



# Spatiality of Social Stress Experienced by Refugee Women in Initial Reception Centers

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## Abstract

This study takes an interdisciplinary approach to understanding the multi-dimensionality of social stress within the spatiality of initial refugee reception centers in Berlin. By focusing particularly on the experiences of women who fled from Syria and Afghanistan, it situates this humanitarian issue within an analytical framework of gender-sensitive and culturally sensitive research and policymaking. Through qualitative interviews with 11 refugee women, the connection between the spatiality of initial reception centers and social stress is explored. This is done by thematically coding the data collected in the context of nine different initial reception centers across various districts in the city of Berlin. The study shows that in terms of the intercultural needs and practices of these women, social stress is triggered by a lack of essential privacy within the spatiality of these structures. However, privacy is not limited to a physical enclosure—it is about having control/freedom over different aspects of everyday life. This article highlights intercultural gaps in gender-sensitive and protection considerations during humanitarian responses.

**Keywords** Spatiality · Social stress · Refugee women · Reception centers · Privacy · Resettlement

## Introduction

The “Long Summer of Migration” of 2015 was an unprecedented period in European history that marked the very beginning of an enormous arrival of refugees, mainly of people fleeing the war and armed conflicts in Syria and Afghanistan (Beznec et al., 2016). Based on figures from the United Nations High Commissioner for Refugees (UNHCR) (2016), the member states of the European Union received over 1 million asylum seekers in 2015. Of these member states, Germany hosted

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the most significant number of asylum applications within its urban areas (BAMF, 2016; Eurostat, 2016); in the same year, Germany's capital city of Berlin received more than 33,281 refugees, and the city undertook the task of accommodating forcibly displaced individuals from different backgrounds, many of whom were battling with traumatic experiences (Eurostat, 2016).

By building on Hobfoll's (1989) Conservation of Resources' theoretical framework, Bakker et al. (2014) elucidated the impact of post-migration stressors on the process of refugee resettlement in the host context. On the one hand, they discussed the many forms of loss that refugees experience in terms of social, cultural, material, and personal resources. On the other hand, they emphasized the gaps and challenges refugees encounter in the host context, such as lack of adequate support and services, difficult living conditions, family dislocation, discrimination, poverty, pending decisions on their asylum application, and insecurity about the future (Landau et al., 2017; Milkie et al., 2020; Ryan et al., 2008; Schock et al., 2016). Ultimately, these gaps and challenges can hamper the successful resettlement of refugees in host societies. The connection between pre-migration losses and post-migration limitations experienced by refugees represented a "resource loss spiral" within which the affective link to mood and feelings can activate a range of mental health problems (Bakker et al., 2014).

In terms of basic and immediate human needs, having a roof over one's head is one physiological priority. In response to the scope of emergency and the need for great haste, the city of Berlin repurposed and co-opted pre-existing facilities, including sports halls, town halls, hotels, and the former airport in Tempelhof, to provide temporary accommodation. These structures were either managed by German and international charitable organizations or by private companies (Stiftung SPI, 2017). According to regulations in Germany, displaced people should be housed in three different types of housing—short-term initial reception centers, medium-term collective centers, and long-term local centers—one after the other, depending on their phase of asylum seeking (Asylum Information Database, 2020b). One of the principal aspects involved in governing refugees is the enforcement of two binding laws, the *Obligation of Residence* and the *Obligation of Home*, which limit refugees' mobility, particularly within the federal state, during their asylum procedure (BMJV, 2016).<sup>1</sup>

Despite general permission having been granted for vocational training, asylum seekers face practical difficulties in accessing these facilities. The reason for this is that it is directly linked to an employment permit, which can be gained only if the person no longer lives in the initial reception centers. Additionally, due to uncertainties regarding asylum applications, potential employers often hesitate to offer these positions. Likewise, general permission has been granted for studying at university, regardless of residence status. However, the higher education requirements, such as qualifications, knowledge of the German language, and health insurance coverage, are too complicated to be met by most asylum seekers. Another problem is that

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<sup>1</sup> In addition, there was neither the permission nor the provision of facilities to host guests, friends, or family members.

asylum seekers are not entitled to student financial aid until they gain permission to stay (Asylum Information Database, 2020a; BMJV, 2016). Asylum seekers are obliged to attend the so-called integration courses, which include language and orientation courses, only after approval of their asylum application and issuance of residence permit (BMAS, 2015).<sup>2</sup>

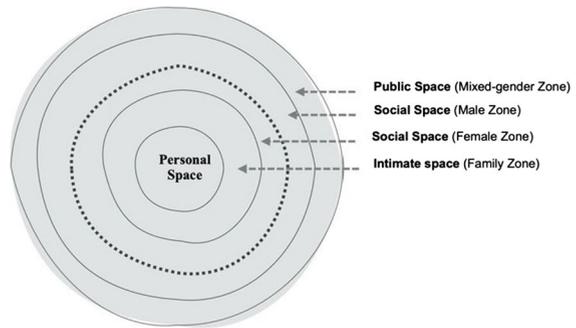
Although the legal basis of these initial reception centers is generally in alignment with the UNHCR's instructions (Safouane, 2017), a gender-sensitive approach is necessary in light of the fact that female refugees are vulnerable to occurrences of different forms of violence, especially instances of sexual and gender-based violence, within these structures (Hartmann, 2017). In general, women—married, single, or mothers—are more susceptible to developing affective disorders such as depression and anxiety (Milkie et al., 2020; Shishehgar et al., 2017). Thus, the importance of evaluating and analyzing circumstances and conditions that might protect forcibly displaced women from harm cannot be understated. Despite a proliferation of research that has added to the already existing corpus of literature on refugee trajectory and resettlement in the host society, most analyses have been gender-blind in their investigations of forced displacement and incorporation (Fiddian-Qasmiyeh et al., 2014; Hans, 2008).

The above-mentioned arguments led to this study's interdisciplinary framework—spanning architecture, psychology, and sociology—which was conceptualized to capture refugee women's lived experiences in the initial reception centers and shed light on their self-reported social stressors within the spatiality of these settings in Berlin. Drawing on Hobfoll's (1989) conservation of resources' theory, space, in this context, is considered a resource that outlines the quality of communications and social activities (Baldassare, 1978, 1979). The interconnection between the spatial arrangement of a setting—distribution, availability, and utilization of space—cultural factors, and social circumstances has received tremendous attention, mainly from psychologists (Barker, 1968; Sommer, 1969; Sundstrom, 1978). Studies have indicated that the design of a setting inevitably determines spatial proximity and social interactions, leading to either community spirit or social and psychological stress (Mitchell, 1974). By jointly adjusting their social and spatial boundaries, individuals and groups aim to properly regulate social interaction and gain an optimal social life. Edward T. Hall (1962), in his theory of "proxemics," indicated that despite some universal similarities in spatial use, persons from different cultures vary in what they define as appropriate personal space, interpersonal distances, and what constitutes intimacy. He argued that members of a particular

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<sup>2</sup> Based on the refugee women's experiences, access to the German course was controversial. At first, the government only provided official German courses for Arabic-speaking refugees. Farsi-speaking women felt discriminated against. They mentioned that no language courses were provided for them, either officially or through volunteer initiatives. They related this issue to the fact that the German government evaluated Afghanistan and Iran as safe places and, therefore, that they might be forcibly returned to these countries. However, later, when they also received permission to join the official courses, there were barriers that would hamper the women's attendance to German courses—i.e., they were suffering from depression and insomnia, the children were alone at the center because their husband also attended the classes, or that their husband did not permit them to participate in the course.

**Fig. 1** Different layers of spatial hierarchies to define privacy based on gender and social interactions in Islamic societies (Bahammam, 1988; Shabani et al., 2017)



society develop a mechanism for regulating contacts to a more acceptable level and controlling the movement across interpersonal boundaries. Thus, they establish a spatial order within their environment by giving meaning to interactional distances—e.g., public, social, personal, and intimate—to achieve privacy while maintaining their relationships with others. However, according to Pile and Thrift (1995), the notion of cultural identity is not bounded or fixed and can alter when an individual or group encounters diverse environments. Kaufmann (2017) argues that when moved into a new environment, through spatial negotiations, individuals are able to disengage with their initial culture yet simultaneously take on new roles and culture according to recent circumstances. In this way, their image of themselves and each other is associated with social relations and actions, which are formed and regarded as appropriate in a particular bounded space (Kaufmann, 2017; Pile & Thrift, 1995). Interpersonal conflict and role interference arise when those sharing a common space do not have the same perception of territorial allotments and how spatial resources should be allocated (Baldassare, 1978). Thus, a feeling of spatial adequacy or inadequacy is developed by overlying different temporal, personal, social, cultural, and environmental factors within a spatial setting (Baldassare, 1978; Stokols, 1972). Some scholars have underlined the essential role of intersectional differences, such as social class, gender, and ethnic variations, in spatial choices (Leibman, 1970; Scherer, 1974).

Coming predominantly from Syria and Afghanistan (UNHCR, 2016), refugee women's habituated spatialities tend to be intensively gendered and oriented around the home-scape of domestic activities (Bahammam, 1988; Othman et al., 2015; Shabani et al., 2017). Depicted in Fig. 1, this culturally mediated cognitive lens propositions a hierarchical spatial arrangement through which they adjust their personal spaces away from lesser-known male acquaintances (Bahammam, 1988; Othman et al., 2015; Shabani et al., 2017). From this perspective, the study took a culturally sensitive and gender-sensitive approach to uncover insights into the relationship between different spatial modalities of initial reception centers in Berlin with social stressors (e.g., inability to build or strengthen social relations or isolation and gendered-based constraints) experienced by Farsi- and Arabic-speaking refugee women. It elucidates the extent to which the women were able to negotiate their social and spatial needs and adapt to spatial circumstances.

**Table 1** Information on the most recent initial reception centers that the interviewees were or had been living in

Building	District	Number of residents <sup>1</sup>	Number of interviewees <sup>2</sup>
Airport (former)	Tempelhof	1,300	1
Headquarters	Charlottenburg-Wilmersdorf	1,000	1
City hall	Tempelhof-Schöneberg	400	1
Sports hall	Spandau	unknown	1
Sports hall	Spandau	1,000	2
Air dome shelter	Moabit	300	2
Senior home	Schöneberg	300	1
Hotel president	Schöneberg	100	1

1. Data on the number of residents were retrieved from the accommodations' managers

2. It is important to note that all interviewees experienced living in more than one accommodation during the first 6 months of their arrival

Note: The name and the location of the ninth accommodation are not mentioned, based on the preferences of the interviewee

## Methodology

### Data Collection

After establishing community-level trust through previous fieldwork inside the initial reception centers, which was conducted over 5 months in 2018 (pre-COVID), seven Farsi-speaking and four Arabic-speaking refugees were interviewed. The study sought access to interviewees across various neighborhoods—depicted in Table 1. Conducting the interviews was the responsibility of the authors, who natively speak Farsi and Arabic. The interviewers initially contacted the refugee women they knew from their prior engagement in refugees' social support and healthcare intervention projects.<sup>3</sup> The participants were selected from diverse accommodations to include a variety of lived experiences. The contacted women came from different social backgrounds.<sup>4</sup> All participants were above the age of 18 and had resided in the initial reception centers for at least the government-mandated obligation of 6 months (BMJV, 2016).<sup>5</sup> Other than one participant who was already

<sup>3</sup> The project of *ReWoven—refugee women and (psychosocial) volunteer engagement* (Humboldt-Universität zu Berlin, 2016), and the project of *Mehira—stepped care model supporting mental health in refugees and asylum seekers* (Charité – Universitätsmedizin Berlin, 2016).

<sup>4</sup> The participants included four single women (unchaperoned) and seven women with families (family women): three with two children, one with three children, and three with one child.

Six family women were married and accompanied by their husband, and one of the family women was a single mother (widow). Nine women identified themselves as Muslim and two had converted from Islam to Christianity.

<sup>5</sup> The maximum age of the participants was 45 years. The average age was 31. Please note that two participants did not have a national ID when they arrived in Germany; therefore, the average age is based on the official papers they received in Germany.

living in an apartment, the rest of them were still living in initial reception centers. The average duration of stay among the participants up to the date of the interviews was 15 months.<sup>6</sup> As a result, the interviewees' legal status varied—some were officially asylum seekers, while the others were recognized as refugees.<sup>7</sup> However, to avoid confusion, the article primarily refers to the interviewed women as “interviewees” or “refugee women.” The interviewers followed an interview topic guide that inquired about general descriptions of everyday life, spatial arrangements, and the social stressors they experienced. The interviewees were also asked about their lifestyles back home in order to gain a better understanding of the differences between their previous lived experiences and their current living conditions, as well as the process of adaptation to their new situation.

Informed consent was acquired from all interviewees, and the interviews were recorded, transcribed, and translated into English by the interviewers. A second method of investigation involved inviting the interviewees to draw sketches of the spatial relations inside the accommodations. These sketches aimed to produce inter-subjective cognitive maps that could trigger more in-depth discussions of the spatial arrangements. The interviews took place at the interviewees' preferred locations, such as inside the initial reception centers, at local cafes, or in the common spaces of German-language schools. If interviewees accepted, the amount of 10 Euro was paid to cover their transportation costs.

## Data Analysis

This study applied a qualitative empirical inquiry with an inductive approach (Corbin & Strauss, 2014). Each interview was translated into English and imported into software that has been especially developed for qualitative research projects: MAXQDA Standard version (MAXQDA, 2018). The processes of analyzing and interviewing took place in parallel, and the content of the interviews was analyzed according to a four-level coding scheme (Braun & Clarke, 2006; Guest et al., 2012; Javadi & Zarea, 2016), which is depicted in Table 2. At the first level, codes were quoted directly from the transcript text. At the second level, codes from the first level were sorted into sub-categories. At the third level, the second-level codes were transformed into refined thematic categories. The saturation point at the third level was reached after coding the eighth interview, by which time the authors were finalizing the eleventh interview. At the fourth level, a code was formed as a common concept representing all the third-level codes. All interviews were coded and analyzed by an

<sup>6</sup> The minimum duration of stay was 6 months, and the maximum duration of stay was 26 months.

<sup>7</sup> The asylum-seeking process consists of different terminologies related to different phases:

Asylum seekers, individuals who intend to file an asylum application but have not yet been registered by the Federal Office as asylum applicants. Asylum applicants, asylum applicants whose asylum proceedings are pending and whose case has not yet been decided on. Persons entitled to protection and persons entitled to remain, individuals who receive an entitlement to asylum, refugee protection or subsidiary protection, or who may remain in Germany on the basis of a ban on deportation (BAMF, 2021).

**Table 2** A sample of the coding process, from the original quote to the main concept

The fourth-level coding: the main concept	Disruption in Privacy: No Control/Freedom Over Everyday Life
The third-level coding: the category	Overexposure and Disintegration of Intimacy/Domesticity
The second-level coding: the sub-category	Visibility as a Woman
The first level coding: the original quote	I don't feel comfortable if someone sees me coming out of the shower. (...) I don't even show up with a towel in front of the others (A04)

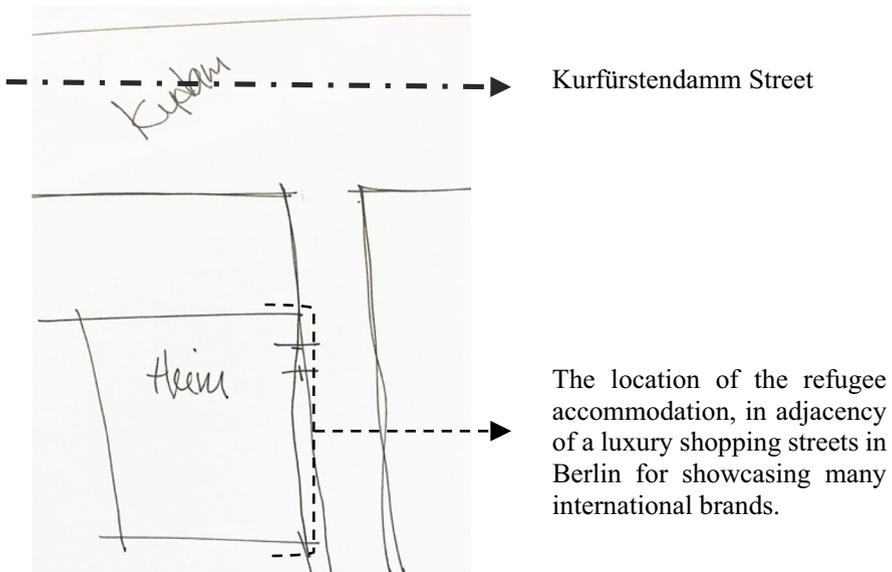
intercultural, interdisciplinary team that met weekly to integrate different perspectives, prevent bias in the results, and discuss the validity of the codes and categories.

### Empirical Findings

The interview data show that initial reception centers in Berlin are diverse. Even if two similar typologies of buildings were allocated as refugee centers, due to the superimposition of spatial (social, temporal, cultural, material, and physical dimensions) dimensions and the internal regulations and organizational rules, every center functioned differently. Despite the diversity of these spatialities, our gender-sensitive analysis found that disruptions in privacy, in part due to intercultural differences, were the primary sources of social stress commonly reported by refugee women. Their explanations of privacy indicated a lack of sensitization to the intercultural differences and needs of refugee women coming particularly from Islamic societies within the spatiality of the reception centers. Privacy, however, is not limited to the physical enclosure and protected space. It extended into conditions of decision-making and feelings of control/freedom over everyday matters of their lives. More specifically, they articulated disruptions in negotiations between control over social relations—either establishing intimacy and a sense of community or defining their needed social distance and freedom over individual and cultural practices. Furthermore, the limited possibilities for modifying their living space to make it “their own” intensified the feeling of disturbed privacy. The fourth-level code, “disruption in privacy: having no control/freedom over everyday life,” was derived from the third-level categories, which emphasize loss of autonomy and control over different modalities of space. Space in this context is heterogeneous and infused with many different lived dimensions. It is the result of overlaying physical characteristics; the social relation and structures; the psychological process; the content of activities, events, and situations; and individual and group values and meanings. These categories comprised (1) overexposure and disintegration of intimacy/domesticity; (2) psychological dissociation; and (3) structural constraints. Each of these third-level categories was derived from the second-level sub-categories, which are depicted in Table 3.

**Table 3** The main concept (fourth-level code), categories (third-level codes), and second-level sub-categories resulting from the data analysis

The fourth-level coding: the main concept	The third-level coding: the categories	The second-level coding: the sub-categories
"Disruption in Privacy: No Control/Freedom Over Everyday Life"	1. Overexposure and Disintegration of Intimacy/Domesticity	1.1. Visibility as a Refugee
		1.2. Crowding and Conflicting Interpersonal Distances
		1.3. Visibility as a Woman
	2. Psychological Dissociation	2.1. Prolonged Temporariness
		2.2. Difficulties in Resuming Normalcy
		2.3. Protraction of the Side Effects Beyond Their Stay
		2.4. Poor Access to Psychological Help
	3. Structural Constraints	3.1. Inflexible and Strict Rules: Losing Agency and Individuality
		3.2. Miscommunication with and Distrust of Staff



**Fig. 2** A sketch of the spatial arrangement in an initial reception center—a senior home—drawn by an interviewee

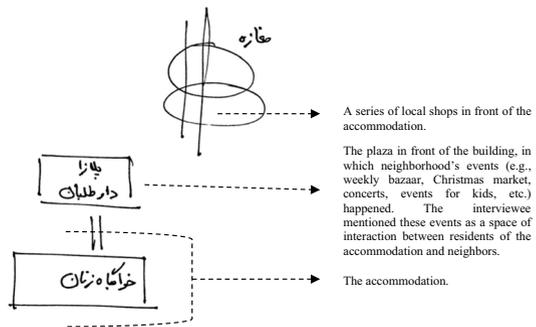
## Overexposure and Disintegration of Intimacy/Domesticity

### Visibility as a Refugee

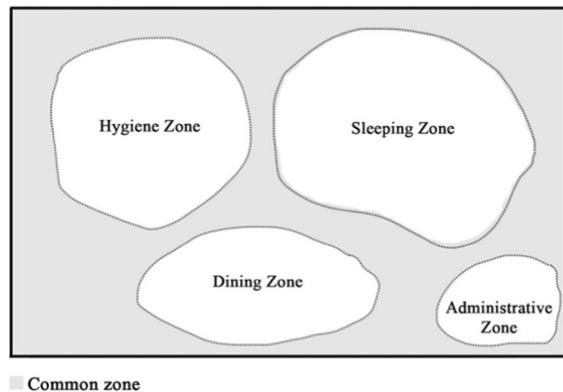
Everyday life within the initial reception centers was experienced as somewhat paradoxical. Although spatially located within an urban environment, the refugee women reported a feeling of being excluded from the neighborhood and, yet, all the while, visible—mostly due to socio-spatial and legal boundaries between the center and its adjacencies. For them, the initial reception centers were exposed and negatively highlighted due to the buildings' strong visual and mental impact—e.g., the quality and size of the structures, their locations in remote areas, their lack of access to public transportation, the socio-demographic characteristics and density of the people living there, the perceived discrepancy in social classes, and the presence of security at the entrances. Interviewees felt that this socioeconomic and political context exposed and separated them from the surrounding urban environment, as depicted in Fig. 2.

Nevertheless, one interviewee mentioned her experience when she felt the physical, social, and mental border between one of the centers and its immediate environment was blurred through the existence of mediator spaces, events, and activities around the accommodation, such as green spaces, shopping areas, plazas, parks, and playgrounds (F01)—depicted in Fig. 3.

**Fig. 3** A sketch of the spatial arrangement in an initial reception center—a city hall—drawn by an interviewee



**Fig. 4** Zoning and centralized strategies at initial reception centers—the fragmentation of the home-scape. The figure is derived by the authors from the content of the interviews



## Crowding and Conflicting Interpersonal Distances

Initial reception centers were mostly reported to be large-scale buildings, such as airports and sports halls, or large non-residential buildings that had been temporarily converted to accommodate refugees and asylum seekers. According to the interviewees, the organization of the interior architecture of the accommodations implies that the tasks of fulfilling the physiological needs of the refugees were divided into separated zones, linked through a common area, and shared between all inhabitants of the reception centers. In general, the zones included (1) a sleeping zone, (2) a hygiene zone (toilets, bathrooms, or washing area), (3) a dining zone (dining area and catering), and (4) an administrative zone (staff offices), as depicted in Fig. 4. Most commonly, there were two main typologies of sleeping zones. One consisted of large open spaces with individual beds, which did not offer any consideration of personal or private space. In the other ones, there were separate rooms, which, depending on their size, were shared between a few individuals or members of the same family.

Many women reported that the zoning design approach to everyday life activities created a fragmented sense of domesticity and over-exposed them to unwanted and multiple encounters with random people. The sleeping zones were separated according to the refugees' family status—married vs.

single—the hygiene facilities were partitioned distinctively for women and men, and the rest of the zones were mixed-gender. This approach created not only crowded and unclean conditions, but also hazardous health situations. In some of the larger centers—e.g., in some sports halls and at Tempelhof airport—crowding and a lack of physical partitions to ensure interpersonal distances and boundaries, such as walls, doors, or a ceiling, were reported as social stressors by the refugee women. One interviewee, who was housed in a sports hall, said that they were allowed to hang bed sheets and blankets like curtains all around their beds to protect their personal or family zones. Consequently, their personal spaces were minimized to the size of a bed and could be easily violated (F07, F01). The interviewees felt that they were being constantly watched, listened to, or even touched, particularly by male refugees and security personnel. This triggered stress and psychological pressure to protect their private and intimate spaces or determine personal and interpersonal spheres:

Then, once, the guy took my number and started to write to me. And said, 'I want to come up and talk with you.' He came and pulled the sheet and kissed me. I was as scared as hell. (F01)

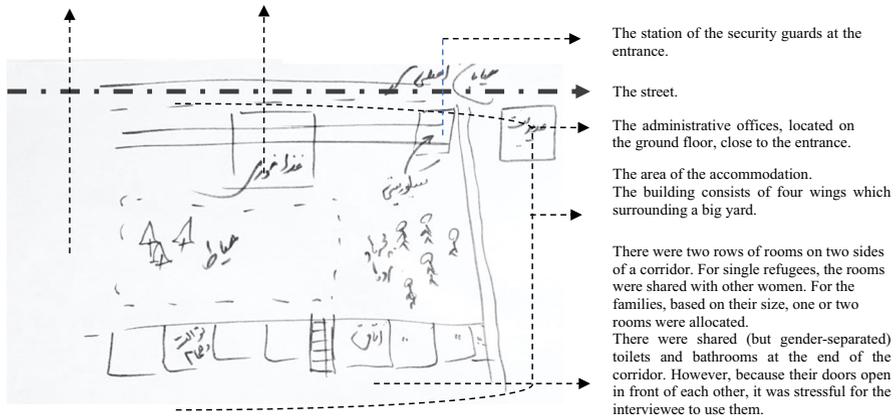
As stated by the interviewees, back home, hygiene and food services served an integral role in the rituals of everyday life, forming a sense of home and intimate space. The interviewees noted the lack of control and freedom over their nutrition, the presence of male security personnel and refugees in dining areas, queueing in long lines with no permission to take food to rooms, and predetermined times for eating. If the women and their families were late or had no appetite during the catering times, they would remain hungry until the next meal. For most centers with catering facilities, the interviewees reported a distinctive gap between the quality and type of food provided and their traditional foods back home. Moreover, they defined the whole process of preparing, serving, and eating food as a private matter that reflected a gendered role and which had been one of their main tasks in their former homes. Women used to dedicate a significant portion of their daily activities to food production, which created a sense of belonging for them. As a result, the spatial organization in the centers negatively impacted the social process of food consumption and the relationships between people.

Having no control or role in food provision led the interviewees to feel ineffective and helpless. Moreover, sharing a dining space with many people without any consideration of individual needs—gender-specific, disabilities, medical diets, or children's needs—was reported as a stressful experience at the reception centers. In some cases, the interviewees would quit going to the dining room, and because they were neither allowed to take food nor cook in their rooms, this might have led to malnutrition, as depicted in Fig. 5:

I don't feel comfortable at all. It depends if I feel intimate, then I feel good to eat together, but if I don't know the people, it is annoying. Intimacy means we know each other, and we accept and understand each other. (F01)

A large yard mostly populated by different groups of men. Additionally, it was used as playground for children.

A big salon as a dining room to serve almost 1000 refugees, located on the third floor, in the south wing. Due to the strict rules, impassable access, and mixed-gender space, the interviewee sometimes preferred not to eat food there, and this led to malnutrition. This situation arose because they did not have permission and possibility to cook their own foods.



**Fig. 5** A sketch of the spatial arrangement in an initial reception center—a headquarters—drawn by an interviewee

On an additional note, having no permission or dedicated space to host friends and family members was particularly distressing for those whose extended family members were living in different cities due to strict regulations.

### Visibility as a Woman

The interviews revealed that gaps and challenges in accommodating gender-based needs caused particular stress for the interviewees. They reported that in order to utilize each zoned facility, they had to pass through common shared spaces, which were occupied predominately by men. They felt watched and were sexually harassed by refugee men who would target them and spread rumors about them within the refugee community. This gradually excluded women from common spaces and limited their mobility, even inside the accommodation. Furthermore, basic acts like taking a shower were problematic for many. Although the toilets and showers for men and women were separated, they were usually located in the same zone. As a result, one of the interviewees' challenges was how to use the showers and toilets without encountering men. They did not feel comfortable being seen by men while going to the shower or coming out with a towel over their heads. They also expressed fear of a man entering while they showered, as depicted in Figs. 6, 7, and 8:

I don't feel comfortable if someone sees me coming out of the shower. (...) I don't even show up with a towel in front of the others. (A04)

Consequently, to adapt to the new situation, the women tried to abide by specific dress codes and to use the facilities when men were asleep or otherwise busy.

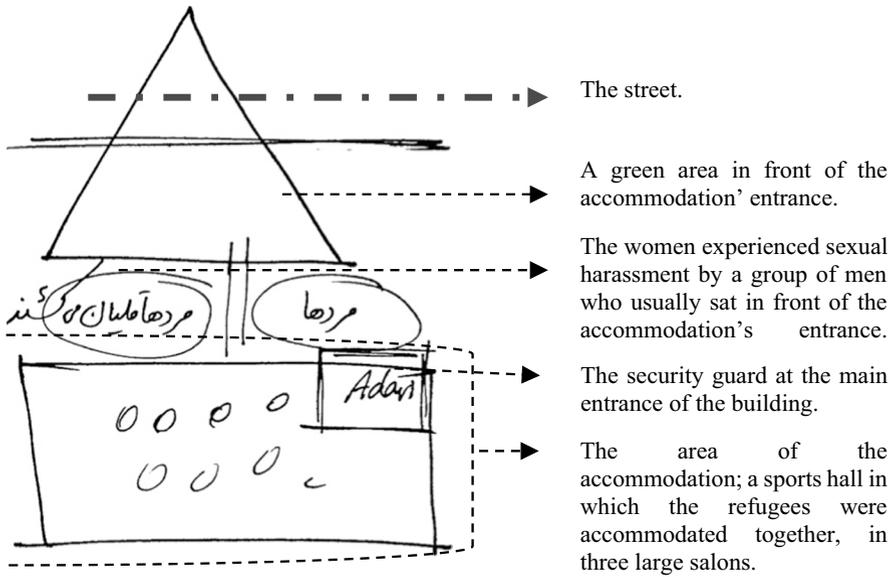


Fig. 6 A sketch of the spatial arrangement in an initial reception center—a sports hall—drawn by an interviewee

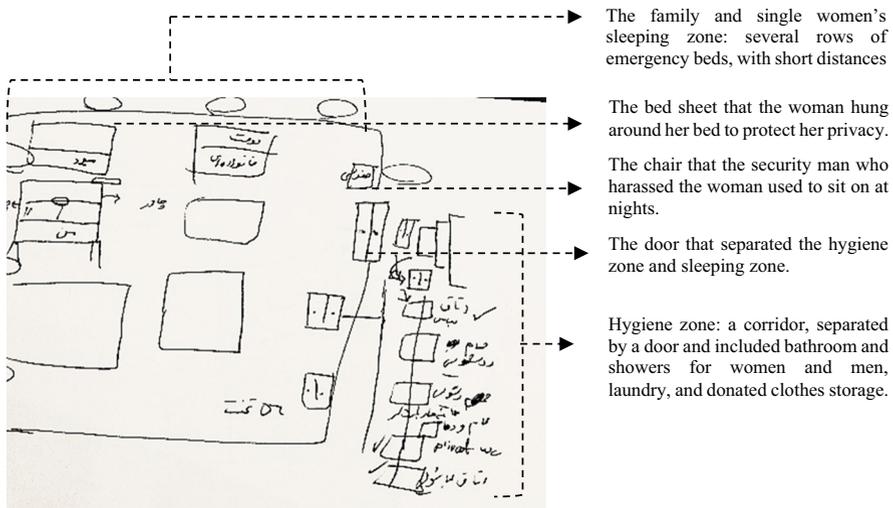
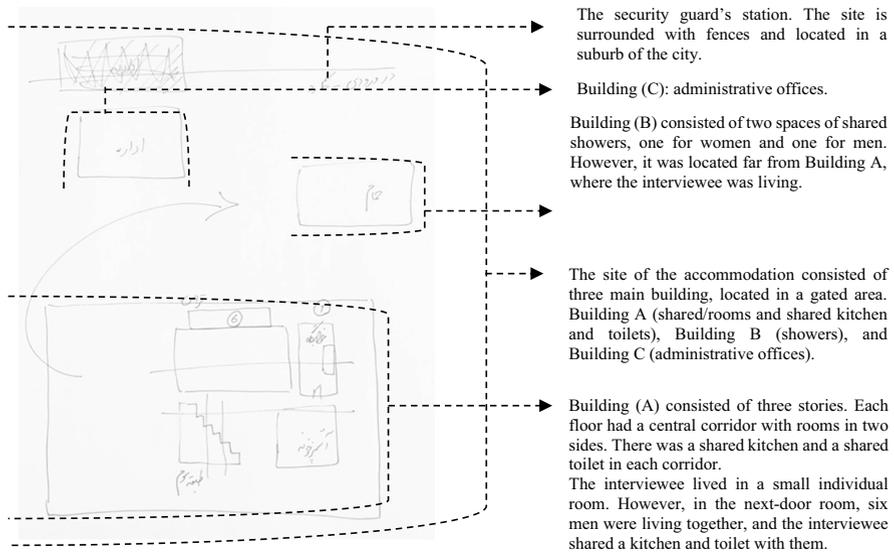


Fig. 7 A sketch of the spatial arrangement in an initial reception center—a sports hall—drawn by an interviewee

These strategies were mostly based on self-imposed limitations on their mobility or by their husbands, and consequently, they could restrict the social fluidity of space and cause divisions within the community and end up in the segregation of the women:



**Fig. 8** A sketch of the spatial arrangement in an initial reception center—a gated complex of sports hall and administrative buildings—drawn by an interviewee. The name of the site is not mentioned based on the preference of the interviewee

The main problem I had was that the men were usually sitting in the entrance or front of the building. (...), I always tried to go out very early in the morning and come back late in the afternoon when there were no or few people at the entrance. (F01)

The interviews also indicated different lived experiences for single, divorced, and married women. One of the main challenges that married refugee women dealt with was the new dynamic between them and their husbands. Displacement, new socio-cultural challenges, unemployment, new laws and social rights, confusion, and impaired mental health, all at the same time, caused changes in the interactions between the couples. This often resulted in frustration, loss of coping mechanisms, feelings of loneliness, and lack of reciprocal support:

And all these happened, and my husband was quiet. He has had a big change. My heart was broken already. And I must live with him for the rest of my life. (F10)

Adding to that, the lack of private space and secured zones, which often publicly revealed family matters, and having no room for intimate sexual interaction between couples caused mental pressure and emotional distress and ultimately reduced their ability to cope with difficulties (A03). The space for movement and interaction for family women were often formed around their responsibilities toward children and their family matters, and being accompanied made them less visible and exposed than single women:

The other ‘single’ women had problems. But I was busy with my own life. My kids were sick. I had to bring them to the doctor. (F02)

At the same time, due to the everyday struggles of dealing with gender-based social pressures and sexual harassment within their accommodation, unchaperoned women preferred either to stay in gender homogenous spaces or within family zones in mixed-gender reception centers. In addition, poor access to public transportation in remote accommodations decreased their mobility across the city, making the women more dependent on the centers’ services. They reported that their everyday struggles with gender-based limitations inside the accommodation triggered feelings of imprisonment and exclusion and an inability to imagine a world beyond their lives in the center (F01, A04, & A05).

The women interviewees constantly struggled to define their social privacy based on the degree of intimacy toward people. In verbal communication, the interviewees’ understanding of their private spaces was impacted by whether they had or did not have a common language with others. On the one hand, the absence of a common language was an obstacle when building friendships. On the other hand, one interviewee described how sharing a room with a girl with the same mother tongue negatively affected her privacy (A03). All in all, the spatial organization of refugee centers failed to provide a safe dynamic between “common” and “private” spaces.

## Psychological Dissociation

The interviews indicated that women could not relate themselves to and were psychologically dissociated from the spaces in the initial reception centers. These centers’ spatiality hampered the imagination of a meaningful life that would be in continuation of their past and could have a long-term adverse psychological impact beyond the stay of refugees in these structures. In addition, inadequate provision of psychological support intensifies this quality.

## Prolonged Temporariness

All of the interviewees mentioned that they had been rehoused in different initial reception centers at least twice. In addition to the instability of regulation and organizational structures, rehousing frequencies were linked to feelings of diminished control over their lives. There was often a lack of clarity about their length of stay in their accommodation, which, for most, had already far exceeded the mandatory duration of 6 months. Temporariness was not only a time-related quality but also manifested in the social dynamics and material aspects of the centers. From the structural height and depth of the buildings and their location and accessibility to the remaining and existing elements, such as doors, windows, and symbols, to the old furniture reused from other usages, such as emergency foldable beds and garden or office chairs, and to the lack of lockers for clothing and valuable objects, everything was temporary. These qualities of impermanence directly influenced how the

refugees experienced stress or did not experience comfort in these spaces. Prolonged temporariness formed and violated the privacy of these women:

The first days after arrival, I was confused. Gradually, when five, six months passed, I noticed that I was stuck in there and I could not imagine any end for that horrible situation. Can you imagine living and sleeping under that high ceiling with those wide windows? I felt I was sleeping in street. (F08)

### **Difficulties in Resuming Normalcy**

The interviewees struggled to resume or establish normalcy in their existing circumstances and find a meaningful relationship between their past and present lives and spatial practices. As transitional spaces, these structures performed as in-between or neither-nor spaces that neither facilitated a process of negotiation and understanding between the refugees and the host environment nor enabled them to practice their spatial knowledge gained through their everyday lives in their previous places of residence. The design disconnected the interviewees' spatial surroundings from their "self," "past," "normal," "home," "familiar," and "what we habituated," making them feel as though they were lost and did not belong to the host context (all interviewees):

Here, I cannot be myself. I feel I am neither here nor there. I am suspended. (A04).

### **Protraction of the Side Effects Beyond Their Stay**

The negative feelings toward the centers' living conditions remained with one interviewee even after she left the facilities, and it continued to affect her everyday life (A05). These feelings fostered a negative image of life in Germany, making it difficult for the interviewees to envision building a future here. One of the women mentioned how her difficult everyday life in the accommodation and her encounters with the German managers dampened her enthusiasm for learning the German language (A03). Another interviewee reported feelings of being rejected by the host community on different levels (A05):

See! Now I am living in an apartment with my daughter. But I barely leave my bedroom and join her in the living room. I do not feel comfortable there. It is large like refugee accommodations, and I feel insecure there. (A05)

### **Poor Access to Psychological Help**

The interviewees repeatedly noted their awareness of the critical mental state of refugees in the center. Among the issues reported by the interviewees were the depressive moods of family members or other refugees and feelings of impotence and helplessness toward psychological problems. They imagined the center as a collective of depressed people. This situation, in turn, hindered establishing relationships with other refugee women (A04, F02). Feeling weak and alone after refuge and

displacement, one interviewee could not deal with these challenges and needed help, but the lack of social and psychiatric services worsened her mental distress (A04).

## Structural Constraints

### Inflexible and Strict Rules: Losing Agency and Individuality

The interviewees expressed various reasons for fleeing—not all of them came to Germany for the same reason, and, consequently, they had different needs and wishes. Living among many refugees with different socio-cultural backgrounds, one interviewee explained her efforts, such as applying etiquette while eating and speaking in English to demonstrate and present her characteristics, social class, and values to the staff and security. She tried to disassociate herself from the negative images about refugees, especially those of refugee women. This interviewee tried to establish new social rules for how the other refugees and staff would treat her (A04).

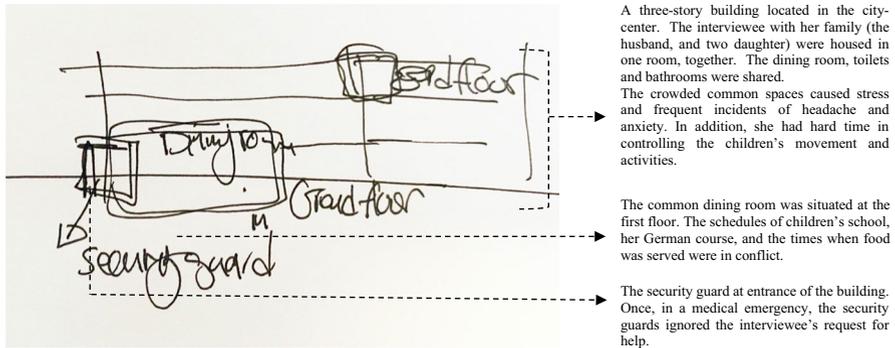
Some of the reported stressors at the reception centers included reduction in services for basic material needs, such as eating, sleeping, and hygiene—with no consideration of cultural norms and individuals' needs—and the imposition of strict, inflexible rules regarding spatial arrangements and daily routines. These caused interviewees to overthink every action and feel as if they had no control/freedom over their lives and private matters.

In some centers, the managers enforced strict internal rules for refugees' everyday lives, such as installing alarms to wake them up, refusing permission for families and partners to join beds together, and restricting the hanging of blankets around beds. If they failed to abide by those rules, there would be consequences, such as being unable to receive meals if they arrived late for lunchtime or having the blankets removed that they hung around their beds; these were put there by the refugees to avoid being seen while sleeping. One woman described this situation as if “it was like an army” (F02). Furthermore, rules that did not allow residents to lock their rooms resulted in frequent intentional or unintentional entrances into refugee women's personal spaces by other refugees and staff. Consequently, the women were always fearing that someone would interfere with their private space:

Private space is the space that belongs to me. I have control over it. It is the place that I can sleep easily without thinking. The place I don't feel stress. (A06)

More specifically, the needs of religious Muslim women—who wear a scarf or apply Islamic dress codes and need a regulatable living area without being seen by strangers—were sometimes contradictory to the established organizational rules and were therefore neglected by staff and other refugees, which led to feelings of discomfort:

When you woke up at 8:00–9:00, you had to take the curtains. I wasn't free. I had a scarf with sleeves, even on hot days in summer. It was so hard. (F02)



**Fig. 9** A sketch of the spatial arrangement in an initial reception center, a senior's home, drawn by an interviewee

Another important layer of restriction that the interviewees mentioned was the neglect of their cultural values, such as a lack of access to traditional food and the inability to host guests (hospitality). The distance between the hygiene, dining areas, and the sleeping zones—and having to share those zones with many people—was another physical factor that disrupted privacy.

### Miscommunication with and Distrust of Staff

It was evident from the interviews that the women did not open up to the staff about their past and current lived experiences for several reasons. First, the interviewees and staff experienced issues of miscommunication and distrust. Some of them blamed the administrative structure for incidents of rape and violence and would therefore not ask for help from those same administrators. The interviewees interpreted these incidents as the result of spatial mismanagement and the lack of consideration of gender-sensitive approaches:

So, if I am a woman living in a sports hall, with 200 men around me, and I was sexually harassed, I would not go to the people that made this situation. I would blame the administration. (A04)

Second, speaking up about rape, sexual harassment, and psychiatric issues is considered taboo in Islamic cultures:

... but I didn't dare say I need a psychiatrist. (...) Also, coming from Islamic culture, it is not easy for me to talk about it (rape). It's taboo. (A04)

In addition, the interviewees reported intense bad feelings toward male security personnel. Many of them failed to respect the interviewees' privacy by entering or invading their private personal spaces. Single women also mentioned experiences of sexual harassment by security, which led them to retreat from common spaces and limited their mobility inside the center to avoid encountering these men, as depicted in Figs. 7 and 9. Some of them tried to establish personal relationships with the women; one even proposed to a woman (F01). Moreover, the interviewees expected

the staff to inform them, more transparently, about the accommodation's rules and the refugees' rights within the reception centers.

## Discussion

Being a refugee comes with a social status fraught with stigma and disruptions. The main social stressor that the women spoke about was the “disruption in privacy,” which ended in experiences of gender-based constraints and, sometimes, gendered-based violence. That “women” have a shared understanding of the value of privacy that is not just a defining requirement of women in Islam, but of the association between protecting privacy and protection from undesirable social encounters, especially from the perseverance of unwanted male sexual attention and advances, in the crowded context of refugee accommodations. This shared understanding of privacy also extends to having the freedom to control everyday life matters, which are seriously neglected through the enforced regulations within the context of refuge, particularly in the initial reception centers. These empirical findings align with Altman's (1975) use of the term “privacy,” when he argued that significant psychological and social difficulties are linked to the need to regulate the quality and quantity of social contact in specific spatial arrangements. In this way, establishing and controlling spatial boundaries help individuals access various aspects of the self within a bounded space (Altman, 1975). Crowding has been regarded as a setting in which individuals encounter environmental circumstances beyond their control and prediction. The experience of poor spatial control triggers the feeling of powerlessness and exhaustion—resulting from over-attention to every detail—which leads to observable stress responses and interpersonal hostility (Baldassare, 1978).

Studies show that inadequacy of space leads to competition, a lack of control, and even conflicts over spatial resources for performing desired social roles, which lead to interruption in privacy (Booth & Johnson, 1975; Smith, 1971). In this situation, people are either continuously under social and psychological pressure for various durations or adapt to the existing spatial circumstances (Baldassare, 1978). The context of scarce spatial resources has a different potential impact on individuals with varying social power. It might favor high-status individuals—in this case men and staff—and place low-status individuals—in this case women—in a relative predicament (Baldassare, 1978). The indiscreet and gender-insensitive regulations of proximity were normatively constructed into the spatiality of these initial reception centers. They led women to experience the normalization of power over their lives, first, by refugee men and male security staff, and second, by governors of the context of refuge, particularly inside the accommodations. The consecutive, self-imposed social and spatial limitations put upon women and their gradual retreat from common spaces inside the accommodation can be considered an adaptive response to experiencing crowding and a shortage of space. With the implementation of these strategies, women aim to minimize interference through scheduling activities and closely regulating and defining proper space utilization (Anderson, 1972). George Simmel (1905) discussed that the principal adaptation and common coping mechanism to crowding is *social withdrawal*, or individuals' attempts to avoid others

or reduce their involvement in some associations, which consequently leads to an impoverished social life. Baldassare (1979) elaborated on the concept of social withdrawal by discussing *specialized withdrawal* based on social differences among the potential contacts within the person's spatial range. From this perspective, individuals learn to sustain social dynamism by attending longstanding, intimate ties from primary relationships or more satisfying encounters—in this case, other women or family members—and limiting encounters of a more secondary nature—in this case, male strangers or casual or potentially harmful interactions with men. Lyman and Scott (1967) argued that cultural training and societal values play an essential role in determining human spatial responses and guide people to relate certain personal activities to a particular space. The interviews inquired into an intensively gendered home-scape that is formed based on the degree of intimacy within family relationships and introduces a complex process of materialized arrangements of social interactions, ranging from the private to the public (Bahammam, 1988; Bell & Valentine, 1997; Othman et al., 2015; Shabani et al., 2017; Yasmeen, 2000). However, it revealed that the architectural arrangement of initial reception centers disintegrated the everyday symbolic, religious, and domestic values around performances of hospitality, hygiene, and food consumption, which had been integrated into the home-scape of the past. Thus, the women typically described reliance upon establishing continuations of cultural practices in the host environment as a mechanism of creating a meaningful connection to the new place. By illustrating this, they are positioned between “two normalities” of past and future (Turner, 2016), between the familiarity of spaces of their previous home-scape and the anxieties of unknown spatialities in a new geopolitical terrain that is highly visible and demarcated within their immediate urban adjacencies (Corbet, 2012; Hailey, 2009; Turner, 2016). In these narratives, refugee women expressed the burden of cultural dislocation comprised of alienation from their traditional values and sensibilities and an inability to negotiate new cultural practices and roles, which are controlled through the power structures of spatial environments (Kaufmann, 2017; Pile & Thrift, 1995).

The transient nature of the initial reception centers, in addition to the undetermined duration of stay, which is often prolonged from short-term to long-term, as well as the many other constant changes, only adds to an accumulation of uncounted burdens. Safouane (2017) has discussed how this temporal quality is embedded within different modalities of these spatialities, in their non-residential nature, and on the traces of their previous usage. The temporality of the spatial circumstances fails to provide information on the sequential order of what and when an event will occur. This, in turn, hinders the functioning of coping strategies and results in adaptation failure (Baldassare, 1978).

Living in a non-Islamic society, the women experienced a shift in pre-practice gender roles within the family dynamic and changes in the notions of masculinity and femininity that imposed an extra burden on married women (Dolan, 2002; Krabbe, 2017; Shishehgar et al., 2017). According to a study by Spasojević et al. (2000), post-traumatic stress disorder (PTSD) amplifies communication distress between refugee couples and leads to isolation and marital distress. Furthermore, the lack of intimate space for couples within these centers' spatialities adversely affects their relationships. Nevertheless, the women invoke existing marriage and

family relationships as a protective factor in personal boundary-making negotiations within refugee accommodations, where the presumed availability of single women is situated more so as the target of rape and sexual assault. In contrast, accompanied women are less of a target.

From the discussion mentioned above, one may conclude that the spatiality of the initial reception centers hampered achieving what Edward T. Hall (1963), in his theory of “Proxemics,” introduced as the spatial order of social boundaries, a proper balance of communality and individuality. Consequently, it led to social isolation and a prevalence of sexual harassment and gender-based violence incidences, which have already been reported in several studies (Hartmann, 2017; UNHCR, 2018). Refugee women, in this context, experience the loss of both social and spatial resources (Hobfoll, 2001). In an intersectional, interdisciplinary perspective, social stress can exacerbate mental health symptoms, and, in traumatized patients, the consequences for psychosocial wellbeing can be even direr (Schock et al., 2016), and poor access to psychological care could also negatively intensify this situation.

## Conclusion

This study contributes to understanding the elements and processes that Farsi- and Arabic-speaking refugee women experienced as social stressors within the spatiality of initial reception centers in Berlin. The empirical findings demonstrated how different temporal, architectural, and psychological modalities of these spaces hindered building and strengthening social relations and failed to provide women with adequate protection from gender-based violence while also disrupting culturally mediated notions of privacy. The results indicate that the women were engaged in a constant struggle to understand and adapt themselves to life in these accommodations or modify their living conditions. Nevertheless, the limits of such acts of adaptation and modification within initial reception centers need to be considered. Due to various imposed legal restrictions, the spatiality of these structures hindered the performance of these women’s social freedom and agency. Therefore, it is crucial to rethink the initial reception centers’ conceptualization and integrate gender-sensitive strategies in designing these spatialities, as the psychological effects can remain even beyond the duration of their stays and hinder the process of resettlement.

Although there are general guidelines for designing refugee accommodations, every center’s spatiality, with its social and material characteristics, is unique. Thus, these spaces should not be considered fixed spatial apparatuses for imposing suppressive rules and disciplines. In contrast, managers should take on a sustainable system of constant monitoring, decision-making, and intervention, one in which women are actively engaged. In this case, it is not only the quantity and physical dimension of space, but also different cultural modes of control over space that need to be negotiated. Integrating different social and psychological modalities of these spaces and engaging refugee women in the design and planning of these settings can moderate social conflicts and allow for a process of spatial negotiation and adaptation by refugee women that is based on their spatial and cultural needs. Given the sensitivity of these topics, it is clear that the positionality of the interviewees as

native Farsi- and Arabic-speaking women migrants from the Middle East beneficially shaped the interactions in the interviews by holding space for feelings of trust.

As the article has shown, an interdisciplinary analysis adds a layer of complexity to gender-sensitive research frameworks. The complexity of intersectionality can give a platform to issues of profound importance for communities marginalized within marginalization who do not have the power of their volition to be heard in society. Yet, a limitation of this research is the danger of maternalism, whereby refugee women are considered helpless and in need of support to acculturate due to the valorization of assumed embodied difference. Future research needs to include refugee women in forms of community participatory research approaches. Although the number of studies that focus on women's experiences in the context of refuge and forced displacement is increasing, women's experience needs a particular emphasis in order to fully reflect the multi-faceted and complex nature of their everyday social reality. The all-too-common occurrence of gender-based violence in these accommodations, which is hazardous to women's health and wellbeing, indicated gaps and challenges in knowledge production and policymaking strategies that need to be addressed.

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## Declarations

**Ethics Approval** The study was conducted according to the Helsinki Declaration and the local institutional ethical standards.

**Conflict of Interest** The authors declare no competing interests.

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