies and practices to address these problems. In addition, this research provides a platform for protecting the rights of disabled migrants and increasing their social participation.

### **2.3. Research Methodology**

In line with the specified objectives, a qualitative approach was adopted, utilizing in-depth interview technique. Qualitative research methods are very useful for migration research and for identifying and understanding the experiences and issues of populations that are perceived as hard to reach (such as people with disabilities and ethnic minority groups) (Kümbetoğlu, 2012; Harris & Roberts, 2003). This research focuses on understanding and

analysing the experiences of disabled migrants by drawing on the experiences of 12 disabled migrants living in Tokat<sup>4</sup>.

The research used the phenomenological method, which is a qualitative research approach that adopts an individual-centred perspective and focuses on in-depth understanding (Yıldırım & Şimşek, 2006). In this method, the main aim is to collect data from individuals who have experienced a phenomenon and provide a description that defines the essence of all individuals' experiences (Creswell, 2016). In line with the qualitative approach, the study used the experiences of disabled migrants to gather information about their issues, and data was collected through observation and semi-structured in-depth interviews<sup>5</sup>. During the interviews<sup>6</sup>, in addition to general information such as participants' demographic characteristics, reasons for migrating from their countries, and length of stay in Tokat, Türkiye, issues related to the accessibility of the physical environment they encountered in their place of residence were also addressed.

Content analysis method was used to analyse the data. Content analysis essentially enables the organization and interpretation of similar data within specific concepts and themes. This analytical method encompasses coding of the data, identification of themes, organization of codes and themes, description and interpretation of findings (Yıldırım & Şimşek, 2006). Accordingly, participants' responses were examined, similar data were coded, then conceptualized, and from these concepts, themes and associated sub-themes were formed. In qualitative research, directly quoting interviewees' expressions and explaining the results in this manner ensures validity (Yıldırım & Şimşek, 2006, p. 257). Therefore, field data were analyzed using the participants' statements directly and presented in this manner in the study. To ensure participant confidentiality, their names were coded as P1, P2, P3..., P12 according to the order of the interviews, without revealing their identities. In the research, reliability was ensured through obtaining expert opinions, preventing data loss by using recording devices, checking for consistency among data, conducting in-depth interviews,

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<sup>4</sup> There are three main reasons for conducting this study in Tokat province. Firstly, there has been no previous field research focusing on disabled migrants in Tokat. Secondly, Tokat is one of the satellite cities where migrants with international protection status, such as conditional refugees, reside (defined by the Ministry of Interior as cities where migrants with international protection status reside during their stay in Türkiye). And third, the research area is geographically close to the researcher, which facilitates easy access to participants.

<sup>5</sup> The data related to the research were collected as a result of the interviews conducted between September and November 2022. In order to conduct the research, written permission was obtained from Tokat Gaziosmanpaşa University Social and Human Sciences Research Ethics Committee (25.08.2022/11-21).

<sup>6</sup> The in-depth interviews lasted a minimum of 55 minutes and a maximum of 120 minutes. The interviews were audio-recorded for those who consented to be audio-recorded, while those who did not consent were audio-recorded by the author. At the request of the participants, the interviews were conducted in their own homes. Two university students who speak Turkish well (Afghan and Iraqi) were used as interpreters during the interviews. Family members who speak Turkish also contributed to the study by translating questions and answers.

observations, and utilizing multiple data sources such as relevant literature, and quantifying the data<sup>7</sup> (Yıldırım & Şimşek, 2006; Creswell, 2016).

The snowball sampling technique was preferred to identify the participants for the study. In qualitative research, snowball sampling technique is known as an effective approach to reach hard-to-reach or invisible (hidden, sensitive, vulnerable) groups in society (Parker et al., 2019). In this sampling approach, other participants are reached through the key person, thus forming the research sample through interpersonal communication. In the research, the disabled migrants reached first introduced the researcher to other potential participants. The sample was closed when information and responses reached saturation point. Participants were selected on the basis of criteria such as being 18 years or older and having lived in Tokat for at least one year.

A total of 12 disabled migrants (5 women, 7 men) were interviewed. 7 of the participants were Afghan (3 women, 4 men) and 5 were Iraqi (2 women, 3 men). The age of the participants ranged from 21 to 50 years. Six participants are married and six are single. 3 participants are illiterate, 2 are primary school graduates, 3 are secondary school graduates, 2 are high school graduates and 2 are religious school graduates. The majority of the disabled migrant participants (9) have physical disabilities, while the rest have visual disabilities. Five of the participants have been living in Tokat, Türkiye for four years, two for six years, three for five years, one for seven years and one for eleven years. All Afghan disabled migrants migrated to Türkiye to escape Taliban oppression, while three of the Iraqi migrants fled due to internal conflict/war and two due to ISIS oppression.

## **2.4. Findings and Discussion**

Based on the data analysis, the problems of disabled migrants related to the accessibility of the physical environment are addressed under five main themes. These themes are problems related to the physical conditions of the houses they live in, problems related to the physical conditions of the neighbourhood they live in, problems related to access to public places (e.g. parks, shopping places) due to physical environmental conditions, problems related to access to services due to physical environmental conditions, and problems related to the physical conditions of the buildings where the services are provided. The findings include frequency information for each theme and extracts from the participants' statements, and are discussed in the context of the relevant literature.

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<sup>7</sup> Due to some participants providing responses under different themes, the total frequency exceeds the number of participants.

#### **2.4.1. Findings on the Physical Accessibility Conditions of the Dwellings in Which They Live**

For the participants, an important issue related to the accessibility of the physical environment is the physical conditions of the houses they live in. All disabled migrants who participated in the research (n=12) expressed problems related to the physical conditions of their homes. Observations made during the research confirmed this situation. It was found that the housing in which the interviewed disabled migrants live is not suitable for their needs. These flats are usually located in old, narrow, multi-storey buildings without lifts. It was also noted that the entrances to the houses and the stairs inside the buildings are high and narrow.

In the research, participants expressed the following problems regarding the physical conditions of their dwellings: The house is narrow or small (n=12), lack of a lift (n=12), the toilet/bathroom being narrow or small (n=11), stairs in the house are high and narrow (n=11), the stairs at the entrance of the house are high (n=3). Some of the participants' statements are presented below:

"We live on the 4th floor. Our house is crowded and small, ... it is quite inconvenient. Especially walking with crutches makes it difficult for us to feel comfortable in the house. Rooms, corridors, every corner of the house are narrow. We also do not have a lift, so the stairs are very difficult and tiring. It is really hard to get up and down. At the entrance of our flat, in front of the door of the building, there are a lot of stairs. This situation is a big problem for me when I enter or leave the house." (P2, physically disabled, woman)

"The house is too small. ... In winter we use the stove. This is very dangerous for me. No matter how careful I am, I keep bumping into the stove because the house is very narrow. I can't move much, even to go to the toilet, my sister or brother helps me. .... We have no chance to change houses, we have to live here." (P3, visually impaired, woman)

"The stairs in the house are very high. So getting out is quite limited. .... There is no lift in our current house. The stairs are tiring, it is difficult to get up and down. I have a lot of trouble getting my daughter up and down the stairs. ... The stairs in the house are very steep." (P4, physically disabled, woman)

"I am visually impaired, one eye is completely blind and the other is partially sighted. The house ... The toilet, the bathroom, the rooms, they are all very small and narrow. This is the second floor, the stairs are narrow and high. ... My mother, father, sister and brothers help me. I can't get up and down without them. I can't go out much anyway. We don't live in a house adapted for disabled people. The house is very bad... But they recommended this place, they said the rent is low, you can rent a house there. We had to live here. (P7, visually impaired, male)

"The stairs are too high for me. ... they are difficult for the disabled. It is not possible to go up and down so many stairs with crutches. My uncle's son takes me up and down on his back. ... I get help from him when he is at home. No one else is in a position to help me. My father is old and my brothers work. ..." (P9, physically disabled, male)

Disabled migrants face a number of difficulties in relation to housing and accommodation conditions that are not adapted to their needs. The inaccessible physical conditions of the houses restrict the movement of disabled migrants, limit their independent movement even within the house and prevent them from going out. Not all participants have access to houses with lifts that meet their needs due to high rental costs. Affordable, accessible and safe housing that meets their needs is a fundamental element in enabling disabled people to build meaningful relationships, integrate into society and participate in work, school and leisure activities (Gibson et al., 2012). Therefore, addressing housing inequalities is essential for disabled people to lead healthier and more socially integrated lives (Meschede et al., 2023, p. 228). However, research shows that the lack of housing adapted to the specific needs of disabled migrants is one of their main problems. This situation is highlighted as an exclusionary factor that limits their mobility and consequently their participation in society (Martín-Cano et al., 2020; Leenknecht, 2020; Mizra & Heinemann, 2012). Studies conducted in Türkiye also show that the housing provided for disabled migrants does not meet accessibility requirements and they face significant difficulties due to the challenges of their physical environment (Memişoğlu et al., 2021; Kaya, 2017).

#### **2.4.2. Findings on the Physical Accessibility Conditions of the Residential Neighbourhood**

For disabled people, the physical accessibility of the neighbourhoods in which they live is crucial within the social model approach. Accessible physical environments help disabled people to lead healthier and more independent lives in society. However, research shows that the inadequacy of physical accessibility conditions in the neighbourhoods where disabled migrants live results in them living in an environment that reinforces their disability beyond their functional limitations (Meschede et al., 2023, pp. 229, 244). In particular, participants' accounts highlight issues such as broken or uneven roads (n:11), distance to necessary transport stops (n:11), lack of footpaths (n:8), steepness of ramps (n:8) and height of kerbs (n:5) in the neighbourhoods where they live. These issues highlight the external challenges of the built environment that disabled people face when leaving their homes. Participants' comments on these issues were as follows:

"I don't know anywhere else but here. It's a long way from anywhere, with old houses. I spend my life here. The roads are very bad, bumpy and there are no pavements. My family members ... there is no problem for them.

Anyway, if I could see, ... the roads and other things wouldn't be a problem. But because I cannot see, the place I step on, the unevenness of the road and the lack of pavements are a problem." (P3, visually impaired, woman)

"The location of the neighbourhood is bad, there are no pavements. When we walk in the street, the cars pass very close, as if they want to touch us or run us over. The bus stop is quite low and far away... So it is not easy to reach." (P4, physically disabled, woman)

"The road in the neighbourhood is quite uneven, so I am afraid of falling while walking. ... I cannot walk comfortably. The pavements are narrow and uneven, and their height is too high. My feet feel hollow and I have problems with balance. It is not safe and comfortable for me to walk around the neighbourhood. ..." (P8, visually impaired, male)

"The roads are in bad condition, very steep and hilly. It is very difficult to walk. If you want to go somewhere, you usually have to take the bus. The bus stop is quite far away. It is difficult for me to walk with crutches. ... It is not possible to walk alone on these streets." (P11, physically disabled, male)

The accessibility problems arising from the physical environment conditions of disabled immigrants make their lives significantly more difficult (Memişoğlu et al., 2021). The lack of physical conditions suitable for their needs, from their homes to their neighbourhoods, limits their mobility and makes it difficult for them to participate in society (Kaya, 2017). The findings of this study also indicate that the physical environmental conditions of neighbourhoods pose significant challenges for disabled immigrants and play a restrictive role in their movements. The observations corroborate this, showing that the neighbourhoods where disabled immigrants live often have characteristics that could be obstructive. For example, the streets in these neighbourhoods are generally narrow and poorly surfaced, some neighbourhoods lack sidewalks or have high curbs, and the neighbourhoods are observed to have very steep and sloping geographical areas with ramps.

#### **2.4.3. Findings on Problems of Access to Public Spaces due to the Accessibility Conditions of the Physical Environment**

The negative physical access conditions of the houses and neighbourhoods where disabled migrants live prevent them from accessing public spaces. The negative physical conditions of the places where disabled migrants live make it difficult for them to access public spaces such as parks, shopping centres and places of worship (Kaya, 2017). This situation limits their social interactions and hinders their social integration.

The data obtained in the study indicate that access to public spaces, which is crucial for participation in social life, is limited for disabled migrants due to the inadequate accessibility of the physical environment of

homes and neighbourhoods. In this context, it was found that another important problem for the participants related to the physical environment was the problems of access to public spaces. Two sub-themes within this theme show the difficulties that participants face in accessing parks and shopping areas due to the accessibility of their physical environment - their homes and neighbourhoods. Due to inaccessible environmental conditions, disabled immigrants are unable to access social spaces such as shopping centres and parks and to carry out activities of daily living. Conditions created by the design of the physical environment, such as the inability to use streets and sidewalks, to access parks, gardens and green spaces, and to benefit from shopping centres and transport, are the fundamental barriers to their access to public spaces.

In the study, disabled immigrants expressed their inability to go to parks due to unfavourable physical environment conditions. Participants identified the conditions of their homes and neighbourhoods that make it difficult to go to parks with codes such as high stairs in the house (n:9), lack of lifts (n:9), rough and uneven roads in their neighbourhood (n:9), distance of their home from the park (n:8), distance of bus stops used to reach the park (n:6), and lack of sidewalks (n:5). Some statements on this topic are given below:

"I've been to the park a few times, but I can't go back. It's too inconvenient for me. The park is too far from here. ... the road is uneven, which makes it difficult to walk. When the weather is good, my family takes me out and we walk around where the house is. It doesn't feel like a park because there are other people there, children. It is good to hear their voices. The park is actually a nice place to go. It's a place for me to walk around, but I can't go because it's far away..." (P3, visually impaired, woman)

"It is not possible to go to the park, I cannot take my daughter for a walk and I cannot take her to the park. When her father has time, he takes us. Sometimes he takes us, but he does not have time because he works. There are nice parks by the river in Tokat, they are good for people. But these parks are far away and you have to take the bus. Getting to the bus stops is a problem... I can go down the stairs of the house with difficulty, but the street is dangerous. There is no pavement. I am afraid of being hit by cars." (P4, physically disabled, woman)

"I can't go to the park, how can I? There are a lot of stairs in the house and the road outside is in bad condition. This is a big problem for me. So it is very limited for me to go out. We usually walk around the house, my mother, my siblings and my father help me, they are with me. Apart from that, I do not have much opportunity to go out for other reasons. Parks are far away from my neighbourhood. ... It is also difficult to walk on the cobbled street. So I can't go to parks." (P7, visually impaired, male)

"There's no park in the neighbourhood so I can go for a walk. It's far... I can't go myself, I can't go up and down the stairs of the house. There's no



pavement on the road, the road slopes too much. It's impossible for me to go to the park. My mum and dad are old; they'd find it hard to take me. ... This place is far from everywhere, I stay at home, I can't afford to go out." (P9, physically disabled, male)

The findings of the study indicate that due to the challenges posed by the structural physical environment, disabled migrants have limited outdoor activities and access to public living spaces, particularly parks. However, green spaces, especially parks, play an important role in the structural development process of communities in urban areas. These areas are social spaces where individuals and society meet, socialise and interact with people from different social classes and cultures. In this context, these spaces, which promote social participation and have important functions, are also crucial for people with disabilities (Yılmaz et al., 2014; Gibson et al., 2012). Disabled migrants are isolated and excluded from public spaces due to the barriers created by the physical environment.

The study revealed that participants were unable to go shopping due to the physical accessibility conditions of their living environment. The reasons for this were coded as the lack of a lift in the building (n:9), the distance of their home from shopping areas (n:9), the height of the stairs in their home (n:8), the poor or uneven roads in their neighbourhood (n:7), and the distance of the bus stops to be used for transport (n:7). Participants expressed this situation with the following statements:

"Shopping places are quite far away for us. There are no shops even here.... I try to go with my husband sometimes, but he helps me up and down the stairs at home. I struggle on my own because the stairs are high and it is not easy for me to go up and down. My female relatives, even if they don't go shopping, just go for a walk. It's good to mix with people and get out of the house. I would like to go out too, but it is difficult for me to go down the stairs and walk to the bus stop. The bus stop is very far away, if it was closer I could go." (P1, physically disabled, woman)

"Going to shopping centres is a good way to get out of the house. I can interact with people and get in touch with the outside world. It allows me to go out and travel and meet different people. But I cannot go alone, I need someone with me. We could not find a place on the ground floor of the house, we live on the 5th floor. I have difficulty getting up and down the stairs by myself. If the house had a lift, I would not have so much trouble. ..." (P5, physically disabled, woman)

"I can't go to the shops because the slope in my neighbourhood is very steep. I have to go to the bus stop to buy things and it is very difficult for me. It is difficult to go up and down the slope, the road is not smooth, it is bumpy. ... If the road was smooth, I could easily go to the shops, I could go anywhere." (P6, physically disabled, male)

Participants are unable to access shopping facilities due to the inaccessible conditions of the physical environment. This situation prevents full and effective access to public spaces such as shopping centres, which are important for social participation, and makes access to daily life activities more difficult. Spatial problems that make disabled people passive and restrict their living space also limit access to facilities, services and social networks in the community. As a result, situations arise where individuals are unable to access even shopping facilities, resulting in disabled people not being able to do their own shopping. Similarly, the research found that due to the inaccessible conditions of the physical environment, participants were unable to access shopping venues, they were unable to shop for themselves and consequently their dependence on others increased (Özçatal, 2021b, p. 195). In this context, some of the participants' expressions are presented below.

“The shops are far away. That's why I can't go. As you can see, my house has stairs. Going up and down from the 3rd floor is very difficult, very tiring. ... Shopping is also a problem. Even going to buy bread is too much effort for me. So I ask my wife or relatives to do the shopping for me.” (P4, physically disabled, woman)

“There's nowhere to shop in the neighbourhood, it's too far away. Even if I could go shopping, carrying the bags... it is very difficult. When you get off the bus at the stop, you have to walk a lot. It is quite difficult for me because one leg is shorter than the other and I limp. I can't walk long distances. ... I can't go shopping at the moment, ... My brother or relatives do it for me.” (P10, physically disabled, male)

#### **2.4.4. Findings on Problems of Access to Services due to the Accessibility of the Physical Environment**

According to the social model approach, inaccessible housing and neighbourhood conditions have a negative impact on the ability of disabled people to lead healthy lives, to ensure access to services necessary for participation in society, to reduce their isolation and barriers to community life (Meschede et al., 2023).

Similarly, the adverse physical environmental conditions identified in the research, which prevent disabled migrants from engaging in activities such as going to the park or shopping, leading to increased social isolation, were found to hinder their access to essential services. Interviews with disabled migrants focused on the variety of problems encountered in accessing basic services due to the accessibility of the physical environment. In this context, three sub-themes were identified: difficulties in accessing health services due to the physical environment in the area where they live (home/neighbourhood), barriers to accessing language services and problems arising from the physical conditions of buildings where language services are provided.

One of the main challenges participants face in accessing services due to the physical environment is the barrier to accessing health services posed by the physical accessibility features of their homes and neighbourhoods. Participants expressed these challenges for reasons such as distant locations of transport stops (n:11), lack of lifts in the building (n:10), high stairs in the house (n:11), poor or uneven roads in the neighbourhood (n:10), and steep ramps along the way (n:5).

Disabled migrant participants are unable to access hospitals and health facilities due to the negative physical accessibility conditions they highlighted, resulting in their inability to attend hospital appointments in a timely and convenient manner. In addition, they cannot even visit hospitals for additional health care needs arising from their disabilities (such as prosthetic needs or obtaining disability-related reports) due to the unfavourable conditions of the physical environment. In addition, participants face difficulties in accessing public transport stops, finding transport vehicles and/or paying for them due to inaccessible physical environment conditions. Some statements made by participants about access to health services due to the physical environment in which they live include:

"... Recently my daughter fell ill, but I couldn't take her to hospital; ... we had to wait for her father. Recently my disabled leg has been very painful and it has become difficult for me to walk. That's why I can't go to the hospital right away. It's difficult for me to walk up the stairs of the house by myself. I have to take the bus to the hospital, but the bus stop is very far away. The roads are not flat, they are bumpy. ... The best thing is to take a taxi, but the hospital is ... far away, so the taxi fare is very high and we cannot afford it." (P4, physically disabled, woman)

"It's very difficult for me to go to the hospital when I'm sick. ... One of my legs was amputated, I have a prosthesis and it hurts a lot because the prosthesis is worn out. ... The hospital building is very far away from us... The slope in our neighbourhood is very steep and I have to walk up and down it to take the bus. Even the taxi drivers use the slope and the distance as an excuse to charge me a lot of money and do not give me a discount." (P6, physically disabled, male)

"... going to the hospital is a big challenge. It was difficult for me to go to the hospital to get a disability certificate. Transport problems are a big obstacle. The location of the house is quite bad; ... the bus stops are far away. My mum, dad and sister take me by the arm to get me to the bus stop, but I still run the risk of falling because of the slope of the road ... We called a taxi once, but we couldn't pay the full fare and it was very expensive... The neighbourhood and the roads are also in a very bad state." (P7, visual impairment, male)

"The bus stop is a long way from my home. Getting to the bus stop on crutches is a big problem for me, ... my walking is limited. ... an additional

difficulty is that the street is uphill .... Therefore, my brother or my uncle's son usually carries me on his back to the bus stop. Because of these transport difficulties, it can be quite difficult to get to the hospital. Several times I have been late for an appointment. Such difficulties prevent me from going to the hospital. It would be a great convenience for people like me if we were provided with suitable transport and picked up from home.” (P9, physically disabled, male)

The findings show that participants have difficulties in accessing hospitals for both general health needs and additional health needs due to their disabilities because of the unfavourable conditions of the physical environment. In a study covering Malaysia, Indonesia, Pakistan, Uganda, Jordan and Türkiye, it is stated that the difficulties experienced by disabled migrants in accessing health services are exacerbated by the adverse geographical/physical accessibility conditions of the dwellings in which they live and the fact that they live in places far away from the buildings where health services are provided, while having limited accessible transport options. It is stated that all the difficulties experienced in accessing health services due to the barriers of the accessibility conditions of the physical environment mean that disabled migrants have fewer options and opportunities to seek medical assistance for their general health status and additional disability-related health needs, which increases the risk of adverse effects on both general health and disability-related health conditions (Smith-Khan & Crock, 2019, pp. 10, 18).

Participants are also unable to access language services because of the physical environment in which they live (home, neighbourhood). Participants stated that they could not attend language learning courses because of the negative physical environment of their homes or neighbourhoods. Disabled migrant participants stated that accessibility problems such as the distance of the bus stops where they would have to get on (n:12), the fact that the houses they live in do not have a lift (n:9), the presence of high stairs (n:9), the broken roads of the neighbourhood they live in (n:8), the high pavements (n:2) and the high stairs at the entrance of the house (n:1) caused them not to attend language courses. The participants' views on this issue are presented below.

“I only did the language course once. ... It was challenging and I didn't continue after that. I use crutches in everyday life, so it is quite difficult for me to go out. The course centre is quite far away... My husband, his brother, my uncle's sons and their wives went to the K2 course. My family members usually travelled by bus. The bus stop is quite far away... For these reasons I cannot attend the course.” (P2, physically disabled, woman)

“Together with my uncle's daughter and my sister... I attended the Turkish course twice. However, I had a lot of difficulties on the way to the course and could not continue afterwards. In everyday life, it is difficult for me to go up and down from the 5th floor... There are also a lot of stairs at the

entrance of the house. The bus stops are quite far from my house... Walking to the bus stop is quite tiring for me. I have not yet been able to attend the course because of the distance, the lack of a lift at home and the difficulty of the road.” (P5, physically disabled, woman)

“Learning a language is difficult. The language courses are very far away from the neighbourhood where we were offered to live. For a healthy person this is not a problem because they can take a minibus. They can even walk there. But for people like us, who have problems walking, it is more difficult. The roads in the area are bad and the pavements are high. So getting to the bus stop is quite a challenge.” (P12, physically disabled, male)

The unsuitable accessibility conditions of the physical environment hinder access to language services. This finding is consistent with similar research in the literature. Studies conducted in the USA, EU countries, the UK, Canada and Malaysia have identified factors such as the lack of suitable housing and the unsuitability of the physical environmental conditions of the place of residence as limiting access to language services for disabled migrants and hindering their social participation (Martín-Cano et al., 2020; Leenknecht, 2020; Mizra & Heinemann, 2012; Burns, 2020).

An important issue articulated by participants regarding access to services due to the physical environment is related to the physical conditions of the buildings where language services are provided. Codes identified on the basis of participants' statements on this issue are listed as physical conditions such as distance from public transport stops (n:9), lack of lifts (n:9), high staircase steps (n:4), high stairs at the entrance of the building (n:4), and narrow classrooms (n:4). In the research, participants expressed a strong willingness to engage in language learning but indicated that they were unable to do so. One of the main reasons for this is the physical conditions that hinder their access to language services; these conditions include factors such as the distance of the course building in terms of transport, the lack of lifts, high stairs at the entrance of the building, and narrow and small classrooms. These barriers to access pose significant challenges for participants in attending and continuing language courses. Below are some expressions related to this issue:

“In the language centre where Turkish was taught, there were many steps both at the entrance and inside the building. There was no lift in the building and this made it very difficult for me to navigate the stairs. This situation was one of the reasons why I gave up on the course and couldn't continue.” (P2, physically disabled, woman)

“I attended the language course. However, once you got off the bus, the building was quite far away. Also, there was no lift and the steps to enter the building were quite high. This made it very difficult to get in and out of the building and made me tired. I could not bear it and stopped attending the course when it became difficult. I could only attend the course for a total of five days.” (P4, physically disabled, woman)

“I attended the language course, but I had a lot of difficulties. It was very difficult to go up and down the stairs with my artificial leg. For this reason, I was able to walk ... from time to time, ... So I could not learn Turkish well. It would be much better if such buildings were built with disabled people like us in mind, or if facilities like lifts were added. So that we could also ... attend courses to learn Turkish.” (P6, physically disabled, male)

“My mother, father and siblings attended the language course. Later my wife joined them. But they told me not to come. After we got off the bus, they said it was a long walk to the course building. ... I tried it once. .... It was a long walk. There was no lift in the building. The classrooms were small and crowded. For someone with a disability ... it was restrictive. For these reasons I did not continue the course.” (P12, physically disabled, male)

These findings are consistent with other relevant research. Studies show that language learning courses for migrants do not take into account the disability perspective (e.g. accessible physical environments), which makes it difficult for disabled migrants to access this important service. The neglect of accessible transport and built environments for disabled migrants exacerbates difficulties in language development (Leenknecht, 2020, pp. 14-15). All these structural barriers limit the mobility of disabled migrants and create challenges in accessing essential needs such as language services (Martín-Cano et al., 2020).

The situation of being deprived of language services due to physical environmental conditions results in disabled migrants not knowing or learning the language of the country in which they live. The research found that most of the disabled migrants (n:9) do not know Turkish, one person knows and speaks Turkish to a limited extent, and only two people can understand and speak Turkish despite living in Tokat for a long time.

## **Conclusion**

We are witnessing a period of significant growth in international migration. People migrating to new countries face difficulties in integrating into society, accessing services and exercising their rights, leading to serious challenges such as social exclusion. The group that experiences these challenges more acutely are disabled migrants. Viewing disabled people solely as patients in need of care or rehabilitation leads to the exclusion of disabled migrants in their new countries and neglects the significant problems they face in participating fully in society.

There is a lack of data in national and international literature on the problems faced by disabled migrants and their rights to social participation. Therefore, there is a need for a more comprehensive social model approach that goes beyond individual health issues and emphasises the relationship between disability and societal structures and environmental factors in

addressing the problems of disabled migrants. This approach allows us to consider all the difficulties that disabled migrants face in participating in society and to address their problems within society.

This study explored issues arising from the inaccessibility of the physical environment experienced by disabled migrants, based on their experiences and using the social model approach. The research findings indicate that disabled migrants face a number of significant physical environment challenges within the social structure. These challenges arise from environmental factors such as their homes, neighbourhood streets, sidewalks, bus stops and buildings where language services are provided, which are not suitable for the needs and use of disabled migrants. Due to the inaccessible conditions of the physical environment, disabled migrants face significant difficulties. These challenges result in their inability to access even the most basic services such as health care and language training.

They face many fundamental problems due to the accessibility of the physical environment, such as narrow living spaces, lack of lifts and high staircases in their accommodation. Factors such as broken or uneven roads in the neighbourhoods where they live, the absence or high height of pavements and the location of transport stops make it difficult for disabled migrants to participate in society. These barriers prevent them from accessing social spaces such as shopping centres and parks and from participating in public life. In addition, the physical environment of their homes and neighbourhoods makes it difficult for them to access basic services such as health and language services. Furthermore, due to inadequate physical accessibility of service buildings, such as language courses, disabled migrants cannot benefit from the opportunity to learn the language of the new country, which is essential for social participation in the new country.

These problems arising from the accessibility of the physical environment have profound and serious consequences for disabled migrants. These problems are not limited to physical difficulties such as the inability to negotiate stairs or lifts in a building, or difficulties in walking due to factors such as poor road conditions, steep ramps or high pavements. These challenges make disabled migrants disabled not only because of their physical conditions, but also because of environmental factors arising from the physical accessibility structures of mainstream society.

Due to the unfavourable conditions of accessibility, disabled migrants' access to social spaces is restricted and their access to essential services is hindered. This situation makes them unable to carry out basic shopping and makes them dependent on others. The inadequate design of the physical environment makes it difficult or even impossible for disabled migrants to leave their homes, participate in social life and access services. All of these difficulties make disabled migrants invisible, vulnerable, marginalised and excluded, thus placing them in a difficult situation.

The results of this research highlight the importance of accessibility problems in the physical environment experienced by disabled migrants and show that these problems are not only related to individual disabilities, but also to structural barriers related to the organisation of the physical environment in society. The lack of accessibility in the physical environment stems from deeper societal barriers that go beyond the natural difficulties experienced by individuals who, for example, cannot climb stairs due to limited mobility. This situation limits the mobility of disabled migrants and makes them "truly" disabled.

Failure to address the challenges related to access to the physical environment for disabled migrants will continue to exclude them from full and effective participation in society. Therefore, addressing inequalities in the accessibility of the physical environment is crucial to prevent disabled migrants from living in isolation and to ensure their active and equal participation in society. To achieve this goal, relevant migration agencies need to adopt a disability-sensitive approach. These agencies should raise awareness of how disabled migrants are affected by accessibility issues in the physical environment and establish specialised units to address these issues. These units should address disability needs in relation to the physical environment and develop inclusive strategies for disabled people during the migration process. Cooperation should be established with relevant public institutions and civil society organisations to address the physical accessibility needs of disabled migrants.

Migration, migrants and disability are issues that affect all countries at both local and global levels. Therefore, local governments, states, international organisations, civil society organisations, the private sector and, in particular, representatives of disabled migrants should work together as stakeholders in identifying and solving problems. This inclusive approach will ensure a better understanding of the needs of the disabled migrant community in the physical design and planning process. Inter-agency cooperation is needed to develop and implement policies and programmes that correct the negative effects of physical environmental conditions that lead to the exclusion of disabled migrants. Solutions such as increasing accessible and affordable housing options for disabled migrants, providing rental assistance, and ensuring the accessibility of buildings that provide language services for disabled migrants should be considered as part of policies that address the accessibility needs of disabled migrants. In addition, when identifying and addressing the physical environment needs of disabled migrants, all relevant policy makers, service providers and implementers should be trained and educated in accessibility design in order to increase their knowledge and awareness of disability and disability rights during the planning and implementation phases.

Efforts to improve the accessibility of the physical environment, which is crucial for the integration of disabled migrants into mainstream



society, also benefit the community as a whole. Disability is not only a concern for migrant communities, but also a significant issue in the lives of the general population. In a world of ageing populations, chronic health problems, conflict and pandemics, everyone is likely to experience disability at some point in their lives. Therefore, creating safe and accessible physical environments in urban areas (including buildings, streets, parks, transport systems, sidewalks, roads, ramps, stops, etc.) will facilitate access to services and opportunities for all members of the local community, especially disadvantaged groups, as well as disabled migrants. Ensuring the accessibility of the physical environment is critical to meeting the overall needs of society.

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