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The Role of Imam-Hatips Deployed in Türkiye's COVID-19 Pandemic Response

Türkiye'de COVID-19 Pandemi Uygulamalarında Görevlendirilen İmam-Hatiplerin Rolü

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Abstract

During the COVID-19 pandemic, Türkiye implemented strict measures like curfews, school closures, and isolation rules, which also affected religious Presidency of Religious Affairs (PRA) congregational prayers, leading to imam-hatips being exempt from their mosque duties and redeployed to assist with contact tracing. Unlike many countries, Türkiye implemented home-based contact tracing, where health professionals monitored infected individuals and their contacts. Imam-hatips supported these efforts by calling patients, delivering masks and sanitizers, and ensuring isolation compliance. They also participated in Vefa Social Support Groups to provide socioeconomic aid. Despite their significant roles, the experience of imam-hatips, particularly in contact tracing, has been understudied. This research, based on interviews with imam-hatips in Istanbul and Balıkesir, explores their experiences. Findings reveal that while imam-hatips faced challenges balancing their religious duties with new responsibilities, many found purpose and satisfaction in contributing to their communities. Though missing their traditional roles, imam-hatips embraced their expanded duties, motivated by a sense of religious and moral obligation. This study sheds light on imam-hatips' unique contributions and the challenges they faced during Türkiye's pandemic response.

Keywords: Sociology of religion, COVID-19 pandemic, Türkiye, imamhatips, contact tracing

Öz

Türkiye, COVID-19 pandemisi sırasında, sokağa çıkma yasakları, okulların kapatılması ve izolasyon gibi çeşitli önlemler uygulamıştır. Diyanet İşleri Başkanlığı (DİB), virüsün yayılmasını önlemek amacıyla cemaat namazlarını askıya almıştır. Bu süreçte imam-hatip olan DİB çalışanları, cami görevlerinden muaf tutulup, filyasyon çalışmalarına dahil edilmiştir. Türkiye, diğer ülkelerden farklı olarak, evde temaslı takibi uygulamıştır. Sağlık profesyonelleri, enfekte bireyleri izleyip izolasyon kurallarını denetlerken imamlar da hastalarla iletişim kurarak, maske ve dezenfektan dağıtarak ve izolasyona uyumunu kontrol ederek bu çalışmalara destek olmuştur. Ayrıca, Vefa Sosyal Destek Grupları'nda, ihtiyacı olan ailelere sosyoekonomik destek

sunmuşlardır. Türkiye'de imam-hatip görevlilerinin pandemide özellikle filyasyon çalışmalarındaki deneyimleri yeterince araştırılmamıştır. Bu çalışma, İstanbul ve Balıkesir'deki imam-hatip görevlileriyle yapılan görüşmelerle bu deneyimi ele almaktadır. Çalışmanın ana bulgusu, imamların cami görevlerini sürdürme ve filyasyona katılma arasında denge kurma zorluğu yaşamalarına rağmen, cami cemaatlerinin ötesinde topluma hizmet etmeyi amaç edinip bundan memnuniyet duyduklarıdır. Cemaat namazlarını kıldırmak gibi geleneksel rollerini özleseler de filyasyon görevinde topluma moral ve manevi destek sunmak açısından motive olmuşlardır. Bu çalışma, Türkiye'de pandemi sürecinden imamların deneyimlerine ışık tutmakta, onların önemli rollerini ve bu olağanüstü dönemde karşılaştıkları zorlukları ele almaktadır.

Anahtar Kelimeler: Din sosyolojisi, COVID-19 pandemisi, Türkiye, imam hatipler, filyasyon

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Introduction

The coronavirus outbreak, first identified in Wuhan, China, in December 2019, rapidly became a global health crisis. The World Health Organization (WHO) officially declared the outbreak a pandemic in March 2020 (WHO, 2020). Following the widespread transmission of cases, all nations implemented various precautionary measures to minimize its impact. In addition to its profound impact on global health and well-being, the COVID-19 pandemic significantly altered social, economic, and religious life. This study examines how the pandemic affected religious life from the perspective of imam-hatips (afterwards imams) in Türkiye, focusing on their deployment in pandemic tasks, specifically contact tracing.

Türkiye recorded the first official COVID-19 case on March 11, 2020. Like many other countries, Türkiye implemented preventive measures to curb the spread of SARS-CoV-2 and introduced initiatives to address the pandemic's wide-ranging challenges. As part of these efforts, various civil servants were temporarily assigned health-related duties, including staff from the Presidency of Religious Affairs (PRA).

Contact tracing teams were established to monitor individuals diagnosed with COVID-19 or those who had been in contact with infected persons. This process involves identifying sources and contacts to implement protective and control measures against infectious diseases (Health Ministry, 2021). While these teams primarily included doctors, health personnel (nurses, midwives, technicians), and drivers, by 2021, dental professionals and other government employees, including religious officials, were deployed by the government in contact tracing workload (Polat et al., 2022). Health professionals were assigned to medical duties, while other personnel focused on controlling and auditing. Thus, it can be stated that the role of religious officials in these teams pertained to regulatory support rather than direct health interventions. Imams were deployed also in Vefa Social Support Groups, which were established under the coordination of provincial and district governors to support highrisk and vulnerable citizens. Approximately 140,000 personnel from the PRA worked with these groups (Capcioğlu-Kaya, 2021, 13). According to PRA President Ali Erbaş, 61,000 imams officially participated in Vefa Social Support Groups (Özkaya, 2020), while others assisted health professionals in contact tracing teams to help reduce their workload.

In addition to contact tracing efforts, the Turkish government implemented restrictions affecting various activities to manage the pandemic outbreak effectively and minimize losses. These included suspensions in education and religious practices, both in public spaces and private gatherings. On March 12, 2020, educational activities in institutions affiliated with the Council of Higher Education (universities) and the Ministry of National Education (primary to high schools) were suspended.

In the early stages of the pandemic, Türkiye imposed intercity travel restrictions in 30 metropolitan areas and Zonguldak, where population density was highest, to curb the virus's spread. Intercity flights were also suspended during this time. Weekend curfews were periodically enforced in these areas, while nationwide stay-at-home orders were issued for individuals under 18 and over 65. These restrictions were later modified to allow limited outdoor hours.

Religious life and religious personnel were notably impacted by Covid-19-related restrictions. In Saudi Arabia, Umrah pilgrimages were suspended as early as February 27, 2020 (Çapcıoğlu–Kaya, 2021), and Turkish nationals in Saudi Arabia were repatriated. In Türkiye, even before the first confirmed case, a reference to the coronavirus was included in the Friday sermon on March 6.

In response to public need for information on Islam's stance toward epidemics, the PRA published a book at the onset of the pandemic (Öztürk, 2020), detailing general attitudes within Islam toward illness. Illness was described as a test, a divine reminder, and a form of trial, emphasizing patience and resilience. Furthermore, the High Council of Religious Affairs issued decisions and religious rulings relevant to Covid-19.

The PRA announced on March 13, 2020, that Friday prayers would no longer be held in mosques (PRA, 2020). On March 16, the High Council of Religious Affairs suspended not only Friday prayers but all congregational prayers in mosques, emphasizing that preserving human life and avoiding

actions that endanger it is a fundamental principle of Islam. This decision was further supported by citing the words of Prophet Muhammad: "If you hear of an outbreak of plague in a land, do not enter it; if it occurs in a place while you are in it, do not leave that place." Another hadith, stating, "A person infected with a contagious disease should not bring it near those who are healthy," was cited to emphasize the importance of taking precautions during pandemics.

The PRA's, ban on congregational prayers in mosques allowed individuals to perform daily prayers alone in mosques. The call to prayer continued, and mosques remained open for individual prayer, although pandemic regulations, such as wearing face masks, had to be observed. In addition to these preventive measures, it was decided on March 22 that, after the night prayer, to support public morale, special prayers would be recited from mosque minarets, praying for deliverance from the pandemic. On May 29, congregational prayers for noon and afternoon as well as Friday prayers resumed under specific precautions (Interior Ministry, 2020), and by June 23, congregational prayers for all five daily prayers were reinstated in mosques. In other words, congregational prayers were banned from mid-March until the end of June, for about three months. Although this period was relatively short, it had a lasting impact on people's memories, including that of the imams, as will be discussed in the findings section.

The Impact of COVID-19 on Religious Life Worldwide

Türkiye was certainly not the only country to implement restrictions in the religious domain. According to the Pew Research Center (Pew), authorities in approximately one-quarter of the 198 regions studied enforced pandemic restrictions during religious services or gatherings through physical measures, such as arrests or detentions (Pew, 2022). In Nepal, for example, police used tear gas to disperse religious groups that violated pandemic rules (Sharma, 2020). In the U.S., 15 individuals were arrested at a rabbi's funeral for breaching the 'stay-at-home' directive (Flynn, 2020). Similarly, in South Korea, a church faced a police raid after holding public gatherings in defiance of restrictions (Volodzko, 2020). In India, two Christians who were detained

for violating lockdown restrictions tragically died following beatings while in custody (U.S. Department of State, 2020).

In Türkiye, although no arrests or detentions were reported, fines were issued for violations of pandemic restrictions. For instance, individuals who congregated in mosques despite the prohibition, as well as elderly citizens (65+) who attended mosques during restricted periods, faced fines under the 'Misdemeanor Law' (Erdem, 2020).

Another finding from Pew revealed that 27% of religious groups worldwide filed lawsuits challenging pandemic-related restrictions, arguing that they were unfairly treated compared to other entities, such as businesses and restaurants (Pew, 2022). In Belgium, for example, approximately 100 Catholics argued that prohibiting religious gatherings was disproportionate, especially when crowded groups were allowed to visit shops but not attend rituals (Pew, 2022).

In 35% of the regions studied, religious groups actively resisted COVID-19 restrictions (Pew, 2022). For instance, despite Canada's prohibition on large gatherings, some congregations continued holding services, arguing that these restrictions infringed upon their rights and freedoms. Similarly, in the U.S., a pastor continued to hold church services despite the restrictions (Hilburn, 2020).

Additionally, in some countries, religious groups faced accusations of spreading COVID-19. According to the U.S. Commission on International Religious Freedom, Shia Muslims returning from pilgrimage journeys in Iran were blamed for the spread of COVID-19 in Pakistan (Pew, 2022). In Türkiye, an individual who set fire to the door of the Bakırköy Armenian Orthodox Church claimed to have acted out of the belief that Armenian Christians had brought the virus to the country (Duvar, 2020).

Pew's analysis also indicated that, despite these conflicts, 47% of religious groups and leaders supported precautionary measures such as social distancing and handwashing (Pew, 2022). For example, both Protestant and Catholic churches in Lesotho promoted awareness and encouraged safety measures (Fides, 2020). In Istanbul, a church leader reported that churches were disinfected, temperatures were checked at entry points, and masks were

made compulsory (Akbulut, 2020). Similarly, in Türkiye, both non-Muslim communities and the PRA encouraged congregants to avoid collective worship and implemented protective measures to prevent the spread of the virus.

These examples from the global religious landscape illustrate that, in most countries, religious groups adhered to and supported pandemic regulations. However, they also expressed hesitation and doubt about sacrificing religious rituals while social life continued in other areas. In any case, the pandemic drastically reshaped religious life and communities.

The Purpose and Significance of This Research

While the COVID-19 pandemic has significantly reshaped religious life, research examining its impact on religious personnel remains limited. Although various studies have explored the pandemic's effects in Türkiye and globally, those focusing on religious figures, particularly imams, are scarce. This study seeks to shed light on the experiences of imams in Türkiye, who were tasked with roles outside their usual duties as part of the state's pandemic response. Specifically, imams were involved in contact tracing and the Vefa Social Support Groups. This research aims to explore how imams perceived these new responsibilities, the challenges they faced, and the opportunities these unique roles provided.

Although no studies specifically address the roles of imams in contact tracing, some research has examined their involvement in the Vefa Social Support Groups. Citizens over the age of 65 required increased spiritual support during the COVID-19 pandemic (Gencer, 2020). Gencer suggests integrating spiritual services into initiatives like the Vefa Social Support Groups. According to Gencer, staff members recognized this need and treated the elderly with appropriate care and courtesy.

In a related study, researchers explore the satisfaction of citizens over 65 with the activities of the Vefa Social Support Groups (Kaya et al., 2020). Staff members, including imams, worked in rotating shifts to meet the basic needs of citizens It has been observed that staff assignments were initially made by appointment but later transitioned to a voluntary system (Kaya et al, 2020). This shift was well-received, with staff expressing high satisfaction with their

roles and a willingness to participate in future assignments. In a separate study on the inclusion of teachers in these activities, the importance of sensitivity and role modeling was emphasized, noting that a volunteer-based approach was adopted (Özdoğru, 2021). Religious personnel, numbering 30,451, represent the largest professional group involved in the Vefa Social Support Groups (Savaş- Özbey, 2023, 316).

These studies highlight the significant role of religious personnel in pandemic response, particularly within the Vefa Social Support Groups, emphasizing their major contributions and voluntary involvement. While imams' roles in contact tracing differ from their roles in the Vefa Social Support Groups, it is crucial to examine both comparatively and shed light on their participation in contact tracing. How did imams perceive their involvement in contact tracing? What challenges did they encounter, and how did this experience influence their professional lives? Given the limited understanding of these issues, this study seeks to address these questions using a qualitative phenomenological research design.

Method

This study employs a qualitative research design, specifically a phenomenological approach. Phenomenology, as a qualitative method, focuses on understanding the lived experiences of individuals or groups (Creswell, 2013). It is particularly useful for exploring phenomena that are common in daily life but whose full meanings and interpretations are not fully understood (Yıldırım–Şimşek, 2016, 69). The primary objective of phenomenological research is to gain a deep understanding of human experience (van Manen, 2007). This approach was chosen for this study to explore, interpret, and describe the experiences of mosque imams during the pandemic. Through this method, the study investigates the imams' experiences in contact tracing, including their thoughts, emotions, perspectives, and interpretations of the situation.

Data Collection Process and Sampling

For this study, in-depth, face-to-face interviews were conducted with imams who played active roles in the 112 Emergency Call Center, Vefa Social Support Groups, and contact tracing teams during the pandemic. Due to the

pandemic conditions, direct observation was not feasible, so data collection was limited to semi-structured interviews. Ethical approval was obtained from the Ethical Council of University (2022/91, 28.02.2022) and the Provincial Mufti's Office (E-609228694-250-2688569, 22.07.2022).

Throughout the study, the researchers adhered to the ethical guidelines outlined in the ethics committee application. Before the interviews, each participant was provided with detailed information about the study, along with a document containing the researchers' contact details. Confidentiality and anonymity were ensured, with interviews recorded on personal devices and transferred to the researchers' secure computers. Once the transcriptions were completed, the recordings were deleted from both devices. Participants' identities and personal details were kept confidential by replacing their names with assigned participant numbers. Specific place names, such as mosques and neighborhoods mentioned by participants, were omitted from the transcript, though city and district names were included. Given the large number of actively serving imams, the use of these broader geographic identifiers was considered acceptable, as it did not violate anonymity.

The Provincial Mufti's office granted permission only for research in two specific districts near the researchers' residence. Requests to expand the sample to include other districts for greater diversity were denied, thereby restricting the study to these particular districts within Istanbul. Accordingly, based on the scope of this ethical authorization, two district mufti offices in Istanbul—Beykoz and Ümraniye—were contacted. Imams for the interviews were recruited through these district offices. A total of 17 participants were included in the study. The majority of participants were from Istanbul (13), while a smaller group (4) was selected from Balıkesir to ensure diversity and heterogeneity in the sample, allowing for a comparative analysis.

Participants from Istanbul were contacted through district mufti offices, while those from Balıkesir were reached through individual means. Interviews were conducted by the lead researcher in locations such as the mosque where the imam served, the imam's office, or mosque-affiliated associations. Only one interview took place at the district mufti's office, at the participant's request. Interviews were recorded using voice recording

software on the researcher's personal phone and transcribed verbatim. Each interview lasted approximately 40 minutes, yielding a total of 135 pages of raw data. The semi-structured interviews included 11 main questions, along with follow-up questions. When necessary, questions were clarified, adjusted, or supplemented with new ones, in accordance with the guidelines for semi-structured interviews (Polat, 2022).

The imams' involvement in the 112 Emergency Call Center, Vefa Social Support Groups, and contact tracing teams lasted between 3 months and 2 years. While participants provided approximate timeframes, they did not report continuous engagement. Some imams mentioned two years, but their roles varied depending on case numbers and assignment needs. Thus, the process was irregular and fluctuating for the imams. However, this variability did not affect the primary research question or the study's sampling.

Information about the participants is presented in Table 1 below.

Table 1. Inf	ormation A	bout The Pa	rticipan	ts.			
Participant order by interview date		District	Age	Education	Professional Experience (year)	Units Served During the Pandemic	Working Time During the Pandemic
P1	Balıkesir	Altıeylül	58	Associate degree	37	Vefa Social Support Groups	3 months
P2	Balıkesir	Karesi	47	Master's degree	21	Contact tracing, Vefa Social Support Groups, 112	1,5 years
P3	İstanbul	Beykoz	50	Associate degree	30	Contact tracing, Vefa Social Support Groups	1 year
P4	İstanbul	Beykoz	50	Bachelor	33	Contact	5 months

				degree		tracing	
P5	İstanbul	Beykoz	42	Bachelor	15	Contact	1,5 years
				degree		tracing	
P6	Balıkesir	Karesi	53	Bachelor	35	Contact	1 year
				degree		tracing	-
P7	İstanbul	Ümraniye	47	Associate	25	Contact	9 months
		•		degree		tracing	
P8	İstanbul	Ümraniye	42	Bachelor	15	Contact	9 months
		•		degree		tracing,	
				O		Vefa	
						Social	
						Support	
						Groups	
P9	İstanbul	Ümraniye	45	Bachelor	20	Contact	2 years
		,		degree		tracing	•
P10	İstanbul	Ümraniye	47	Bachelor	12	Contact	2 years
		•		degree		tracing,	-
				O		Vefa	
						Social	
						Support	
						Groups	
P11 İ	İstanbul	Ümraniye	43	Associate	10	Contact	1 year
		•		degree		tracing,	•
				Ü		Vefa	
						Social	
						Support	
						Groups	
P12	İstanbul	Beykoz	50	Bachelor	15	Contact	2 years
				degree		tracing,	
						Vefa	
						Social	
						Support	
						Groups	
P13	İstanbul	Beykoz	35	Associate	15	Contact	2 years
				degree		tracing,	
						Vefa	
						Social	
						Support	
						Groups	
P14	İstanbul	Beykoz	38	Associate	14	Vefa	6 months
				degree		Social	
						Support	

						Groups, 112	
P15	İstanbul	Ümraniye	47	Associate degree	10	Contact tracing	7 months
P16	İstanbul	Beykoz	40	Associate degree	16	Contact tracing, Vefa Social Support Groups	2 years
P17	Balıkesir	Karesi	43	Associate degree	19	Contact tracing	1 year

Data Analysis

The interviews were conducted over a two-and-a-half-month period and concluded when data reached saturation (Glaser-Strauss, 1967). Since qualitative research can yield meaningful insights even with smaller samples (Young-Casey, 2018), most themes emerged after the first eight interviews. Nonetheless, additional efforts were made to include more imams who had actively participated in public health roles, particularly in contact tracing, during the Covid-19 pandemic.

Since the mosque imams were no longer actively serving in the 112 Emergency Call Center, Vefa Social Support groups, or contact tracing teams, direct observations of their current experiences were not feasible. However, a research diary was kept to document reflections and insights, with observations from the interviews recorded and incorporated into the data analysis process.

Some imams, due to their religious beliefs, preferred not to be alone with a female researcher in a closed space, and therefore included a secondary person in the interviews. Researchers did not object to this arrangement, as the presence of these individuals did not disrupt the research process and adhered to ethical principles of respecting participant consent. These secondary individuals, such as mosque muezzins, association leaders, or occasionally congregation members, generally refrained from intervening but

occasionally responded to questions and offered comments when encouraged by the participating imams.

The imams' hesitation to participate and their ongoing reservations during the interviews sometimes limited their openness. Their caution appeared to stem from factors such as being government employees, with concerns about potential repercussions for their employment rights or professional reputation. However, despite these initial reservations, their skepticism, largely due to unfamiliarity with such studies, was often alleviated as the interview progressed.

For data analysis, phenomenological procedures outlined by Moustakas were followed (Moustakas, 1994). The data were first transcribed verbatim to ensure a thorough understanding of the content. These transcripts were then reviewed to identify relevant statements, with key expressions highlighted and listed. Subsequently, the significant statements were coded and categorized (Merriam, 2009). This process yielded a list of 53 key statements, which were grouped into distinct categories. Overlapping statements were condensed to identify recurring patterns, leading to the construction of three main themes.

Findings

We have identified three main themes in our analysis of the enrollment of imams in contact tracing work in Türkiye: 1) From religious duties to deployment in pandemic response, 2) challenges: the dual workload and missing the congregation, 3) satisfaction in serving others.

From Religious Duties to Deployment in Pandemic Response

During the COVID-19 pandemic, restrictions on congregational worship in mosques led the Turkish state to reassign imams to alternative roles, including contact tracing and participation in Vefa Social Support Groups. Imams supported pandemic efforts in three key areas: assisting contact tracing teams and 112 emergency call center and providing aid through Vefa Social Support Groups.

As part of these assignments, imams undertook various distinct tasks. In contact tracing, to reduce the workload of health professionals, imams helped

monitor compliance with home quarantine rules by calling patients and logging data into FITAS, an application used by health professionals in contact tracing. At the 112 emergency line, they responded to public inquiries. Through Vefa Social Support Groups, they delivered groceries, food, and pension payments to vulnerable populations, particularly the elderly, the disable, or those with high health risks. They tried to provide moral and social support to individuals.

Their roles frequently adapted to emerging needs, with tasks assigned by local bureaucratic authorities. For example, in smaller towns like Balıkesir, imams took on responsibilities such as mask distribution and monitoring facemask compliance. As one participant noted, "We were assigned as needed by the district governor's Office" (P10). Pandemic assignments lacked a specific job description, adapting instead to the immediate needs of the neighborhoods, towns, or districts where imams worked.

Imams were not provided formal training for these tasks, a challenge noted by many participants. While this was true for other professionals deployed during the pandemic, including medical staff (Polat et al., 2024), it is particularly striking in the case of imams, as they were assigned tasks far removed from their usual profession. Some imams adapted quickly, stating, "It wasn't a difficult assignment" (P2), or that they "simply followed orders" (P16). Others emphasized learning on the job or seeking guidance from healthcare professionals. "There was no training, we learned on our own in the field" (P8). Imams emphasized to householders the need to adhere to pandemic measures, such as isolation, at home. They provided basic health advice, such as taking vitamins, eating healthy food, and occasionally recommending basic painkillers (P15).

Imams were deployed in the pandemic response regardless of their professional or personal backgrounds. However, participants noted that directors prioritized younger and healthier imams for these roles due to the physical demands of contact tracing, which often involved visiting multiple households, and the associated health risks. Those under 50 were more frequently assigned to pandemic duties (P9, P10). Superiors, including muftis, generally excluded imams with chronic illnesses to safeguard their health.

Despite these precautions, particularly during the pandemic's early stages, some imams contracted COVID-19 while performing contact tracing duties and died (Evrensel, 2020). Participants attributed this to insufficient training on protective measures and inadequate access to personal protective equipment (e.g., masks, gloves, and face shields) at the outset of the pandemic.

According to the imams, their deployment in the pandemic response was not only a result of the suspension of congregational prayers but, more importantly, because of their close connection to the communities they served. Most imams live in the neighborhoods where their mosques are located and are familiar with the residents, particularly those who regularly attend the mosque. Even among those they did not know personally, they could easily establish contact. As one participant explained, "We were chosen because imams and muezzins usually reside in the same neighborhood where our mosques are located" (P3). This local knowledge and proximity were key factors in the state's decision to involve imams in pandemic efforts, alongside their increased availability due to mosque closures.

Challenges: Dual Workload and Missing the Congregation

Turkish state involved various civil servant groups, including health professionals, police, military personnel, and local governors in pandemic measures, employing a "rotational schedule" system. Under this principle, workers alternated between three months of pandemic duty and three months off. However, this rotation was not consistently implemented due to the high pandemic workload. Imams, who had anticipated working in rotations with breaks, instead continued their pandemic roles uninterrupted.

Several imams compared their experience with other civil servants, emphasizing that their pandemic workload lasted longer than most other groups, and that they also continued to serve at the mosque. They described themselves as one of the most overburdened civil servants, noting that they received no additional compensation, such as extra salary, for their extended efforts. Some imams, even if indirectly, expressed feelings of being undervalued. Despite their extended service in the pandemic without breaks

or rotation, their contributions often, in their eyes, went unrecognized by both the state and society.

Although congregational prayers were suspended during the initial phase of the pandemic, they were gradually reinstated with restrictions. Initially, prayers were led by imams with the congregation maintaining physical distance and wearing face masks. Throughout these changing regulations, imams maintained their dual roles, leading prayers in the mosques while continuing their pandemic duties in contact tracing and Vefa Social Support Groups to provide assistance.

Like other professional groups, such as teachers, imams experienced a profound shift in their routine professional life. While online or remote teaching presented unique challenges for teachers, the suspension of congregational prayers and mosque closures brought their own difficulties for imams. Some found this emotionally challenging and mentioned continuing to hold daily prayers alone in the mosque to ensure it remained open (P1). Furthermore, some imams deeply missed congregational prayers and mourned their loss, both personally and for the community. One participant expressed, "We could not pray tarawih during the Ramadan in the mosque. It was very difficult for us and for the community" (P9). Another participant's statement was as follows:

The Kaaba was closed to us. The mosques were shut in our faces, and people completely cut off communication with one another. Perhaps this was a punishment from our God. 'You cannot love one another... So, I am closing these to you,' our God might have said. (P6)

In the face of this loss-of their regular practices such as leading prayers, reciting Qur'an, and engaging with the congregation—some imams interpreted it as a "divine sign." They viewed the suspension of congregational prayers as a symbol of failures, considering it a form of divine punishment or religious trial. As one imam put it, "What did we do to be separated from our mosques, from Friday prayers?" (P9). For them, COVID-19 was a "lesson", a divine call for society to improve not only religious practices but also other aspects of personal and communal life.

Indeed, some imams emphasized that the decision to ban congregational prayers during the COVID-19 pandemic was wrong (P4, P6, P17). They viewed the restrictions on mosques as excessive, arguing that they kept people from praying and distanced worshippers from participating in religious rituals. Preventive measures, such as signs urging the use of masks, hand sanitizers, and maintaining physical distance, had already been implemented in mosques. These measures, they believed, could have helped mitigate the spread of infection and contamination.

Imams highlighted the preventive efforts implemented in mosques, noting that while people initially reacted negatively, they eventually complied with these measures. In this context, they implied that mosques could have remained open for congregational prayers. Some imams even argued that religious representatives, particularly from the Presidency of Religious Affairs, should have had a seat on the Scientific Advisory Board or the Social Sciences Advisory Board (P14, P16). They felt that decisions related to religious matters were made without consulting religious authorities. The Scientific Advisory Board, established on January 10, 2020, was initially composed only of medical experts (Darici, 2020). Later, specialists in psychology, sociology, statistics, and religious sociology were added, and the board was renamed the "Social Sciences Advisory Board."

In addition to the challenges posed by changes in their work settings and the loss of personal and ritualistic contact with mosque attendees, imams faced difficulties due to their dual workload. They worked both in their ordinary work as imams as well as in their pandemic tasks in contact tracing or Vefa social support. In this way, they faced the challenge of balancing the demands of both jobs, struggling to manage the dual workload. At times, they were unable to fulfill their mosque duties, as expressed by the following participants:

There was even a time when I could not attend the prayer. I mean, someone from the congregation must have led it instead—I do not know. Yes, there were challenges. (P17)

Sometimes, if it was going to take a long time, it was considered OK if we occasionally did not attend the mosque for the noon prayers due to our dual responsibilities. (P7)

Many imams mentioned that they tried to balance both roles, though at times they prioritized their responsibilities as imams, aiming to maintain their connection with the congregation. To achieve this, they often carried out pandemic-related tasks outside of prayer times (P13). However, it was not always easy, as noted above, since they frequently had to move quickly between tasks: "We came back, prayed, then went out again. We were constantly running around." (P15).

One imam mentioned that it was particularly challenging to make it to the mosque on time to lead the prayer while also actively supporting contact tracing tasks in the field (P17). This participant was from Balıkesir, which suggests that the challenge might have been even greater in larger, more crowded cities like Istanbul.

It seems several factors influenced the imams' ability to meet the demands of both roles. As they narrated whether they had access to a car, the size of the neighborhood they served, and its geographical features, such as being flat or steep (P3, P8). As a result, imams had varying experiences, with some facing greater challenges than others.

Some imams suggested that it would have been better if one of these roles were alleviated, allowing them to either serve in the mosque or focus on contact tracing. In some exceptional cases, an imam could have been exempted from mosque duty, but this appeared to be due to the imam working in a small town and maintaining close communication with directors to express his needs. However, even that imam noted that despite the temporary suspension of his mosque duties, he continued to maintain strong ties with the congregation while performing contact tracing (P1).

Imams also emphasized that they did not choose these tasks but were required to accept the assignments given to them. As one participant stated, "It was definitely not my choice, but when the mufti's office assigns it to you, there is not much you can say" (P8). Another imam shared that he had

considered quitting, but it was not an option: "I wanted to leave; my neighborhood is very big, but we could not quit" (P3).

Satisfaction in Serving Others

Although some imams acknowledged that the work was compulsory, many also believed in its value and importance. Some framed it as working "for the benefit of the state" (P3), others as "for the welfare of the people" (P2), and still others as "for the sake of God" (P15). One or a combination of these motivations drove them to perform their assigned tasks to the best of their abilities.

Even though imams missed their congregation and regular mosque interactions, many found their service to society and their contributions beyond the mosque to be a unique and valuable experience (P3, P5, P9, P13). Interacting with individuals and communities who were not regular mosque attendees, or who had never visited a mosque, became a source of motivation for the imams (P8, P9, P13). This new dimension of their work seemed to provide them with a sense of purpose and dedication, as they believed they were serving the greater good of society and helping alleviate the burdens caused by the pandemic. Most of the imams interviewed emphasized that their roles in contact tracing and the Vefa social support initiative deepened their social connections and helped them better understand the diverse needs of different communities.

Some imams also shared that they appreciated getting "closer to society" (P9). Unlike other religious officials, mosque imams have direct interactions with people in their neighborhoods. While imams regularly engaged with worshippers at the mosque before the pandemic, the COVID-19 crisis altered these interactions. The pandemic tasks they were assigned exposed imams to individuals, groups, and communities who did not regularly, or at all, attend the mosque for prayers. Through phone calls and in-person visits, imams connected with people outside their regular congregations. In this way, the pandemic allowed imams to engage with various social groups, and some found it beneficial in strengthening their ties to these different segments of society. Imams found a religious reason behind their pandemic roles as well. They referred to prophetic sayings such as "the most honorable among people

are those who serve others selflessly" (P7). Some participants expressed peace and happiness with the work they did, stating, "They [the households we visited] pray in such a heartfelt way that it makes you want to go back again, to be honest" (P12) and "I felt happy, truly happy because of the help I provided" (P13).

They also emphasized that while some other professional groups involved in contact tracing only called patients and performed the basic tasks, imams sought to add a spiritual tone to their work. For example, they might have offered prayers for the sick, shared comforting words, or encouraged individuals to remain hopeful and patient during the pandemic:

We would ultimately say, 'This is a temporary illness, God willing. May God, grant you healing' expressing good wishes and prayers. This would please them. (P12)

We emphasized to people that this illness could affect any of us and that we all needed to face it with patience-whether rich or poor, this illness could come to anyone. (P7)

These actions were seen as ways of incorporating their religious duties into their pandemic work, providing not just practical support but also emotional and spiritual care.

Some imams underlined their dedication by noting that they were committed to working constantly, on-call for twenty-four hours (P5). While the state provided extra financial benefits to health professionals involved in contact tracing, this was not the case for imams. However, most of the imams interviewed did not oppose this decision. In fact, some asserted that it was even better, as they were primarily religiously motivated to perform their pandemic duties rather than for extra material income (P2).

Several imams (P4, P2, P11, P13) also expressed that they were generally welcomed by households they visited, as people trusted and loved them as religious figures. Some underlined that they introduced themselves as imams in order to take advantage of people's respect for and confidence in their profession: "Well, we were introducing ourselves as the imams of the mosque, in other words, we are the mosque hodja" (P4).

Nonetheless, others stated that they chose not to introduce themselves as imams, but rather preferred to present themselves as 'district office representatives,' since they had been assigned the task by that office. 'We say we come from the district governorship,' noted one participant (P10). They also believed that by doing so, they could carry more weight in people's eyes, as they had the 'authority' of the state behind them (P8, P10).

Some imams chose to use both titles to communicate that they represented both the state and their religious roles, aiming to provide community support from multiple perspectives. Since imams are state servants, even when they used the title imam, it was clear that they were deployed for the task by the state. However, some likely preferred not to use the imam title to avoid potential resistance from households who might question why a religious figure was involved in contact tracing. Indeed, some imams mentioned that when people learned they were not healthcare workers, they were disappointed, expecting to see health professionals instead. In some cases, people even criticized the involvement of imams in contact tracing and did not take their advice seriously. As a result, some imams felt that they were not fully respected or listened to, at least by certain households.

Some imams expressed that despite their hard work and serious commitment to the pandemic response, their roles were often overlooked and undervalued. While some attributed this underappreciation to pre-pandemic times, the pandemic assignment deepened their sense of disappointment, as they felt neither formally acknowledged by the state nor fully valued by society. However, some also emphasized that the pandemic provided a unique opportunity to "show themselves to society" (P10, P14)—not only to regular mosque attendees but to a broader cross-section of the community. It allowed imams, as civil servants, to demonstrate their significant role in providing social assistance during both ordinary and exceptional times.

Discussion and Conclusion

The COVID-19 pandemic has transformed social life in nearly all areas, from the redesign of economic activities to the rise in digital communication. Religious life was also significantly impacted, particularly communal rituals,

collective gatherings, and mass organizations (Sisti et al., 2023). While a vast body of literature has accumulated on the effects of COVID-19 in Türkiye and worldwide, the religious dimension has received comparatively less attention.

In this study, we highlighted some of the changes in the global religious landscape. Religious authorities in many countries generally supported the pandemic measures undertaken by governments and worked to persuade their communities to adhere to these regulations to limit the spread of the disease. Türkiye quickly implemented restrictions in the religious domain. In fact, only two days after the first recorded case, Friday prayers at mosques were banned, as the Friday noon prayers draw large crowds. A few days later, as COVID-19 case numbers rapidly increased, the PRA decided that daily prayers would no longer be held in congregation at mosques. As a result, activities in mosques, including tarawih prayers, were suspended during the holy month of Ramadan.

While the pandemic reshaped communal religious life, particularly in mosques, the conditions for religious personnel also underwent significant changes. Imams were no longer able to carry out their duties at the mosque, primarily the congregational prayers. However, the government saw an opportunity in this situation and decided to deploy imams—who make up a significant proportion of state employees—in the pandemic response.

The Turkish government undertook numerous measures to combat the pandemic, with home-based contact tracing being a notable effort, reflecting a major mobilization. While health professionals were the primary group deployed for pandemic tasks, imams, police officers, governors, and other state personnel and departments were also involved.

What is striking about imams' engagement is that, while most other professions carried out tasks within the scope of, or similar to, their routine duties, imams took on new roles. Although their duties in the Vefa Social Support Groups and contact tracing aligned with their religious roles in providing moral and spiritual support to believers, they went beyond these responsibilities. Imams visited various households, interacted with individuals and groups who did not frequently (or ever) attend the mosque, reminded them about pandemic regulations, provided health advice,

distributed food or other financial aid to specific households, and worked to uplift people's morale.

In this way, imams served not only regular mosque attendees, people they were familiar with, but also new individuals and households they had not known before. They expressed finding meaning and purpose in serving society at all these different levels and among various groups, especially during the extremely challenging times of the pandemic.

However, imams also found it difficult to keep up with the workload of both roles: mosque duties and contact tracing or social support. They tried not to neglect their responsibilities as imams, especially leading prayers, but sometimes they missed daily prayers, particularly the noon prayers, due to their involvement in contact tracing or assisting Vefa groups.

It should also be highlighted that while some imams provided basic medical advice, such as recommending certain vitamins or over-the-counter painkillers, their contact tracing duties did not overstep professional boundaries. In other words, their role in contact tracing was primarily to support health professionals by making phone calls and reminding people to adhere to isolation and quarantine protocols. However, they also took on many physical tasks, such as distributing masks and sanitizers. This was particularly challenging for those working in large cities, crowded neighborhoods with difficult geographical conditions, and for those who had to walk due to a lack of cars.

The pandemic, as an exceptional time, was challenging for both ordinary citizens and public personnel, and imams were no exception. They were personally affected by the pandemic and underwent a unique professional experience. The goal of this study was to shed light on their experience, even if only to a limited extent.

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