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Syrian Children's Resilience and Families' Social-Justice-Related Experiences: A Mixed-Methods Study

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Abstract

Guided by Bronfenbrenner's ecological theory, the research examined child and family's justice related experiences that influence Syrian preschool children's resilience. In the quantitative phase, data were collected from 156 mothers using the Strengths and Difficulties Questionnaire and the Preschool Anxiety Scale to evaluate behavioral, emotional, and anxiety-related outcomes in their children. In the qualitative phase, ten mothers who had children with high and low difficulty scores were selected for semi-structured interviews to explore the impact of language, discrimination, economic hardship, community relations, and institutional support on children's resilience. The quantitative findings showed strong associations between prosocial behavior and lower psychological distress. Qualitative analysis revealed that structural inequities, such as restricted mobility, discriminatory treatment in schools, and economic instability, often undermined children's social integration. On the other hand, supportive teachers, inclusive neighborhoods, and cultural belonging acted as protective factors. Experiences of justice fostered engagement, confidence, and emotional stability, while experiences of injustice contributed to anxiety, withdrawal, and reduced participation in learning. These findings highlight the need for culturally responsive, multi-level interventions and policies that address structural barriers, foster inclusive environments, and recognize the cultural assets of refugee families to strengthen resilience in early childhood.

Keywords: *forced migration, social justice, resilience, family experiences*

Öz

Bronfenbrenner'in ekolojik kuramına temellendirilen bu araştırma, Suriyeli okul öncesi çocukların iyi oluşunu etkileyen sosyal adaletle ilgili çocuk ve aile deneyimlerini incelemektedir. Araştırmanın nicel aşmasında, 156 anneden Güçler ve Güçlükler Anketi ile Okul Öncesi Anksiyete Ölçeği kullanılarak veri toplanmış; çocukların davranışsal, duygusal ve kaygı düzeyleri değerlendirilmiştir. Nitel aşamada ise, yüksek ve düşük zorluk puanlarına sahip çocukların annelerinden seçilen on kişiyle yarı yapılandırılmış görüşmeler gerçekleştirilmiştir. Bu görüşmelerde dil, ayrımcılık, ekonomik sıkıntı, toplumsal ilişkiler ve kurumsal destek gibi etmenlerin çocukların dayanıklılığı üzerindeki etkisi incelenmiştir. Araştırmanın nicel bulguları, prososyal davranış ile düşük psikolojik sıkıntı arasında güçlü bir ilişki olduğunu göstermiştir. Nitel analizde, hareket özgürlüğünün kısıtlanması, okullarda ayrımcı tutumlar ve ekonomik istikrarsızlık gibi yapısal eşitsizliklerin çocukların toplumsal uyumunu zayıflattığı bulunmuştur. Buna karşın, destekleyici öğretmenler, kapsayıcı mahalleler ve kültürel aidiyet duygusu araştırmada koruyucu faktörler olarak öne çıkmıştır. Sosyal adaletle ilişkili deneyimler, çocuklarda katılım, özgüven ve duygusal dengelerini güçlendirirken; adaletsizlik deneyimleri kaygı, içe kapanma ve öğrenmeye katılımın azalmasına yol açmıştır. Bulgular, erken çocuklukta dayanıklılığı güçlendirmek için kültürel olarak duyarlı, çok düzeyli müdahaleler ve politikalar geliştirilmesi; yapısal engellerin kaldırılması, kapsayıcı ortamların teşvik edilmesi ve mülteci ailelerin kültürel değerlerinin tanınması gerektiğini vurgulamaktadır.

Anahtar Kelimeler: *zorunlu göç, sosyal adalet, psikolojik sağlamlık, aile deneyimleri*

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Introduction

The twenty-first century has brought an increasing number of global crises, including armed conflict, political violence, human rights violations, and climate-related disasters. As a result, over 120 million people have been forcibly displaced from their homes worldwide as of 2024, with over half of these individuals being children (UNHCR, 2024). The consequences of forced migration for children are multifaceted, involving exposure to violence, persecution, environmental insecurity, and systemic injustice. These factors are consistently interconnected, creating an environment of multifaceted adversity, particularly for young children (Fazel et al., 2012).

The body of knowledge that comprises refugee children's mental health research has emphasized negative mental health outcomes, with a focus on justice-related risk factors across the life span (Fazel & Stein, 2003; Türken et al., 2024). In this context, refugee children face unique developmental vulnerabilities, as early childhood represents a foundational period for human development (Shonkoff et al., 2012). Children as young as three can identify social hierarchies based on race and ethnicity, and they begin to internalize societal attitudes through daily interactions (Feagin & Van Ausdale, 2001; Vincent, 2003). Refugee children, who often experience linguistic, cultural, and social dislocation, are particularly sensitive to justice-related experiences in their everyday environments. These experiences influence their self-concept, sense of belonging, and overall development, and they hinder children's social integration and sense of belonging within the host society (Kuru & Ungar, 2021).

Evidence from both high-income and low-/middle-income countries shows that discrimination is a major threat to children's mental health and developmental outcomes (Fazel et al., 2012). Racial and ethnic discrimination has been shown to limit opportunities for integration, lower self-esteem, and exacerbate mental and physical health difficulties among refugee children and their caregivers (Ford et al., 2013; Sanders-Phillips, 2009). However, the impact of structural injustice varies across families. Studies suggest that cultural background and the political, economic, and social context of the host country can either intensify risks or function as protective factors (Mattelin et al., 2024). Cultural and linguistic similarities between countries of origin and host societies can facilitate the resettlement process, whereas greater differences may hinder adjustment (Wilcox et al., 2021). Understanding how families from diverse ethnocultural backgrounds navigate justice-related conditions in host societies is therefore essential to examining how young refugee children develop resilience within challenging circumstances (Hutchinson & Dorsett, 2012).

However, social justice cannot be understood solely as the lack of discrimination or exclusion. As Fraser (2008) and Young (2011) argue, social justice encompasses interconnected dimensions involving legal and institutional rights, recognition of cultural identities and social belonging, meaningful representation and participation in institutional processes, and equitable access to material and social resources. These dimensions provide the conceptual grounding through which refugee families' experiences should be assessed. For Syrian families in Türkiye, social justice includes access to early childhood education, culturally and linguistically responsive services, recognition of cultural assets, and institutional practices that affirm their legitimacy within the community. These factors directly shape children's developmental opportunities and their capacity for resilience.

Therefore, Bronfenbrenner's (1979) socioecological theory offers a comprehensive framework for understanding how children develop within nested environmental systems. Although the model does not directly address social justice, scholars have emphasized that factors related to justice have an impact at different ecological levels (Betancourt & Khan, 2008; Kuru, 2025; Mundy & Dryden-Peterson, 2015). At the microsystem level, children may encounter fairness or discrimination through their daily interactions with peers, teachers, and caregivers. At the mesosystem level, language barriers may restrict parents' ability to participate in school activities, limiting their representation and influencing their children's educational experiences. Exosystem influences, such as migra-

tion policies and access to linguistically appropriate services, determine families' opportunities to exercise rights and access support. Finally, macrosystem factors including public attitudes toward refugees and dominant sociopolitical narratives shape broader norms of inclusion and exclusion. Situating social justice within this ecological framework illustrates how structural inequities permeate children's everyday developmental contexts.

Integrating resilience with an ecological, social justice-based perspective highlights that children's ability to adapt and cope with challenges results from their ongoing interaction with risks and resources within these ecological contexts. Contemporary resilience research highlights that positive development depends not only on individual strengths but also on the fairness of the environments in which children grow (Masten, 2014; Ungar, 2013). When dimensions of social justice—such as rights, recognition, representation, and equitable access—are restricted through linguistic marginalization, socioeconomic precarity, or institutional exclusion, children face accumulating burdens that heighten psychological difficulties and erode their sense of belonging. In contrast, when ecological systems provide inclusive school environments, culturally attuned community interactions, responsive public services, and supportive relationships with teachers, these justice-enhancing conditions act as powerful protective factors (Betancourt & Khan, 2008; Masten et al, 2023). Considering resilience from an ecological and social justice perspective strengthens the theoretical framework of the study, providing a context for refugee children's emotional and behavioral outcomes within the broader structures that influence their daily lives.

Taken together, the primary aim of this study is to examine how social justice-related experiences influence children's resilience, integrating quantitative indicators of psychological resilience with qualitative insights from mothers. By analyzing mothers' narratives alongside quantitative assessments of children's behavioral and emotional functioning, the study captures how experiences of fairness, recognition, and inclusion or their lack affect children's outcomes. In sum, this research positions social justice as a lived, developmental necessity for Syrian refugee children in early childhood. This paper argues that equitable access to rights, recognition of cultural assets, and inclusive social policies are foundational to the development of resilience. To guide this exploration, the following research questions are proposed:

- RQ 1: Do children's prosocial behavior, psychological difficulties (SDQ), and anxiety (PAS) differ by key sociodemographic factors (e.g., gender, maternal education, language difficulties)?
- RQ 2: What is the relationship between prosocial behavior and psychological distress and anxiety in Syrian preschool children
- RQ 3: How do Syrian mothers describe their children's experiences of justice and injustice in Türkiye, and how these experiences influence children's social, emotional, and behavioral well-being?
- RQ 4: What structural, relational, and cultural factors do mothers identify as risks or protective mechanisms for their children's resilience, and how do these qualitative themes help explain the quantitative patterns found in RQ 1 and RQ 2?

Method

This study used a sequential explanatory mixed-methods design to examine how justice-related experiences shape children's resilience. Data triangulation was achieved by exploring the same phenomenon through quantitative assessments (SDQ and PAS) and qualitative interviews with mothers, strengthening the validity of the findings. Quantitative results guided the purposeful selection of participants for Phase 2, and qualitative themes were used to contextualize and deepen the interpretation of statistical patterns. Finally, both datasets were integrated during interpretation to provide a comprehensive understanding of how justice-related conditions influence children's resilience.

Study Setting and Participants

A total of 156 mothers of Syrian preschool children living in Türkiye participated in the study. Suitable candidates were identified with the help of professionals working with Syrians and members of the Syrian temporary protection community (convenience sample). Subsequently, I sought participants' help in recruiting others (snowball technique). Inclusion criteria were: (a) holding only Syrian nationality, (b) having a child aged 5 to 6 years, (c) the child being enrolled in a preschool institution, (d) the mother being literate in Arabic, (e) the mother being at least a primary school graduate to ensure that they had sufficient literacy skills to understand the survey items, (f) the ability to complete an online survey, and (g) willingness to participate in the second phase of the study, which involved interviews with mothers. Exclusion criteria were: (a) a history of severe mental health conditions (e.g., post-traumatic stress disorder, major depressive disorder) in the parent and/or the child.

Ethical approval was obtained from the Siirt University Institutional Review Board, and the study was conducted in accordance with the ethical statements of the Helsinki Declaration. Prior to initiating study procedures, written and verbal consent was obtained from all participants.

Data Collection

The mixed methods data collection was conducted in two phases: an initial quantitative phase, followed by a qualitative phase designed to elaborate on and explain the quantitative findings (Ivankova et al., 2006).

Quantitative phase (Phase 1)

A demographic information form was prepared by the researcher based on a literature review and translated into Arabic. The form contained questions including basic information such as the mother's education level, employment status, the mother's and child's age, gender, and Turkish language proficiency.

Spence Preschool Anxiety Scale : The Preschool Anxiety Scale (PAS; Al-Ghalayini, 2015; Spence et al., 2001) is a 28-item, five-point Likert-type, parent-report measure designed for preschool-age children. Each item is rated on a scale from 0 (not true at all) to 4 (very often true). The maximum scale score is 112; higher scores indicate more severe anxiety symptoms. The scale consists of five subscales: separation anxiety disorder (five items), physical injury fears (seven items), social phobia (six items), obsessive-compulsive disorder (five items), and generalized anxiety disorder (five items). The Arabic version of the Cronbach's alpha value for PAS has been reported to be 0.90, and the split-half value was 0.79. In the present study, the total scale showed similarly strong reliability, with Cronbach's alpha found to be α = .86

***Strength and Difficulties Questionnaire (SDQ)*:** The Strengths and Difficulties Questionnaire (SDQ) is a well-established and widely standardized measure of general mental health problems in childhood (Goodman, 1997). The parent version of the SDQ (Alyahri & Goodman, 2006) consists of 25 items. Each item is scored on a 0–2 scale (0 = not true, 1 = somewhat true, 2 = certainly true). A score is estimated for each subscale (range 0–10), with a total difficulty score for the 4 subscales (emotional, hyperactivity, conduct, and peer problems) in the range of 0–40, with the exception of prosocial behaviors (positive items). The Cronbach's α of the SDQ total score was 0.73, in the present study, all Arabic SDQ subscales showed reliability coefficients ranging from α = .78 to .84.

Quantitative data collection procedure

A cross-sectional web-based survey design was used in the first phase to collect quantitative data. At the beginning of the survey, respondents were given the option to include their email or phone number for an individual interview. Once this section was completed, mothers were directed to the demographic information form and the survey questionnaires assessing the child's behavioral and emotional problems as well as anxiety-related outcomes. The survey was designed to take approximately 15 minutes to complete.

Quantitative data analysis

All the data were verified and checked in Phase 1 and then imported for statistical analysis. To examine group differences based on sociodemographic variables, independent samples t-tests were conducted for binary variables, and one-way analysis of variance (ANOVA) was performed for multicategorical variables. Frequency, constituent ratio, and mean ± standard deviation (x ± S) were used for descriptive analysis, and bivariate correlations were conducted to test for associations between the major study variables (child's psychological difficulties, prosocial behavior, conduct problem, emotional problem, hyperactivity, peer problem and anxiety levels). The significance level was specified as $p < 0.01$.

Qualitative phase (Phase 2)

Interview Protocol

Since the aim of follow-up qualitative designs is to explore and examine the results of statistical analyses in depth (Creswell & Plano Clark, 2007; Creswell, 2009), the researcher focused on how contextual factors related to children and families can facilitate coping with exposure to injustice or how such exposure affects children's resilience. Open-ended questions were utilized to explore factors related to the social justice experiences of families in the host country. The interview addressed the general difficulties faced by families, including the causes of challenging situations and strategies for navigating them. It also covered the sense of belonging in the host community and the nature of social relationships developed in Türkiye. Further questions explored barriers to integration within key systems, including education and social, political, cultural, and economic domains. Lastly, the interview focused on the challenges children face, such as difficulties in school and how parents and children respond to these difficulties. The interview protocol was pilot tested on two mothers and revised based on the results of the pilot testing.

Qualitative data collection procedure

To participate in the qualitative study, previous participation in the cross-sectional study was mandatory. To understand how Syrian mothers and their children experienced and navigated resilience within the context of justice-related experiences, five mothers of children with high total difficulties scores on the SDQ and five mothers of children with low total difficulties scores were interviewed. All interviews were conducted by the researcher online (via Zoom). In most sessions, Arabic interpreters assisted the parents, and interviews lasted 45–60 minutes. Qualitative data collection continued until thematic saturation was reached, when no new themes emerged and the interviews no longer provided new insights. The process concluded once thematic saturation was reached (Faulkner & Trotter, 2017).

Qualitative Data analysis

Interview transcripts were analyzed using thematic analysis (Braun & Clarke, 2006, 2022), following a six-step approach in NVivo software. The researcher transcribed all interviews verbatim and checked them for accuracy. The researcher and an external collaborator with a Ph.D. in measurement and evaluation independently coded the data, compared interpretations, and refined codes through discussion. The final themes and subthemes were developed collaboratively to ensure analytic rigor and multiple perspectives in the interpretation phase and were then translated into English for reporting. The involvement of two independent coders in the thematic analysis, followed by consensus discussions, constituted investigator triangulation (Denzin, 1978), enhancing analytic rigor and minimizing individual researcher bias

The researcher's role and preconceptions

The researcher holds a Ph.D. in early childhood education and has conducted postdoctoral research on childhood resilience. She has studied the psychological resilience of preschool refugee children. For instance, while conducting research in refugee

camps, she closely observed Syrian children and their families. This helped her develop a deep understanding of how socio-contextual factors influence children's social and emotional development. The researcher had no prior relationship with the participating mothers or their children and met them for the first time within the scope of this study. However, living in Türkiye, which hosts the world's largest Syrian refugee population, the researcher is familiar with the challenges that refugee families encounter in daily life. Despite this familiarity, the researcher made a conscious effort to remain in the neutral researcher role, including limiting verbal and non-verbal acknowledgments as participants recalled their experiences. To ensure objectivity, an external researcher with a Ph.D. in measurement and evaluation was included in the data analysis process, thereby strengthening the study's validity and reliability.

Findings

Demographic results

A total of 156 mothers of preschool children were included in the quantitative research, whereas in the qualitative research, ten mothers were invited to be interviewed. Table 1 provides the demographic information of all the participants.

Table 1. Participant Characteristics

Variable	Phase 1 (N=156, %)	Phase 2 (N=10, %)
Gender Child		
Girl	86 (55.1 %)	4 (40 %)
Boy	70 (44.9 %)	6 (60 %)
Age Child (year)		
5	75 (48.1 %)	7 (70 %)
6	81 (51.9 %)	3 (30 %)
Age Mother (year)		
25-35	27 (17.3 %)	3 (30 %)
36-45	70 (44. 9 %)	5 (50 %)
≥ 46	59 (37.8 %)	2 (20 %)
Mother's educational levels		
Primary school degree	56 (35.9 %)	4 (40 %)
Secondary school degree	53 (34.0 %)	2 (20 %)
High school degree	40 (25.6 %)	3 (30 %)
More than high school	7 (4.5 %)	1 (10 %)
Mother's employment status		
Employee	24 (15.4 %)	4 (40 %)
Unemployed	132 (84.6 %)	6 (60 %)
Difficulty with the Turkish language (Mother)		
Yes	109 (69,9 %)	6 (60 %)
No	47 (30.1 %)	4 (40 %)
Difficulty with the Turkish language (Child)		
Yes	98 62.8 %)	5 (50 %)
No	58 (37.2 %)	5 (50 %)

Descriptive statistics and correlations between variables

The measured variable was found to be within normal limits in terms of skewness and kurtosis (Klibe, 2015; West et al., 1995). Descriptive statistics for scale scores are presented in Table 2. Descriptive analysis, independent t-tests, and one-way analysis of variance (ANOVA) were used to describe the characteristics and distributions of psychological difficulties (SDQ), PAS, and prosocial behaviors.

Table 2. Descriptive Statistics of Scale Scores (n = 156)

Latent Construct Variables/Indicators-Child	Min-Max	Mean ± SD	Skewness	Kurtosis
Prosocial behaviors	3-9	6.64 (1.57)	-.33	-.65
Peer problem	2-9	5.46(1.47)	.03	-.11
Hyperactivity	2-5	3.07 (.77)	.54	.19
Conduct problem	1-5	2.95 (.95)	.02	-.23
Emotional problems	1-10	4.86 (2.02)	.43	-.55
Child psychological difficulties (SDQ)	7-27	16.90 (4.01)	.22	-.58
Preschool Anxiety Scale (PAS)	20-102	48 (16.90)	.66	.24

Table 3 provides an overview of the sociodemographic differences in prosocial behaviors, psychological distress (SDQ), and preschool anxiety (PAS). Prosocial behaviors differed significantly by child gender, with girls scoring higher than boys ($t = 5.09$, $p = .000$). Both mothers' and children's Turkish language difficulties were associated with significantly lower prosocial behaviors ($p < .01$ for both comparisons). SDQ total scores showed a significant difference according to the mother's level of education ($F = 3.58$, $p = .015$), with children of mothers who completed only primary school showing higher psychological difficulties. SDQ scores were also significantly higher among children whose mothers reported Turkish language difficulties ($t = 4.13$, $p < .001$), as well as among children who themselves had difficulty with Turkish ($t = 2.92$, $p = .004$). PAS scores demonstrated a similar pattern, with boys showing higher anxiety levels than girls ($t = –4.23$, $p = .000$). Anxiety scores were also significantly higher in both the mother ($t = 7.31$, $p < .001$) and child ($t = 6.13$, $p < .001$) language-difficulty groups.

Table 3. Sociodemographic Characteristics and the Distributions of SDQ, PAS and Prosocial Behavior (n=156)

Variable	Prosocial Mean (SD)	t/F	p	SDQ Mean (SD)	t/F	p	PAS Mean (SD)	t/F	P
Child Gender									
Girl	7.18 (1.25)	5.09	.000	14.33 (3.14)	–7.05	.000	37.13 (12.92)	–4.23	.000
Boy	5.98 (1.68)			18.84 (4.54)			46.21 (13.79)		
Child Age									
5 years	6.66 (1.51)	0.14	.884	15.86 (4.28)	–1.35	.179	39.85 (14.47)	–1.16	.246
6 years	6.62 (1.63)			16.81 (4.46)			42.46 (13.58)		
Mother Age									
25–35	6.55 (1.60)	2.18	.115	15.81 (4.82)	1.81	.166	40.81 (15.77)	1.09	.337
36–45	6.96 (1.47)			15.75 (3.81)			39.37 (11.37)		
≥46	6.39 (1.63)			17.11 (4.64)			43.01 (15.38)		
Mother Education									
Primary	6.19 (1.76)	3.40	0.21	17.78 (4.78)	3.58	.015	44.05 (12.93)	1.86	.18
Secondary	7.11 (1.39)			15.56 (3.43)			37.79 (15.04)		
High school	6.60 (1.37)			15.82 (4.47)			41.65 (14.02)		
>High school	7.00 (1.63)			14.00 (4.83)			41.85 (11.46)		
Mother's Employment Status									
Employee	7.83 (1.20)	4.21	.000	11.16 (1.63)	-7.26	000	36.62 (10.01)	-2.95	.004
Unemployed	6.43 (1.54)			17.30 (4.06)			42.59 (14.24)		
Turkish Language Difficulty-Mother									
Yes	6.32 (1.52)	–3.83	.000	17.32(4.23)	4.13	.000	46.16 (12.45)	7.31	.000
No	7.31 (1.48)			14.37 (4.07)			31.01 (11.42)		
Turkish Language Difficulty-Child									
Yes	6.38 (1.63)	–2.72	.007	17.13 (4.48)	2.92	.004	45.97 (13.23)	6.13	.000
No	7.08 (1.38)			15.05 (3.93)			33.15 (11.49)		

Additionally, children of unemployed mothers showed higher SDQ (t = –7.26, p < .001) and PAS scores (t = –2.95, p = .004). Pearson correlations were calculated to explore the bivariate relationships among prosocial behavior, PAS, SDQ, peer problems, hyperactivity, emotional problems, and conduct problems presented in Table 4.

Conversely, peer problems, hyperactivity, conduct problems, and emotional problems showed strong positive correlations with total psychological difficulties (r = .815, .787, .815, and .888, respectively; all p < .01) and moderate-to-strong positive correlations with preschool anxiety (r = .375–.577, all p < .01).

Table 4. Correlation Matrix of the Major Variables

Variable	1	2	3	4	5	6	7
1. Prosocial behaviors	-						
2. Peer problem	**-.521****	-					
3. Hyperactivity	**-.680****	**.618****	-				
4. Conduct problem	**-.548****	**.571****	**.586****	-			
5. Emotional problems	**-.660****	**.532****	**.597****	**.653****	-		
6. Child psychological difficulties (SDQ)	**-719****	**.815****	**.787****	**.815****	**.888****	-	
7. Preschool Anxiety Scale (PAS)	**-.633****	**.375****	**.479****	**.577****	**.517****	**.575**	-

p<0.01

Prosocial behaviors were negatively associated with peer problems (r = –.521, p < .01), hyperactivity (r = –.680, p < .01), conduct problems (r = –.548, p < .01), emotional problems (r = –.660, p < .01), total psychological difficulties (r = –.719, p < .01), and preschool anxiety (r = –.655, p < .01).

Total psychological difficulties were also positively correlated with preschool anxiety (r = .575, p < .01).

Qualitative Findings

Analysis of ten mothers' narratives yielded three overarching themes: structural barriers to equity, adaptive and protective factors, and the impact of injustice or justice on child well-being. The Syrian

mothers described how race, language, culture, and socioeconomic conditions in the host country contributed to their children's psychological difficulties. They also shared the strategies they used to cope with these challenges.

Theme 1: Structural Barriers to Equity

This theme highlights mothers' perceptions of unequal social conditions in the host country and the ways these structural constraints shape their families' everyday lives. Mothers identified language barriers, cultural differences, and economic hardship as key factors contributing to social injustice in their daily lives. Limited proficiency in Turkish, both their own and their children's, restricted access to education, healthcare, and legal rights, which narrowed children's opportunities for participation and integration. One mother explained:

> *The hardest part is not knowing the language. I tried to learn it, but then I couldn't find the time. Not knowing the language, I can't go to my child's school and take care of him. Their siblings are in the older classes, and they know a little Turkish. When the preschool teacher wants to talk, they go and talk to the teacher. When you don't know the language, people at the hospital and on the street realize we are foreigners and treat us differently. That's why I usually go out with my child who knows Turkish. This really bothers me. (P2)*

Even when parents recognized the importance of learning Turkish, their children's reluctance to attend school due to peer rejection created further barriers.

> *I enrolled my child in school so that he could learn Turkish. But he doesn't want to go. Because he doesn't know the language, the other children in the class treat him badly. His father went to talk to the teacher, but nothing changed. He doesn't want to go to school. He says that no one likes him because he is Syrian. I keep pushing him to go. (P3)*

Economic instability, often linked to low-paying jobs and precarious employment, was perceived by the mothers as a structural issue rather than an individual shortcoming. Discrimination in the labour market reinforced these inequalities.

> *They think that because I am Syrian, I have no choice but to work for low wages. That's right. I do whatever job I can to survive here so that my children can have a better future, but I don't get paid what I deserve. They don't pay me what I deserve just because I am not a citizen, even though I do the same job as them. (P5)*

Although some mothers expressed gratitude for living in a Muslim country, they also reported that their children often faced bullying in school settings, which, in some cases, led to school dropout.

> *We are Muslims, and this is a Muslim country. I am happy to be in Türkiye. But my children are very unhappy. Turkish children fight a lot with my children. They don't want to go to school. Two of my children have dropped out of school because of this. They say, 'You are Syrians, go back to your own country.' We hear this a lot. I am afraid that we will be sent back to our country at any moment. (P7)*

Educational inequality was another area of concern. Some mothers perceived that teachers held lower expectations for Syrian children and, at times, treated them differently from their Turkish peers. This perception was reinforced by experiences of exclusion in everyday interactions with school staff.

> *I couldn't go to school. My father didn't send me to school because I am a girl. But I want my children to go to school. They are smart. But the teachers have no expectations. I want them to become doctors or engineers like Turkish children, but the teachers act as if it is enough for us that they are attending school. When I pick up my child from school, I want to talk to the teachers. I understand Turkish and can speak it, but they cut me off and don't want to talk to me.*

I see them talking to Turkish mothers. But I trust my child, and I will be there for them as long as I live. (P4)

In some cases, restrictions on mobility reinforced a sense of confinement and exclusion from broader social life.

There is no freedom of movement; to travel from one city to another, you need to get permission. Sometimes I feel like I am in prison. The children want to see the sea, but because it is forbidden, we cannot go. (P8)

The mothers described interconnected structural barriers such as language restrictions, discrimination, limited mobility, and economic hardship that hinder their children's immediate opportunities and shape their long-term social integration and educational opportunities

Theme 2: Adaptive and Protective Factors

This theme focuses on the protective and adaptive resources that mothers perceive as supporting their children's resilience in the face of everyday challenges. Mothers described a range of strategies, both available and aspirational, that could help them and their children cope with discrimination, unequal treatment, and broader challenges in the host country. While some were able to employ protective factors, others explained barriers that prevented them from implementing approaches they believed would be effective. The most frequently cited protective factors included language proficiency, supportive peer relationships, strong family connections, stable economic resources, opportunities for social interaction, and assistance from schools and community networks. One mother emphasized how her child's ability to speak the host country's language, combined with the support of an understanding teacher, had prevented negative experiences in the school setting:

My child is able to make friends at school because she knows the language. Her teacher is very understanding, which has prevented any problems, and we have not encountered any discrimination at school to date. She enjoys attending school. (P9)

However, many mothers noted that personal and structural limitations constrained their capacity to protect their children from harm. Family separation emerged as a particularly significant barrier, both emotionally and economically.

My husband is in Syria and cannot come here, so I struggle a lot raising my children on my own. He has done nothing wrong, but because he went to Syria once, he is no longer allowed to return. Having their father present is important for children and not having him here makes my child feel insecure. This situation causes me significant financial and emotional hardship. (P1)

Economic instability was another recurring challenge, often exacerbated by discriminatory incidents in the workplace. In some cases, the lack of stable income forced children to take on responsibilities beyond their years.

My eldest son has to work to support the household, and he often says he wants to move to another country. Because of financial hardship, I cannot meet my children's needs, and sometimes I cannot even buy food. They are aware of this situation, and like all children, they want to go out, have fun, and get toys, but I cannot provide any of these things. If our presence were accepted and we had a stable income, we would have no problems at all. (P3)

Some mothers contrasted earlier negative experiences with more recent encounters of inclusion and kindness in their neighborhoods. Moving to a new location had, in certain cases, transformed the social environment for their children.

Here, I have Turkish neighbors who treat us very well. We used to live in Kırşehir, but we moved to Ankara because of my child's health problems. In Kırşehir, people did not want their children to be friends with mine because we are

Syrian. But here, my neighbors sometimes invite my children to play with theirs so they can spend time together. This makes both me and my children very happy, and they do not feel like strangers. (P10)

Media portrayals and public hostility toward Syrians were also identified as major sources of stress. Some mothers sought to protect their children by limiting their exposure to potentially unsafe public spaces.

The unemployment here, the mistreatment from people seeing us as a burden and the way the media portrays us all negatively when a single Syrian person does something wrong are very hard to bear. If a Syrian appears in the news for doing something bad, it feels as though we are all treated as if we were guilty. Then, when they see a Syrian person on the street, some people start physically attacking them. Some Syrian children respond to this, while others like my own do not even want to go outside. I also prefer that they do not spend much time outside. They study and play at home together with their siblings, and this is how I protect them. (P4)

For some, access to healthcare services was experienced as a powerful protective factor, offering reassurance and trust in the host country's institutions.

Being able to take my child to the doctor makes me happy. One day, my child became very ill, and the hospital treated him immediately without requesting any documents. The doctor treated us very well and approached us with a warm smile. In a country where many Syrians have difficulty accessing healthcare even in Syria it was very pleasing to be treated fairly here. It made me feel more confident that my child's health would be protected. My child also saw that if something happened, someone would take care of him, and this created a feeling that we would be helped if needed. It is such a beautiful feeling that I cannot even describe it. (P6)

Cultural and religious connections also contributed to resilience, fostering a sense of belonging and shared identity.

Sharing the same religion here and the sense of religious fellowship make things easier. During religious holidays, our neighbors, for example, send us food and sometimes visit us. Just like in Syria, this gives my children a sense of belonging. During these holidays, we do not feel like strangers, and it reminds us that we are the same, giving us strength to cope with difficulties. (P9)

Overall, these narratives illustrate that adaptive and protective factors are multifaceted, combining personal skills, social relationships, institutional support, and cultural connections. When present, they can significantly buffer the harmful effects of discrimination and instability. However, their absence, often due to structural barriers, can leave families and children vulnerable to deepening inequality and isolation.

Theme 3: Injustice or Justice Impact on Child Well-being

This theme examines how children's experiences of justice and injustice within social and institutional contexts shape their emotional, social, and developmental well-being. Mothers' narratives showed that some preschool children faced discrimination and exclusion in the host country, while others received fair and supportive treatment. For some children, injustice was linked to feelings of anxiety, loss of confidence, and reduced participation in preschool activities. In contrast, children whose mothers reported that they were treated fairly by their peers, teachers, and community members were described as more engaged in learning, having stronger social connections, and experiencing a greater sense of belonging. These contrasting experiences highlight how injustice and justice within a host country's social and institutional environments can shape the psychological, social, and developmental well-being of young children. One mother detailed how her son's self-

perception changed after being mocked for his Syrian background:

> *When he came home after that day, he looked so down. He told me, 'I am not good like the other children.' It broke my heart because before this, he always thought he could do everything the same as his classmates. (P8)*

For some children, repeated exposure to rejection or overhearing hostile remarks in public spaces created lasting emotional wounds. One mother described her daughter's reaction after overhearing a neighbor say that Syrians did not belong in the country:

> *One day at school a child said, 'Syrians do not belong here.' She came to me with tears in her eyes and asked why they don't want us here. From that day, she became afraid of going to preschool. (P5)*

Several mothers observed that their children were excluded from playgroups, particularly in outdoor settings or during preschool activities. This exclusion limited opportunities for peer learning and reinforced feelings of being different or unwelcome.

> *When the other children run to play together, my son stays sitting alone at the table. At first, he tried to go to them, but they would turn their backs or walk away. Now, he doesn't even try to join. (P1)*

In contrast, children who experienced justice were more likely to be included in group activities, both inside and outside of school. One mother reflected on the warmth of such gestures during cultural celebrations:

> *My neighbors make a special effort to invite my children to play with their own. These moments mean so much to us because they remind us that we are not strangers here, that we belong, and that our children can share in the joy and laughter like everyone else. (P2)*

Injustice also affected children's learning experiences. Some mothers reported that teachers' lower expectations, whether conscious or unconscious, undermined their children's motivation to participate.

> *Before, she loved school and talking about the teacher… The teacher doesn't ask her to show her work anymore. When a child senses that the teacher doesn't expect much from them, they lose the will to try. (P3)*

Justice, however, appeared to strengthen academic engagement. When teachers valued children's contributions and encouraged peer friendships, children became more confident and persistent. As one mother proudly shared:

> *His teacher is very understanding, and she treats him like every other child in the class. She praises his work and encourages him to speak up. He tells me, 'I can do it, my teacher says so. (P6)*

Stress from injustice can sometimes result in visible behavioral changes and unexplained physical symptoms. Mothers reported that their children experienced irritability, sudden aggression, and stress-related ailments such as stomachaches, loss of appetite, and disrupted sleep.

> *On school mornings, she says her tummy hurts. At first, I thought it might be something she ate, but then I realized it only happened before preschool. When I asked her why, she said it's because of the way she is treated there because some children won't play with her, and sometimes the teacher doesn't notice when they leave her out. (P7)*

In contrast, children in just environments appeared calmer, maintained healthy routines, and demonstrated greater resilience when challenges arose. One mother summarized the difference clearly:

> *When they are treated well, they come home with smiles, telling stories about what they did.*

Even if something small goes wrong at home, they can handle it without breaking down. (P10)

Integrated Consideration of Findings

The integration of quantitative and qualitative findings shows how specific justice-related experiences contribute children's behavioral and emotional outcomes. Quantitative analyses indicated that children's language difficulties and their mothers' language difficulties were significantly associated with higher psychological difficulties (SDQ) and anxiety symptoms (PAS). Qualitative narratives explained how these statistical relationships appear in everyday life: mothers described peer rejection, miscommunication with teachers, and limited access to school or health services when language barriers were present. Thus, the qualitative data highlight the mechanism behind the elevated SDQ and PAS scores in groups experiencing language difficulties.

Prosocial behavior demonstrated negative correlations with internalizing and externalizing problems ($r = –.521$ to $–.660$, all $p < .01$). Interviews supported this pattern: children who were included by peers and treated fairly by teachers were described as more confident, socially engaged, and emotionally regulated. In contrast, children exposed to exclusion or discrimination withdrew from social interactions, echoing the quantitative association between lower prosocial behavior and higher emotional or peer problems.

The quantitative finding that maternal education was linked to SDQ scores ($F = 3.58$, $p = .015$) also aligned with mothers' accounts of structural barriers. Mothers with lower educational backgrounds reported greater challenges navigating institutional systems, accessing school resources, or advocating for their children. These contextual constraints help explain the statistical association between maternal education and children's psychological difficulties. Moreover, although mothers described employment as difficult due to low wages and discrimination, the quantitative results showed that maternal employment was associated with better child outcomes. Children of employed mothers had significantly lower psychological difficulties ($t = –7.26$, $p < .001$) and lower anxiety levels ($t = –2.95$, $p = .004$) compared with children of unemployed mothers. Thus, even when stressful for mothers, employment appeared to function as a protective factor for children.

Finally, the strong correlations among peer problems, emotional problems, hyperactivity, and total psychological difficulties ($r = .575–.888$, $p < .01$) were reflected in mothers' descriptions of children's experiences of injustice. Repeated exposure to unfair treatment was often accompanied by anxiety, aggression, withdrawal, or physical complaints. Conversely, when institutional and interpersonal interactions were fair and supportive, children appeared calmer, showed healthier routines, and maintained stronger peer relationships—mirroring the protective associations implied in the quantitative data.

Together, the integrated findings demonstrate that quantitative patterns are meaningfully explained by mothers lived experiences, revealing how justice-related conditions function as both risk and protective factors within children's ecological environments.

Discussion

This mixed-methods study reveals that the resilience of Syrian preschool children is shaped by a complex interaction of individual, relational, and structural factors, with justice-related experiences playing a critical role in positive outcomes. Quantitative data showed that prosocial behaviors were negatively associated with peer problems, conduct problems, hyperactivity, and emotional problems. These difficulties were strongly and positively correlated with total psychological difficulties and preschool anxiety. Language barriers reported by both mothers and children were significantly associated with higher behavioral and emotional problems. This finding supports the role of language proficiency as a primary gateway to educational success, social participation, and a sense of identity (Kuru & Ungar, 2021; Türken et al., 2024).

The qualitative findings add depth to these results, showing that language difficulties often lead to a cascade of discriminatory experiences, such as

peer rejection, decreased parental involvement in schools, and limited access to public services. Children who received support from teachers who recognized their cultural and linguistic backgrounds developed stronger peer relationships, greater resilience, and higher engagement in learning. These results are consistent with research emphasizing culturally responsive pedagogy in early childhood settings (Erdemir, 2022; Sirin & Rogers-Sirin, 2015). However, when children perceived bias or low expectations from educators, their motivation and engagement diminished, which aligns with evidence showing that discriminatory treatment undermines academic self-concept (Ellis et al., 2010; Mattelin et al., 2024).

Structural inequities extended beyond the classroom. Mothers reported economic hardship, discriminatory employment conditions, and mobility restrictions as ongoing challenges to both their children's well-being and their own capacity to provide support. These barriers were reflected in the quantitative association between lower income and greater psychological distress in children—a link identified in previous studies of refugee populations (Boyden & Mann, 2005; Hatch & Dohrenwend, 2007). Some families reported improvements after relocating to more socially inclusive neighborhoods, aligning with findings that community support and cohesion can mitigate the effects of adversity (Gapen et al., 2011; Nuttman-Shwartz et al., 2011). However, sustained exposure to negative media coverage and public discrimination appeared to reinforce feelings of exclusion, leading to social withdrawal and heightened anxiety (Panter-Brick et al., 2011; Willms, 2002).

Experiences of justice and injustice emerged as direct determinants of developmental outcomes. Injustice—manifested in peer exclusion, inequitable teacher treatment, and public hostility—was associated with increased anxiety, psychosomatic complaints, and reduced participation in learning activities. These findings are consistent with evidence that perceived discrimination acts as a chronic stressor with long-term psychological consequences (Hutchinson & Dorsett, 2012). In contrast, experiences of justice, such as being included by peers, encouraged by teachers, and treated fairly by neighbors, fostered social connectedness, emotional stability, and sustained engagement. These results support research highlighting the role of fairness and recognition in building resilience (Masten, 2014; Ungar, 2013).

Overall, integrating the quantitative and qualitative findings shows that resilience is a dynamic process shaped by the interaction between children's resources and their environments (Bronfenbrenner & Morris, 2006; Ungar & Theron, 2019). Positive relationships have been linked to increased prosocial behaviors and reduced psychological distress, while cumulative disadvantage has been associated with heightened emotional and behavioral issues. Addressing these inequalities requires multi-level action, such as strengthening social-emotional skills, creating inclusive schools, improving language and economic opportunities, and challenging discriminatory attitudes (Richman et al., 2004). These efforts should include not only children but also their families, who experience these barriers in interconnected ways, as parents play a critical role in supporting their children's well-being and development. For example, policies that ensure equitable access to education, healthcare, and legal protections—while valuing the cultural assets of refugee families—can help foster inclusive conditions (Kirmayer et al., 2009; Reed et al., 2012).

Limitations

Several limitations should be considered when interpreting these findings. First, the cross-sectional design of the quantitative phase prevents us from drawing causal conclusions about the relationships between experiences of justice and children's outcomes. Second, the qualitative data were based only on the perspectives of mothers. Incorporating the voices of fathers, teachers, and children themselves could enrich future analyses. Additionally, despite the use of translated, validated, and reliable tools and interpreters, language barriers during the research process may have affected the depth and nuance of some responses. Future research should adopt longitudinal and participatory approaches to capture trends in resilience over time and ensure that children's perspectives are more fully represented.

Conclusion

This study showed that Syrian preschool children's resilience is shaped by more than just individual or family factors. It is also influenced by children's competencies, family and school relationships, and broader socio-contextual factors. Justice-related experiences play a decisive role in developmental outcomes. Integrating both qualitative and quantitative evidence clarifies that resilience is a dynamic process rooted in equitable access to resources, culturally affirming practices, and supportive relationships. Multi-level interventions and inclusive policies that address structural barriers while recognizing the cultural assets of refugee families are essential to sustaining and strengthening resilience. These findings highlight the need for policies that strengthen refugee children's resilience by reducing structural barriers and supporting equitable access to early education. Improving language support in preschools, enhancing culturally responsive teacher practices, and fostering inclusive community environments may help mitigate the negative effects of discrimination and promote children's social and emotional well-being.

Declarations

Funding: No funding was received for conducting this study.

Conflicts of Interest: The author declares no conflict of interest.

Ethical Approval: Ethical approval was obtained from the Siirt University Institutional Review Board, and the study was conducted in accordance with the ethical statements of the Helsinki Declaration.

Informed Consent: Participation was voluntary, and written and verbal informed consent was obtained from all participants prior to the online survey and the interviews.

Data Availability: The quantitative data (n = 156 mothers) and qualitative interview data (n = 10 mothers) supporting the findings of this study are available from the corresponding author upon reasonable request.

AI Disclosure: No artificial intelligence-based tools or applications were used in the conception, analysis, writing, or preparation of figures for this study. All content was generated by the author in accordance with scientific research methods and academic ethical standards.

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