Institutional Disempowerment in the UK Asylum System

Clea Kahn

U2072924

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Abstract

This research introduces the concept of institutional disempowerment and explores how mental health and well-being is affected by government services that deny users accountability and the exercise of choice and agency. Using situational analysis, a form of grounded theory, the study used mapping techniques to consider the impact of institutional disempowerment on people going through the process of seeking asylum in the UK. The involvement of three experts-by-experience co-researchers at every stage of the process informed and nuanced the design of the study and interpretation of the data. The use of the timeline data collection tool gave participants the power to shape their own narrative. From participants' descriptions of the high and low points of their experience of the asylum process, the study mapped four core elements of the model – safety, social connection, identity, and power and autonomy – as well as the two cross-cutting components of time and bureaucracy. The mechanism of harm was understood with reference to well-evidenced theories demonstrating the negative impact on mental health of learned helplessness and the denial of self-determination, self-efficacy and agency. This makes an important contribution to the field of Counselling Psychology by providing useful evidence on how the asylum system can be made less damaging and for therapeutic work with people seeking asylum. The overarching importance of social factors on mental health and well-being, in both positive and negative ways, has been particularly striking and suggests a good entry point for change. The study provides a strong basis for future research on the concept of institutional disempowerment which holds promise as a model for creating more responsive and compassionate social services.

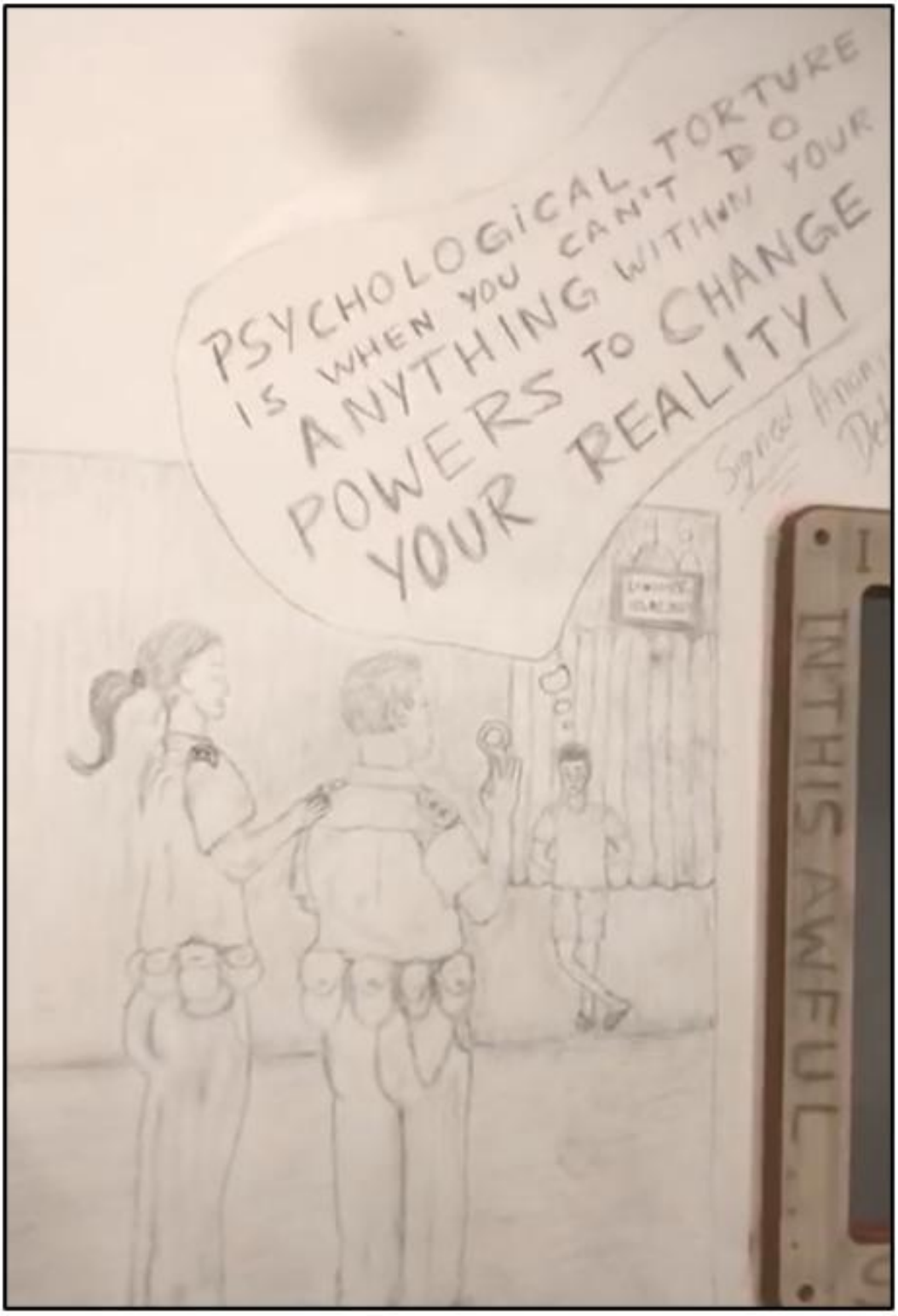

Photo of a drawing by a man detained in an immigration removal centre, provided by a former detainee.

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The writing of this thesis took place against the backdrop of a constantly evolving asylum policy environment. The UK government introduced ever more harsh measures for people entering the country irregularly, which violate the spirit and possibly the letter of the UK's commitments under the Refugee Convention. This was accompanied by language that dehumanised and vilified people already made vulnerable by persecution and conflict. The seeds of this strategy bore fruit in the summer of 2024 in the form of racist and xenophobic riots across England that threatened the safety of people seeking asylum and those who work with them. I hope that the findings of this research will help create a better system, in which no refugee is ever left to feel helpless in the face of hate.

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Contents

Glossary and list of acronyms

Glossary

Aspen Card	A pre-paid card provided to PSA, automatically re-charged weekly.
HC2	Certificate providing entitlement to free NHS prescriptions
Section 4	Temporary support for PSA whose claim has been refused
Section 95	Support for PSA while awaiting a decision
Section 98	Emergency Funding

Acronyms

APPG	All-Party Parliamentary Group
COR	Conservation of Resources
ICIBI	Independent Chief Inspector of Borders and Immigration
IMA	Illegal Migration Act
IOM	International Organization for Migration
LGBTQI+	Lesbian, gay, bisexual, transgender, queer, intersex and other
NABA	Nationality and Borders Act
NGO	Non-governmental organisation
PSA	People seeking asylum
PTSD	Post-traumatic stress disorder
SDT	Self-determination theory
WHO	World Health Organization

Introduction

This research introduces the concept of institutional disempowerment. It describes a form of harm experienced by users of services and systems designed in such a way as deny unaccountability and the exercise of choice and agency to those dependent on them. The word ‘dependent’ is used advisedly, as it is typically the people with least power in society that are most affected, either because they lack the financial means to seek alternatives – private healthcare as opposed to public, for example – or the empowerment to insist on other options.

The concept is new, derived from the lead researcher’s experience as a patient in the health system, as a service user and provider in the mental health system, as a monitor in immigration detention, and from working with people in social services and the asylum system. While many systems demonstrate institutional disempowerment, the UK asylum system was chosen for this research because people seeking asylum are unable to ‘vote with their feet’ if they feel they are treated poorly and, as non-citizens, often face structural barriers (Asif & Kienzler, 2022) and lack the language skills and/or familiarity with legal and social systems that would allow them to assert their rights. This marginalisation is increasingly exacerbated by an atmosphere of hostility toward forced migrants in the UK and beyond.

This is a qualitative study using situational analysis, a form of grounded theory that uses mapping techniques to consider a situation in all its complexity, including human and non-human actors as well as discursive elements. It is participatory research, and three experts-by-experience co-researchers have informed every stage of the process, from the design of the study to interpretation of the data. A

timeline data collection tool was selected to give participants the power to shape their own narrative.

Academics and refugee advocates have provided strong evidence of harms associated with asylum processes in the UK and elsewhere including, at least anecdotally, from disempowerment. There is, in parallel, a robust and well-established evidence base of the negative impact of disempowerment on mental health and well-being and, conversely, of the benefits of empowerment, comprising concepts of agency, self-determination and self-efficacy. This research aims to provide an understanding of this as a process and as a form of institutional harm. Its findings indicate that the UK asylum process does cause harm, both by aggravating and exacerbating the pre-existing trauma and vulnerability of people seeking asylum and by creating new harms related to disempowerment. The research identifies four core areas of the model – safety, identity, social connections, and power and autonomy – with cross-cutting issues relating to time and bureaucracy. The findings show that although these can be understood as discrete categories, they are also overlapping and interactive.

These findings are important, providing compelling evidence that can be used both to call for change to systems inherently damaging to mental health and well-being, and to propose the mechanisms by which this change can be effected. This offers opportunities for advocacy and for improved support to people seeking asylum, rooted in the commitment to individual rights and self-determination and to social justice as a way of achieving better mental health and well-being in a diverse society that is at the core of counselling psychology (Cutts, 2013; Kagan et al., 2010; Tribe & Bell, 2018; Tribe & Charura, 2023).

This paper first establishes the evidence base on disempowerment and on the mental health of forced migrants, identifying the research gap. It then provides a detailed explanation of the research methodology followed by analysis and discussion of the findings. Finally, it summarises the implications of the research, including limitations and directions for future research, followed by a brief conclusion.

Chapter 1: Literature Review

This chapter will provide a critical review of the literature surrounding the concept of institutional disempowerment. It will do so first by identifying what is meant by disempowerment and reviewing the evidence of its impact on mental health and well-being. It will then consider the literature on the mental health and well-being of forced migrants, with particular emphasis on the post-migration period. Finally, it will bring this literature together, looking specifically at the asylum system in the UK.

Definitions

Acknowledging the power of language and the dehumanising nature of the present discourse around migration, including forced migration, language has been carefully chosen to avoid ‘othering’ or reproducing harmful power dynamics (Tribe & Charura, 2023). The term ‘people seeking asylum’ (PSA) is used to describe people waiting for confirmation of their status as a refugee or other protected status. It is used in preference to ‘asylum seeker’ to put emphasis on our shared personhood and move away from a phrasing that has become objectifying in popular discourse. The term ‘forced migrant’ will sometimes be used when referring more broadly to people who have fled conflict or persecution or are victims of human trafficking. Mental health in this paper is understood as “a state of wellbeing that enables people

to cope with the stresses of life, to realise their abilities, to learn well and work well, and to contribute to their communities" (WHO, 2023). Well-being is "a state of positive feelings and meeting full potential in the world. This can be measured subjectively and objectively using a salutogenic approach" (Simons & Baldwin, 2021), recognising that it "comprises an individual's experience of their life as well as a comparison of life circumstances with social norms and values" (World Health Organization, 2013).

1.1 Disempowerment

1.1.1 Understanding empowerment and disempowerment

The concepts of empowerment and disempowerment are germane to a range of fields, including community psychology, nursing, social geography, social anthropology and the women's movement, however there is no psychological construct for either term. Disempowerment is defined as being deprived of autonomy, power or control (Merriam Webster, n.d.), while empowerment has been defined as "a process by which people, organisations, and communities gain mastery over issues of concern to them" (Rappaport, 1984, in Zimmerman, 1995, p. 852), though scholars agree the term is conceptually ambiguous, contentious and contested (Cattaneo & Goodman, 2015; Jupp et al., 2010; Kieffer, 1984; Pekonen et al., 2020). In defining empowerment as the "capacity of disenfranchised people to understand and become active participants in matters that affect their lives", Bolton & Brookings (1998, p. 131) allude to an aspect of social justice inherent in the term.

Empowerment can be understood as both a process and an outcome (Cattaneo & Goodman, 2015; Jupp et al., 2010; Pekonen et al., 2020; Perkins & Zimmerman, 1995), and has been conceptualised in various ways. Kabeer (1999)

identifies three inter-related dimensions of empowerment: resources (material, human and social); agency; and achievements/well-being outcomes, while Zimmerman (1995) took a more relational approach, dividing empowerment into intrapersonal, interactional and behavioural aspects. The intrapersonal concerns the individual's perception of their own control, self-efficacy, competence, and mastery as it applies to their capacity to exert influence in different life arenas such as family, work and community. Interactional empowerment is about understanding and engaging with one's environment to access the resources and networks needed to achieve one's goal. Finally, the behavioural component concerns actions taken to achieve the goal. While studies of Zimmerman's theories have found cross-cultural validity (Tsubouchi et al., 2021), empowerment itself has been found to be culturally mediated (Zimmerman & Warschausky, 1998).

A central component of most definitions of empowerment is the concept of agency, or "the state of being active, usually in the service of a goal, or of having the power and capability to produce an effect or exert influence" (American Psychological Association, 2018). Bandura (2006) argues that agency involves intentionality, forethought, self-reactiveness and self-reflectiveness, and considers that humans and their systems are in a constant state of co-construction in which, "human functioning is a product of a reciprocal interplay of intrapersonal, behavioural, and environmental determinants" (p. 165). Frazer-Carroll (2023) warns that while agency is understood to involve playing a *meaningful* role in the world, in some societies this is conflated with playing a *productive* one. This error is sometimes seen in the literature, as in a recent study of new-migrant psychiatric patients, where Tham et al. (2023) found that those seeking permission to stay in the UK – including many PSA – had higher rates of psychiatric disorders and a lower

likelihood of seeking out mental health services than those resident less than five years. The authors hypothesised that this was connected to lack of financial means associated with barriers to employment in the asylum processes, but did not consider the relevance of other aspects of employment known to be particularly important to forced migrants, such as helping others and developing meaningful relationships and feelings of dignity and self-sufficiency (Fedrigo et al., 2023; Şahin Mencütek & Nashwan, 2021).

Empowerment, then, can be understood as a relative concept with personal, relational and contextual components and comprising an objective aspect and a subjective belief about one's capacity to exert influence on the world. It is considered a fundamental building block in work on equality and social justice (Comas-Días & Torres Rivera, 2020). Next we will review of what is known about the relationship between empowerment and well-being.

1.1.2 Empowerment and well-being

A number of theories have been developed about the relationship between empowerment and well-being. This section will briefly review these.

Developed in the field of social psychology, self-determination theory (SDT) brings a biological and evolutionary perspective to issues of empowerment. SDT holds that humans evolved to be "active, intrinsically motivated, and oriented toward developing naturally through integrative processes" (Deci & Ryan, 2012, p. 418). These qualities are considered inherent but develop relationally, through interaction with the social environment. Empirical research over several decades has validated the theory and its biological basis. For example, one experimental study with

students measured salivary cortisol, a biological marker of stress, finding that more controlling, authoritative teaching resulted in elevated levels of cortisol, whereas autonomy-supportive teaching resulted in decreased levels (Reeve, 2002). Another study found that elevation in an immunological protein associated with anticipation of acute stress was related to need frustration, but not need satisfaction (Bartholomew et al., 2011). SDT has six mini-theories, the most relevant of which is Basic psychological needs theory (BPNT), which has been tested using largely experimental, quantitative designs looking at motivation in work (Gagné & Deci, 2005), education (Reeve, 2002) and sport (Ntoumanis & Mallett, 2014). Findings have been summarised in meta-analyses (e.g. Slemp et al., 2018; Yu et al., 2018) and support the view that negative consequences arise when psychological needs are thwarted by controlling, critical or rejecting social contexts. Frustration of basic psychological needs has also been shown to be a robust predictor of stress, depressive symptoms and anxiety (Vansteenkiste et al., 2020; Vansteenkiste & Ryan, 2013). Conversely, studies in the workplace uphold the theory that autonomy, competence and relatedness are key to satisfaction and thriving in organisational contexts (Busque-Carrier et al., 2022), with cross-cultural evidence (Deci et al., 2001; Magson et al., 2022; Unanue et al., 2017). This suggests that optimal development requires a sense of competence, autonomy and relatedness (Deci & Ryan, 2012), and that the ability to undertake actions of one's own choice to attain freely chosen goals is therefore both evolutionary, and fundamental to human survival (Shogren et al., 2017).

Another theory centres on the importance of one's beliefs about one's capability to exercise influence over events that affect them, or self-efficacy. Self-efficacy beliefs are rooted in cognitive, affective, motivational and selection

processes, and strongly influence an individual's thoughts, feelings, self-motivation and behaviour (Bandura, 1994). Self-efficacy concerns the capacity to act rather than the desire to do so or the desirability of the action (Gallagher, 2012). Related findings came from an experimental study showing how involvement in community activities and organisations helps provide psychological empowerment through an experience of mastery and control, concluding that participatory decision-making and social support are key elements in 'learned hopefulness' (Zimmerman, 1990). While a sense of mastery is considered the key component in developing a sense of self-efficacy, three other influences are also important: social persuasion, or being assured by others that one is capable; vicarious experience, or seeing others like oneself succeed; and one's physiological state, or one's interpretation of stress responses associated with the effort or fear of failure (Bandura, 1994). As the emphasis on social persuasion and vicarious experience suggests, self-efficacy has a strong social component. A recent study conducted with nearly 400 high school students found a mediation effect for mastery on social persuasion and physiological influences, but not on vicarious experience (Capa-Aydin et al., 2018), suggesting that seeing others like oneself succeed has a particularly powerful influence on the sense of self-efficacy. Recent mixed-methods studies with adults and children in different contexts reinforce the conclusion that social influences play a critical role in self-efficacy (Gale et al., 2021; Peura et al., 2021).

Studies show that self-efficacy is important in contexts of forced migration. A recent longitudinal study of 180 resettled refugees in the UK found that positive affect was consistently associated with self-efficacy, particularly elements of mastery such as employment, language and understanding the system, as well as social support (Tip et al., 2020). Pak et al. (2023) conducted a cross-sectional survey of

339 adult Syrian refugees in Istanbul and found that self-efficacy had a mediating effect on the relationship between social support and resilience, with males and individuals with higher education levels reporting increased resilience. Based on measures of depression, anxiety, somatisation, self-efficacy, and locus of control, Schlechter et al. (2023) found that self-efficacy and external locus of control were critical to mental health in a cross-sectional study of 200 refugees in Germany.

The field of positive psychology (PP) aims to “learn what actions lead to well being, to positive individuals, to flourishing communities, and to a just society” (Seligman, 1999, p. 2). Seligman & Csikszentmihalyi (2000) define PP as the scientific study of flourishing and positive functioning in evolutionary, biological, personal, relational, institutional and cultural terms. While some, including community psychologists, critique many of the theories discussed so far for focusing on the individual at the expense of their social context (Orford, 2008), PP emphasises the importance of community and institutions (Compton & Hoffman, 2020). PP focuses on different aspects of subjective well-being, including those mentioned above, as well as social connections, meaning in life – including spiritual practice, optimism or hope – and self-esteem. Numerous clinical studies have been conducted in western and non-western contexts looking at different PP ‘strengths’ of forgiveness, gratitude, kindness, and optimism and various categorisations of interventions. These have been summarised in numerous reviews and meta-analyses over the past decade, which have found small to medium effect sizes in reduction of anxiety, depression and stress, as well as improvements in well-being (Bolier et al., 2013; Carr et al., 2021; Hendriks et al., 2020).

1.1.3 Disempowerment and mental health

More than 50 years of research supports the logical assumption that if empowerment has a positive impact on well-being, disempowerment must have the opposite effect. The behaviourist-inspired theory of learned helplessness was developed in the 1970s through experimental studies first with animal and then human subjects,[1] subjecting them to repeated experiences of negative stimuli perceived to be unavoidable or inescapable. The studies identified three interrelated impacts of learned helplessness: a lack of motivation to pursue change; cognitive difficulty in connecting actions and outcomes; and emotional uncertainty, fear and depression. Subjects developed an overall pessimistic attributional style (Abramson et al., 1978; Maier & Seligman, 1976; I. W. Miller & Norman, 1979; Seligman & Maier, 1967; Trindade et al., 2020). Subsequent studies have connected learned helplessness with clinical depression, mental distress and physical ill health (Seligman, 1972; Smallheer et al., 2018; Trindade et al., 2020), as well as with conditions or psychological phenomena such as coercive control (Stark, 2009). The concept has been found to have cross-cultural validity (Couto & Pilati, 2023; Dyal, 1984; Lan et al., 2024).

Learned helplessness is related to the concept of locus of control, or the extent to which an individual believes that they control events in their lives and outcomes of their behaviour, rather than chance, luck or fate (Rotter, 1966). Extensive studies on animals and humans connect an internal locus of control with reduced fear and a greater sense of agency, while the belief that one's situation is

[1] The term 'subjects' is used here in preference to 'participants' recognising that many of those researched on – animals – did not provide informed consent and were often treated unethically (Singer, 1995).

controlled by chance and/or outside forces – an external locus of control – is debilitating, leading to hopelessness and depression (Lefcourt, 2014; Prociuk et al., 1976). In studies on the role of causal attribution in relation to learned helplessness, Abramson et al. (1978) theorised that the extent of helplessness and associated depression is linked with one of three statistically independent continuums depending on whether the individual attributes its cause to their own attributes or believes that helplessness would affect anyone in the same situation (individual/universal), believes it to be permanent or temporary (stable/unstable), or whether it is viewed as occurring in all situations or just one (global/specific). Studies of learned helplessness in a range of situations contribute to an understanding its relationship to depression and passivity or the inability to escape an aversive situation. These include children in education (Nolen-Hoeksema et al., 1986), older adults in long-term care settings (LeSage et al., 1989), long-term incarcerated adults (Schill & Marcus, 1998) and women subjected to domestic violence (Bargai et al., 2007; Herman, 1992). Bosankić et al.'s (2019) studies with returnees and internally displaced persons in Bosnia and Herzogovina suggest that forced migrants become victim to learned helplessness when assistance is delivered in ways that render them powerless and dependent, resulting in extreme passivity and a pessimistic outlook.

Based on these findings, it is reasonable to assume that individuals subject to a system that denies them control over their situation are likely to experience negative emotional and physical consequences commensurate with the extent to which they perceive their situation as something temporary that anyone might experience or as permanent or longstanding and unique to them, and with how important and encompassing its impact is on their lives.

1.1.4 Structural dimensions of empowerment and disempowerment

Much of the evidence base on empowerment and disempowerment focuses on the individual, but all of the theories include an interpersonal and environmental dimension. For this reason, it is important to provide a brief overview of theories of structural empowerment and disempowerment. Particularly influential figures include Michel Foucault, Frantz Fanon and Paulo Freire, as well as the liberation psychology of Ignacio Martín-Baró. While these differ in their foundations and focus, they are all concerned with the use of power and authority for social control (Foucault, 2019; Rouse, 1994), including how oppressed peoples, in internalising their oppressor, experience powerlessness, disunion and an inability to reach their full potential (Comas-Días & Torres Rivera, 2020; Freire, 2018). Community psychology has arguably been the tool by which the liberationist ethos has entered the mainstream of psychology (Montero et al., 2017), recognising that individuals do not exist in isolation but relationally, and as members of wider societies. This perspective is accompanied by an emphasis on principles of social justice, community and connectedness, diversity, self determination, empowerment and participation (Boden-Stuart & Larkin, 2023; Orford, 2008; Riemer et al., 2020), though some argue that, in failing to acknowledge its roots in hegemonic power structures, it falls short of disrupting the structural harms it critiques (Beals et al., 2021). There is a symmetry between community psychology and the chosen methodology of this research, situational analysis, as both acknowledge the subjective experience of the individual while focusing on the wider situation, understanding the challenges that people face not in isolation, but as a complex combination of the individual in their social, cultural and economic context, including structural discrimination and the exercise of power in society.

What does it mean for a harm to be structural? Bailey et al. (2017) describe the structural dimension of racism as involving interconnected institutions and referring, “to the totality of ways in which societies foster racial discrimination, through mutually reinforcing inequitable systems (in housing, education, employment, earnings, benefits, credit, media, health care, criminal justice, and so on)” (p. 1454). Sexism has similarly been defined as structural when it is, “observable at each level of the gender system as gendered power and resource inequalities in: large-scale social, political and cultural institutions at the macro level, organizational *(sic)* and interactional settings at the meso level, and individual identities, beliefs and bodies at the micro level” (Homan, 2024, p. 2). The concept of ‘institutional’ disempowerment that this research explores is similar but narrower than the structural dimension. It is well described in Kanter’s (2008) examination of the gendered exercise of power in corporations. Kanter observed that power is passed between people with shared characteristics (men) who then use their power to deny opportunity to others (women). This is achieved, she argued, by rewarding behaviour that keeps women in positions of disempowerment, trapping them in a state of “accountability without power” (p. 66) and in “downward spirals of ineffectiveness” (Patterson & Loseke, 1978, p. 256). Javidan (2021) clarified that institutional sexism is a manifestation of structural sexism, “integral to the routine operation or daily workings” of the institution which can be “obfuscated, rendered covert, and thereby allowed to proliferate” (p.2).

While these arguments are largely theoretical, they are credible based on the substantial evidence base demonstrating physical, psychological and emotional harm caused by structural and systemic discrimination. For example, critical race theorists and feminist scholars have meticulously documented how structural

discrimination is normalised and rendered invisible in societies with implications for women's health and well-being (Delgado & Stefancic, 2023; Perez, 2019; Rippon, 2019). Similarly, Methot (2019) has described how health and well-being is affected by structural violence and intergenerational trauma among Canada's indigenous peoples, resulting in widespread substance abuse, suicide, sexual abuse, child neglect and a "passive acceptance of powerlessness" (p. 51). Carter and Pieterse (2020) provide robust statistical evidence of harm in demonstrating how experiences of direct and indirect racism result in psychopathological symptoms and internalised racial oppression at interpersonal, institutional and cultural levels. Other scholars have focused on the mechanisms by which structural disempowerment causes harm, including through denial of resources, choice and agency (Kabeer, 1999), while empowerment has been shown to provide benefits through experiences of "opportunity, information, resources, support, formal power and informal power" (Wagner et al., 2010, p. 449).

1.1.5 Empowerment and disempowerment: A summary

This section has outlined the evidence base on theories centred on deficit models, showing that experiences that reinforce feelings of helplessness can result in profound negative impacts on physical and mental health. Conversely, the ability to exert control over one's life and environment can lead to feelings of agency, self-efficacy and empowerment, in turn linked to improved well-being. Both of these aspects are linked with an individual's locus of control and the extent to which they feel they can exert influence over their life and environment. While the evidence base for these assertions is robust, it is worth noting that its largely positivist, quantitative nature does not capture the subjective experience of empowerment and

disempowerment. Moreover, and somewhat ironically, many of the methodologies contain strong elements of disempowerment, acting on and controlling participants and their data rather than engaging them directly. Finally, the concept of empowerment is culturally mediated (Zimmerman & Warschausky, 1998), and much of the work to date is rooted in a western and northern paradigm. Although the negative impact of disempowerment and the benefits of autonomy are well evidenced, empowerment remains a complex and contentious construct, with contested definitions and dynamics of power.

The next section will review the literature about forced migration and mental health and well-being, before bringing the topics together to understand empowerment and disempowerment in relation to PSA.

1.2 Forced migration and mental health

There is an extensive and complex literature on forced migration and mental health. This section will first examine what is known about mental health before, during and after migration, then look at the evidence regarding stressors related to asylum processes, with a particular focus on the UK. Finally, it will identify the gap in the evidence on how disempowerment acts on people, particularly PSA, when experienced in a systematic and institutionalised way.

To do this, this review draws on systematic and scoping reviews, meta-analyses, and meta-ethnographies. The different approaches to the synthesis of data are useful in drawing out different aspects of the evidence including qualitative studies exploring experiential or phenomenological aspects of PSA's experiences. These reviews have been selected based on the use of established methodologies

with transparent and rigorous methods and are treated as equally reliable (Munn et al., 2018; Paul & Barari, 2022; Sattar et al., 2021). It is important to note, however, that reviews consistently comment on the wide variation in studies' methodological rigour and quality, and it is not always clear to what extent questionnaires have been culturally adapted or tested (Bogic et al., 2015; Silove et al., 2017; WHO, 2018). All of these reviews are limited by the heterogeneity of the target populations, varying in size, location and target groups (e.g. legal status, nationality), and the fact that they are often self-selecting. Moreover, because search strategies are based on clinical diagnoses, the picture is typically framed in biomedical terms and excludes forms of distress that do not meet clinical thresholds (e.g. Blackmore et al., 2020). More specific aspects of PSA experiences in asylum processes tend to be based on smaller-scale studies, sometimes qualitative. These give a better sense of the lived experience, but are less generalisable, and a systematic review of qualitative research found that while the majority of the 15 studies reviewed were of medium to high quality in terms of literature review, aims and methodology, they were weak in reflexivity and description of ethical considerations, and generally lacking in credibility, though it did not specify how this was judged (Hoare et al., 2017). Finally, reviews included here have been selected to avoid duplication of data, for example studies in the same countries during the same time period. Where there was a risk of overlap, selection was based on size of sample and quality of the methodology.

The focus of this review is on evidence from the UK and contexts similar in culture, socioeconomic profile and refugee profile (countries of origin and migration routes), such as Europe, Australia, Canada and the United States. However, any attempt to generalise across different population groups, even in similar countries and contexts, must be tentative at best. There is a focus on more recent studies

because although what refugees are fleeing does not necessarily change substantially, the context into which they are received does. In recent decades large-scale flows of refugees into Europe and the United States have resulted in a hardening in policies and public attitudes toward forced migrants and an increased focus on border controls, deterrence and externalisation (Bloch & Donà, 2018; Posselt et al., 2018; Vallianatou & Toremark, 2023). This is important because a life story is intricately connected to the wider history in which it is set (Gilligan, 2023).

1.2.1 Forced migration and mental health

This section will outline the evidence base concerning mental health of forced migrants, including PSA. While this has expanded significantly in the past sixty years (Silove et al., 2017), the literature still disproportionately concerns the impact of trauma before and during migration (Schick et al., 2018), based on clinical diagnoses, particularly post-traumatic stress disorder (PTSD) and depressive and anxiety disorders. This suggests a skewed picture. The absence of sub-clinical cases coupled with barriers to accessing mental health support (e.g. weak cultural competence and poor access to language-appropriate services (WHO, 2023)) and the well-established reticence of the population to seek mental health support (Byrow et al., 2020) would suggest that levels of distress are likely higher than reported (Fuhr et al., 2020; McGrath et al., 2020). Existing evidence, then, only accounts for a segment of the population and, due to the relative paucity of qualitative studies, says little about people's subjective experience. Moreover, it is important to be aware of the risk raised by Doná (2010) of equating 'genuine refugeeness' solely with trauma. Finally, although there is acknowledgement that there are specific stressors

associated with seeking asylum, there are relatively few studies looking at this specifically (Priebe et al., 2016).

There is strong evidence that forced migrants suffer from poor mental health and higher rates of self harm in comparison to host populations (Blackmore et al., 2020; Fazel et al., 2005; Gargiulo et al., 2021; Heeren et al., 2014) and in comparison to other types of migrant (Carroll et al., 2020; Hollander et al., 2016; Mewes et al., 2017), including refugees (Ryan et al., 2009). This is particularly true for people who have experienced organised violence, such as armed conflict (Siriwardhana et al., 2014) irrespective of migration status (Mesa-Vieira et al., 2022). However, reviews report considerable divergence in rates, from 9% (Fazel et al., 2005) to 31.5% (Blackmore et al., 2020), to 100% (Crepet et al., 2017; Posselt et al., 2020), and several noted that studies with higher methodological quality show lower prevalence rates of PTSD (Blackmore et al., 2020; Bogic et al., 2012; Silove et al., 2017; Steel et al., 2009). Other reasons cited for the wide divergence include heterogeneity and methodological factors such as sampling methods, size of sample, population group, length of time since the traumatic experiences, as well as contextual factors including changes in level of risk in transit depending on route and political factors (Blackmore et al., 2020). Studies also note a high prevalence of depression (Posselt et al., 2020), often persisting for many years post-displacement. There is some disagreement on whether rates are higher among PSAs and refugees than in the general population (Blackmore et al., 2020) or roughly the same (Fazel et al., 2005), but it is possible that this is also attributable to geo-political factors, as the studies took place some time apart.

There are typically three phases of forced migration referenced in the literature: pre-migration, migration and post-migration (Murray et al., 2010).

Numerous studies show that forced migrants' mental health is influenced by a complex combination of pre-migration trauma and loss experiences before and during flight, and on and after arrival, often with cumulative impacts in adults (Bhugra, 2004; Ermansons et al., 2023; Laban et al., 2004; Porter & Haslam, 2005; Siriwardhana et al., 2014) and children (Fazel et al., 2012; Lustig et al., 2004). Variability in conditions and processes faced by PSA across contexts and time periods creates challenges in understanding the impact of different stressors, however PTSD, depression and other mood disorders have been found to be linked with, and exacerbated, by post-migration factors. It is even increasingly suggested that post-migration factors may have a greater impact on post-migration mental health than pre-migration factors (Belz et al., 2017; Chen et al., 2017; Eleftherakos et al., 2018; Laban et al., 2004; Miller & Rasmussen, 2017; Porter & Haslam, 2005; Steel et al., 2009). Ermansons et al. (2023) found that studies focusing on adverse experiences pre-migration generally find associations with PTSD and depression, whereas those looking at post-migration stressors find associations with mood disorders, anxiety, substance misuse and psychosis. This may indicate a shift in refugee and PSA mental health pre- and post-migration or in how mental health is framed by those measuring it, or both, however it is worth noting that this assertion is not found in other reviews. While these are interesting questions in the abstract, in practice it seems neither feasible nor helpful to try to attribute shares of responsibility for poor mental health to pre-, peri- and post-migration stressors. It is perhaps more useful, as Miller and Rasmussen (2017) propose, to conceptualise forced migrants' distress as a 'constellation' of stressors, in line with Bronfenbrenner's social ecological model. The next section will consider the components of this constellation after briefly outlining the entitlements of the UK asylum system.

1.2.2 A constellation of post-migration stressors

Provisions for people in the UK asylum process

In the UK, the Immigration and Asylum Act (1999) makes provision for basic needs under either section 95 for destitute PSA or section 4 for refused PSA. Normally PSA will stay about 35 days in initial accommodation – often hotels or hostels – then move to dispersal accommodation (Darling, 2022). However, backlogs in processing claims and coronavirus-related pressure on housing led to increased use of 'contingency accommodation' (UK Visas and Immigration, 2021), initially consisting mainly of hotels and apartments commissioned for short-term stay, but later including repurposed miiltary barracks and a barge. This was ostensibly due to space constraints, though critics suggest the choice of more austere accommodation was intended both to deter people from entering the UK irregularly and to address public perceptions of PSA living in luxury (All-Party Parliamentary Group, 2021; Dorling & Harris, 2023). PSA have no choice in accommodation and can be moved at very short notice from one part of the country to another, often with severe personal and social consequences (Asif & Kienzler, 2022; Refugee Council, 2021).

The asylum process

Issues associated with asylum process have been found to be extremely stressful, with insecurity of status linked with depression and PTSD (Nickerson et al., 2019), and undermining resilience in children and families (Ratnamohan et al., 2023). A number of studies identify issues associated with authority figures as particularly distressing. For example, qualitative studies found that contact with

people in authority were experienced as humiliating, depersonalising and threatening (Hoare et al., 2017; Sundvall et al., 2015), a finding echoed by Jannesari et al.'s (2022) systematic review, though they noted that studies often did not specify which interviews and/or contexts were most stressful.

For PSA the post-migration phase is not a single block of time but is divided in two: the first while the asylum claim is being considered; and the second – integration – following confirmation of legal status and receipt of a temporary or permanent right to remain. The stress of uncertainty while the claim is being considered is a key source of mental health difficulties (Gleeson et al., 2020). The well-documented trend toward more restrictive asylum policies and processes in many countries has led to longer processing times for claims, among other outcomes (Li et al., 2016). In the UK, such delays are related to a substantial backlog of applications, which increased from 27,000 to 132,000 between 2018 and 2022 (Cuibus et al., 2024). In July 2022 the House of Commons Home Affairs Committee (HASC) described the pace of decision-making as "glacial", with waiting times an average of 550 days for a child and 449 days for an adult (Home Affairs Select Committee, 2022, p. 4)." Grace et al. (2018) argue that the psychological toll taken by long waiting times amounts to a form of structural harm, the 'violence of uncertainty'. Phillimore & Cheung (2021) provided evidence of this theory by analysing data from an extensive longitudinal study in the UK. They found that longer waiting time was associated with poor physical and emotional health, particularly for women, with negative emotional impact persisting up to 21 months post-settlement. Migration researchers and social geographers have paid particular attention to temporal dimensions of people's experiences waiting for a decision, identifying themes of stuckness, liminality and precarity (Haas, 2017; Jansson, 2024; Wolter et

al., 2023), understanding precarity through Butler's (2012) definition of a deliberate use of state power to repress and dehumanise, and a form of structural violence.

While not part of the asylum process as such, immigration detention is not uncommon, with serious implications for mental health (Bosworth, 2016; Filges et al., 2018). Evidence of a very high burden of mental health problems in comparison to non-detained migrants suggests detention "independently and adversely" affects mental health (Verhülsdonk et al., 2021). A recent study found that people detained six months or more reported PTSD 16.9 times more often than people detained less than six months, and were 5.5 times more likely to report suicidal ideation (Specker et al., 2024). Systematic reviews report consistent findings of disturbed sleep, fear, hopelessness, self-harm and suicidal ideation among detained PSA, with higher levels of pre-detention trauma associated with greater severity of symptoms (Robjant & Fazel, 2010; von Werthern et al., 2018). Even relatively brief periods of detention have been found to have a negative impact on mental health (Cleveland & Rousseau, 2013). Bosworth and Vannier (2020) note that detention blurs the lines between asylum reception and administrative detention, experienced by PSA as the host society defining them in securitised terms. This results in feelings of criminalisation, as though "a key part of their identity has already been determined by their confinement, over-riding other aspects of their sense of self" ((Bosworth, 2014, p.87). Issues related to identity will be further discussed below.

Housing conditions

Hotels and reception centres are described as impersonal, institutional, and often in substandard condition (BRC, 2022; Darling, 2022; Guma et al., 2021). A study of PSA experiences conducted by Doctors of the World (Jones et al., 2022)

reported feelings of being imprisoned in hotel accommodation, and of loneliness and isolation, with serious consequences for mental health. In a 2023 study mixed-methods study, the Helen Bamber Foundation (HBF, 2024) found that high numbers of PSA in hotels reported depression, suicidal ideation, anxiety, trauma, and sleep problems. Qualitative studies in the UK found poor mental health associated with insecurity of housing or homelessness (Palmer & Ward, 2007) or with poor quality of housing and a general sense of fear in state-provided housing (Hoare et al., 2017).

Dispersal accommodation is typically located in relatively remote areas where housing is less expensive, but ethnic diversity is often low and local hostility may be more likely, as seen during the anti-asylum seeker riots of 2024 (Downs, 2024; Duncan et al., 2024). An association between poor mental health and the relocation of PSA to remotely-located accommodation away from their networks and urban centres has been found in studies in Denmark, Greece and Germany (Kreichauf, 2018) and Denmark and Norway (Herslund & Paulgaard, 2021). In a UK study drawing on qualitative research from five English counties, Phillips (2006) found that PSA and refugees felt excluded in society not only due to the location of their housing, but also its quality. In Norway, Hauge et al. (2017) noted that "[p]roviding asylum seekers with housing in neighbourhoods equal to the way other Norwegians live creates a possibility for imagining them as 'ordinary citizens'. However, when the aesthetic and technical standards differs significantly from the rest of the neighbourhood… the effect may be the opposite" (p. 15). Poor quality of accommodation is, then, not only uncomfortable but also viewed as a marker of 'otherness' and a source of social discomfort. In the UK this has been exemplified by the famous case of the sub-contracted company which painted the doors of PSA in dispersal accommodation red to enable its staff to more readily identify them.

Studies explored both how rendering them visible exposed them to violence, abuse and distress (Darling, 2022), while the discourse concerning the incident was framed in exceptionalist and class-based terms, obscuring the structural racism that underpins it (Bates, 2017).

Living conditions

UK contingency accommodation is full board, with no choice what or when people eat. Residents receive an allowance of £8.86 per week. In self-catered accommodation PSA receive a subsistence allowance of £49.18 to cover all of their needs (Gower, 2024). Allowances are intended to cover all costs including, but not limited to, clothing, toiletries and transportation. Advocates argue that the stress of managing on so little takes a toll on mental health (Allsopp et al., 2014; Refugee Action, 2023; Simpson et al., 2023). In addition, because landlords and property managers are contracted by the Home Office, there is no direct accountability to PSA (Darling, 2022). In a recent inspection of large-scale accommodation, the Independent Chief Inspector of Borders and Immigration (ICIBI, 2024) noted numerous concerns, including lack of effective engagement and consultation with stakeholders, including “service users” (quotations theirs). They noted the cumulative nature of the stressors, making a connection between the conditions of accommodation and the ambiguity and liminality of the waiting period.

Importance of ‘homing’

Contingency accommodation lacks common and recreational space, particularly for families and children. Boccagni (2022) argues that such spaces are

important allowing for play and communal activities. He notes the importance of providing a balance between privacy and connectedness, citing studies that show a tendency among residents to beautify and appropriate what are otherwise institutional spaces as a form of ‘homing’. In Norway a qualitative study found a connection between a sense of ‘home’ and feelings of empowerment (Hauge et al., 2017). Dispersal accommodation in the UK offers some trappings of homing which have been found to support well-being, such as the capacity to cook, clean and shop for oneself (Grønseth et al., 2016). In Canada a qualitative study identified the living environment as an ‘external resiliency factor’, with improvements in well-being attributed to access to familiar food, freedom to practice one’s own religion and safe access to natural spaces (Liu et al., 2020). Finnvold and Ugreninov (2018) found, in a large-scale quantitative analysis (n= 30,871) in Norway that living in ‘ethnic enclaves’ resulted in a lower probability of being admitted to mental healthcare institutions and, if admitted, a shorter duration of stay.

Discursive constructions

Social geography studies in Norway and Germany reporting feelings of precarity and disorientation among PSA housed in conditions similar to UK contingency accommodation, and perceptions of being imprisoned or ‘confined to the threshold’ of the country (Fontanari, 2015; Thorshaug & Brun, 2019; Zill et al., 2021). Other studies problematise discourse around hotel accommodation, with particular reference to the cognitive dissonance between the discursive presentation of hotels as places of luxury and hospitality and PSA’s experiences of them as confining and even carceral (Dawson, 2014; Zill et al., 2020). Dawson (2014) also noted how the official narrative of ‘hospitality’ both allows Canadians to frame themselves as

hospitable and to imply that PSA are treated overly generously or that they are taking advantage. A similar tone is struck by discourses in the UK, captured in a Home Office article (2024) about the closure of some asylum hotels with the headline, ‘150 asylum hotels returned to communities’ implying that, in being used in this way, they had been ‘taken away’.

Social stressors

Relatedness, defined as “the need to be close to, trusting of, caring for, and cared for by others” (Deci & Ryan, 2012, p. 421), is considered in SDT to be a key requirement for optimal development. Other theories also hold that social support enhances well-being both as a buffer in stressful circumstances and in fulfilling ongoing basic social needs (Cohen & Wills, 1985). Numerous studies have highlighted the importance of social connections to the mental health and well-being of forced migrants, but a recent scoping review of research found that the issue is insufficiently prioritised in forced migration research (Wachter et al., 2022). It found a high importance of social support, both formal – from institutions such as faith groups, schools and non-governmental organisations (NGOs) – and informal – from family, friends and community networks. Family support was an important protective factor (Correa-Velez et al., 2017; Karaman & Bulut, 2024; Oppedal & Idsoe, 2015) but worry about family and separation was also an important source of stress (Hoare et al., 2017; Li et al., 2016; R. D. Schweitzer et al., 2011). One study found that the connection with one’s ethnic community had a significant role in predicting mental health outcomes (Schweitzer et al., 2006). The absence of social support has been associated with decreased physical and mental health in both forced migrant (Bogic et al., 2012; Sundvall et al., 2015) and general populations (Jeong et al.,

2016). Strong and Gore (2020) demonstrated that the stability of these relationships is predictive of lower psychological distress and higher levels of subjective well-being, irrespective of the number of social connections .

Hobfoll's conservation of resources (COR) theory has often been used to reflect on social issues in research on forced migration. COR argues that, to ensure survival, humans acquire, maintain and protect resources, including objects (food, shelter, money), personal characteristics (skills, knowledge, self-esteem), conditions (well-being, belonging), or energies (vitality). Resources are valued in themselves, but also as tools to gain other resources, including through relationships of reciprocity. Real or threatened resource loss causes stress and motivates the individual to replace or substitute them. Losses are believed to have a greater impact on mental health than gains (Hobfoll, 2011; Hobfoll et al., 2016). Putnam's theory of social capital is helpful in reflecting on the role of social resources in particular, with its emphasis on the importance of reciprocal relationships that strengthen solidarity and mutual trust by bonding individuals together in groups and creating bridges between groups (Claridge, 2018; Putnam, 2011). In a longitudinal study in Northern Iraq, Hall et al. (2014) found that social resources can buffer against psychological stress and symptoms of depression and PTSD. They argue that social resources both improve and are improved by decreased symptoms of distress. Ryan et al. (2008) found that the likelihood of negative psychological outcomes is higher when the host environment constrains or depletes a migrant's resources without providing opportunities for gain. This framework has also been used to consider how a range of resource losses and gains affect forced migrants, including physical and socio-economic resources, social capital and mental health resources (Bakker et al., 2016; Faran et al., 2023; Strang & Quinn, 2021; Ziersch et al., 2023). Particularly useful are

two studies considering these theories in relation to refugee integration. Phillimore et al. (2018) expanded the understanding of how refugees use resource-related reciprocity in different ways, with particular emphasis on acknowledgement of agency. Strang & Quinn (2021) provided evidence that connection alone is insufficient to build social capital for marginalised groups, recognising the hitherto neglected importance of diversity and societal power differentials.

Also important in the discussion of social relations is the concept of social harm, a form of harm resulting from acts and omissions by states and institutions. Individuals and communities can be harmed by social actions in a variety of ways: physically, materially (financially/economically) and socially or through ‘cultural safety’, “encompassing notions of autonomy, development and growth, and access to cultural, intellectual and informational resources generally available in any given society” (Hillyard & Tombs, 2007, p. 17). Relational harm, a form of social harm, is defined by Pemberton (2004) as comprising both enforced exclusion from social relationships and misrecognition, with misrecognition understood as a form of harm caused when the people or society around us reflects a demeaning or diminishing view of us (Taylor, 2021). Canning (2017) has convincingly argued that this is one form of harm perpetrated by the asylum process.

Identity

The American Psychology Association (APA) defines ‘identity; as “an individual’s sense of self defined by (a) a set of physical, psychological, and interpersonal characteristics that is not wholly shared with any other person and (b) a range of affiliations (e.g., ethnicity) and social roles” (APA Dictionary of Psychology, 2018). It is a complex and multidimensional concept. As deceptively simple as the

implicit or explicit response to the question, ‘who are you?’, it can be viewed as a personal, relational or collective phenomenon as stable or fluctuating, and as discovered or personally or socially constructed (Schwartz et al., 2011). Social identity theory holds that our sense of self comprises both self-categorisation and membership in social categories or groups (Tajfel & Turner, 1979). Numerous studies have explored the relationship between social group membership and refugee mental health and found it important and highly complex. A study with Syrian refugees in Turkey found that membership in multiple groups was important in maintaining a sense of continuity and life-satisfaction, though it also augmented feelings of loss (Smeekes et al., 2017). Continuity is considered an agentic act involving the capacity to maintain a sense of self over time (Zimbardo & Boyd, 1999). A study in the Netherlands found a complex relationship between acculturation and religion which was, “a cause of cultural distance, a salient social identity, a bright boundary and a source of prejudice” (Şafak-AyvazoĞlu et al., 2021, p. 555). Guan & So (2016) found that a strong sense of group social identity led to a perception of social support which, in turn, led to an increased perception of self-efficacy. Loss of social and cultural identity is an important source of distress for forced migrants when they are removed from their country, culture and community (Bhugra, 2004; Doná, 2010). This may be related to the argument that an event is perceived as challenging based on how much personal redefinition is required and is more stressful if it poses a significant challenge to one’s self-concept (Compton & Hoffman, 2020). At the same time forced migrants take on new identities, often socially constructed in problematic ways, including ‘asylum seeker’ (Douglas, 2010). A Foucauldian Discourse Analysis of official documents in the UK found that social construction of PSA created multiple identities, including some discourses of

compassion, but also homogenising and securitising language that framed PSA as the ‘other’ (Ballentyne & Drury, 2023). In their systematic review, Mulcaire et al., (2024) identified 19 studies showing a relationship between identity and the asylum determination process, resulting in increased negative self-image and reductions in self-confidence and self-esteem. The label ‘asylum seeker’ was connected by some with self-critical thoughts and a loss of status, and asylum processes were connected with feelings of failure, self-hatred, shame and lack of control.

Summary

This section has reviewed the evidence showing a negative impact of disempowerment on mental health and a positive impact of empowerment. It has also considered the evidence concerning the mental health of refugees and PSA which, while heavily biased toward pre- and peri-migration trauma, includes convincing evidence that stress caused by the experience of asylum processes can be as or even more severe than earlier phases of migration. Research, including some specific to the UK context, indicates this is a result of a ‘constellation of stressors’, including material, social, and psychological issues, but the impact and interaction between these stressors is poorly understood. This is the gap that this research aims to address.

Chapter 2: Methodology

This research aims to parse how different aspects of the asylum process affect the mental health and well-being of PSA. It does so by using a qualitative methodology to explore how the process is experienced by people going through it. Research is not a neutral endeavour, and it is imperative that this work does not reproduce violence or trauma inflicted through imbalances of power and injustice. To this end it extends a social constructionist, critical realist perspective to embrace an epistemology that not only recognises the existence of different ways of comprehending the world but incorporates these different ways of knowing into the structure of the research. This chapter will first describe the ontological and epistemological approach of the research. It will outline the philosophical perspectives that frame how the research reflects on issues of power, in particular, structural racism, (neo)colonialism and intersectional issues. It will then outline how this was implemented using situational analysis, a form of grounded theory. It will finish with a brief reflection on my own positionality in relation to the research, the participants and my co-researchers.

Before continuing, it is important to briefly describe what principles have been considered in ensuring quality and rigour in this research. Qualitative research poses more challenges in this regard than quantitative methodologies, which may use tools such as psychometrics, surveys and questionnaires to identify ‘objective’ knowledge which can be tested using principles from the scientific method such as replicability. Yardley (2017) has highlighted how decades of development of qualitative techniques and reflection on rigour have converged on principles in four main dimensions to which this research has attended: sensitivity to context; commitment and rigour; transparency and coherence; and impact and importance.

Sensitivity to context was at the core of this research, and co-researchers considered how participants' and co-researchers' lived experience, sociocultural context and language issues might impact how issues were framed and interpreted. For example, the discursive environment regarding people seeking asylum in the UK was profoundly negative at the time of the research, with potential to make participants defensive, or for both participants and researchers to overcompensate for this negativity by framing constraints on people as more unreasonable than they are. This was managed by reflecting on these issues through systematic, documented debriefings between co-researchers following each interview or focus group, and through the grounded theory process of memo writing. One memo, for example, documented how moved a researcher had become by the testimony of a participant and how, in debriefing, the co-researchers examined what the individual had found distressing and why. This provided both emotional support for the researcher and helped identify a particular area in which they might struggle to be neutral in interpreting the data.

Rigour, transparency and coherence were also given close attention. The researchers considered, for example, how to ensure consistency in the interview process considering how open and relatively unstructured the timeline is as a data collection tool in comparison to, for example, semi-structured interviews. This was achieved by providing standardised instructions in both written and oral form (see Appendix 7). Using sensitising concepts in coding was also a useful way of imposing structure and consistency. In line with recommendations of Mays & Pope (2020), considerable effort has been made to provide a detailed account of how this coding was done, demonstrating transparency by providing samples of coded transcripts (Appendix 9) as well as an excerpt from a table that was made to collate evidence

for each emerging theme in order to identify those that were most salient. Rigour was also ensured using respondent validation, in which the findings are presented back to the participants to test how closely they correspond to participants' accounts (Mays & Pope, 2020). Due to time limitations, not all participants could be presented with findings, but co-researchers, who were present in interviews and acted as participants, provided validation of final codes.

2.1 Epistemological approach

This research is rooted in the social, political and philosophical values of counselling psychology. While the field can and does encompass a range of epistemological approaches, its humanistic, existential and phenomenological roots situate it more toward the constructivist-interpretivist end of the spectrum than the positivist end (Kasket, 2012; Strawbridge & Woolfe, 2003). From a constructivist perspective, knowledge is apprehended subjectively, either phenomenologically, through the individual experience, or through intersubjectivity, reflecting social and cultural categories of meaning (Harper, 2011; Ponterotto, 2005). This research is particularly aligned with a social constructionist epistemology arguing, in the spirit of Gergen & Gergen (2007), that our perception and understanding the world is both rooted in and contingent upon culturally and historically-situated social processes.

Importantly, this is not a radical constructivism, but takes a critical realist stance, drawing on Pilgrim's (2019) 'holy trinity' of epistemological relativism, ontological and judgmental realism. Using this framework, the researcher acknowledges the world's independent existence while recognising that it can be only imperfectly apprehended through the lens of one's context, identity and culture.

While recognising that research data must be interpreted in its context, it should onetheless be possible to draw tentative conclusions about real-world ‘truths’. The acknowledgement of a shared reality, albeit differently experienced, is crucial in research that seeks to understand the experience of people subject and particularly vulnerable to systems and exercise of power in society. It could be argued, for example, that borders are ‘just’ a construct, albeit one on which there is general, though not universal, agreement (Bradley & Noronha, 2022; R. Jones, 2019). Objectively, they are no more than a line on a map or the ground across which, society acknowledges, governments have the right to control movement. However, an individual’s subjective experience and perception of a border is profoundly situated. Depending on one’s nationality, racialised or gender identity, legal status, education or cultural background, a border can be perceived as an administrative detail or as an impenetrable barrier to another geographic area as well as livelihoods, opportunities, safety or even survival. Transgression of borders can have serious, even grave real-world consequences, including detention, injury and even death (Arsenijević et al., 2017; International Organization for Migration (IOM), 2024).

This situatedness of knowledge raises questions for the researcher about how and to what extent they filter their findings, not only in interpreting data, but also in deciding to whom they speak, what they ask and how they ask it. Foucault held that power and knowledge are inextricably intertwined, with power being drawn from knowledge or ‘truth’ that is, in turn, created according to the dictates of those who hold power. This is all-pervasive, including: “the types of discourse which it accepts and makes function as true; the mechanisms and instances which enable one to distinguish true and false statements, the means by which each is sanctioned; the techniques and procedures accorded value in the acquisition of truth; the status of

those who are charged with saying what counts as true" (Chomsky & Foucault, 2015, p. 168). Fanon's (2023) revelation that colonised peoples adopt the language and appearance of their oppressors to navigate the world inspired reflection about how knowledge is constructed and used to maintain structures of power. This anticolonial thinking inspired Paolo Freire's Pedagogy of the Oppressed (2018) and the argument that any theory and practice of learning which aims to be liberating or decolonised must be inclusive of those who are oppressed and marginalised. It cannot be imposed on them from without but must come from within. Drawing on both Freire's work and the Liberation Theology movement of the 1970s, Ignacio Martín-Baró proposed a new epistemology and praxis for psychology. This 'Liberation Psychology' aimed to upend the traditional hierarchies of psychology and 'humanise' the profession, with research being co-created by the people to address their common concerns. The psychologist then becomes, "a convener, a witness, a coparticipant, a mirror, and a holder of faith for a process through which those who have been silenced may discover their own capacities for historical memory, critical analysis, utopian imagination, and transformative social action" (Watkins & Shulman, 2008, p. 26). This emancipatory thinking has evolved over time and aligned with a praxis that is feminist, but also intersectional (Lykes & Távara, 2020).

Intersectionality is a term coined in 1989 by Kimberlé Crenshaw to recognise that people's social lives are shaped not only by their characteristics such as race, class and gender individual, but also by the intersection of these characteristics (Collins & Bilge, 2020; Grzanka, 2018). This is particularly relevant to this research. Although participants were recruited based on their identity as people seeking asylum, this identity intersects with a wide range of other identities and characteristics including,

but not limited to, nationality, racialised identity, gender identity, and less frequently-considered identities such as parenthood and physical well-being.

Counselling psychology's ecological and idiographic approach, valuing the individual's subjective experience in practice and in research, make it a particularly appropriate home for research critically addressing societal dynamics of power and difference (Rafalin, 2010). This research starts from this point, then builds on the philosophical foundation of social constructionist critical realism, to incorporate the key themes discussed above of decolonisation, antiracism, feminism and intersectionality. As the discussion above suggests, this requires an approach shaped from beginning to end by the active engagement of people with lived experience – a participatory methodology. All of this is brought together under the umbrella of situational analysis, an extension of grounded theory which has been referred to as a 'theory-method package' in which ontology and epistemology are firmly integrated, recognising that what is knowable is inseparable from how we know it (Clarke, 2016). This chapter will now briefly discuss the foundations for the participatory approach, followed by an outline of situational analysis as a methodology, after which the procedure will be discussed in detail, including ethical considerations.

2.2 A participatory approach

Mays & Pope (2020) outline two main drivers for use of participatory approaches in qualitative research: a social justice rationale, concerned with the distribution of power and knowledge, and an utilitarian one, which aims to ground the work in participants' practical experience and, in so doing, increases public trust and understanding in the findings. This research has used a participatory methodology for both of these reasons. Participatory research is aligned with a social constructionist paradigm in four main aspects which the research incorporates: the shift from self to relationship; the recognition of the social origins of knowledge; the politics of knowledge; and the centrality of language (Gergen & Gergen, 2015). It is important to recognise that a participatory approach *extends* the epistemology to make space for a wider spectrum of ways of knowing, including those that are tacit, practical or experiential, and which are formed in the encounter between individuals and the societies in which they find themselves (Riley & Reason, 2015; Wicks et al., 2008).

There are many forms of participatory methodology, on a spectrum from no participation to high participation (Orford, 2008) or from consultation through to full collaboration (Mulvihill & Swaminathan, 2023). Donà (2007) lists different types of involvement: as objects, subjects, social actors, participants and/or co-researchers, and there is precedent for participants to also act as co-researchers, particularly in health research (Given, 2008; Malterud & Elvbakken, 2020). This research aimed to ensure people with lived experience of the asylum system acted, insofar as possible, as co-researchers, "involved, informed, consulted, and heard" in the process (Donà, 2007, p. 212). Levac et al. (2019) derived principles for participatory research from a scoping review of nearly 750 articles. They noted although the ideal is to include

participation and input across all stages of the research process, this is rarely met. Indeed, in 106 projects examined only three met this ideal. In the present research, while the aim was to have co-researchers involved in all stages of the research, the reality was that framing the research question and selecting the methodology had to be done prior to their recruitment for practical reasons, such as including the need to make methodological decisions in connection with the research proposal and delays in ethical approval. Co-researchers were brought in as early as possible and the choice of methodology meant they could be involved in key decisions throughout the process. They played a key role in identifying particular subgroups of PSA that should be interviewed and in planning, recruiting and interviewing. They contributed to mapping and to validating and querying themes that emerged during coding. It had been hoped that they would participate in coding itself, but this would have placed an unreasonable demand on their time. This puts the level of participation in this research into the ‘medium’ level described by Balcazar et al. (2004), with co-researchers acting as ongoing advisers and reviewers, with a moderate level of responsibility and commitment. It fits with a collaborative model of participation, which Mulvihill and Swaminathan (2023) describe as co-researchers working together in ways that are not controlled or pre-defined, allowing for synergistic development of ideas, in preference to a coordination model, in which they work in parallel, each fulfilling a task contributing to the whole.

Despite efforts to ensure the meaningful involvement of the co-researchers as the research moved forward, it became clear that there was an uneven division of labour between the lead researcher and the co-researchers. While the differences in scale of workload had been expected, it became apparent that the differences in type of work meant that the project was not benefitting as much as it should from

their very rich lived experience. Importantly, this felt unfair to them, resulting in a perverse outcome in which their involvement as co-researchers, far from privileging their experience, was excluding it. This goes against the right of participation, an important principle in participatory research (Fløtten et al., 2021). Moreover, it exacerbated the pre-existing power disparity between the lead researcher and the expert-by-experience co-researchers. The lead researcher therefore proposed that co-researchers would also be interviewed for the study. A review of the existing literature indicated that it is not uncommon for participants to also be co-researchers, particularly in the field of healthcare (Malterud & Elvbakken, 2020), and even for this change to happen during the course of research project, though this has typically been from participant to co-researcher rather than the reverse (Pope, 2020). Flexibility in the research process has been identified as a key element of ensuring good outcomes in participatory research, particularly as it is impossible to predict how the experience of co-researchers may evolve, both in relation to the content and in terms of the relationship (Bindels et al., 2014; Fløtten et al., 2021). Such changes do, however, require considerable discussion and reflection in order to navigate practical and ethical concerns. In this case, three main concerns arose: the relationships between the lead researcher and the co-researchers and between the co-researchers; issues of confidentiality; and maintaining quality of the research by having a consistent and coherent approach to all data.

In designing the research, considerable time and reflection was invested in thinking through the dynamics of the relationships. The power dynamic between the lead researcher and co-researchers is both situational and structural. Situational due to the power inherent in her role as lead researcher, having established the research framework, recruited the co-researchers and in acting as ‘supervisor’ by defining and

deciding when and how to pay the stipend. Structural as a result of being a white, UK citizen (albeit an immigrant), and situated within an institution of power – the university. These power disparities can be mitigated – for example the balance of power was slightly tilted toward co-researchers because they led on recruitment, effectively acting as gatekeepers in that process, and possessed insider knowledge which the lead researcher lacked – but they cannot be eliminated. Constant awareness and reflection is needed about how these powers are used and/or perceived by all members of the team. Mays & Pope (2020) suggest that one test of transparency about power in a participatory research process is whether those with less power are able to raise issues that are inconvenient to the lead researcher. This occurred several times during this research, notably when co-researchers' names were removed from the final submitted thesis.

Dynamics also exist between co-researchers, and numerous steps were taken to ensure a balance of power and good relationships between them. Workload was evenly and transparently divided, for example, and all co-researchers received equal payment and equal opportunities to give input to the process. Before bringing the co-researchers together, the lead researcher considered possible sources of strife or discomfort and tried to minimise risks. For example, private conversations with each of the co-researchers allowed her to gently probe for biases or prejudices that might create tensions though, fortunately, none emerged. When co-researchers shifted into also acting as participants, there was a risk that this could create power disparities between them or make them feel exposed before one another. This was managed by having only the lead researcher present during the interview and in the coding. In addition, like all other participants, co-researchers' interviews were anonymised and pseudonymised before any of the findings were shared so that co-

researchers' could not identify one another's contributions. This separation of the individual's identity also helped reduce the risk of loss of anonymity as a participant when they were credited for their work as a co-researcher.

The third concern was that co-researchers' data might receive different treatment or attention due to the closer relationship with the lead researcher and greater involvement with the research process. This was mitigated by ensuring consistency and coherence in the process of data collection and analysis. The methods used to achieve this are described in detail below, in line with best practice in providing transparency regarding the procedure.

Finally, this research aimed to incorporate a range of other good practices for participatory research, including reciprocity of benefit, capacity-building, and the explicit acknowledgement of power differentials. Specific steps that were taken are outlined below under 'procedure' and some associated issues are discussed under 'ethics'. However, as noted above, whatever steps are taken to try to create an equal partnership, important structural inequalities inevitably remain that need to be recognised and managed (Mays & Pope, 2020).

2.3 The methodology: Grounded theory and situational analysis

Grounded theory (GT) is one of the oldest and most frequently used qualitative research methodologies (Morse et al., 2016). It was developed in the 1960s by Glaser and Strauss at a time when qualitative research was just coming into its own (Birks & Mills, 2023). Its earliest form has been critiqued for its adherence to the prevailing positivist paradigm of its time, particularly principles associated with the scientific method such as objectivity, falsification of competing

theories and replicability of research (Charmaz, 2014b). The methodology has expanded and developed, now encompassing a variety of schools or approaches, including a constructivist form developed by Charmaz (2014a). This research uses SA, which has been described as 'third generation' GT (Birks & Mills, 2023; Clarke, 2016) and took GT "around the interpretive turn" (Clarke et al., 2017).

GT is rooted in social constructionism and is an emergent methodology, aiming at the development of theory (Clarke et al., 2016). GT, "…does not deal in facts or findings, but generates concepts that apply as explanation" (Glaser, 2007, p. 115). Instead of using a deductive approach, in which a theory is formed, and a study designed to prove or disprove it, GT uses an inductive process whereby a theory is developed that is empirically grounded in the data. Key to this process are core GT methods of concurrent data generation/collection and analysis, theoretical sampling and constant comparative analysis. These will be further discussed below, but it is important to highlight here how these create an iterative process by which data is interrogated, reflected on in a more conceptual and abstract way, and then developed into a robust theory. This process has also been called an abductive approach, reflecting the dynamic way that inductive inferences are fed into the evolving hypothesis, which is then tested deductively against further data, generating more inductive inferences in an ongoing cycle (Birks & Mills, 2023; Charmaz, 2014a; Clarke et al., 2017).

Importantly, GT lends itself well to a participatory approach. Glaser & Strauss's (2017) reflected that team working makes a particularly valuable contribution to development of a final substantive theory in a GT project, providing the benefit of each member's analysis as well as the synergy arising from a shared conceptual analysis forged through sharing of reflections, memos and, in this case,

mapping. Clarke (2019) also notes that a collaborative approach to map-making in situational analysis means it can be an effective method for research situations with embedded power dynamics.

2.3.1 GT and critical interactionism

Charmaz (2014a) notes the link between GT and symbolic interactionism (SI), which she argues is a key element of the methodology and describes as "a dynamic theoretical perspective that views human actions as constructing self, situation and society" (p. 262). In other words, we act and react to people, actions and events according to our interpretation of them and the meaning that they have for us. These meanings are constructed from social interaction and modified through interpretation. Our understanding of the world, including our own history, is therefore shaped by our changing experience and subsequent reinterpretations. It emphasises human agency, language and interpretation (Burbank & Martins, 2019). Particularly relevant to this research is Mead and Cooley's concept of the 'looking glass self' (Charmaz, 2014b), which considered how one's self-perception is reframed by how one believes oneself to be perceived by the other. For PSAs, that could be the gaze of the Home Office and its workers or of the wider society, perhaps as reflected by public discourses and narratives about migration. This may have the effect of reshaping their view of themselves. Understanding and reading the texts with this theoretical framework in mind allows us to consider that the self-perception that an individual may have had before their flight and subsequent journey (e.g. as an agentic, experienced, skilful and confident individual) may be altered or even nullified by subsequent experience or interpretation.

While a useful framework, SI has been critiqued for its inability to address issues of power and social inequality (Burbank & Martins, 2019), and SA accordingly positions itself more in alignment with critical interactionism (CI). CI is a combination of SI and critical social theory, which concerns itself with issues of social inequality and power within the context of societal systems. The combination of these approaches means that CI is able to bring both micro and macro perspectives, looking at individuals and systems, which is a particularly useful lens for this research (Burbank & Martins, 2019).

In reflecting on how a CI framework fits with the SA methodology, Clarke (2019) notes that SA is pragmatic and particularly concerned with relationships in the situation being examined, especially those of power and the role of 'implicated actors'. Implicated actors – or actants – may be human or non-human and can take two forms. In the first, the actor may be physically present but silenced, ignored or otherwise marginalised. In the second, the actor is not present physically but is discursively constructed. An example that arose in some interviews for this research was the sense of threat perceived by PSAs who found themselves in immigration detention, "I didn't feel confident. I felt like I was surrounded by criminals, even though… maybe they weren't criminals, but that's how I felt" (*Youssuf 272-273*). Indeed, criminality itself can be considered an implicated actor, to the extent that individual PSAs perceive themselves to be constructed as a criminal by society and the asylum system. The concept of implicated actors allows other key elements, issues and aspects of a situation such as race, ethnicity, and gender to be considered as active participants in a situation.

2.3.2 Key concepts in GT

Data

Glaser (1998) famously stated that in GT “all is data”. Analysis consists not just of interview text, but also of observations during the interview, reflections on the interview and artefacts of the process, particularly as documented in memos. This encourages the researcher to think broadly about what might constitute data and how it can be used (Birks et al., 2019; Birks & Mills, 2023; Charmaz, 2014a; Flick, 2024; Glaser & Strauss, 2017). In this research the analysis has considered not only the interview as transcribed and the researchers’ reflections, but also the timeline as a document and/or visual representation. Literature, including grey literature as well as academic literature, has also been drawn on. Importantly, all of the researchers have brought their own experience, which has been incorporated throughout the process in memos and maps.

Literature review

Glaser and Strauss initially advised postponing literature review in order to come to the data with as few preconceptions as possible (Dunne, 2011). Others argue that it is impossible to avoid bringing one’s knowledge and preconceptions to the field of study and argue that a more transparent approach is to acknowledge and be reflexive about them (Charmaz, 2014a). In SA the researcher’s experience and knowledge is explicitly brought to the research from the earliest phase of the process. However, this relies on ongoing use of reflexivity to explore preconceptions that might otherwise blind the researcher to what the collected data is really saying. In reflecting on this issue in relation to this research I am aware that I bring

considerable life experience with forced migrants and asylum processes and therefore bring useful background and theoretical sensitivity[2] to the topic but also a host of preconceptions that need to be managed to avoid a blinkered view of the data (Clarke et al., 2017). This has been managed in three ways that are well-embedded in the methodology: through the use of memos to record decisions, reflections and collisions with the data; through the GT line-by-line coding process; and though the participatory methodology, which allows co-researchers to bring their knowledge and lived experience to data collection and analysis, and provide a challenge to my and one another's thinking and assumptions (Birks & Mills, 2023).

Operationalising the abductive approach

A key feature of GT is that analysis begins from the moment the first data is collected and continues throughout. This makes possible several other aspects unique to the methodology, particularly constant comparative analysis, in which data, coding and analysis are continuously compared as they are generated, with the reflections recorded in memos. These reflections contribute to the overall analysis but are also used to identify gaps in the line of inquiry or identify new avenues for exploration. This feeds the process of theoretical sampling, in which more information is sought in order to address these knowledge gaps. In principle, this process continues until the research reaches theoretical saturation, or the point at which no new avenues for exploration arise from analysis of the data. The researcher can be confident of having reached saturation when they start to see

[2] Theoretical sensitivity is a key concept of GT, referring to the researcher's capacity to identify and extract relevant elements and insights from research data. This depends on the individual's insight into themselves and the area of research, as well as their intellectual and theoretical insight and experience (Birks & Mills, 2023; Charmaz, 2014).

similar findings and/or findings offer no new insights or avenues for exploration. It is important that sampling aims at inclusion of hard-to-reach and marginalised groups to ensure that the point of saturation really represents the exhaustion of all possible lines of inquiry (Flick, 2024; Glaser & Strauss, 2017). The word 'theoretical' may be considered to have a double meaning here, as it is difficult, if not impossible, to reach the ideal of saturation. Charmaz (2014a) considers that saturation is a judgment based on a range of considerations including some that are more pragmatic than theoretical, for example the availability of key resources like time and money. Time was very much a consideration in this research, but so too was the target group, which can be difficult to access. The personal networks of the researchers had a strong influence on who was recruited as a participant, including nationality, age group, gender, marital and parental status, and level of educational attainment/aspiration, among other considerations.

2.3.3 Moving around the interpretive turn: Situational Analysis

In developing SA, Clarke was particularly interested in how ecological mapping was able to capture relationships between the specific situation of a group of interest and wider society, shifting from a geographically-led perspective to one that encompassed a wider social lens, including both action and discourse. SA takes the situation as the object of research, with 'situation' encapsulating all elements – human, non-human, discursive and conceptual – with an impact on the research subject. This includes the social, geographical and political context in which it is set, as well as its constituent parts. The assumption is that everything in the situation affects the rest in some way. SA uses three types of maps to explore these elements and the relationships between them (Clarke, 2016; Clarke et al., 2017). The first is

the situational map, which includes all of these elements. It is first created as early as possible in the process as a messy map, a repository for everything that is known and is being learned about the situation. The inclusion of all of these elements is a defence against oversimplification, allowing the full complexity of a situation to be represented (Clarke et al., 2016). The second map is of the social worlds/arenas discussed above. This aims to map all of the collective actors and 'arenas of commitment and discourse' which, in turn, lays bare the 'basic social processes' of various kinds between actors in negotiating the physical and conceptual space (Clarke, 2016; Clarke et al., 2016, 2017). The final map is the positional map, which lays out all of the major positions taken and not taken in the situation, with a particular focus on issues where there is divergence, controversy or concern. These are not necessarily the positions articulated by the collective actors identified in the social worlds/arenas maps, as the positional map does not aim to highlight disagreements between actors. Rather it represents the complexity of positioning, which may involve the articulation of multiple and sometimes contradictory positions. Clarke et al. (2016) argue that mapping in this way is particularly revealing because, in mapping all of the elements without consideration of power relationships, aspects of the situation are elucidated that might be implicit, assumed or otherwise taken for granted.

In mapping all aspects of a situation, including human and non-human actors and actants, situational analysis is particularly well-suited to an epistemological approach bringing together social constructionism and critical realism. It does so, for example, by considering social worlds as "universes of discourse" (Clarke, 2016, p. 196) while recognising the theoretical importance of 'materialities' such as technological or cultural objects, animals, media, and animate and inanimate pieces

of material culture. This is very important in considering the experience of the asylum process, as can be seen in the ubiquity in the data of such materialities, including physical aspects of participants' accommodation and systems like the Migrant Help telephone helplines. A full understanding of how the process is experienced by those going through it cannot be attained without understanding both the physical realities and the way that these are constructed and experienced. For example, having one's mobile phone taken away temporarily is a minor inconvenience under normal circumstances, but mobile phones are increasingly a vital lifeline for forced migrants, including PSA, both as a practical tool and for what they represent (Godin & Donà, 2021; Mancini et al., 2019). The social constructionist, critical realist epistemology and SA mapping methodology allowed this research to capture the *de facto* agency of non-human aspects of the asylum process and their practical and emotional importance to the individual experience. The combination of coding and mapping, particularly positional mapping, allowed the analysis to consider multiple constructions of the same 'real world' experience by the same or different individuals. For example, nearly all participants described the lack of warm clothing in winter as having a profound impact on them, constructing it variously as a barrier to their mobility or as a financial constraint limiting their choices.

2.4 Ethics

This research was conducted in compliance with the British Psychological Society (BPS) Code of Human Research Ethics (BPS, 2021) and the University of East London's (UEL) Code of Practice for Research Ethics in conjunction with policies on data management and backup. Ethical approval for this research was granted by the University of East London's School of Psychology (Appendix 1).

All of the participants in this study were over the age of 18 and all were provided with information prior to participation (Appendix 4) and asked to give their informed consent to participate (Appendix 5). Participants were also given a debriefing sheet (Appendix 6) with details of their rights over their data and of support services if they experienced distress related to the interview or the memories that it evoked.

Specific consideration was given to ethical issues in relation to working with co-researchers, both for the protection and dignity of the participants and of the researchers themselves. Aspects of this will be discussed in more detail below, under procedure.

2.5 Procedure

General notes

Memos, sometimes also referred to as field notes, are a core tool in GT and SA and were used throughout the research to record reflections, insights, avenues for further exploration and decision points. This is useful not only in promoting reflexivity throughout the process, but also because it provides an audit trail of the conduct of the research (Birks & Mills, 2023; Charmaz, 2014a; Clarke et al., 2022), an element which is important in providing the transparency that is important to ensuring rigour in qualitative research (Yardley, 2017). Initially memos were sparse, but as I developed the habit of memo writing they became both more frequent and more detailed. A sample memo is included as Appendix 8.

A timeline data collection tool was used in preference to a semi-structured questionnaire. This was sparked by my own reflection on the power of the lifeline as

a therapeutic tool in my therapeutic work with refugees. Research into its use as a data collection tool showed that while it is not commonly used, it can be a very powerful tool. Assessed benefits include how it gives the participant the power to control the narrative and make sense of their own experience, its ability to provide different types of data, including qualitative and quantitative data, and the fact that it bridges the scientist-practitioner divide, being both a data collection tool and a therapeutic one (Berends, 2011; Bremner, 2020; de Vries et al., 2017; Kolar et al., 2015; Punjani et al., 2023). Participants were requested to draw a timeline of their asylum process, highlighting the moments they found most difficult or, conversely, most positive. They were then asked to take the researchers through the timeline, allowing the researchers to occasionally ask questions to better understand the participant's experience. The drawing of a timeline was encouraged but not essential and a few participants opted not to do so.

Recruitment of co-researchers and joint working

As soon as the decision was made to use a participatory approach, co-researchers were recruited. This was done using personal contacts and through refugee-led organisations and their networks. Interest was expressed by two individuals from Refugee Action's experts-by-experience network, based in Manchester and Doncaster, and one individual from the Happy Baby Community. At the start, inclusion criteria for co-researchers was that they be over the age of 18, have a functional level of spoken English, have completed the asylum process and have a low assessed risk (based on my own risk assessment in interview), with established sources of support. Each prospective co-researcher was interviewed individually to understand their interest and motivations and to address any

questions or concerns they might raise. As recruitment progressed, it became clear that one of the participants had not completed the asylum process, but was still going through legal challenges – something I had not understood in our initial discussions. This created a dilemma. The exclusion criteria required me to tell him that, in light of this information, he could not work on the project, but his actual situation forced me to reconsider this criterion. It had been established out of concern that someone still going through the process might be in a particularly vulnerable place and find it difficult to cope with the content of interviews and with the process. However, although the process was still unquestionably stressful, this individual had been going through it for nine years and was, in parallel, working with an organisation as an expert-by-experience, running his own small support group for LGBTQI+ PSAs, and working as a researcher with another project. It seemed absurd for me to tell him I deemed him too vulnerable to take part. In thinking through what that discussion might look like, I also struggled to imagine how I could reply if he said, as I suspected he would, that he did not consider it a problem. If he said he was prepared to take this risk, did I have the right to tell him he could not? The outcome was that the exclusion criterion was changed, which was approved by the School of Psychology Ethics Committee. In line with the methodology and in order to ensure transparency, an important aspect of quality assurance in qualitative research (Yardley, 2017), all reflections and discussions with my supervisor and, eventually, with the co-researcher were documented in memos.

To address the power differential, as much work was done as a team as possible. A preliminary workshop was held to review and discuss the research question, explain the methodology, discuss procedures and co-create a memorandum of understanding and plan for conducting the research. In this

workshop, issues of power were explicitly discussed. Researchers were provided with training in basic principles of ethical research, including respect for the autonomy, privacy and dignity of individuals, groups and communities, scientific integrity, social responsibility, maximising benefit and minimising harm and managing risk. We had detailed discussions about confidentiality, data management and integrity of data. This led to a more detailed discussion about how we would work together as a research team, the details of which were transferred to a memorandum of understanding (Appendix 3) which was signed by all researchers. This included a commitment to reciprocity of benefit, represented by payment of £100 in vouchers[3], recognition of co-researchers as co-authors in any publication or dissemination of the research, and training in qualitative research techniques and the methodology, as well as psychological first aid training. It also included a commitment to ensuring that findings would be used to advocate for change in the asylum system, an issue that was particularly important to the co-researchers.

Co-researchers were involved in the recruitment of participants and in most interviews.[4] Time did not allow for them to be involved in the coding of the transcripts, but two analysis workshops were held with all researchers. The first took place following initial coding, allowing preliminary findings to be presented, discussed and challenged based on co-researchers' personal experience and experience of the interviews. These codes were used for the next stage in the mapping (details below). The final workshop, in which findings were presented for further challenge and validation, took place after focused coding.

[3] The MoU acknowledges that £100 is not fair market rate for the work conducted, an issue that was also raised during UEL ethics review.

[4] Co-researchers were not involved in interviewing one another. In addition, the London-based researcher was not able to attend some interviews for personal reasons.

Sampling and recruitment of participants

Initial sampling was purposive, with subsequent use of theoretical sampling in line with GT and SA practice as outlined by Birks and Mills (2023), Charmaz (2014a) and Clarke et al. (2017). The co-researchers developed an initial list of categories of participant to ensure diversity. This discussion made clear the value of working with experts-by-experience as nuances were elicited, like the different challenges faced by PSA who had been granted permission to work but struggled to find jobs due to bureaucratic restrictions and employers' hesitations. This list was adapted over the course of the research as part of an emergent process, to address gaps that had been revealed. Participants were recruited purposively, using snowballing through the networks and contacts of all of the researchers.

After interviews had been conducted in all locations, the researchers agreed it was important for experts-by-experience co-researchers to be interviewed as participants. This decision was made because, through debriefings after interviews and in other discussions, it became clear that the richness of their experience was not finding its way into the data, and that the pool of data would be the weaker for it. The lead researcher could find no precedent either for or against their participation in this way, as it was difficult to find research using either GT or SA that had a similar participatory methodology. Given the commitment in SA to bringing the knowledge of the researcher to the process and the values that underpinned the decision to use a participatory approach, it felt right to move forward in this way with some caveats, e.g. that these were coded and analysed by the lead researcher so no researcher analysed their own interview.

Participants

Inclusion and exclusion criteria for participants were identical to those used for co-researchers in that they were required to be over the age of 18 with substantial experience of the asylum process and with no history or apparent risk of self harm or suicidal ideation. The research team agreed on the following list of attributes:

- Mixture of women, men and transgender
- Representatives of different faith groups, including secular
- Representatives of different regions
- People in different types of accommodation (dispersal, hotel)
- Diversity of sexual identities
- Different family groupings: single, couple, parents, single parent.
- At least one person with a physical disability and/or long-term health issues.
- At least one ‘failed’ asylum seeker.

The researchers were able to identify people from many, but not all, of these categories. Different family groupings were included, but time constraints meant it was impossible to represent all of the possible permutations, including those who had the right to work and were in active employment. We ultimately deemed it unethical to interview the failed asylum seeker that had been identified due to her level of distress related to imminent deportation. Finally, while we aimed for a broader diversity of regional and gender representation, constraints of the process meant that this was more limited. The following is an overview of the final participants, whether they were interviewed in a focus group discussion (FGD) or individual interview (II) and some summary demographics. The duration of participants’ experience of the asylum process ranged from three months to ten years.

Participant summary

Nationality	Gender	Age group	Location	FGD or II
Yemen	M	46-55	London	II
Trinidad	F	25-35	Doncaster	FGD
Botswana	F	25-35	Doncaster	FGD
Eritrea	M	25-35	Doncaster	FGD
Eritrea	M	25-35	London	II
Chad	F	25-35	London	II
Sudan	M	45-54	Manchester	II
Trinidad	M	45-54	Doncaster	II
Chad	F	25-35	London	II
Chad	M	25-35	Manchester	FGD
Sudan	M	36-45	Manchester	FGD
Sudan	M	25-35	Manchester	FGD
Sudan	M	36-35	Manchester	II
Sudan	M	25-35	London	II

Demographics:

Gender

Men: 10
Women: 5 (2 transgender)

Age

25-35: 11
36-45: 2
46-55: 2

Nationality:

Botswana: 1
Chad: 3
Eritrea: 2
Pakistan: 1
Sudan: 5
Trinidad: 2
Yemen: 1

Interviews

Interviews were conducted individually and in focus groups to maximise data richness (Kleiber, 2003; Lambert & Loiselle, 2008). The methods complemented one another, as group discussions elicited trends and allowed nuances and different experiences to be explored, while interviews allowed for a deeper exploration of the individual's experience. Co-researchers allocated participants to group or individual interviews randomly, based largely on availability. Retrospectively, however, it is clear that co-researchers used some implicit judgement, as focus group participants often shared characteristics such as ethicity or gender identity. Most interviews were conducted in person in London, Manchester and Doncaster, but some were conducted online for logistical reasons, such as childcare.

In-person participants were given a verbal explanation of the timeline task and 30 minutes to draw their timeline. Those interviewed online were given a written explanation (Appendix 7) and asked to complete the task in advance. There was considerable variety in how participants engaged with the timeline. The timeline was intended give participants power over the interview process, so it was viewed as positive that some felt empowered to choose not to draw one. One participant, when told they could “do whatever you like” said, “I like that. It gives me the control”.

Analysis

Each interview was recorded and transcribed. Online interviews used Teams and in-person interviews used a hand-held recording device which was subsequently transcribed by Otter.ai., an AI note taker compliant with GDPR regulations. Transcripts were manually corrected and culturally appropriate pseudonyms randomly assigned using one of two name generator/finder found online: www.fantasynamegenerators.com and www.forebears.io.

Situational maps can be created directly from the data, but Clarke (2005) recommends at least partially and initially using coded data for two reasons. First, it draws the researcher into a deep and immersive relationship with the data, allowing it to be ‘digested’ in a way that is conducive to working with it more creatively. Second, line-by-line coding functions as a heuristic device that, by requiring the researcher to stay close to the data and look at it in small fragments, ensures that initial codes derive directly from the data and helps the researcher avoid making conceptual leaps (Charmaz, 2014a). This study used Charmaz’s (2014a) method of initial line-by-line coding followed by focused coding, with simultaneous mapping (Clarke, 2005). Memos were created during transcription, initial coding and mapping

to capture reflections on the data and connections within and across data. This constant comparative analysis allowed emerging themes and reflections to be captured immediately and explored in-depth later. Handwritten notes from interviews/groups and in the post-interview debrief with co-researchers were reviewed and added to memos later, allowing latent information, impressions and images to be brought forth, and any assumptions and preconceptions to be interrogated (Clarke, 2005).

Charmaz (2014a) proposes a number of sensitising concepts to consider when coding: action, meaning, process, agency, situation and identity. For projects considering issues of social justice, she proposes also issues of ideology, power, privilege and oppression. Sensitising concepts deemed appropriate to this research were action, meaning, process, agency, situation, identity, emotional state, power and discourse. Discourse was added later, in response to participants' tendency, in the face of opaque processes, to ascribe their own meaning to actions and occurrences. For example, in the group interview in Doncaster participants speculated about differential treatment of people experienced by participants who arrived in the UK regularly versus irregularly. They also speculated about delays and technical flaws on the Migrant Help hotline.[5] These were interpreted against the backdrop of a hostile and deterrent migration environment as being both deliberate and intended to frustrate and discourage.

[5] A telephone helpline contracted by the Home Office.

2.6 Positionality and reflexivity

I am a cisgender, heterosexual white woman from a middle-class background in a wealthy country in the 'global north'. I have been socialised and acculturated to 'western' values, rooted in the European philosophical tradition which foreground the individual rather than the collective, and is shaped by colonial assumptions about the world and its peoples. Importantly, I have been raised in a rules-based system in which I have felt confidence in asserting my rights without fear of severe repercussions and in which petty corruption, including bribes and facilitation payments, is rare. I have generally experienced few barriers to crossing borders other than bureaucratic procedures which I experienced as neutral and non-discriminatory. In my career as a humanitarian worker I felt empowered to protest against barriers to my access to a country or context, framing this in reference to the right to access under international humanitarian law and the 'humanitarian imperative' to save lives, address suffering and help restore dignity in conflicts and crises (Kahn & Cunningham, 2013). This research topic was in part inspired by my awareness of the gulf between my own sense of empowerment in the world and the extreme disempowerment of forced migrants I have worked with. For much of my career I have taken pride in using my power to represent marginalised people. I increasingly recognise that, although rooted in good intentions and sometimes yielding positive political or practical results, this use of power is rooted in colonial assumptions and structural inequalities that must be challenged and counterbalanced. This inspired the social constructionist, critical realist 'extended' epistemology and participatory methodology. The active involvement of experts-by-experience co-

researchers in interviews and debriefings has been invaluable in helping expose some of my assumptions, though blind spots undoubtedly remain.

As mentioned above, the GT memoing process has been important in supporting reflexivity throughout this research, creating a space and process for reflecting on both how and why decisions have been made and the issues that were considered. Gentles et al. (2014) summarised how reflexivity has evolved in relation to GT as a methodology and considered five different researcher interactions considered in a piece of research on autism: “researcher influence on research design and decisions; researcher-participant interactional influences during data collection; researcher influence on the analysis; researcher influence on the writing; and the influence of the research on the researcher” (pp. 5-6). I have added to these the relationship between the co-researchers and attempted to reflect on all of these interactions in memos, bringing them, where relevant, into this documentation. Some examples have been mentioned above in relation to how the epistemology was exemplified in participants’ construction of real-world phenomena such as mobile phones and winter clothing, and reflection on exclusion criteria and vulnerability of co-researchers. Other memos were very important in reflecting on how working with co-researchers had a sometimes unanticipated impact on who was interviewed and how interviews and focus groups were organised. For example, although co-researchers cast a wide net in seeking participants representing diverse groups, the ones that took up the invitation tended to be people who shared their own characteristics. Surfacing this in a memo allowed the researchers to consider to what extent the inadvertent privileging of some nationalities or identities – gender, sexuality and motherhood, for example – might affect the findings. On another occasion an individual had an emotional response to the lead researcher that would

have been impossible to predict, and because he had arrived while another focus group was in progress, his distress was not managed as well as it could have been. Reflection in the debriefing resulted in an individualised follow-up by the co-researcher to ensure that even though the individual did not end up participating in the research, he had an opportunity to express his concerns and received a debriefing sheet with useful resources. Reflection on the entire process and how it might affect the individuals and the research was documented, including communication between the researchers, between the researchers and the participant, and the impact of the disruption on the focus group discussion on those participants' dialogue and feelings of safety.

There are numerous challenges in undertaking participatory research, particularly in the course of a doctoral process, including challenges in designing a process that offers co-researchers ownership and reciprocity of benefit. However, the effort is worthwhile, due to the benefits outlined above in improving the quality and credibility of the findings and in challenging existing research paradigms, which are typically western, positivist, individualistic and hierarchical (Mulvihill & Swaminathan, 2023; Smith, 2016). Moreover, given that the research centres on the impact of disempowerment, it feels important to have an approach that is itself empowering, and which feels constructive rather than extractive. It should avoid reproducing the harm caused by the presumed disempowerment and, ideally, go some way toward remediating it by providing opportunities for agency and advocacy. Research can harm, however, as well as help, and this risk will be managed through constant attention to ethical issues and a reflective process of memoing as discussed below.

Chapter 3: Analysis and Discussion

This research aims to understand the mechanisms underpinning the adverse effect of the asylum process on mental health and well-being, with particular consideration of the role of disempowerment. Participants were asked to narrate the timeline of their experience of the asylum process, identifying times that felt particularly positive and negative to them and exploring what made these times challenging. The transcripts from these interviews were coded as described in the methodology section alongside the co-development of situational maps by the researchers. Figure 1 shows the first messy situational map, drafted in the initial workshop with co-researchers, which was expanded and developed over the course of the project, including in post-interview debriefs, during coding, and in co-researcher workshops. The maps were turned into an ordered situational map (Figure 2).

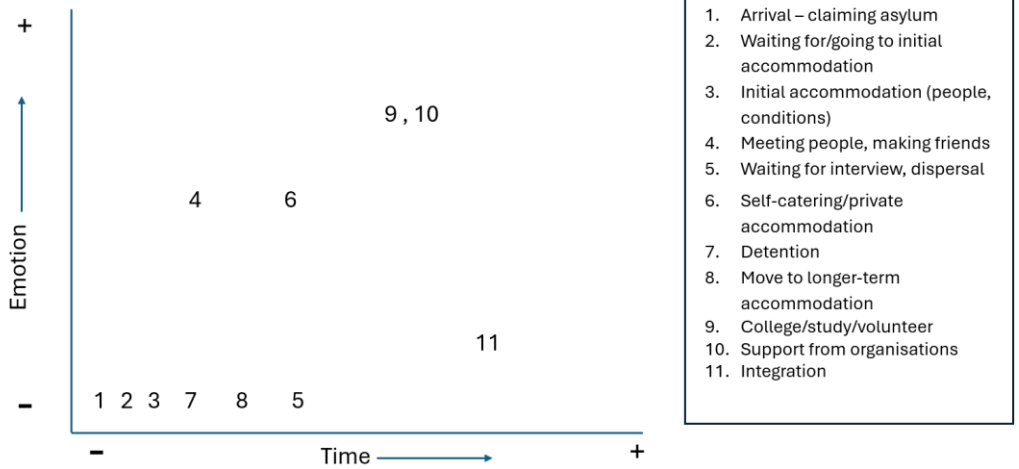
Figure 1: Preliminary messy situational map, workshop (8 December 2023)

Figure 2: Ordered situational map

Individual human elements/actors	Non-human elements/actors
Individual PSAs	Screening interview
Individuals working in accommodation	Substantive interview
Immigration officials	Hotel
Police officers	Accommodation
Detention officers	Detention centre
Healthcare workers (doctors, nurses)	Vans
Interviewers	Airport
interpreters	Financial support (the Aspen debit card)
Individual charity workers	Weather/cold
Home Office drivers relocating PSA	Faith
Housemates	Migrant Help telephone hotline
Children	UK rules, regulations, systems
Teachers	Integration
Collective Human Elements/actors	Implicated actors/actants
Companies running accommodation	Occupation/training/professional identity
Nationality groups	Friends and families of PSAs
Charities/NGOs	Documentation
Healthcare: NHS , private	
Schools	
Local Councils	
Home Office	
Discursive constructions of individual and/or collective human actors	Discursive constructions of non-human actants
PSAs as liars, criminals	Broken asylum system
Right wing fascists	Merging of self with one's case
Woke left-wing liberals	Accommodation as luxurious/deterrent
PSAs as saints	Community walls
	Hostile environment
Political/economic elements	Sociocultural/symbolic elements
Illegal Migration Act	Different ways of living
Nationality and Borders Bill	Language
Hostile environment	Families and collectives/individualism
Rwanda policy	Loneliness
Financial and legal barriers to entertainment, opportunity, travel (drivers licence, passport)	Freedom
	Time
	Discrimination: Racism, Homophobia, transphobia
Temporal elements	Spatial elements
Length of the asylum process (waiting)	Shared rooms
Trapped in the present	Hotel living
Liminality	Remoteness of accommodation
Amorphous/shapeless nature of time	
Lost time (to develop/learn/pursue goals)	
Waiting times at services, NHS, etc.	
School admission delay	
Major issues/debates (usually contested)	Related discourses (historical, narrative and/or visual)
Access to education	Colonial history
Access to work	PSA taking jobs, housing away
Access to health/mental health/dental	PSA Living in luxury hotels
Validation of educational certificates	
Other elements	
Lack of information	Winter clothes
Lack of control	Isolation and lack of social networks
Family separation	Childcare

Positional mapping (Figure 3) connected particular issues or events with emotional states.

Figure 3: Positional Map



Coding combined with mapping yielded a series of themes strongly associated with positive or negative mental states: social connection, identity, safety, and power and autonomy. Two cross-cutting themes were also identified, time and bureaucracy, used here in its colloquial sense to describe the legal and administrative procedures of governmental and other actors. While these findings are discussed here in discrete sections for the sake of clarity, they must be understood as interrelated and overlapping, as illustrated in the process map in Figure 4 and in participants' timelines (e.g. Figure 5). In this chapter, each of these themes will be discussed through an outline of the evidence and a brief thematic summary. A brief summary will then be given of the overall conclusions, limitations and directions for further research.

Figure 4: Process Map

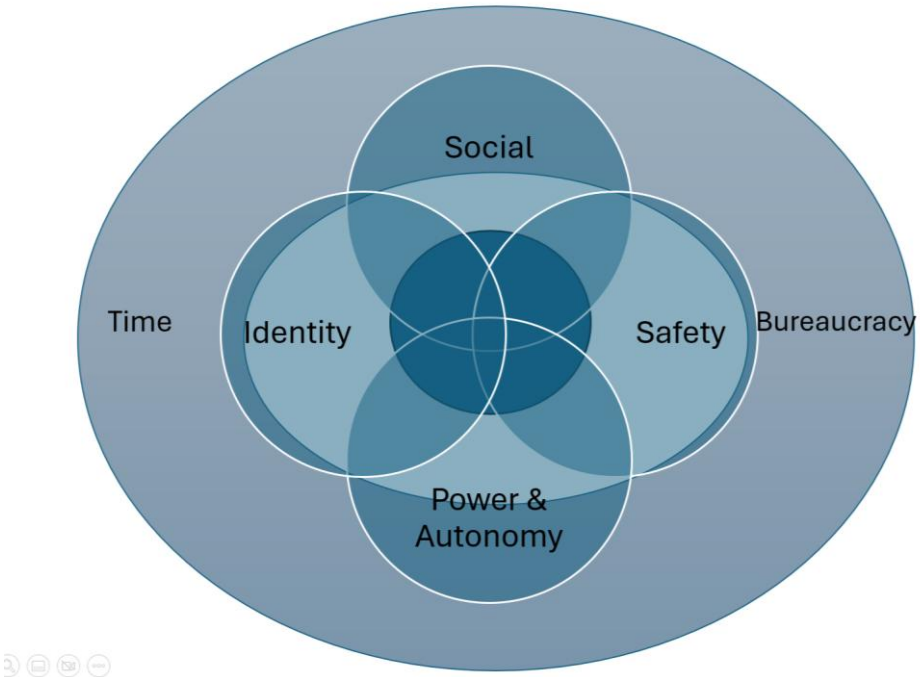
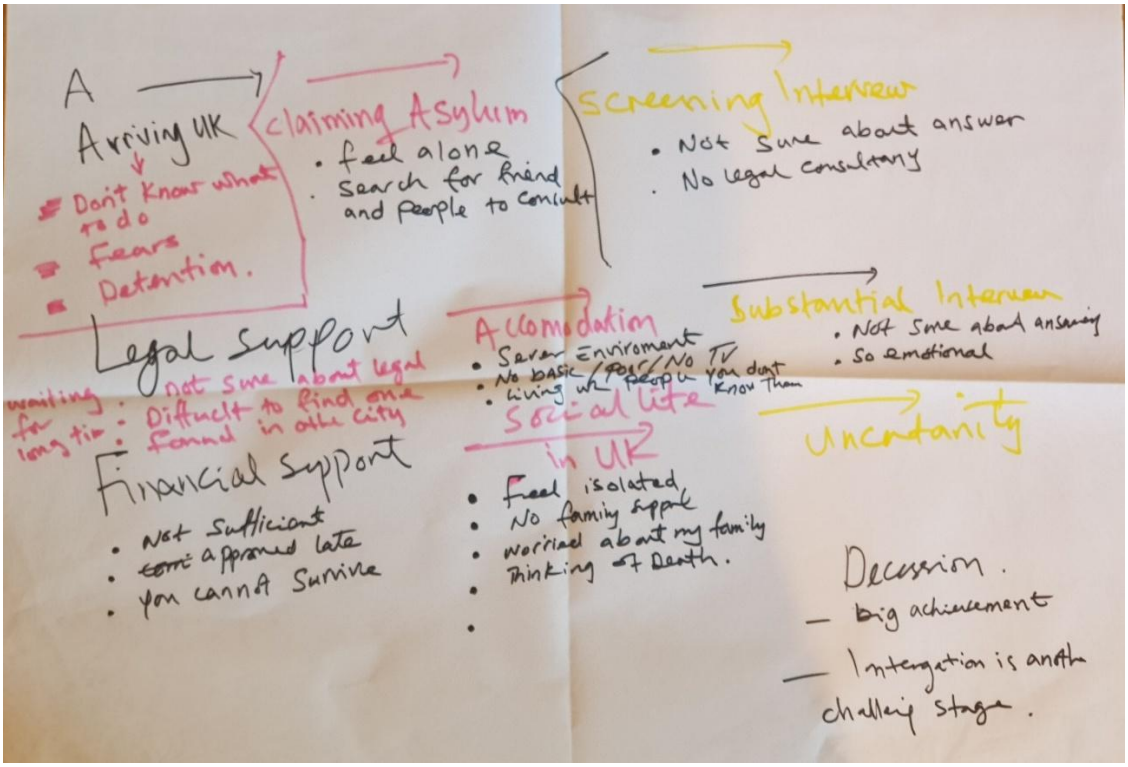


Figure 5 Participant timeline



3.1 Safety

Safety is a fundamental need and is particularly salient for people seeking asylum. However, at many points during their timelines, participants not only felt unsafe, but were at risk or came to harm. These included physical risk related to the living conditions and the people with whom they shared accommodation, and feelings of emotional or psychological risk. They described feeling unsafe due to explicit or implicit threats relating to their case, their freedom and their family lives. Importantly, it was often the asylum system that put them in harm's way.

3.1.1 Threats associated with asylum accommodation

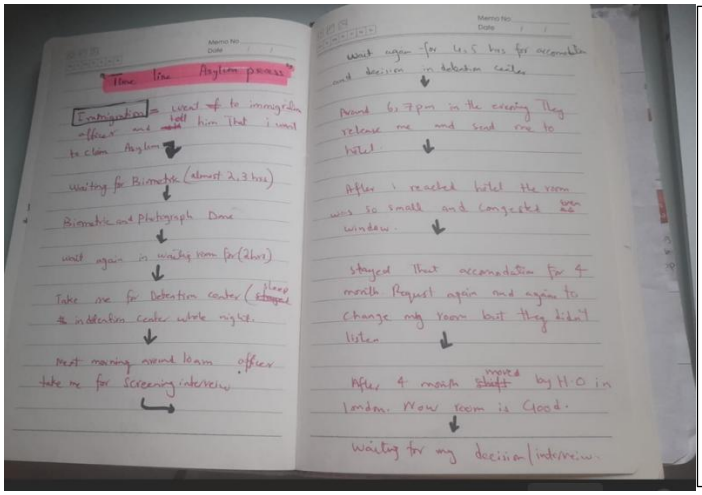
The physical conditions of accommodation, particularly short-term or contingency accommodation, were cited by many as problematic and even dangerous:

> …the housing that they put you in isn't always safe… I mean, the house itself…The entire flat was covered in black mould… there wasn't any insulation in the walls… there was only one heater in the entire house... I have a friend… [w]hen she got her more permanent accommodation… the ceiling fell on top of her and her baby. And nothing was done out of that. They just said 'oh, I'm sorry'. You could have killed that woman's child! (*Gail, 1175-1183*)

Khadija described living with rats in contingency accommodation and in run-down conditions in dispersal accommodation, including the "situation of the room and the toilet and the mud and around the room and the broken shower and everything" *(386-387)*. Even when conditions were not immediately dangerous, they

were often physically and/or mentally unhealthy. For Sameera, for example, the lack of a window in the room she lived in for four months held a prominent place in her timeline (Figure 6).

Figure 6: Sameera's Timeline



I went down to the reception and I was crying at that time because I was very, very stressed out.

I could not control my emotion at that time and I said 'I I I can't live in this room. *(129-131)*

Even more than physical conditions, the social aspect of accommodation made participants fearful:

> …there are some strangers and a lot of people with mental health at that hotel at that time. And yeah, they used to bang the doors at the night while you are sleeping, freaking out and and shouting and drunk, drunk people. It was very dangerous place actually. *(Khadija, 207-210)*

> It was not bad but, again, you will live with people you don't know who are they and what is their background and one of them… is coming from the jail after, after spending five years and his mental health was not okay so unexpected behaviour is always coming from

> him so at all time you will be like alerted and be like ready for any unexpected. *(Nassir 121-125)*
>
> This was one of my scary time because the people who with us… he's smoking weed all the time and drinking all the time. So it wasn't safe. Feeling it's not safe when I go to my room just I lock it and also I heard his shouting all the night. *(Farouk 580-583)*

Farouk attributed this to, “they're mixing up people. They're not classifying people. Because they're thinking these refugee people they don't have a choice” (576-577). Tariq had similar reflections about the failure to prevent problems:

> I can't sleep because I don't know the others… Different religions, different backgrounds… I was avoided to go, I mean, went into debates or negotiations or talks because sometimes they become nervous and they fight you and bah bah bah. They come from Iran, Iraq Kurdistan... you know, there's some sensitive problems between them. *(369-373)*

Sharing a room with a stranger is unsettling at the best of times, and even more so when forced into a situation of unwanted intimacy:

> I feel, like, uncomfortable because… they put me in a room with someone… [h]e did not speak English at all. We communicate with the mobile translator with each other… the strange thing is that the room was not equipped by two beds. Is one bed… For me it was… shocking. Maybe I spent 90% of the night on the chair (*71-73, 87)*

These situations, and others like them, led to a frequent perception of being unsafe. In some cases this proved to be the reality:

> We had one guy moved out due to the fact he got quite violent… he pulled a knife…. once he pulled it on me… I said you better go outside. Yeah. So I put him outside… Then called the police. *(Xavier, 399-411)*

Gail was sexually assaulted and harassed on multiple occasions in different accommodation, both prior to her transition and after. Her sexual identity prior to her transition and her gender identity after made her vulnerable to abuse, particularly when placed in all-male accommodation and among people with no tolerance or understanding of LGBTQI+ identities. In her initial accommodation:

> I was put in a room with two other guys… the first night, I was so terrified of being there. And then the third night, I was sexually assaulted…And I was so terrified, I didn't know what to do, who to tell. I had no idea what to what to do in that situation. So I just left it. *(FGD1, 87-91)*

Not only was the accommodation not monitored effectively, but residents were not even provided with information about how to report their concerns. Developing more familiarity with the system did not provide protection or relief, however, and when she was bullied and sexually harassed in another accommodation, fear prevented her from reporting it, with serious consequences for her mental health:

> …he would always force me like, touch me and stuff like that. And that happened for quite some time and I was terrified to say anything because I kept assuming that I would be in trouble if I was to report that. I suffered severely with anxiety, depression, I was very, very suicidal. *(FGD1, 126-129)*

Gail subsequently lived for a time in the community, but when her partner became abusive she returned to Home Office-provided accommodation. Despite having legally transitioned and having received assurances from the Home Office, she was taken to an all-male hostel. The manager managed to find her a single room:

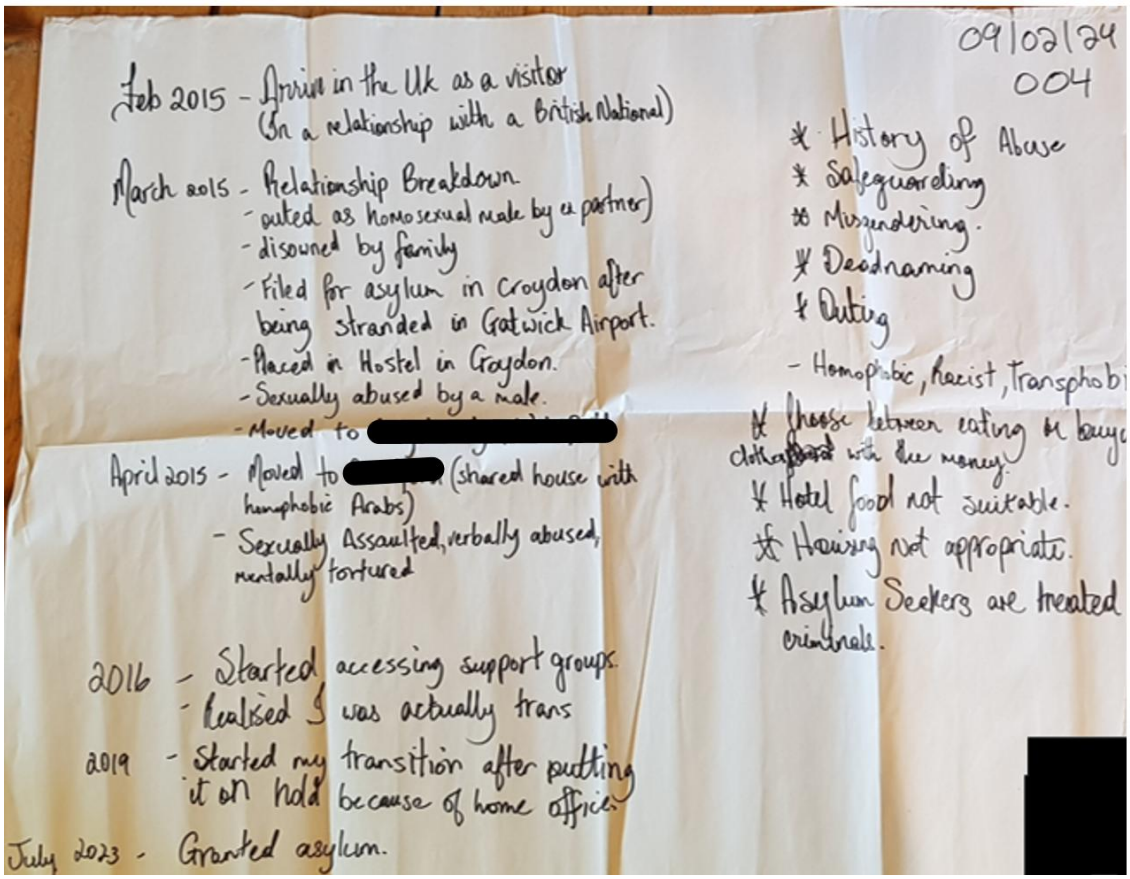
> I bought one of those big boxes of pot noodles and I took that with me. So I didn't leave the room at all… The toilets and the showers were shared, so I used to wait until like three, four in the morning when nobody was outside at all to use the toilet or to have a shower and that was really uncomfortable… *(FGD1, 261-265)*

After five days hiding in her room, she felt "really mentally drained" (*269*) and had developed a urinary tract infection. At her friend's urging, she moved out:

> then the Home Office contacted me and said, I'm not entitled to receive any support because I've absconded… I did write them back a letter and said, No, I didn't abscond. This was a safeguarding concern. I raised it with you. You said you were going to deal with it in 24 to 48 hours… Day five came and nothing had happened and I was not safe. I left for my own safety. They insisted that I have absconded and I cannot get support. *(FGD1, 272-276)*

Gail was repeatedly put at risk, first by not taking account of her sexual and gender identity, (an issue further discussed in section 3.3 on identity), secondly because the denial of support made her vulnerable to exploitative and abusive housing situations, and thirdly due to the threat to her case implied by the criminalising word 'abscond'. The use of threats relating to PSA's cases was reported by many of the participants and is further discussed in section 3.4 on power and autonomy.

Figure 7: Gail's Timeline



3.1.2 Risks outside of asylum accommodation

Although the majority of safety concerns expressed by participants concerned risks in accommodation, other risks arose in other circumstances in navigating the asylum process. When Malik arrived, for example, he presented himself at the police station to claim asylum. The hour was late and, apparently unsure what to do, they told him to wait at the train station and come back in the morning. He stayed until 3am, when station security moved him along. Without official support, he relied on strangers:

> I found someone he is the homeless sleep under the building. I asked him I say to him 'I'm new here. I don't know any place to go. I want to sleep just this night'. But he been very kind to me. He give

> me a sleepbag and then just a drink carton and slept in that place in the middle of the night. That day, I found one lady she come with me up and give me ten pounds. Some people they brought sandwich put near to my head. Some people put some some coin here to my head. Because I sleep they don't want to wake me up. *(FGD2 45-50)*

By contrast, Yousself, who also presented himself at a police station was handcuffed and put in a cell to wait for the arrival of Home Office officials. He was not told how long this would take and, in fact, they did not arrive until the morning. Like Malik, he was then taken to immigration detention:

> I was freaked when they took me to that place because I can see from outside… police and could see… as soon as I get to that place, I think I I started to to, to feel more depressed. You know what I mean? I started to get more depressed. I was thinking like ohh I'm, I'm not expecting- this is something I wasn't expecting- I was expecting, uh, to be looked after, to be to be in a like a, you know, a house, or, you know, but why do you taking me to a place you know, like a prison? *(201-208)*

From a phenomenological perspective, Malik and Youssuf's accounts both have a feeling of detached unreality as they try to make sense of the confusing and frightening circumstances in which they find themselves. On a purely objective level, it is striking that two men presenting themselves to the police station for assistance find themselves treated in such different, though arguably equally distressing, ways.

As difficult as the asylum process was, participants generally found the integration phase even harder, particularly losing access to accommodation and financial support. Youssuf described scrambling to find somewhere to live within the

28 days given to ‘move on’ after receiving a positive decision. He found himself in the catch-22 of being unable to rent accommodation without a bank account and unable to get a bank account without an address. When he tried to sign on to benefits he was told, “ if you don't have account, can you find anyone else account so we can just, you know, give you the first payment on that account and then we'll change it to yours” (*852-856*). While almost certainly unofficial – and no doubt intended to be helpful - this advice is deeply problematic. Had he followed it, Youssuf might have found himself controlled, exploited and abused by the person who received his money. Instead, Youssuf entered into a problematic rental arrangement with an exploitative landlady. The rental agreement contained several clauses with which he was uncomfortable but, “I was desperate, I sign it…I was thinking, like, let me just find a place” *(868-869)*. He was thereafter subjected to racist abuse by a landlady who did:

> terrible thing to make me feel uncomfortable. That's another worst experience I had. I remember I started not to go to that house during the day at all. I will leave in the morning, I will come back like two o'clock in the morning or three o'clock and to make sure she she fall asleep. *(875-878)*

Nassir similarly found himself in a very uncomfortable and potentially dangerous housing situation on leaving asylum accommodation. When his family was reunited in the UK they became six people sharing a single room, a situation that endured nearly a year, “this is the hardest time for me” *(223)*. He appealed for help but was told that homelessness was given priority for housing over overcrowding. It was only when he sought legal representation that the council took action, acknowledging that the extent of overcrowding made the family’s situation similar to homelessness and

the clear safeguarding issues, particularly after his youngest son required hospital care for a burn from a hotplate that could not be made safe due to space constraints:

> So they move me and I keep moving between temporary accommodation for two years, then I I settle in a permanent house after three years. And I keep changing my address, changing the school, changing the addresses in the driving licence. In the council tax, Universal Credit, NHS... *(Nassir, 250-253)*

Ironically, having mastered the complexity of the asylum process, PSA are unceremoniously ejected upon acceptance of their asylum claim, and are then plunged into a new world of bureaucracy and red tape which they must navigate with little or no support. As these examples illustrate, they are then at considerable risk both from the conditions they are obliged to accept and from potential exploitation and abuse.

3.1.3 Summary and Discussion

Participants in this research described their experience of the UK asylum system as frightening and sometimes actually harmful or dangerous. This was due to physical conditions of accommodation as well as real and perceived risks associated with people sharing it with them. There were failings both of omission and commission, as people were put directly in harm's way, while management and safeguarding systems were inadequate to prevent abuse in accommodation. There was a lack of guidance or support to prevent exploitation and abuse of people living in the community or moving on after a decision was made on their case. Gail's experience shows how direct or implied threats about the consequences participants' actions might have for their case undermine their subjective experience of safety and

make them less likely to seek help when they are actively at risk. These types of threats, both implicit and explicit, were reported by many participants and in other research (see, *inter alia*, Hoare et al., 2020).

Participants' descriptions of their state of stress and feelings of threat in asylum accommodation and their helplessness to change their situation were reminiscent of descriptions of the method of early learned helplessness studies. So, too, were their descriptions of the consequences, including uncertainty, fear, depression and apathy. This suggests that lack of safety in such accommodation is conducive to the development of learned helplessness.

3.2 Social connection

The data showed that social connections and relationships were of primary importance and were strongly connected with virtually every other element of the model. Participants identified positive social connections as supporting their mental health and well-being, contrasting them with the negative impact of being socially disconnected or exposed to a social environment that felt hostile, alien or dangerous.

Figure 8: Beneficial and detrimental social contacts

Beneficial	Detrimental
Connecting with one's community	Isolation from family, friends
Developing social networks, making friends	Exclusion from UK 'mainstream' society
Support from NGOs, solicitors, support workers (e.g. mentors, therapists, etc)	Living amongst strangers and/or people perceived as dangerous or alien

3.2.1 Connecting with one's own community

For all of the participants, finding and connecting with members of their own community marked a key transition from feelings of confusion, loss and anxiety on arrival to feeling more positive and hopeful. Tariq described coming through immigration on a tourist visa, filled with confusion about what to do next:

> I spent twelve hours in the coffee shop…Thinking, thinking, thinking, thinking. Then I saw on the Facebook that the majority of Yemeni community in S. So I said maybe if I went to S I will find someone who can advise me what to do. *(76-80)*

Similarly, Semere described receiving help from compatriots throughout the asylum process, from navigating his journey to the UK to practical and emotional support once there:

> I have a lot of friends which has been come from my country. I will discuss all the things, they have been sharing me their experience. Because always we will have somebody before you… He can guide you about the things that's facing you. If you need to communicate about something that is happening he will tell you about the things to do... just... to support each other. *(260-265)*

Ahmed described finding compatriots in detention:

> One of them was I think here were for a long time. So they explain everything for what should you do... For me, because I called my cousin before I came, I know a little bit about the case. But some people they don't know… when they can apply or how can they apply for this test, what can they say on their upcoming interviews.

> You know, when you finds people from Sudan, straight away like your family. *(FGD2, 837-841)*

Nationality and language was one important area of common ground, but other aspects of identity were also important. For Khadija, Rachida and Saleema motherhood was particularly important, while for Xavier, Krista and Gail finding other LGBTQI+ or transgender individuals or groups was a high priority. Participants drew on different aspects of their identity at different times to make connections, including intersecting identities. For example, when Gail found herself in difficulty early in her time in the UK she sought out someone from the region, “I was in such a dire situation that I was actually contemplating jumping in front of a fucking train… then I remembered I had a friend who was also from the Caribbean” *(37-38, 72)*. When she was in asylum accommodation, however, she sought out other women, both for safety and for emotional support. Most helpful, however, was when she found people who shared her intersecting identities:

> I met a trans woman from Trinidad…she was there for a few days… and then she left and then I met another trans woman who was there as well from Trinidad. And she was there. I would say two weeks, and then left. So I was on my own when she left. And when they were there, I had them as company and I had people to sit with and to reassure me that was going to be okay. But then when they left, I was on my own. *(94-99)*

In addition to expressing a strong sense of loneliness and isolation when separated from people from her own community, Gail also captured the sense of disconnection resulting from the constant movement of people in and out of temporary accommodation, which was common to all the participants’ accounts. This left her

not only emotionally, but also physically vulnerable, and she was sexually assaulted again in the same hostel. In another hostel where she was sexually assaulted she sought refuge in other women's rooms.

Gail's story illustrates how bureaucratic processes and official negligence exacerbated the risk she faced – ironically through the same identity-related risks responsible for her initial flight. Krista's experience similarly demonstrated how her existing problems were exacerbated by bureaucratic and human failings, including being rehoused without notice to a location where she was cut off from both her medical (HRT) and social support networks.

3.2.2 Isolation from family and friends

Loss of contact with family and friends at home is very common for forced migrants and their families. When Semere lost his telephone en route:

> …up to one month and fifteen days I didn't have contact. Because when I come to here I lose everything. I lose my phone. I don't have their address. I don't have anything. Then, for one month I don't have their contact… very stressful. *(333-351)*

While Semere's loss was accidental, Ahmed and Saleema both had their telephone taken away on arrival, as is increasingly common in the UK and elsewhere (MacGregor, 2024):

> In the detention[6] centre, they take all, like all of our bag or our phone or devices so we don't have any access to- we cannot contact our family or friends… whole day was very stressful for me and I felt very

[6] An airport short-term holding facility.

> sad because I know back in my country, my family was very worried because I don't have any contact with them. *(Saleema 94-103).*

Some other participants reported that communication with family was difficult due to issues with internet in accommodation (Farouk, Nassir, Xavier), though others either did not mention this or said that internet connection was adequate (Semere). Although this is not universally problematic, then, neither is internet access consistent across asylum accommodation. Importantly, there was a perception that this was due not to technical issues, but to companies treating PSA as commodities and the failure of the government to prevent this:

> …the housing companies dealing with the people as a benefit… it's more cost for them, you know…. They make a lot of money. But I think there's lack of supervision from the regulatory body… the government. *(Farouk, 449-463)*

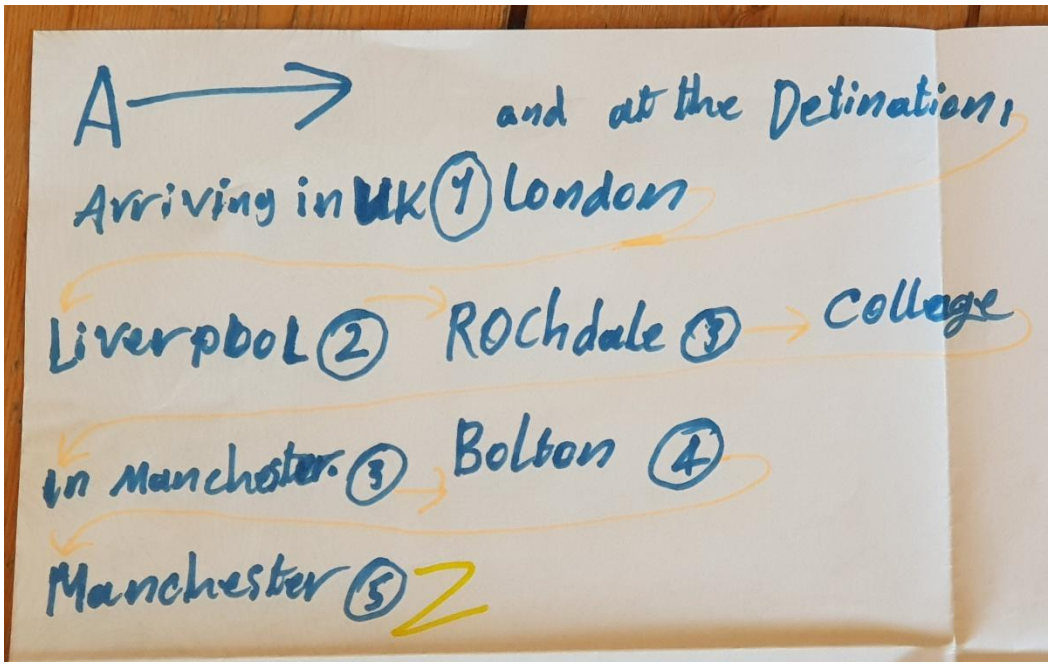
Some participants limited their own communication with family at home. Farouk, for example, withheld information about his life in the UK to avoid worrying his family. Tariq also withheld information from his children for reasons of both safety and status:

> I didn't tell them I went to asylum seeker. I said 'Baba is studying PhD. I am working. Don't worry I come.' He said 'but you said two, three months... it's now two years'... I don't want them to... tell their friends, and their friends I don't know tell who and then maybe I'll be trouble for them with the authority there. Then the second thing is I don't want them to feel that we are less… *(523-533)*

Regular relocation also had an impact on relationships. Ahmed's brother arrived before Brexit and was therefore subject to the Dublin Regulation, under

which he could be returned to a European country where he had previously been registered. Ahmed, who arrived later, went through the system relatively quickly but his brother was stalled, moving neither forward nor back. Ahmed struggled to keep track of and in contact with his brother, who was moved without forewarning in and out of detention and when released to asylum accommodation, from one city to another. Another participant's timeline[7] shows how many times he was moved from place to place (Figure 9).

Figure 9: participant's timeline



Lapses in communication between PSA and their families, then, occurred for a variety of reasons, and while some of these are unavoidable results of fleeing one's home – loss of means of communication, concerns about worrying family members or putting them at risk – these were sometimes exacerbated by acts or

[7] The name of the participant has been removed to ensure anonymity.

omissions in the asylum process, like taking away PSA's means of communication or failing to provide adequate or consistent access to the internet.

3.2.3 Friends, social networks and exclusion from 'mainstream' UK society

> This is always my advice to newcomers: Make friends, make friends, make friends. Because these friends really help your mental health. Help you come out from everything you're struggling with. They will physically help you, support you. *(Khadija, 487-490)*

Friendships and supportive relationships were identified as vital to remaining positive and resilient while going through the asylum process. Jamal even favourably compared his experience in Libya, a notoriously dangerous and difficult place, with the UK because the living conditions were more conducive to social interaction: "[I] stay with friends, we cook together, like, you know, very, we are very happy. But here, we just stress you in your own room" (*1157-1159*). Farouk was able to share things with friends in the UK that he hid from family and friends at home because, "same like me, you know, we are sharing the worry together" *(547)*. Similarly, when Ahmed's letter confirming he had been granted asylum arrived on Eid, his well-being was enhanced by the combination of celebrating the festival with his brother and friends and their happiness for him, though marred by his brother's case being unresolved.

As important as these friendships are, social relationships, particularly in contingency accommodation and shared houses can be a source of considerable stress, "[a]ways you choose nice friends and good friends. They can help you. But if you choose wrong they always, you know, they give you negative energies" *(FGD2, 1245-1247)*. Saleema noted that "it's very important to have a right people by your

side so that if you are feeling low and you can get some motivation from that people" *(705-706)*, but also that she had sometimes put boundaries between herself and other residents when they took too much from her emotionally.

As noted in section 3.1, social dynamics in asylum accommodation made participants stressed and even fearful. Xavier described as 'jarring' the experience of living among people less cosmopolitan, noting he could "see it from their eyes how their malice, how their their uncomfortability of seeing someone black or openly gay …" *(340-341)*. Of his next accommodation he said, "it's six rooms and the housing… manager wasn't a good navigator of people and we had some really, real issues with personal space and understanding personal space *(386-389)*.

The loneliness of the integration period was also identified as particularly difficult:

> Previously, it was very strange to me, how people lost their mind… at that point of time, I know how people lost their mind. So many stress, stress, stress, stress, without any relief, and you feel like any single stuff in the world is fighting you. And you are fighting alone …you feel like you're alone. You don't have friends, you don't have relatives, you don't have... So the loneliness is very hard, was killing me. And I'm a social person.... sometimes I speak with the window, I speak with the walls, I speak with the mirror... there is no family or friends or daughter, no children, no wife. No dad, no mom…. So you are alone here. And the thought that coming to my mind, if I sleep at night, and I pass away... What will happen? *(Nassir, 166-172)*

Loneliness was exacerbated by feeling excluded from UK society: “I moved outside. I thought I'm going to, for the open life, but… I hit by the community walls, then” *(Farouk, 238-239)*. Gail noted that:

> [E]ven post-asylum… I'm still finding it so hard to integrate because I have no idea where to go. They don't tell you who to contact to get housing or get on universal credit or how to get involved in society so you can become a person again. (*1255-1257*)

This statement highlights the experience of liminality created by the asylum process, feeling outside of society and thus depersonalised and perhaps dehumanised.

Berhane said lack of contact affected his English acquisition, “because I had no chance to communicate with someone. Because to improve something you have to contact, so I have no contacts” *(1288-1289)*. Farouk attempted to address this by trying to engage people in conversation at a local café, but though he went every day, “I didn't find response. And it's all of this you know, it's impacting our, you can say behaviour, it's impacting our thoughts” *(270-271)*. As a consequence, “I start to seclude myself. I start to find my people who's who's going to accept for me. My community” *(285-286)*.

Most engaged in some form of volunteer work. For Tariq this met multiple needs:

> I saw a lot of people suffering. And I want to help people. This number one. Number two… I want to know about the rules and regulations about the country, I want to understand the country. I can’t understand if I'm sitting, if I'm sleeping at the room... I want to see people. I want to do some work. I want to know, learn *(463-472)*.

This work helped him learn to negotiate his new environment and have a sense of meaning and contribution, connecting him not just with society, but also with his sense of self, discussed in section 3.3.

3.2.4 The role of the charitable sector

Participants said they valued the charitable sector as a source of practical and emotional support, of opportunity to exercise agency through volunteer work, and of avenues to integration. Rachida noted how important her personal relationships were with individual workers for her mental health and well-being:

> they supported me in several ways, actually... [f]inancially, even, like, mentally, emotionally… when I had an issue like recently with the dispersal letter, she helped me a lot… We were talking every single day… She was like a family to me… *(588-593)*

Others identified voluntarism as key to managing the stress of waiting:

> I start to think of doing voluntary work, you know… just to keep myself busy because I don't want to think of, you know, the past. And at the same time the waiting is so hard. *(Youssuf, 558-560)*

Or of loneliness and isolation:

> Sometimes you are new in country, I feel like lonely? But yeah, I engage by volunteering and meeting people… (Saleema, 178-179)

Or simply to put their own problems in perspective:

> [I] got in a bit of a depressive state, but I I got out of it quickly though by finding some voluntary work … the fact that I was helping other people and being of use to other people really loosened up the the

> rope for me… Dealing with other folks' problems I got to understand my problems and how to deal with them at the same time. *(Xavier 514-515, 1091-1098)*

NGOs supported PSA to exercise their agency not only through volunteer opportunities, but also through provision of language classes and support to gain access to education and work. However, while this sometimes supported integration into the wider community, many roles involved supporting other PSA. Farouk noted that this can help maintain PSA in an isolated silo.

3.2.5 Discussion

Social experiences during the asylum process were profoundly important, so much so that they would seem to be a key entry point for addressing mental health and well-being issues. All participants highlighted how positive social connections and experiences supported their mental health and well-being, while negative ones eroded them. Maintaining contact with family and friends at home and developing new relationships seemed to be of roughly equal importance, though the relationships served different and often complementary purposes. Shared identity or identities was important in forming trusting bonds, which were valued both for moral and emotional support and for practical guidance and advice. While participants were proactive in seeking out these relationships, finding and maintaining them was undermined by the continual movement of people in and out of accommodation, often without warning, and by inconsistent and unpredictable access to means of communication.

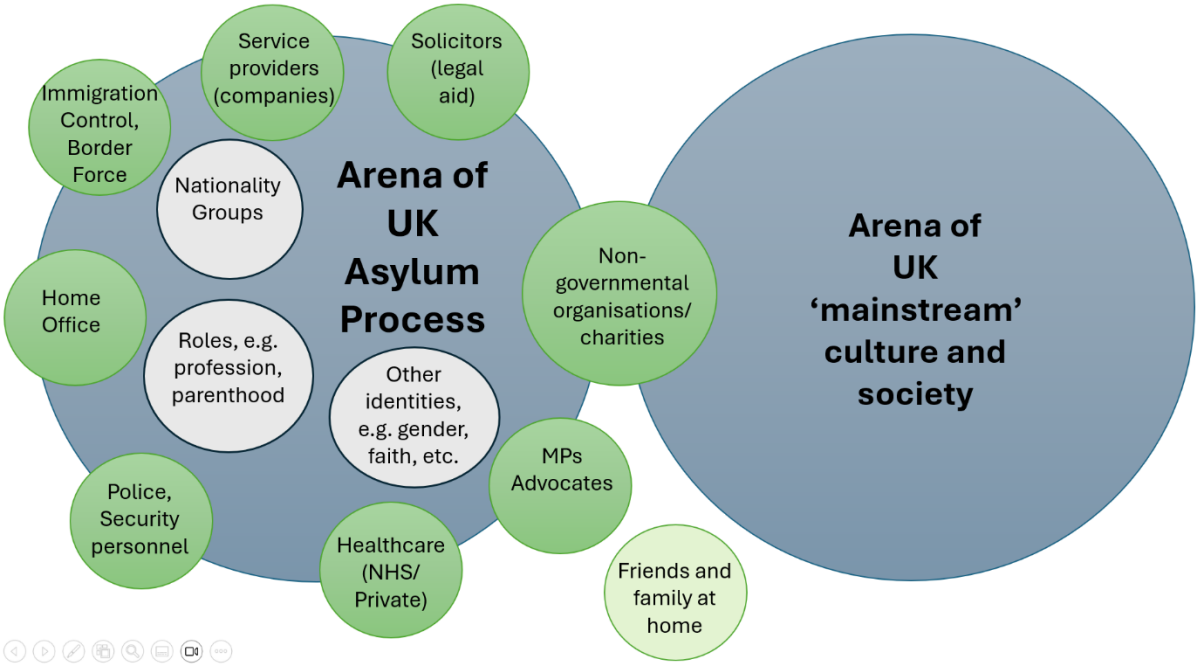
These findings echo and reinforce those of other recent studies in the UK. Like Wardale & Scuzzarello (2024), they show how many different types of

relationships influence PSA well-being. They also challenge discourses of unidirectional care rooted in a power dynamic in which PSA are passive recipients of assistance. Instead participants demonstrate much richer relationships of reciprocity, emphasising the importance of contributing care as much as receiving it. They also show how NGOs provide opportunities both for mutual connection and as a bridge with UK society. The fact that co-researchers and participants in this research also worked with NGOs as experts by experience suggests NGOs are increasingly trying to provide more appropriate services while minimising power disparities. The predominance of such disparities is noted by Strang & Quinn (2021) in their research using the COR model and social capital theory to consider the importance of social relationships in refugee integration. This built on previous work by Ager & Strang (2008) and Phillimore et al. (2018) on the importance of social connection both in itself and as a resource which can be exchanged in relationships of reciprocity. Many of their findings resonated with those of this study, including the importance of relationships or 'bonds' with family members and members of groups according to nationality, ethnicity or other salient identities. Interestingly, while participants in their research indicated they would typically seek emotional support and share intimate concerns only with these family members, several participants in this study said that they sometimes preferentially confided in friends made post-migration. This shielded them from feelings of shame or embarrassment associated with the slow progress of their asylum claim while protecting family members from the harsh reality of their lives, and allowed them to benefit from the shared experiences and resources (contacts, experience and knowledge), of other PSA.

The following map of the social world of the asylum process draws on Strang and Quinn's (2021) work on social resources, considering in-group bonds (e.g. family

and people with shared identities), bridges with other communities, and links with state structures (Figure 10).

Figure 10: Social Worlds Map: the asylum process



The PSA 'community'[8] is made up of groups bonded through nationality, ethnicity or other identities and overlaps, or links, with a number of other social worlds, comprised predominantly of service providers and state institutions. Most of these have the kind of unidirectional relationship described by Wardale and Scuzzarello (2024), featuring significant power disparities and lack of opportunity for PSA reciprocity. Although the PSA's world connects with others, and although many of these have a foot in both the PSA arena and the UK social arena, only NGOs provide a bridge to the wider UK community. Importantly, even this bridge is only

[8] In this section, 'community' is used in its conventional sense to refer to the general public or wider society (*APA*, 2018).

partial and tenuous. Access to UK society can be facilitated through volunteer opportunities or the provision of services such as case support, language training and facilitating access to education and work, but often opportunities remain within the community, leveraging PSA's knowledge of the system and language skills. While participants appreciated this, some expressed frustration at being unable to fully access the host society, "All the jobs I I found, it's with the foreigner people which is not going to help me" (*Farouk, 291-292*).

Mapping the relationship between social worlds in this way makes visible how many of these relationships are instrumental in nature. Managers of accommodation, solicitors and healthcare workers are largely engaged with PSA in a commercial capacity, and participants were conscious of this profit motive. Importantly, as contracts are typically paid by third parties like the Home Office or legal aid, the providers have no direct accountability to PSA. The implications of this are seen in recent reports of serious problems in legal representation due to funding shortfalls in the legal aid system, (Wilding, 2023), and in participants' accounts of managers' unwillingness to address issues falling outside of their contractual responsibilities. Other actors on the map, such as Home Office, police, and immigration control actors, are focused on containment of PSA, a task also delegated to housing providers, who monitor and sometimes restrict residents' movements. While individuals working for organisations, companies, and government departments can and do have positive, caring relationships with individual PSA, the majority of the people with whom PSA consistently interact do so in a professional, boundaried capacity. On the map, family and friends at home are separated as implicated actors, not present but discursively constructed, primarily through emotional representations

of love, worry and loss. They may also be considered present symbolically, as a form of social connectedness or support.

The picture that is formed, then, is of an essentially closed social world in which PSA are objectified and commodified, with limited opportunities to connect with mainstream UK society and little control over their relationships in general, which can be snatched away at any moment. This is arguably a form of social harm as discussed in chapter 1, specifically a form related to social and cultural safety. As Taylor's (2021) notes that because our identity is, at least in part, defined by the recognition of others, "[n]onrecognition or misrecognition can inflict harm, can be a form of oppression, imprisoning someone in a false, distorted, and reduced mode of being" (p.21).

3.3 Identity

An individual's sense of identity is profoundly challenged by the causes and process of forced migration, including loss, separation, and persecution or risk related to aspects of identity (Douglas, 2010; Watzlawik & Brescó De Luna, 2017). Participants in this research repeatedly raised issues related to identity in various ways. They reflected on their self-definition as individuals and or as members of collectives based on gender or gender identity, nationality, ethnicity, faith or social characteristics. They also viewed themselves as 'asylum seekers', in their own construction of being people with unique experiences of forced migration, and as socially constructed, with both welcoming and hostile dimensions.

Identity is a fundamental issue for PSA, not least because, for many, identity/identities are the cause of their initial displacement. Gail, Krista and Xavier all

fled their countries or were unable to return due to their sexual and/or gender identities. Tariq's political views resulted in his expulsion from his country of residence and rendered return to his own country impossible. A successful business and family man, seeking asylum challenged his sense of self:

> [I]t starts from the officer counter… when he asked me, "Sir, what's your purpose for visiting the UK?" And I don't know, what's my purpose… I got my visa because I was a businessman…I don't want to lie to him and I don't know what is the answer. And I push the passengers behind me to go to the counter until I find the answers in my mind… I visit before UK two times as a visitor, as a tourist. So this time, what should- What should I tell him? *(45-51)*

This sense of lost identity and uncertainty in the face of a new one was identified by many of the participants as difficult, with several noting that it was exacerbated by feeling challenged, rejected or disrespected by officials. Khadija, for example, had to push back strongly when an immigration official seemed to challenge her identity:

> I told her I don't speak French and she she kind of… didn't believe me… because I'm from Chad it's supposed to speak French… She was like looking me like weird looks and saying this again and again and again in French. I was like, I don't speak French. I don't speak French. *(84-94)*

The experience of feeling disbelieved, either at the point of claiming asylum or in subsequent interviews, was common to all participants. Malik and Berhane said they were explicitly accused of lying, and Rachida and Farouk said it was heavily implied:

> They were, yeah, putting so much pressure on me like, you know, 'what happened, like, how did you came here?' And I was telling them, and they didn't believe me at first. So it was kind of hard to just try to survive and then people… not, like, believing you. *(Rachida, 78-80)*

> First thing I faced there the officer when I arrived there he starting you know to shout at me, really. This is the this is my first impression which is... I can say this changing my life and changing my opinion about the arriving here and getting into the UK. So he's started shouting, 'oh why you are here why- you are not asylum. ' *(Farouk, 10-13)*

Xavier described being challenged to prove his identity by answering offensive and inappropriate questions, "I said, 'well, would you ask a married couple that?' Do they do anal. Do you do switch sides? Do they use toys." *(784-785)*

Participants described these experiences as distressing both because they challenged their sense of identity and because they felt labelled with a new, unwelcome and unfair identity: "Sometimes when you asylum, when you go like GP or hospital, they feel like you are criminal or bad person. This one left like bad feeling" (*Ahmed, 1279-1280*). This was exacerbated for those who were arrested or detained. When Youssuf presented himself at the police station to claim asylum, he was handcuffed and put in a cell. This and his subsequent detention were the nadir of his asylum experience:

> I've been to a detention centre and was thinking why am I here and and that horrible feeling, I think, made it even worse, you know what

> I mean? You think about horrible things, you think about… you know to die is better than this." *(1007-1011)*

One of the researchers summarised a group discussion of experiences of detention:

> …when people coming to UK, like seeking safety and try to get the protection from what they suffer in their country… find themselves in… detention or a prison or something like that, I believe this is like dealing with people like a criminal. (*All*: Yeah) While we are searching protection, we are not a criminal to be put in an isolated prison or dealing with like that. How that feeling… putting you with the criminal and try to criminalise you about applying for asylum. *(FGD2 863-868)*

Institutional processes reinforced the perception of criminalisation in asylum accommodation:

> …even though we all were in the asylum system, and they had our fingerprints, we are staying in their accommodation, so they know where we are, they treat us like criminals where we have to go to these reporting centres… Like what's the purpose of that? You know where I am, I'm literally staying in the house you put me in. You have my picture. You have my fingerprints. Why do you need to criminalise us like we've done something wrong? *(Gail, 727-731)*

The level of distress expressed by participants suggests that while the system sees these processes simply as managerial tools, for PSA they are deeply personal. Tariq reflected on a Home Office interview:

> Don't talk with me as a crime, as a criminal, or as a liar... I'm very straightforward with you. And this is my whole life… I came to the UK just for looking for peace haven, just to find a place to take breath. I want to breathe. And thank you so much for the Queen and for the government and for the country that they open the door for us. But don't squeezing me too much… Because my dignity is number one… don't treat me as a criminal. *(Tariq, 572-578, 589-590)*

Participants also described these experiences as dehumanising. Haslam (2006) defines dehumanisation as comprising two elements: delegitimisation, or the attribution of negative characteristics to an individual to justify withholding recognition of full personhood; and moral exclusion and engagement, denying recognition of someone as an independent, agentic individual to obviate the need to treat them with morality and compassion. Participants experienced such denial of personhood and dignity in particular when meeting with authorities:

> I think ten to fifteen minutes, [the immigration official]'s just… ignoring me at that time, doing something on the phone and something like that. And then he take the paper and do some paperwork… the way that he talked to me is very kind of shocking for me *(Saleema, 19-21, 52-53)*

> Some of some of the [housing] managers not really treating us as human… they always say we're we're just following the rules... I'm just doing my job. *(Rachida, 527, 533-534)*

In this last example, the response exemplifies moral exclusion and disengagement by denying the possibility of a unique and legitimate need. By situating the

responsibility outside of the immediate relationship, he removes the possibility of negotiation, denying her the possibility of exercising agency. Participants gave numerous examples of this kind of moral exclusion and disengagement in relation to asylum accommodation. Berhane, for example, described his physical and emotional distress when no accommodation was made for his medical problems. Khadija and Rachida, breastfeeding and caring for small children, received no support in negotiating restrictions around meal times and the prohibition of having keeping food in their rooms. In addition to denying their needs as individuals, such rigid conditions also prevent them from 'homing', or taking possession of their space and making it their own even through basic acts like offering hospitality (Boccagni, 2022).

3.3.1 Summary and Discussion

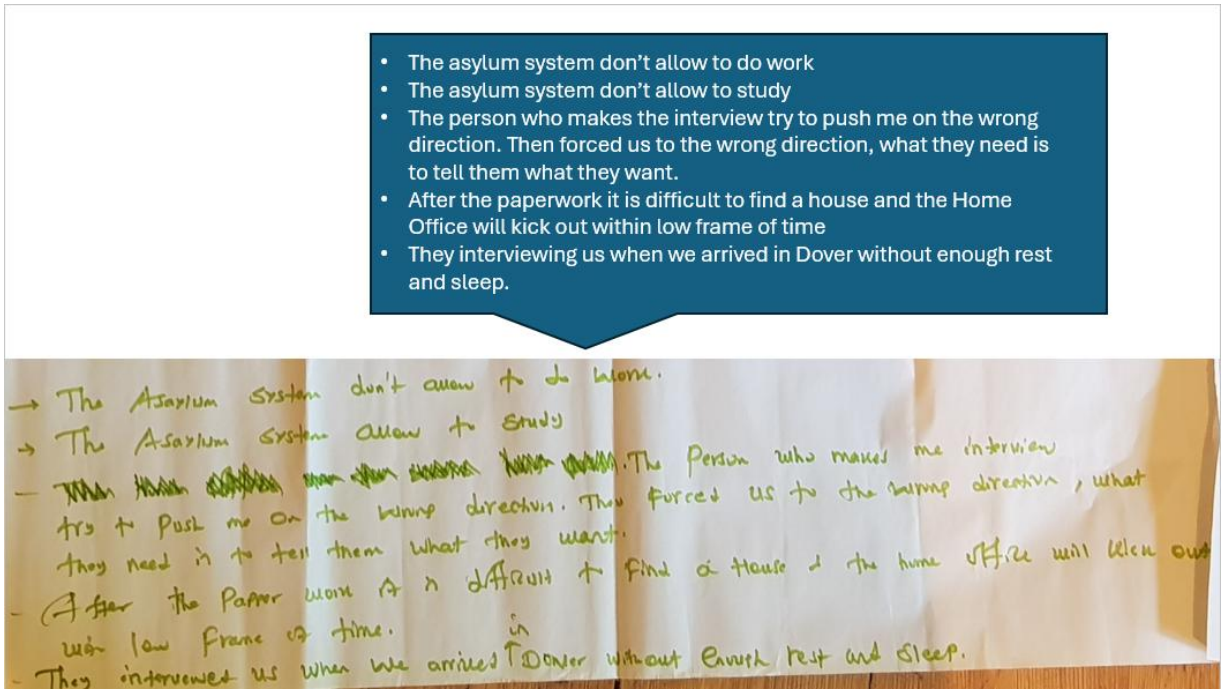
Identity was a highly salient aspect of participants' experience. This included the unavoidable, confusing and painful loss of sense of self and social identity resulting from forced displacement so poignantly described by Tariq. However, it also included denial of identity, or aspects of it, by officials, as when Khadija had to insist that she did not speak French. This was experienced as a denial of personhood and also held practical risks related to safeguarding for Gail and health for Berhane, Khadija and Rachida. These have been found in other studies as, for example, in studies indicating that systemic restrictions affect individuals' ability to parent effectively and therefore their identity as a parent (Mulcaire et al., 2024). The experience of being denied personhood or humanity was common, but so too was the experience of having an unwelcome addition of a criminalised identity. This was experienced as a particular shock when this socially constructed, securitised identity clashed with participants' own 'asylum seeker' identity as someone meriting care and

support. Participants struggled to assert themselves, as those in authority took no personal responsibility for either the denial or imposition of identities, but attributed it to an amorphous and depersonalised system. Based on this analysis, it can be argued that the system exacerbates the pre-existing harm to PSA's mental health and well-being caused by forced displacement. In denying their identity and imposing a new, damaging one, it exacerbates the alienation of their sense of self, requiring more effort to redefine themselves, and increasing stress.

3.4 Power and autonomy

Issues relating to the use of power were pervasive in participants' accounts of their experience of the asylum system. This took two forms: the use and sometimes abuse of power over PSA, and their perception of their own power or powerlessness, expressed in terms of agency and autonomy or its absence.

Figure 11: Excerpt from Berhane's timeline



3.4.1 Control over people's lives

Controls experienced by PSA were both direct and indirect. Direct controls were things like the prohibition of keeping food in the room in hotel accommodation and constraints placed on freedom of movement:

> …It is a steel doors with a lock you cannot open unless… the security open for you and you can't go outside unless you write where you are going and you have one hour to go and come. And if you come late, of course, they will not open the door for you and the camera will show you and they will put you in the room "Why are you late" and… we send this to the Home Office. So this will impact your file and they will deport you… they threaten you. So they want you to stay and not go outside. Okay, but I want to go outside to breathe… I want to see people. I want to see something else. *(Tariq, 375-388)*

Indirect control is exerted by the strictures that are put on people's lives, including overt barriers to paid work or studying, as well as more insidious constraints. Repeatedly raised by the participants, and often cited in the literature, is the very limited amount of cash support, which restricts PSA's options and forces them to make difficult choices:

> …after two months they sent me my [debit] card and they put nine pounds every week. So yeah, I usually eat the food from the hotel even though I don't like it, but I have to eat something… sometime I buy from outside, but it's very rare because from £9 you cannot survive the whole week. Also, when I came here it's the winter and I bring some clothes, but the kind of jackets and the warm stuff I don't have, so I have to buy that thing by myself. (*Saleema, 294-305*)

> I had to choose between buying clothes to stay warm in winter, or eating food and it wasn't always an easy decision because I had to literally starve myself to make sure I had money to buy appropriate clothing to survive… it's so many hard decisions and they don't take any of these things into consideration… it's like, okay, we've given you somewhere to stay, you either make your way, or fuck you. Either way, it's just fuck you. (*Gail, FGD1, 1047-1049, 1055-1057)*

The cold weather and lack of warm clothing was cited as a constraining factor by many of the participants. The cost of transport was similarly problematic:

> I tried to go to school, but… I can't afford it by myself. But they say they don't want to give us the bus ticket. That's a big problem. Not only for me, for many people who want to learn in school. *(FGD1, 734-736)*

This was just one of several examples given during the research of missed opportunities and entitlements due to lack of language skills, social networks and confidence. However, it also provided a real-time demonstration of how barriers can be surmounted by information and social networks. When Berhane raised this issue, Gail told him that relevant funding existed and offered to help him access it. His ignorance of his entitlement to the funding demonstrated the barriers created by lack of information, while Gail's offer showed the power of social connections to provide redress. Rachida similarly demonstrated how confidence and personal networks allowed her to overcome barriers, "After starting the college one month they stopped me and they said it was a mistake and we need to withdraw you from the course…

because this course is not free for asylum seekers… I contacted the church here. And then they helped me... they send a letter to the manager… it's not on me… it's on the college" *(305-310, 298).* She noted that the Home Office, "don't help. They don't care about my education or anything" (*291*).

Farouk described how the combination of these direct and indirect controls, alongside the stress of waiting for a decision on his case, wore him down:

> It's thinking about what they're going to do for me, why it's taking long time, what I'm going to do and it's…not allowed for me to work and, you know, the houses we are living… My room it was I think two metre, one metre. It's just my bed. There's no space for the chair or something like that. It's literally, it's a jail. Same like jail. Which is, you know, it's very difficult. And I can't go anywhere and the house was very far... even the location… is very important… It's contribute on this issue… is remote. *(379-386)*

This picks up on the theme of criminalisation discussed above and demonstrates how all of these issues overlap and interact.

3.4.2 Power and intimidation

Whether by accident or design, many aspects of the asylum process were described by participants as disconcerting and intimidating. Perhaps the most frequently mentioned is the way the system reserves the right to move people around the country – "we have no control over where we are moved" (*Xavier 364-365*) – without information, explanation or justification. When he arrived at the first hostel, Tariq was given confusing and seemingly senseless directions in an atmosphere of chaos.

> I said, ‘Hi, where are we going?’ ‘I don't know. don't ask.’ It was really tough, because maybe stress also crush… then they drove us to the hostel, then we asked him ‘for how long will it be?’ He said, ‘I don't know, don't ask. The other driver who will come maybe after two three days, seven days, I don't know maybe two months. Just everyday morning, every morning you come down to reception and wait. Every day you should come and wait until 12 o'clock for more info. So anytime the driver will come, he will bring a paper, will call names and numbers. If you are not there that mean you will not go with them. Then you have a big problem’. (*Tariq, 294-302*)

There is no information about how long it will take to be collected or what will come next. There is an implicit threat in being repeatedly silenced: ‘don’t ask’. This threat is made stronger by mention of a ‘big problem’ if he does not comply. The stress of this experience is heightened by the suspense of having to pack everything every morning and wait, which he did for a week before he was collected and moved to his next destination. Each of his subsequent moves were conducted in a similar way, as were the other participants’, with little to no advance notice of the move itself, and no information about where they were going. An expert-by-experience researcher noted, “At least inform... where you are going to send me. I'm not a parcel”. Farouk agreed, “they're not treating with you, the company, they're not treating with as a, as a, I can't say as a human, but the minimum right they are not giving for you. At least they have to… inform you where you are going because this is your self… maybe you can't choose the place where you stay but you should know where you are going” *(Farouk, 694-697).*

When Gail sought destitution support for the second time, she forewarned the Home Office of her changed gender identity, providing letters from the gender clinic and other organisations, and received assurances she would her to stay within their catchment area and in reach of her support networks. But when the vehicle arrived, “we were driving, he said, Oh, I'm taking you to N because that's the location I have here. And I was like, ‘that's really far’” *(237-238).* Rachida received a similar shock when she unexpectedly received a letter at her self-catering accommodation telling her she was being moved to dispersal accommodation nearly 200 kilometres away. At the time she was waiting for a decision following her substantive interview, had just found a nursery place for her child and had started studying. She was able to prevent the move by getting letters from her GP, therapist, college and a charity, but it took enormous effort on her part and social resources and language skills that many do not have.

3.4.2 Managing

As the last section suggests, there is a tremendous amount of work required of PSA just to navigate the system and their new environment. Participants in this research were tremendously resourceful, but not everyone has the language skills, connections, resources or confidence to obtain this kind of support. Farouk described the struggle to get by:

> “…[w]e are getting the you know £38, we are trying to manage ourselves during the week. It was in the middle of winter in November… and we can't go outside, there's no nothing to do there's nowhere to walk. And we are not familiarised with the with the places, with the language, with the weathers, so many things is

> there. Yeah, many things. We can't move outside, we can't, you know, integrate with the people there. So just stayed these four months. It's like jail and home. *(Farouk 182-187)*.

There is a feeling of constraint and helplessness here, but the word ‘manage’ suggests that even within these limits there is space for using agency to effect change, providing feelings of pride and satisfaction. Khadija expressed this eloquently, linking it with her own identity as a parent: “Finally, you have… a place called house or home. You can have your own room, you can lock your own door, you don't have that feeling that somebody would break into the room and and whatever… I was excited having some money to buy my own food and cook. This is the feeling that everybody at the first when they move to a self catering accommodation... I was happy, I was excited…I cooked my first meal, which felt very satisfying. I felt very happy cooking for my kids” *(Khadija 413-423*).

However, even when participants were able to exercise this limited agency, they expressed frustration and anxiety about having to manage within such severe constraints and with so little support:

> sometime I feel very exhausted because I have to do everything by my own. There are so many things in my mind at some point like last month I feel kind of very physically exhausted because I have a lot more things to do, like for work, my work on my scholarship application and job kind of thing and home… So physically I feel like very exhausted. I feel like I don't wanna go out and I don't wanna meet anyone. *(Saleema 497-503)*

It is evident from this description how the lack of support depletes PSA's existing resources, such as energy and resilience, making it difficult to acquire new ones, including those required for integration, like social networks.

3.4.3 Use and abuse of power

A number of participants reported experiencing frightening use or abuse of power, particularly in asylum accommodation. Tariq described a particularly egregious case in his hostel:

> Sometimes they play with our emotionals… They come to… the canteen: 'Hey guys, so tomorrow they will deport you, huh? Some friends in my Home Office in - what they call it? Brook House. You know Brook House? Detention centre... 'They will tomorrow send the big van they will took more than 100 to the Brook House for deporting, huh? Be ready for tomorrow, okay?' And the people they start shouting and this way they have fun. *(Tariq, 824-838).*

Others cases were more insidious. When Khadija moved to her self-catering flat:

> the manager came…I wasn't in the house at that time, I went shopping… I hadn't had a chance to clean the table… She found the milk on the table and she texted me that I am irresponsible mother who left the room dirty… and this is not acceptable and that she will report me to the Home Office. Oh my God… all the bad feelings and all the, like, the fear that I felt at that time. She will report me and say that to the Home Office and the Home Office will decide I am a not good mother and they will take my children away. (*426-436*)

Co-researchers commented, when this incident was discussed in the coding workshop, that managers often enter rooms without notification,[9] even citing cases when women were alone and in the shower.

Participants cited numerous instances in which officials caused extreme distress and even risk by using or enforcing processes without regard to the implications and apparently without considering the extent of the power they hold. One example is Gail's experience of having support removed when she 'absconded' from asylum accommodation for her own safety. For Khadija, such experiences related to her children, as when the immigration official initially refused to call for help when she arrived at the airport, heavily pregnant and in pain. When help did arrive, they said she could not take her children with her to hospital: "I was really shocked… I understand it wasn't easy – if I was giving birth where were the kids going to be at that time? – but leaving them behind was a nightmare for me" (*117-120*). Fortunately, this outcome was averted. The threat was repeated, however, when her due date approached and she was told that her two children would be put in foster care, "It was a nightmare… And then I was very worried, praying that like, (laughs) I don't give birth. I just wanna, I wanna keep it in my tummy (*131-132*). Officials did not seem to recognise or care about the anxiety such separation would provoke for any parent, let alone PSA, who have already suffered significant losses, and did not allay concerns about how they would be cared for and when they would be reunited.

Most common and anxiety-provoking for participants was when officials failed to use their power responsibly in relation to their asylum cases. Sometimes this

[9] PSA in asylum accommodation should give explicit permission for entry to their rooms or be provided with 24 hours' notification (Refugee Action, n.d.)

involved seemingly casual threats by housing providers or other actors of reporting actions or behaviour to Home Office. Other instances were in relation to the process itself, as when Khadija's substantive interview ran to five hours, by which point the crèche had closed. "I had to take my baby with me to the interview. She was interviewing me while I was breastfeeding. She used to be very tough woman. She was like, 'no, you have to tell me that'" (*847-848*). Berhane described his screening interview as distressing:

> …after 30 or 40 minutes, they took us to the interview room for the first time. Imagine we came from France by boat to Dover, and without any mental rest. Even I don't remember most of the thing what I said on the interview… that's the big problem because it needs time and we were on the stress during that time. He said for me, for example, 'you are liar'… I'm going to terminate this conversation'… that's that was not appropriate. The way of finding this truth is his job. But at least as a person, he must uh, uh, accept my word. *(FGD1, 494-515)*

In these examples, both Khadija and Berhane comment on the legitimacy of officials' concerns, but chafe under what felt like an unnecessarily harsh and adversarial approach from people in a position of considerable power, and under the feeling of being disrespected and dehumanised.

3.4.6 Summary and Discussion

This section has discussed a number of issues emerging from the data related to power and powerlessness. These can be situated on a spectrum which

has powerlessness at one end as a possibly unintended consequence of bureaucratic processes and, at the other, abuses of power (figure 12).

Figure 12: Spectrum of use and abuse of power

At one end of the spectrum is indirect control. Participants feel limited in their capacity to act because they lack material and informational resources that would allow them to more effectively navigate their environment and achieve better integration. Yeo (2020) has described this as 'sufficientarianism', or the provision of just enough support to meet the absolute minimum needs but not enough for PSA to live with dignity or fully express their agency. The next level involves direct constraints on their freedom, particularly in accommodation. Indeed, the conditions of asylum accommodation have been convincingly compared to a relationship of coercive control, containing elements of surveillance, monitoring and control over people's movements, social isolation and punishment for non-compliance (Canning, 2020; Women for Refugee Women, 2024). These measures may or may not be intended to control or constrain, though participants' accounts demonstrate that they are sometimes used punitively. Housing providers would likely argue that controlling access to the premises and monitoring movement serves a safeguarding purpose, just as restricting food in rooms helps control vermin. Regardless of their purpose, however, and as participants' accounts demonstrate, these controls are often experienced as coercive and have a negative impact on mental health and well-being. The next level of the scale builds adds an element of tacit threat, defined as overt or implied threats to report people to Home Office or take other action that

might negatively affect their case. Such threats were pervasive in the data in this research. The final end of the spectrum contains explicit abuses of power. These were sufficiently common in the data to suggest that they are normalised and, if not explicitly condoned, occur in a relatively permissive environment.

Analysing this in terms of the COR model, it seems evident that, in the absence of material and informational resources, too much PSA time and energy is expended simply trying to cope or get by. This depletion makes it more difficult for them to develop their social networks and other resources, such as skills, knowledge, vitality and resilience. At the same time, their sense of identity and self-esteem is being continually eroded by disbelief, dehumanisation and criminalisation. This supports Ryan et al.'s (2008) finding that the likelihood of negative psychological outcomes is higher when the host environment constrains or depletes a migrant's resources without providing opportunities for gain.

Despite these constraints, participants displayed considerable agency and empowerment in their timelines and their accounts. With reference to Zimmerman's (1995) model, these were primarily seen in the intrapersonal and interactional dimensions of empowerment. That is, through participants' belief in their capacity to influence over their environment and to access networks and resources to achieve their desired outcomes. This was visible in Rachida's marshalling of support to gain access to education or avoid being moved. Agency is also expressed through participants' use of various strategies to protect themselves emotionally. For Xavier, for example, this meant distancing himself from the distress of the events, describing them with almost clinical detachment and often describing himself as an assessor of the situation rather than as a participant in it.

The end of the spectrum – abuse of power – raises particular concerns that must be highlighted. The housing manager telling Rachida he was 'just doing his job' in barring her from eating in her room is eerily reminiscent of the oft-cited 'just following orders' justification for the commission of brutal acts, whether in the context of authoritarian regimes or in Milgram's prison experiment. The justification may represent a tendency to blindly obey authority (Milgram, 1965) or the use of obedience as a discursive tool to account for callous or inhumane behaviour (Gibson, 1991). It is likely that both are the case, which means there are various avenues by which abuse of power can enter the system.

The denial of a packet of biscuits is by no means an inhumane act. However, the kind of controls described by participants, particularly when enforced with implicit or explicit threats of detention, deportation or family separation, have tremendous psychological power. This is especially true when people exposed to them have fled authoritarian or totalitarian regimes. Conceptually they sit at one end of a spectrum of behaviour described by Arendt's (1964) theory of the banality of evil, which suggests that inhumane acts can be committed even in the absence of ill-will or bad intent, simply by being subordinated to the minutiae of bureaucratic processes.

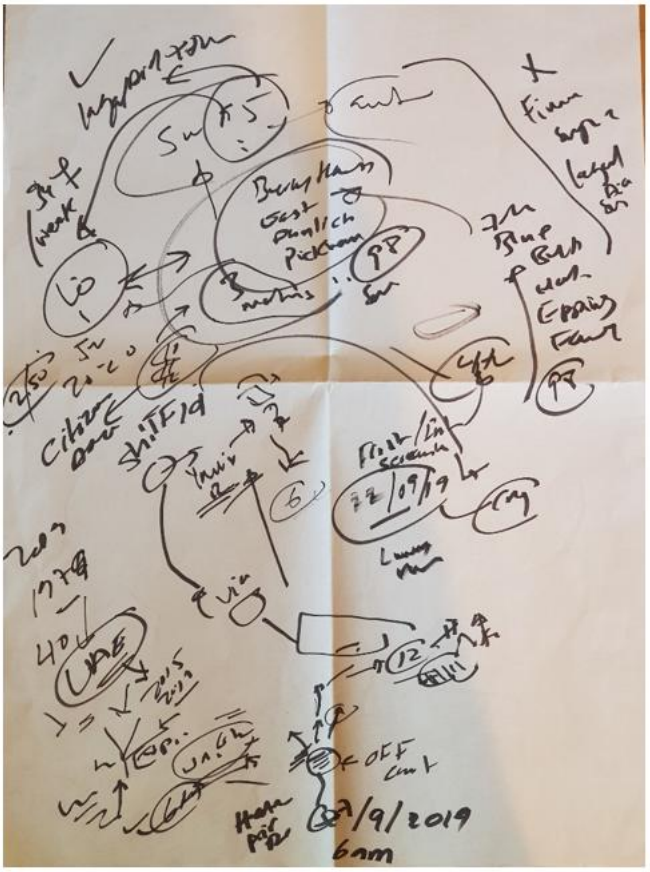
3.5 Bureaucracy

Legal and administrative processes posed a challenge for virtually all of the participants from the very start of their experience of the asylum process, and continued past its technical endpoint at the point of integration. Participants described these processes as complex, arbitrary, inconsistent, opaque and unaccountable.

3.5.1 Complex and impenetrable

The interview transcripts for this research are peppered with jargon from the asylum process and references to sections of the Immigration and Asylum Act 1999 (e.g. Section 95, providing for housing and financial support for destitute PSA). Given that most of the participants had been in the country for some time, this is perhaps unsurprising. However the disorganised appearance of some timelines, like Figure 12, suggests this familiarity was hard-won. Similarly, some participants' narrative accounts have a fever-dream quality, through which a system is barely discernible.

Figure 12: Tariq's timeline



Participants arrived in the UK in a variety of different ways and at different times, with some entering regularly (with a visa or not requiring one), some claiming asylum at the airport and some arriving by small boat or by lorry. All of the participants, including those who already had some foreknowledge of the system, struggled with the process of applying for asylum, "because I don't know the situation of the UK how the people to apply in the UK" *(Malik, FGD2, 131-132).*

Participants were keen to do something to further their case, but struggled to find a way to do this. Perversely, in some cases the more they tried, the less they achieved:

> I'm calling for the, you know, solicitor several times, 'did you get any letter from the Home Office these days? Anything?'... so yeah, we are disturbing the solicitor, solicitor is not picking the phone that time. Because you know, we are worried and we need someone to tell us any any words that…lets us feel secure. *(Farouk 178-181)*

Participants frequently spoke of seeking and collecting documentation and evidence, not only for their asylum case but for everything from education to healthcare to accommodation. Tariq expressed frustration about being granted only temporary humanitarian protection rather than refugee status after waiting two-and-a-half years for his substantive interview and submitting 214 pages documenting the fact that his claim was based on the risk of political persecution.

3.5.2 Arbitrary and inconsistent

Participants accounts highlighted again and again how difficult and destabilising was the inability to predict or understand what was coming next. This was true even when participants were describing positive experiences. Nassir described feeling anxious when a police officer came to his door, only to discover that the man was bringing a gift for his son. Reflecting on this and other kind acts Nassir said, "the British community is very welcoming and so nice and really is very supportive… but the system sometimes need some challenge" *(267-269).*

The sense of arbitrariness and the vacuum of information, perhaps coupled with public discourses about PSA and migrants, sometimes led to a perception of unfairness, or even persecution:

Expert-by-experience researcher: It's a psychological tactic in breaking you down. And it's done on purpose…it's 'oh, but they're trying their best' - One person gets to and another doesn't…

Clea: So you're suggesting it's a deliberate tactic?

Gail: I think it is.

Expert-by-experience researcher: Oh, I'm not suggesting. I'm not suggesting at all.

Krista: it appears that way. (*FGD1, 960-976*)

"My manager, she just knocked on my door and said you're being dispersed to a self-catering accommodation and I was asking like where and when. She said 'today. But, uh, we don't know where'. (pause) I think they knew where, but they didn't wanna tell me because some people will refuse to go if they knew it was a sharing house or something? *(Rachida, 209-213)*

This related to the asylum process itself as well as their entitlements while waiting:

I was lucky... Some of them it's written in their card, in their identity from the Home Office, 'not allowed to study'. Some people they are allowed to study. I don't know what is the criteria. Nobody understand. Why those not allowed to study why those allowed to study? *(Tariq, 935-938)*

Importantly, it also related to the complaints system and helpline, which participants repeatedly described as ineffectual:

> The only possible solution is you have to send your documents by email, then you have to call and again and again… we were waiting on the phone for more than two hours. Then finally, it's hang upped. *(Berhane, FGD1 472-475)*

> [T]here was nothing that I said that was abusive. They did ask, Do you speak English? Do you need an interpreter? And I said no, I speak English, so I don't need an interpreter and then they cut the call. So I'm assuming that they just probably woke up on the wrong side of the bed… *(Krista, FGD1 949-952)*

3.2.3 Opaque and unaccountable

Participants describe significant challenges in trying to obtain information about their cases from the Home Office. Even when Tariq's member of parliament intervened on his behalf little information was forthcoming:

> …they send us 'okay, the Home Office say there is no update. If there's any updates we will contact you.' Okay the same paragraph, the same sentence every time. Every time the same. it's hopeless… No response. No information. No any clarifications. *(Tariq, 864-873)*

There is generally a reported lack of urgency in communication from the Home Office. Yussuf's substantive interview was on 15 May but he did not receive an answer until August, though the date on the letter indicated it had been processed in July. Ahmed and Tariq received their decision by second-class post, though it seems surprising such urgent information would be conveyed by a relatively slow form of communication. Moreover, the letter was in English: "…one of my friends, so English

is not that good. He said if you find word congratulation, that means… you are OK. If it said reject or something - unsuccessful - then it's bad news." (1144-1145)

Gail describes how she reported a member of Home Office staff for deadnaming her, or calling her by her pre-transition name. This is illegal in the UK under the Gender Equality Act 2010 (UK Deed Poll Office, 2022). She was told:

> 'The most we can do is get them trained up on how to handle these situations. but the guy has apologised and no further action is going to be taken.' Like, this is not something that I alone have faced. Every single trans person that I have come into contact with who's been in the asylum system has gone through this, so I'm not the only person. And it's appalling that in a country where you think, 'Oh, these rights are... it's a protected characteristic by law', and it's still happening. Even a simple thing, like having the wrong name and gender and stuff on file that goes against GDPR. If I can take somebody else to court, why can't the Home Office be accountable for that? (*FGD1 317-323*)

Gail was also outed when Home Office put her deadname on a notice posted publicly, triggering the question, "Is that you? And you're a man?" (*FGD1, 309*).

3.2.4 Summary and Discussion

Bureaucracy is often viewed as neutral, or as a passive backdrop to everyday life, however in this research it was an important non-human actant. Positional mapping demonstrated how participants often framed their experience of the asylum process in terms of how they tended to privilege either the bureaucracy or the

person, with consequences for how PSA experienced themselves as respected or disrespected, and their humanity acknowledged or denied.

The data also show how bureaucracy serves to remove the possibility of accountability for failings or neglect. Rachida and Gail show two different facets of this. In Rachida's case the manager shifts responsibility from himself and attributes it to a faceless system, which leaves her no immediate avenue for recourse. In Gail's case, blame flows in the opposite direction. Despite her assertion that the treatment she experienced was common to transgender people in the asylum system, 'the system', as represented by an individual in the complaints process, attributes the fault to an individual employee rather than taking responsibility for it.

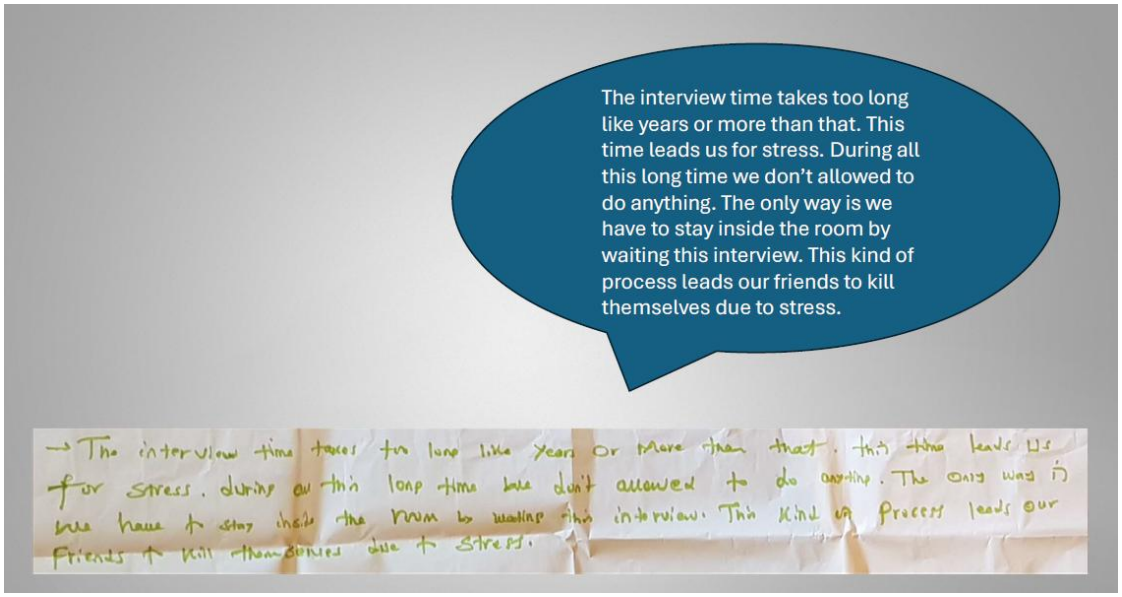
Finally, a system that is arbitrary and inconsistent is often perceived as unfair. Fairness is vital because "when you receive fair treatment this signals that you are valued by important people from your group, community, or society. And unfair treatment hurts so badly, because this communicates that your group, community, or society do not care that much about you" (Sutton, 2024). There are important implications of a system that is perceived as arbitrary and unfair. In the absence of information or logic, the natural tendency is to fill the void. PSA may be particularly inclined to do so when seeing someone else's claim being rejected. This may involve blaming themselves, with negative ramifications for their mental health, as depression and loss of self-esteem is more likely to occur when an individual attributes the cause of negative outcomes to their own qualities rather than to external factors (the internal-external dimension of the learned helplessness attributional scale (Abramson et al., 1978; Luse & Burkman, 2022). They may also blame the other, seeking reassurance in features that distinguish another's case from their own. As Malik put it, when explaining why he did not tell anyone about his

rejection, “[s]ome people when they see the person, he didn't succeed in his case, they see him this this person is uh, like, useless or... source of hazard, you mean? To them, like?” (*FGD2, 483-485*).

3.6 Time

“I think most of the refugees, they're suffering from waiting time.” (Tariq, 929)

Time is discussed last because it underpinned the experiences of all of the participants and exacerbated all other stressors. What may be bearable for few days – noise, bad food, and even anxiety about one’s future – becomes less tolerable as time goes on. PSA experience of the temporality of the asylum process is contradictory, being fixed and linear but also amorphous. The clear start and end points of the process were very salient to participants, who could recall precise dates and even times when they claimed asylum and when they received a decision. However, they also commented on the shapelessness of this time, not only due to the indefinite nature of the wait for a decision but also to the integration process. Although this is conceptualised as the ‘next phase’ after the granting of legal status, in fact it is ongoing, through things like language acquisition and the development of social ties.



Participants described the uncertainty and insecurity of the wait for a decision on their claim was most distressing:

> *Ahmed*: Very difficult time for us. Because you don't know when. *(FGD2, 1016)*

> *Yussuf*: When you just wait you don't know what will happen to you. *(560-561)*

> *Khadija*: [my solicitor] contacted the Home Office saying that she's living in uncertainty. She's in limbo. *(826-827)*

Tariq said of waiting for a decision, “this was the worst time two years and a half, waiting waiting waiting waiting waiting.” (492). It was exacerbated by knowing that his family was also waiting and struggling without his financial support and by the debt accumulating while he waited, unable to work:

> But of course I got some mental health that time… especially when… my wife told me money is finished. Now it's two years and half you said six month. And the rent, the house... we're calling my

> auntie, I call my son, friends here, there… please send my wife some money as a loan. I will work and pay later... I get a loans more than 20,000 pound at that time because, just to pay the rent, the food, things and emergency, medical emergency, medication for things you're talking about four kids and wife." (*Tariq, 509-517*)

The cause of stress was not only the amount of time waiting for the decision, but also the arbitrariness of it:

> "[E]veryone I know from the group I was with, they had their status already sorted. Except me. They late in providing an interview time and then they've been late again in giving me the outcome. (*Khadija, 819-821*)

> [Y]ou find people that they give you, like, bad idea because they are waiting… like years to get set... You feel bad. If I need to carry on or get papers straight away or wait like six, seven months or two months to get the paper. And I found people they say they're waiting for years. (*Ahmed, 890-893*)

> [M]ost of the people there, they were frustrated... when I go there they was two years staying there. So even they don't have ability to talk to anyone, just smoking weed and eating and going back to the, to the bed again. They stop everything. They stopped the college, they stopped- because they are frustrated and they are waiting, just they're waiting Home Office to deport them. *(Farouk, 224-229*)

Jamal recounted how his housemate's mental health deteriorated when Jamal received a decision and he did not, despite having been interviewed a week before

Jamal. “He feel worried, you know... every two minutes he is asking me, like Jamal, when will I get this, when… to be honest he was, you know, his situation was getting worse” (*1187-1189*). Eventually, the accommodation manager called for emergency support. Ahmed said that the reverse was also true, that waiting was made more stressful by witnessing others’ cases dragging on for prolonged periods of time, particularly when their arrival significantly pre-dated one’s own. He added that the stress of waiting drives people to bad habits or negative life choices:

> About the waiting time for the paper…Some people… start thinking like for bad thing… they start to came to night club, drinking… some people start using, like, drugs…. So, so, that one, they can affect him and they make like, they made him health problem… if you stay like 24 hours in your room, just go to the kitchen and the bathroom, you cannot think about different things and you start drinking and smoking. *(FGD2, 1335-1350)*

Within the larger wait, there are also smaller periods of waiting. Participants felt these keenly and they stood out strongly in memory. This was sometimes due to the conditions, as when Yussuf waited for his screening interview in a jail cell:

> I was counting the minutes….they said, ‘We'll keep you until you know the Home Office showed up.’ I was expecting they will show up like in a few, maximum, few hours. But they didn't show up. Couldn't sleep. It wasn’t until the next day. But you know, I was. Yeah, I was, I was, uh, still awake the whole night and and I couldn't, you know, I couldn't sleep…I remember they asked me ‘do you want anything?’ So I asked, you know, to have a book. You know what I

> wanted to keep myself busy because I don't wanna go insane. You know what I mean? I I don't wanna go crazy. *(Yussuf 81-91)*

In FGD1 the group discussed the time spent waiting for the helpline to be answered and associated frustration, particularly given the likelihood that it will disconnect:

> The waiting time is astoundingly horrible, and you get so despondent about it. (*Expert-by-experience researcher, 443*)

From an emotional perspective, there is not merely frustration and anxiety in the waiting, but also a feeling of isolation from friends and family:

> What shall I tell them? I don't want to tell them that I'm suffering here… They do not understand…if I told them I'm waiting my decision and sticking six months. They are not realising… I just keep it for myself. (*Farouk 543-546*)

Crucially, while people do their best to use waiting time productively, much of it is simply lost:

> I lost so many opportunities at the beginning because, you know, I didn't have… the right to work straight away, and at that time I I still had my experience… But because… I didn't have the right to work and and then uh, every day things get worse. And I started to just stay away from computer and not think about it and and all of that. I think that's something I wish if… I would have worked straight away in my area and I would have developed myself by now. (*Youssuf 1037-1044*)

> After six months, I think, the education will start. Also in my experience education is better from the beginning. But waiting six months is not good for me. (*Semere, 311-313*)

These examples illustrate that waiting times create stress in both the asylum decision and the processes it entails due to the uncertainty of the outcome and the unpredictability of the process.

3.6.5 Discussion

The burden of waiting in uncertainty through the asylum process is well-documented, and has even been described as a form of violence (Grace et al., 2018; Phillimore & Cheung, 2021). The experiences described above support many of the findings in the literature. These include the connection of feelings of liminality and living in limbo with negative mental health outcomes (Hartonen et al., 2022), including feelings of exclusion and confinement (O'Reilly, 2018), hopelessness, anger and suicidality (Kenny et al., 2023) and of being punished or otherwise victimised (Phillimore & Cheung, 2021). They also support Bakker et al.'s (2014) finding that the duration of time spent in asylum accommodation not only affects mental health, but also hampers socio-economic integration.

The accounts of these participants support the view that time is an important non-human actant in the asylum process. While previous research has evidenced an association between waiting and poor mental health and well-being of PSA, it has not convincingly offered an explanation. It may be hypothesised that the passage of time serves primarily to exacerbate the effects of other stressors in a relatively straightforward way: if uncertainty has a negative impact on mental health, the longer

one is exposed to it the more severe the impact. This certainly seems to be part of the puzzle. Participants who were in the system longer described this as negatively affecting their mental health and well-being, while several who got through the process relatively quickly, acknowledged this had been a benefit.

As the process map indicates, time is an all-pervasive element but it may also have a stand-alone quality. Zimbardo and Boyd (1999; 2008) contend that there are five perspectives on time, depending on whether one is predominantly oriented toward the past, the present or the future. For past and present the perspective may be either positive or negative. They describe these as past-negative, past-positive, present-hedonistic, present-fatalistic and future oriented. While the way an individual engages with the concept of time is viewed as a trait – a fairly stable tendency in their approach to past, present, and future – it can also be a state, relating to the situation at a given time (Levasseur et al., 2020). It could be argued that, irrespective of their trait orientation, the asylum process traps those going through it in a present-fatalistic mode. The view backward is inevitably tinged with loss, at best, and at worst with severe trauma. There is little to enjoy in the present, living in uncomfortable conditions with high levels of uncertainty, and the future is hidden from view and impossible to predict. This hypothesis is supported by Mulcaire et al.'s (2024) finding of the theme 'frozen in time' across 39 studies, accompanied by feelings of being trapped, unable to plan for the future, psychologically fatigued, demotivated and despondent. Brekke (2010) notes that the experience of 'directionless time', or being caught between the past and the future, is particularly challenging for young people, whose lives feel put on hold, and Allsopp et al. (2015) found that young people often connected their well-being with whether they had a projected sense of their identity and a clear future trajectory.

3.7 Summary of findings

The complexity of the model that emerged from participants' accounts reinforced the perception that situational analysis was an appropriate choice of methodology for this research. No other approach would have allowed the situation to be examined so multidimensionally or made as much of the very rich data that emerged from the timeline process. Using a form of grounded theory also meant that the experience of the system could be considered as a dynamic process. This is important because the experience of disempowerment is dynamic and progressive, forged not in a moment and by a single act but, as the process map demonstrates, through a series of actions and events taking place through interrelated processes. The methodology is complex and as-yet little-used, however, and this made design a challenge. This was overcome by seeking out further information from Carrie Friese, one of the developers of the methodology, as well as other researchers who had used it. Mapping also requires both space and time, neither of which were in great supply. A lot of the mapping was done on papers taped together and rolled up at the end of each day, largely created by the lead researcher due to other demands on the co-researchers' time and the geographic distances between them. Although information was shared as often as possible, it did result in a more limited contribution to the analysis phase on the part on the co-researchers than would have been ideal. Finally, there was an enormous amount of organisation required to manage documents related to recruitment and training of co-researchers, recruitment of participants, multiple types and versions of maps, memos and documents associated with coding. When the extent of this became clear, a full day was taken to create a new filing system that was able to better manage this.

The research identified four core and two cross-cutting components to the model of institutional disempowerment as outlined in the process map. Each of the components of this model has been discussed in some detail above. We will now look at how they come together.

Participants described feeling unsafe in accommodation both physically, due to the conditions of the buildings and fixtures and from other residents, and emotionally, from exposure to other people's distress. Emotional distress was exacerbated by social considerations, including separation from friends and family at home – with whom communication was sometimes rendered more difficult due to poor internet and/or having telephones confiscated – and those in the UK. Social insecurity was created by the constant risk of being separated from friends at short or no notice at all, often a long distance away. All of these stressors were exacerbated by time: how long people were exposed to them and the indeterminate nature of the wait. While work, education or voluntarism was recognised as a way of managing stress, paid work is denied, and access to education and volunteer work is rendered more difficult by the often remote nature of accommodation, the possibility of being moved at short notice, and constraints imposed by poor material support, including insufficient money for warm clothing in winter or to pay for transportation. The inability to engage in meaningful activity or to use their skills and abilities further erodes the individual's sense of identity and stifles their self-actualisation. Throughout there is a lack of accountability of the system to its users, from relatively petty issues like the poor functioning of the helpline, to the bureaucratic processes that put people at risk by failing to adapt to their needs or identity. Weak accountability also leaves space for abuse of power by authorities and people working in the system. The likelihood of such abuse is increased by public

discourses that vilify and denigrate migrants in general, including forced migrants. For PSA, the experience is one of misrecognition, depersonalisation and dehumanisation. It is also an experience of commodification, feeling that their well-being is valued only to the extent that it serves a profit motive for the companies that service every aspect of the industry from accommodation to immigration detention.

3.8 Implications of the findings and recommendations

Some of the distressing experiences described by participants result not from official systems, but from acts or omissions of individuals within it. However, there are enough such examples to suggest that the system is not designed in such a way as to either prevent failings and abuses or support people in it to protect themselves. This suggests several systemic and institutionalised failings. First, PSA are not given the information that they need to assert themselves or claim their rights. Second, people are discouraged from attempting to seek help, report abuse or complain, by a system that is unwieldy and unresponsive. Third, even when a fault is acknowledged, there is a failure to take responsibility. When Gail complains about being outed, for example, she is told that this is down to an individual's poor behaviour. However, when Rachida complains about issues at the hotel it is blamed on the system. This passing of responsibility back and forth between the individual and systemic levels means that no one ever takes full responsibility. It is not clear that there is any analysis of whether and how these numerous cases of heavy-handedness, misuse or abuse of power may be indicative of a systemic problem.

Some of the stressors to which people are exposed are inevitable by-products of forced displacement, but these are arguably exacerbated by the way that the

system is structured. For example the loss of identity that ensues when an individual flees their country and must re-imagine themselves in a new environment is exacerbated when they cannot use their skills, work in their profession, or maintain the continuity of their sense of self. Other stressors are created by the system, particularly those related to conditions of accommodation. The detailed discussion of the elements of the process map demonstrates strong links between its components and the well-evidenced harms caused by thwarting or frustration of self-efficacy and self-determination by limiting or removing the capacity of the individual to take meaningful action for their own well-being or form social relations that would support them. There is a strong case to be made that the denial of agency in the asylum process, particularly over prolonged and indeterminate periods of time, can result in learned helplessness and related mental health difficulties.

Whether deliberately inflicted or caused by negligence, a system designed and delivered by the state cannot be permitted to continue to cause harm to people under its care. The benefit of the model of institutional disempowerment is that, in demonstrating that all of its elements are interrelated, it provides multiple entry points for change. For example, this research recommends that the UK government set targets for the duration of the asylum process. Addressing the cross-cutting issue of time will have a positive impact on virtually every other stressor; by simply minimising the duration of people's exposure to the stresses of the process, the harms will be reduced. Another recommendation is to improving the social context of people's lives while going through the asylum process to enhance resilience and make other stressors more bearable. Introducing measures to supporting PSA to build and maintain social networks is one possible intervention.

These findings can also provide direction for psychologists and for the field of counselling psychology. For example, this research recommends that counselling psychologists working therapeutically with people with current or past experience of the asylum system ensure that therapy is as empowering as possible, for example by maximising the client's control over the therapy, by giving them control over the physical space, and by increasing the service's accountability to the client through service user groups and by reducing barriers to direct communication with the service. In addition, this research suggests that people disempowered by the asylum process feel stuck in the present, and this knowledge can inform the choice of therapeutic approaches used in working with this client group. For example, approaches focusing on the here-and-now, such as mindfulness and cognitive behavioural techniques, may be more effective than those that aim to integrate past experience or that set goals farther in the future. Counselling psychologists and services that provide support to people in the asylum process and any similarly disempowering processes should also use their position of power to advocate for change to these systems. These could include allowing people going through the asylum process to work or making it easier for them to undertake education and adapting systems to ensure that people are consulted and informed about the processes that affect them. Like other studies, the findings of this research also support the conclusion that well-being will be improved by reducing the amount of time that people are subject to the constraints of the asylum process. These reforms are not the responsibility solely of mental health professionals, and alliances should be formed with legal professionals, social workers and organisations that support PSA both to influence the system and to help create bonds between PSA and members of their own communities and bridges with host societies.

3.9 Limitations of the research

While the dataset for this research was relatively small, it was very rich, and it has been impossible to fully explore all of the avenues that this opened. These include, for example, the possible implications of different theories, such as the conservation of resources, different phases of the asylum process and experiences of different populations, such as LGBTQI+ groups. These and others referenced in the study offer opportunities for more in-depth research. Importantly, while efforts have been made to ensure inclusion of all perspectives through theoretical sampling, there are nonetheless individuals whose voices are not represented, notably those accommodated in barracks or other quasi-detention sites (APPG, 2021) and those not living in asylum accommodation or benefitting from government support – roughly 65% of all PSA (Refugee Council, 2024). The research was also conducted at a time when the processing of asylum claims had been frozen for some time, as a result of which some of the participants may have experienced both longer waiting times and spent longer periods of time in hotel contingency accommodation than is intended in the system.

As outlined in the methodology, efforts were made to ensure quality of this study with reference to recognised principles in qualitative research. Overall, these have largely sufficed to ensure transparency, coherence, consistency and rigour in the process. They could have been strengthened by more extensive respondent validation, however, and future research should build time for this into the planning. Stronger organisation from the outset could also have provided even better documentation of the process in memos and mapping. In a future study using situational analysis a more rigorous system for cataloguing the development of maps would increase transparency.

While this research has been as participatory as possible, it has not been able to ensure that co-researchers were as fully involved as would ideally have been the case. Instead of coding jointly, for example, coding was primarily done by the lead researcher and presented for validation. This is due to the availability of co-researchers and the relatively short time period over which the research was conducted, but falls short of the level of participation that was intended. The final write-up was also not done jointly both for reasons of time and workload and the requirements of the doctoral programme. There are also unavoidable limitations related to co-researchers becoming participants during the research process. These have been discussed in the methodology along with some of the measures that have been taken to mitigate risks related to power disparities, confidentiality and consistency and coherence of the research process. These measures do not, however, eliminate the difficulty that when co-researchers are also participants this creates two tiers of participant and risks some participant data being privileged over others. Future research should build this into the design and either provide an opportunity for all participants to have a role as researchers or ensure there is sufficient time for co-researchers to fully participate in coding and analysis so that their lived experience can be fully represented in the process.

3.10 Directions for further research

This research has proposed a model of institutional disempowerment that aims to explain how empowerment or disempowerment affects the mental health and well-being of service users in institutional systems. While this has been demonstrated in the asylum system, it has explanatory potential in other systems as well, including healthcare and social services. Further research would be valuable to

refine the model and to explore whether and to what extent it can be generalised. This would be enhanced by using psychometric scales to complement qualitative data on people's experiences with quantitative data about the extent of learned helplessness (Luse & Burkman, 2022) and the impact on empowerment (Bulsara et al., 2006), self-efficacy (Luszczynska et al., 2005), and self-determination (Sheldon & Deci, 1996).

It would also be useful to better understand whether time plays a solely moderating role between the system and mental health, or whether it is a variable in its own right and, if so, in what way. While it seems self-evident that there would be a benefit in reducing the length of time that PSA are exposed to any of the stressors, the findings might be useful in understand and address the impact of time on mental health and well-being in systems where it cannot easily be manipulated, such as medical treatment or social services.

4. Conclusion

This research aimed to explore the concept of institutional disempowerment and its impact on mental health and well-being. From participants' accounts of their experience of the asylum process, the study mapped four core elements of a model – safety, social connection, identity, and power and autonomy – and two cross-cutting components of time and bureaucracy. The mechanism of harm was understood with reference to well-evidenced theories demonstrating the negative impact on mental health of learned helplessness and the denial of self-determination, self-efficacy and agency. This provides a strong basis for future research on the concept of institutional disempowerment and useful evidence for immediate reflection both on how the asylum system can be made less damaging and how counselling psychologists and allied professionals can better support PSA. The overarching importance of social factors on mental health and well-being, both positive and negative, is particularly striking and may be a good entry point for change. Change, however, requires motivation and commitment, and this is in short supply in the current political climate. Despite a change of government during the final phase of this research, there has been little alteration in the policy or discourse around forced migration, particularly as it relates to people arriving irregularly in the UK. This is unfortunate because, as the section on power and autonomy has highlighted, a dehumanising socio-political context creates conditions conducive to abuses of power.

This research makes an important contribution to the field of counselling psychology by offering a model that can improve the well-being of people at some of the most difficult times in their lives and when circumstances have already

undermined their agency and resilience. It is hoped that it can and will be further developed to promote systems that respect and protect their users.

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Appendices

Appendix 1: Ethics approval and ethics amendment approval

University of East London

School of Psychology Ethics Committee

NOTICE OF ETHICS REVIEW DECISION LETTER

For research involving human participants

BSc/MSc/MA/Professional Doctorates in Clinical, Counselling and Educational Psychology

Reviewer: Please complete sections in **blue** | **Student:** Please complete/read sections in **orange**

Details	
Reviewer:	Please type your full name **Hina Dadabhoy**
Supervisor:	Please type supervisor's full name **Rachel Tribe**
Student:	Please type student's full name **Clea Kahn**
Course:	Please type course name **Prof Doc in Counselling in Psychology**
Title of proposed study:	Institutional Disempowerment in the UK asylum system

Decision on the above-named proposed research study	
Please indicate the decision:	**APPROVED**

Outlook

Re: Ethics amendment

From Trishna Patel <t.patel@uel.ac.uk>
Date Thu 16/11/2023 17:52
To Clea KAHN <u2072924@uel.ac.uk>; Nargis Awan <N.Awan@uel.ac.uk>; Psychology Ethics <psychology.ethics@uel.ac.uk>

1 attachment (52 KB)
Clea Kahn ethics amendment 16.11.2023.docx;

Dear Clea,

I hope this finds you well.

Approved.

Best wishes

Trishna

Dr Trishna Patel (she/her)
Research Director | Chair of School Ethics Committee
Professional Doctorate in Clinical Psychology
Stratford Campus | London E15 4LZ
Tel: +44 (0)20 8223 6392 | E-mail: t.patel@uel.ac.uk
Working hours: 11.00-19.00

Recent publications:

Patel, T. & Gannon, K. (in press). Research from a social justice perspective: Concepts and practice. In R. Tribe & D. Bhugra (Eds.), *Social Justice, Social Discrimination and Mental Health: Theory, Practice, and Professional Issues*. London: Routledge.

Jones, S. & Patel, T. (2022). Inaccessible and stigmatising: LGBTQ+ youth perspectives of services and sexual violence. *Journal of LGBT Youth*. doi.org/10.1080/19361653.2022.2134253

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Appendix 2: Recruitment advertisement – co-researchers

Join me as a researcher

Understanding how well-being is affected by institutional disempowerment in the asylum process

I am a counselling psychologist trainee at the University of East London. My doctoral research looks at factors that affect the well-being of people going through the asylum process. I am particularly interested in the impact of the powerlessness imposed by the asylum system on people, for example by denying them the right to work, to choose their own housing, etc.

I think it is really important to research *with* people rather than *on* them, so I am looking for three people with lived experience of the asylum process to work with me as co-researchers. This would mean working with me to design the research, conduct it, and carry out the analysis.

This will most likely involve participating in four or five fairly long meetings (between two and five hours) and accompanying me in about three to four interviews or focus group discussions per person.

This work is being conducted mainly to help me complete my doctorate, but I hope that my co-researchers will benefit as well:

- If you are studying yourself or interested in research, it is an opportunity to learn a new qualitative research technique and practice interviewing skills (I will provide training).
- If I publish this research, all of the co-researchers will be named as co-authors. I have already identified an opportunity to present the findings at a conference on migration in July.
- I will provide training in basic psychological first aid.
- I will offer a small stipend as financial compensation in the form of a voucher of the researcher's choice.

Note that some of the material discussed or analysed during the research may be distressing, particularly for people with their own difficult experiences of the system. For that reason, I am asking anyone who is still experiencing significant distress or symptoms of post-traumatic stress disorder do not put themselves forward for this role. Co-researchers must be over the age of 18.

Short biography

I have been working with refugees and forced migrants for more than 25 years, first in Canada with the Canadian Centre for Victims of Torture, then overseas and in the UK with organisations like Médecins Sans Frontières/Doctors without Borders, Save the Children, the United Nations and the Red Cross and Red Crescent Movement. I have worked in many countries in Africa (e.g. Chad, DRC, Guinea, Niger, Liberia, Sierra Leone, Sudan, South Sudan) and Asia (Bangladesh, India, Myanmar, Sri Lanka). I have a background in international human rights law and have worked particularly in protection of civilians in armed conflict. I am now re-training to work as a psychologist.

Contact information

Clea Kahn
U2072924@uel.ac.uk

Appendix 3: Memorandum of Understanding – co-researchers

Memorandum of Understanding

Research Project
on
Institutional Disempowerment in the asylum system

This memorandum of understanding (MOU) is an agreement between [the co researchers][10] about how we will work together in conducting the research on *Institutional Disempowerment* in the asylum system.

Institutional disempowerment is a concept that Clea Kahn is developing in conjunction with her professional doctorate in counselling psychology. It describes the state of mind and being experienced by service users when a social system or process is designed to inhibit or prevent the exercise of their agency. This research aims to understand this concept in relation to the asylum system.

This research is committed to not reproducing the disempowering dynamics that it is studying, and therefore aims to research *with* rather than *on* people with experience of the asylum system. The partnership that is formed by this MOU recognises the importance and value of lived experience not only as data in the research process, but also in the framing of the questions, the interpretation of data, and the articulation of the findings.

In signing this document, the co-researchers agree to the following principles and commitments.

1. *Reciprocity of benefit:* This work has been initiated for the fulfilment of Clea Kahn's doctoral requirements, however it should benefit other co-researchers and participants. Clea will therefore offer the following:
    a. The findings will be used to advocate for change in the asylum system
    b. Co-researchers will be recognised as co-authors of this piece of research in dissemination and publication, and will be acknowledged in Clea's doctoral thesis.
    c. Co-researchers will be offered a voucher of £100 from the business or organisation of their choosing. As there is unfortunately no funding for this research, this is as much as can be offered, but it is recognised that this not a fair market rate for the work.
    d. Co-researchers will receive informal training in qualitative research in general and situational analysis in particular, as well as in interviewing techniques and data analysis. They are also offered the opportunity to receive training in psychological first aid, if they wish to take it up.[11]

[10] Names redacted to maintain anonymity.

[11] Psychological First Aid (PFA) is the globally recommended training for supporting people during emergencies and offers guidance on delivering psychosocial care in the immediate aftermath of an emergency event. It is a way of providing emotional support to people of any age or background in order

e. Although it will be impossible for participants to be remunerated, efforts will at least be made to ensure that they are not out of pocket. All reasonable travel expenses will be reimbursed, and refreshments (tea/coffee, biscuits) will be offered.

2. *Commitment to research ethics:* All co-researchers agree to abide by the British Psychological Society and University of East London's codes of ethics. Key provisions include:
    a. The research should be designed and conducted in a way that ensures its quality, integrity and contribution to the development of knowledge and understanding, with respect for the autonomy and dignity of persons.
    b. *Informed consent*. Co-researchers will ensure that every person from whom data are gathered consents freely and voluntarily to participation, having been given sufficient information to enable them to make an informed choice. They should be free during the data gathering phase to withdraw or modify their consent and to ask for the destruction of all or part of the data that they have contributed within agreed and consented limits.
    c. *Protection of potentially vulnerable people.* Recognising that refugees have experienced significant prior distress, appropriate protection measures will be put in place to prevent any psychological or physical harm being caused by the research. This will include having someone in each interview or focus group trained in psychological first aid, and provision of information about local, appropriate referral resources to all participants.
    d. *Confidentiality*: Information obtained from and about participants is confidential. Data will be securely held on the UEL server and all data will be anonymised. Co-researchers agree not to share any information about the individuals that are interviewed.
    e. *Giving advice*: Co-researchers will not provide advice about any aspect of participants' physical or mental health, asylum case or any other issue that may arise during interviews, beyond the provision of contact information for appropriate support organisations.

3. *Commitment to one another:* Co-researchers agree to mutual respect and care, seeing one another's perspectives and respecting one another's opinions.

We commit to making a positive contribution, i.e. not just attacking or tearing down negative parts of the system, but also contributing to positive change.

Signed:

to reduce initial distress caused by a traumatic event or a mental health crisis. The goal of PFA is to foster short- and long-term coping and link to any available supports.

Appendix 4: Participant information sheet

PARTICIPANT INFORMATION SHEET

Institutional Disempowerment in the UK Asylum Process

Contact person: Clea Kahn

Email: u2072924@uel.ac.uk

You are being invited to participate in a research study. Before you decide whether to take part or not, please carefully read through the following information which outlines what your participation would involve. Feel free to talk with others about the study (e.g., friends, family, etc.) before making your decision. If anything is unclear or you have any questions, please do not hesitate to contact me on the above email.

Who am I?

My name is Clea Kahn. I am an postgraduate student in the School of Psychology at the University of East London (UEL) studying for a professional doctorate in counselling psychology. I am working with a small research team to conduct this research and invite you to participate.

What is the purpose of the research?

This research looks at how the asylum process affects the mental health and well-being of the people that are going through it. We are particularly aiming to understand if there is a relationship between mental health and well-being and those aspects of the asylum process that are disempowering (e.g. not being allowed to work, limited control over one's living situation, etc.). We hope that a better understanding of the relationship between these things will be helpful in advocating for changes that will make the process better for asylum seekers.

Why have I been invited to take part?

We are inviting people with experience of the asylum process to share their experience. If you have completed the asylum process or had a significant experience of it (e.g. over a year), you are eligible to take part in the study. It is entirely up to you whether you take part or not, participation is voluntary.

What will I be asked to do if I agree to take part?

If you agree to take part, you will be asked to participate in an interview, either individually or as part of a group. You will be asked to create a visual timeline of your experience of the asylum process, highlighting those experiences that felt particularly positive or negative in terms of your own mental health and well-being. During the interview or group discussion, we will explore what the contributing factors were to making these experiences positive or negative.

Individual interviews will take between an hour and 1½ hours, and group interviews will take 1½ to 2 hours. The interview will be in person and you will be reimbursed for your travel expenses

Can I change my mind?

Yes, you can change your mind at any time and withdraw without explanation, disadvantage or consequence. If you would like to withdraw from the study on disempowerment in the asylum process, you can do so at any time during the process, simply by saying that you no longer wish to participate. If you withdraw, your data will not be used as part of the research.

Separately, you can also request to withdraw your data from being used even after you have taken part in the study, provided that this request is made within three weeks of the data being collected. After this point the data analysis will begin, and withdrawal will not be possible.

Are there any disadvantages to taking part?

Some people find it very stressful to talk about their experiences of the asylum process, and sometimes it can trigger memories of stressful and painful experiences, such as trauma and loss either in one's country of origin or during one's journey. The use of the timeline is intended to minimise any such distress by keeping the discussion focused on the asylum process and by giving you the power to decide what you and do not want to talk about. You are welcome to stop or take a break at any time. At the end of the interview we will provide a list of resources in case you feel distressed or would like to access additional support.

How will the information I provide be kept secure and confidential?

The session will be recorded and a transcript will be made of the recording. These, along with the timeline, will be kept confidentially and will be stored separately from any identifying information about you (for example your name or where the interview took place). Data will only be transferred using secure email.

You will not be identified in the data or in any written materials. If we quote you or use any visual representation of your timeline, a pseudonym will be used in place of your real name and it will be anonymised. This means that we will ensure that you cannot be identified by context, for example where you are living or the names of services that you use. Pseudonymised and anonymised data may be shared with other researchers working on similar issues.

Your personal information will be kept for four weeks after your data is collected in case there is a need to follow up with you. It will then be deleted unless you would like us to keep

in touch and share the completed research with you. In this case, your contact information will be retained by Clea Kahn only until the research has been completed and then will be deleted.

Confidentiality will be strictly maintained at all times unless, in the course of your interview, you say something to suggest there is a risk to you or to someone else.

For the purposes of data protection, the University of East London is the Data Controller for the personal information processed as part of this research project. The University processes this information under the 'public task' condition contained in the General Data Protection Regulation (GDPR). Where the University processes particularly sensitive data (known as 'special category data' in the GDPR), it does so because the processing is necessary for archiving purposes in the public interest, or scientific and historical research purposes or statistical purposes. The University will ensure that the personal data it processes is held securely and processed in accordance with the GDPR and the Data Protection Act 2018. For more information about how the University processes personal data please see www.uel.ac.uk/about/about-uel/governance/information-assurance/data-protection.

What will happen to the results of the research?

The research will be written up as a thesis and submitted for assessment. The thesis will be publicly available on UEL's online Repository. Findings will also be disseminated to a range of audiences (e.g., academics, clinicians, public, etc.) through journal articles, conference presentations, talks, magazine articles, blogs and other public forums, as appropriate. In all material produced, your identity will remain anonymous, in that, it will not be possible to identify you personally.

You will be given the option to receive a summary of the research findings once the study has been completed for which relevant contact details will need to be provided.

Anonymised research data will be securely stored by Professor Rachel Tribe for a maximum of 3 years, following which all data will be deleted.

Who has reviewed the research?

My research has been approved by the School of Psychology Ethics Committee. This means that the Committee's evaluation of this ethics application has been guided by the standards of research ethics set by the British Psychological Society.

Who can I contact if I have any questions/concerns?

If you would like further information about my research or have any questions or concerns, please do not hesitate to contact me.

Clea Kahn

U2072924@uel.ac.uk.

Appendix 5: Participant consent form

Consent to participate in a research study

Institutional Disempowerment in the Asylum Process

I have read the information sheet relating to the above research study and have been given a copy to keep. The nature and purposes of the research have been explained to me, and I have had the opportunity to discuss the details and ask questions about this information. I understand what is being proposed and the procedures in which I will be involved have been explained to me.

I understand that my involvement in this study, and particular data from this research, will remain strictly confidential. Only the researcher(s) involved in the study will have access to identifying data.

I hereby freely and fully consent to participate in the study which has been fully explained to me. Having given this consent I understand that I have the right to withdraw from the study at any time without disadvantage to myself and without being obliged to give any reason. I also understand that should I withdraw, the researcher reserves the right to use my anonymous data in the write-up of the study and in any further analysis that may be conducted by the researcher.

Participant's Name (BLOCK CAPITALS)

……

Participant's Signature

……..

Date: ……..……

Researcher: Clea Kahn, U2072924@uel.ac.uk

Appendix 6 : Participant debrief form

PARTICIPANT DEBRIEF SHEET

Institutional Disempowerment in the UK Asylum Process

Thank you for participating in my research study on how the asylum process affects the mental health and well-being of the people that are going through it. This document offers information that may be relevant in light of you having now taken part.

How will my data be managed?

The University of East London is the Data Controller for the personal information processed as part of this research project. The University will ensure that the personal data it processes is held securely and processed in accordance with the GDPR and the Data Protection Act 2018. More detailed information is available in the Participant Information Sheet, which you received when you agreed to take part in the research.

What will happen to the results of the research?

The research will be written up as a thesis and submitted for assessment. The thesis will be publicly available on UEL's online Repository. Findings will also be disseminated to a range of audiences (e.g., academics, clinicians, public, etc.) through journal articles, conference presentations, talks, magazine articles, blogs, and other appropriate forums. In all material produced, your identity will remain anonymous, in that, it will not be possible to identify you personally. Personally identifying information will either be removed or replaced.

You will be given the option to receive a summary of the research findings once the study has been completed for which relevant contact details will need to be provided.

Anonymised research data will be securely stored by Professor Rachel Tribe for a maximum of 3 years, following which all data will be deleted.

What if I been adversely affected by taking part?

It is not anticipated that you will have been adversely affected by taking part in the research, and all reasonable steps have been taken to minimise distress or harm of any kind. Nevertheless, it is possible that your participation – or its after-effects – may have been challenging, distressing or uncomfortable in some way. If you have been affected in any of

those ways, you may find the following resources/services helpful in relation to obtaining information and support:

- In an emergency, The Samaritans provide 24-hour emotional support. Call free on 116 123 or send an email: jo@samaritans.org.
- The British Red Cross provide support to refugees and asylum seekers around the country and can provide information on their support line at 0808 196 3651.
- Mind can provide information about mental health support around the country by calling their Infoline at 0300 123 3393 or by email at info@mind.org.uk.
- Campaign Against Living Miserably (CALM). You can call the CALM on 0800 58 58 58 (5pm–midnight every day) if you are struggling and need to talk.
- If you prefer not to talk but want some mental health support, you can text SHOUT to 85258. Shout offers a confidential text service 24/7 if you need immediate help.
- If you're under 35 and struggling with suicidal feelings, or concerned about a young person who is struggling, call Papyrus HOPELINEUK on 0800 068 4141 (24 hours, 7 days a week), email pat@papyrus-uk.org or text 07786 209 697.
- If you identify as gay, lesbian, bisexual or transgender, you can call Switchboard on 0300 330 0630 (10am–10pm every day), email chris@switchboard.lgbt or use their webchat service. Phone operators all identify as LGBT+.

Who can I contact if I have questions/concerns?

If you would like more information about my research or have questions or concerns, please do not hesitate to contact me:

Clea Kahn at U2072924@uel.ac.uk

If you have any questions or concerns about how the research has been conducted, please contact my research supervisor Professor Rachel Tribe. School of Psychology, University of East London, Water Lane, London E15 4LZ,
Email: R.Tribe@uel.ac.uk

or

Chair of School Ethics Committee: Dr Trishna Patel, School of Psychology, University of East London, Water Lane, London E15 4LZ.
(Email: t.patel@uel.ac.uk)

Thank you for taking part in my study

Appendix 7: Timeline task description

The Timeline

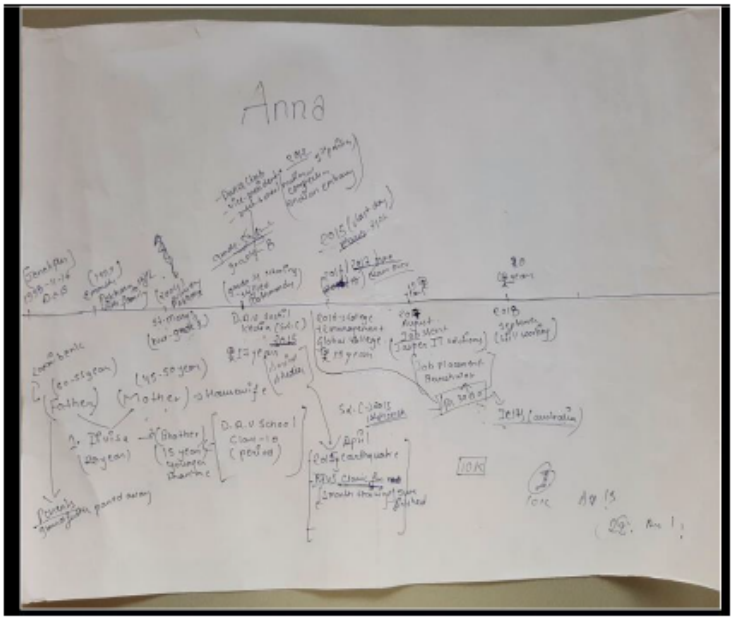
Thank you for agreeing to take part in this research on the mental health impact of the asylum process.

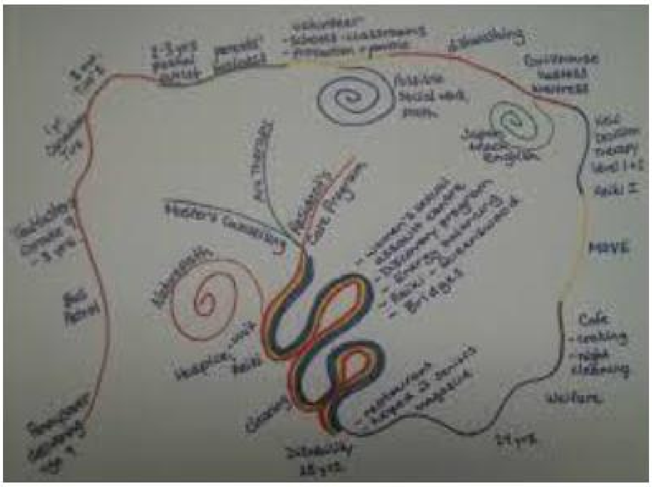
If you have participated in research before, you are probably familiar with the kind of question and answer format that the interview usually takes. This one is a bit unusual in that there is no questionnaire. Instead we ask that you prepare a timeline of your experience of the asylum process and we will ask you questions about it when we meet.

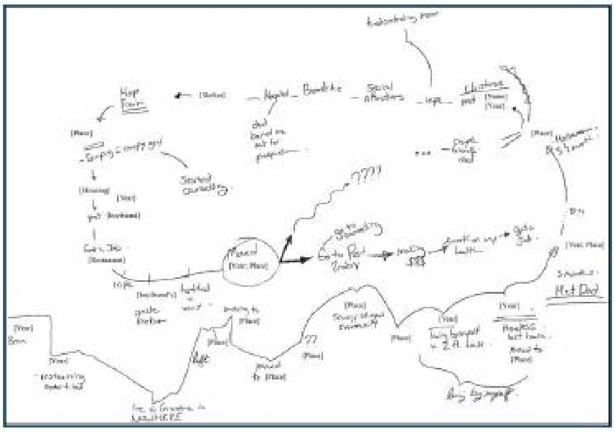
The timeline should begin when you entered the asylum process and continue until you received a decision. If you have not yet completed the process, please bring it up to the present. Please make note on the timeline of the times when you felt that you were struggling the most, and the times when you felt the most positive. When we meet, we will ask you to present your timeline to us, and we will ask you some questions about what made these times positive or negative. If you can take a picture of your timeline with your phone and send it to us, we would be very grateful.

The task should take around 20 minutes, but of course you can take as long as you like. You are also welcome to be as creative, elaborate or simple as you like and to represent the process in whatever way seems right to you. Some examples from other pieces of research are below to give you an idea of how varied they can be.

Do not hesitate to contact Clea Kahn at u2072924@uel.ac.uk if you have any questions. We look forward to meeting you!




MOVE
Welfare


Born
Met Dad


AM I A BAD DAUGHTER?
10/11
12
13
14
15
16
17
18
TODAY

Appendix 8: Sample memo – methodology

Memo – Grounded Theory and situational Analysis

Keywords: methodology

21 October 2023

Clarke et al. (2017) distinguish SA from other forms of GT as the difference between GT's focus on action and interaction against SA's focus on relationality. This raises a question for me about what it is that we are actually doing here. Are we asking the question "what is happening? What are the people and things doing?", as they argue is the case in GT (p. 108), or are we exploring relationality? This raises the question of what really is the distinction between these ways of working.

My initial feeling is that this enquiry requires both of these things to take place. We need to understand both how people and things, including the non-human, institutional and discursive environments, relate to one another and what the resulting processes are that affect the people engaged in them. Clarke et al argue that you can do both, but that they cannot be done concurrently, and stress that this would be only for larger projects, from which I take away that it would not be appropriate for this small scale of research that I am doing.

The question then becomes: is SA really the right approach for this piece of work?

26 October 2023

Reflecting on this and reading on the topic suggests to me that SA is the right approach. Within the relationships are issues of power and its converse, powerlessness. I consider the importance, for example, of the built environment. A hotel does different things depending on the perspective of the individual. This comes out of the Dawson (2014) paper, for example, which explores the discourse around hotels, including concepts of luxury and hospitality that is at odds with the experience of the person seeking asylum who experiences it as a constraining space. Grzanka (2021) speaks to the distinction between what GT does and what SA does using the example from his own research of how white racial guilt is tied to Barack Obama's presidency. He points out that although the study was not about Obama, he was part of the situation. This is doubtless similar to things like the illegal migration act (is that the right analogy?)

Key concepts that need to be fully understood include abduction, which (Grzanka, 2021, p.5) describes as "consistent analytic pivoting between concrete empirical data and more abstract, conceptual ideas, including mapping and memoing". He goes on to say that "[t]he abductive gestalt of SA may help researchers avoid getting stuck in description and failing to connect empirical, manifest evidence to conceptual frameworks that help researchers understand *what [this given situation] means*."

5 November, 2023

Reading from (Clarke et al., 2022):

- In GT the primary focus is on human action – on the processes of what is happening socially. In sharp contrast, in SA primary focus is on the situation being studied, on all the elements in the situation both human and nonhuman, and on the varied relations among these elements. This new focus is foundational to SA."
- SA theoretical foundations are broader than constructivist GT, which centres on "pragmatist interactionism" due to addition of social worlds/arenas theory and mapping.
- "SA's theoretical foundations draw upon critical interactionism (e.g. Jacobsen 2019; clarke & Sta 2007). As Charmaz (2005: 508) reminds us, justice and injustice are "enacted processes". Critical interactionism fundamentally assumes that interactionism is a conflict-based theory/methods package in which differences of perspectives, commitments, allegiances and so on actively shape social live individually and collectively." Attended to through social worlds/arenas and positionality maps.
- "Major methodological foundation and requisite for good SA research is quite serious researcher reflexivity." In contrast to the concept of the researcher as *tabula rasa* in Glaserian GT, SA endorses both literature review and extensive memos about one's pertinent experiences, commitments, social positionality, including insider/outsider positioning.
- SA aims to attend to the outliers and the cases at the margins rather than excluding them, in deliberately collecting rich and diverse data.
- "In SA, *the situation of inquiry broadly conceived becomes the key unit of analysis*. The situation of inquiry is *empirically constructed through making the four kinds of maps* and following through with analytic work and memos of various kinds.*"* P. 10
- "Each kind of map does a different kind of analytic work. Situational maps detail all the major elements found in the situation empirically. The relational maps focus on specifying relations among all those elements and allowing the analyst to discern those most interesting. The Strauss-inspired social worlds/arenas maps centre on the relational ecologies of the collective organisational and institutional entities in the empirical situation. Last, positional maps offer ecologies of the positions taken and not taken usually on contested issues in the situation." P. 17 All four are required for SA, and usually multiple versions of each. Special project maps are typically done at the end and draw analytic focus to feature specific aspects of your own project for presentations and/or publications. Social worlds/arenas and positional maps are often resented and published and are good at summarising an analysis for a chapter or an article. Situational and relational maps are less often used in presentations are more commonly part of the basic early/ongoing work of gaining analytic entrée into and tracking the project.
- SA as *abductive*: "abduction is the name of the research process of tacking back and forth between empirical research materials and trying to conceptualise them more abstractly and analytically…usually contrasted with *analytic induction*, the term originally used regarding GT by Glaser and Strauss for analysing empirical materials gathered in the field, in contrast to *logical deduction* understood as the approach of 'armchair' sociologists who thought about social phenomena but did not go into the field or collect fresh data (qualitative or quantitative)." Abduction is a third alternative.

- SA is particularly relevant to this topic because it is designed with an explicit commitment to social justice and critical research (citing Clarke & Charmaz 2014, 2019). Four specific tools:
    - Focusing on the situation as the unit of analysis, as the broader situation was and remains largely ignored in qualitative inquiry and is especially pertinent in critical analyses.
    - Attentiveness to differences, complexities, and "epistemic diversity! In the situation (recognition in the research that there are many "ways of knowing" or "local epistemologies" present in many/most situations.
    - Using SA's distinctive power analytics (social worlds/arenas maps; analytic concepts including boundary objects and implicated actors; and mapping all the actors, including those at the margins instead of only the most powerful, a radically democratic strategy per se); and
    - Developing SA's capacities for enhancing collaboration, including in making maps, particularly useful in feminist, participatory, decolonizing, Indigenous, (post)colonial and related research.
- *boundary objects* (see Leigh Star) "refers to entities that exist at the juncture of two or more social worlds… Such entities are often contested, as different social worlds want to define and use them differently – to meet that world's own needs and goals. This makes boundary objects excellent foci of research, as the *differences between worlds* are up for discussion, on the table, hence more accessible to analysis." P. 21
    - Another SA power analytic is the concept of *implicated actors*, actors silenced or only discursively present in situations. Two kinds: those physically present but silenced/ignored/made invisible by those with more power; and those not physically present but solely discursively constructed by others, usually disadvantageously. P.22
- Two published examples from counselling psychology, Grzanka, who "argues for a "critical-cartographic" turn in counselling psychology, including promoting systems-level research, deeper analyses of intersectionality, and the invigoration of qualitative inquiry on and in counseling and psychotherapy" p. 22 and Mudry, Vegter and Strong (2020).
- Page 26 tackles the issue of saturation: "means seeking out sufficient pertinent empirical data to fully understand something you are trying to analyze." Cites Jan Morse (2015: 587) and concludes that "while we can always discover more examples of something, eventually their properties will no longer be surprising and *that is when saturation has been approached." P. 26* Citing Nelson 2017 identifies the following "conceptual depth criteria":
    - A wide range of variation exists within the evidence gathered
    - Concepts/analyses are linked together in a rich network of complex connections
    - The concepts (analyses) are appropriately *subtle* rather than transparent
    - The analyses have resonance with the existing literature
    - The analyses must be credible and trustworthy.

Thinking about the relationship maps makes me wonder if I am sure what my 'situation' is. Is it the asylum process or is it PSA mental health and well-being? Not unlike the question my co-researcher asked about the interview, who owns this research, the PSA or the asylum process? Is the PSA merely an element in an asylum process or is the asylum process an element in the PSA's well-being. Certainly, the latter is how it should be.

Appendix 9: Sample coded transcript – excerpt

Tariq

Tariq Okay. So can I get you so? Yeah. Shall I like some detail on it? So this is the beginning. So okay, six o'clock.	• Situation Very precise in the time that it began. Very clear *when* it starts.
Clea 2:13 it's very precise, then, you remember exactly when you? Okay.	
Tariq 2:20 Okay. Well, it starts from the the officer counter. It's from the officer counter. When he asked me, "hi, Sir, what's your purpose for visiting the UK?" And I don't know, what's my purpose. I got my visa because I was a businessman before 25 years ago. So it was a very difficult point here. I don't want to lie to him. And I don't know what is the answer. And I push the passengers behind me to go to the counter until I find the answers in my mind. Then... I visit before UK two times as a visitor, as a tourist. So this time, what should- What should I tell him first? Or asylum seeker or refugee? What I'm what I'm why I'm here and UK? I don't know why I'm here. Because before that some circumstances happen to me and push me to leave the country but I don't know to where. All the visas as you have the US to Australia to Germany I have previous visa it was it was expired already. The only valid visa I have is UK.	• Situation Very clear *where* it starts. • Identity I don't know what my purpose is for coming to the UK. Feeling lost and confused. Who am I in this new role? • Need to provide an answer, don't know what to say. Don't want to lie. • Take a moment. • Step aside. Let others go first. *Agency*: taking back some power by taking a moment to reflect? • Power Standing in front of a gatekeeper. Change in power dynamics, from having come as a businessman or a tourist to as an asylum seeker/refugee. • Don't want to lie, but don't know the answer. • Situation/agency: All of the previous choices and mobility strips away, leaving only one option.
Clea So that was how you made your decision to come to the UK?	
Tariq yeah, it was six days remaining left to to be expired. So I don't have much to think. there's no choice. So I took my handbag	Agency No time to think. No choice. Took the first available flight.

and (makes noise like taking off) the first flight to Heathrow. Six hours to get here. I couldn't see in the airline. I don't know what I'm going to do in the UK. Every time I'm going to the UK I have my hotel booking. I know I'm going to the British Museum as a visitor but this time is totally different. I don't have money. I don't have a plan. So when he asked me what I said, I guess I'm just visiting. He said, What do you mean you guess? You don't know where you're going? No, no, no, no, I'm going to just to spend a few days to see some friends. Okay, then he saw my previous journey to UK. He said you came in June. I said Yeah, I was in June here. And it was last year or so in April. And I said yeah. Oh, you like UK too much you came two times. And I said yeah. It's really close to my heart because the community... He's the he said okay, he was very nice. But I was scared to tell him I want to apply for asylum or not. because I don't know if this is my decision to apply for asylum or not. I don't I want to see a lawyer to advise me what to do. What do I have to say? Then he said give me my passport. Okay, so you can go then this the airport I still waiting the airport for two hours. I don't didn't went out because I'm still thinking. I spent twelve hours and in the in the coffee shop called Nero inside the lobby, the waiting area. Thinking Thinking Thinking Thinking Thinking then I saw on the Facebook that the majority of Yemeni community in Sheffield. So I said maybe if I went to Sheffield I will find someone who can advise me what to do. Then I took a train and bus from the airport to to the Victoria station - so that my process will be very long (laughs). I went to the Victoria Station, then I took the bus to Sheffield. In Sheffield I don't know anyone. I just went to any Yemeni restaurant. I went to Yemeni restaurant. Then I asked the	Six hours to think about what happens when I get there, but no answers. *Identity* & *Meaning*: This feels quite wistful. I normally have a plan, know what I am doing, who I am. Now nothing. Contrast of past and present: Had reason for being here, now none. Had plans, now no plans. *Power:* *"What do you mean, 'I guess'?* Interesting tension between his internal dialogue which is reflective and thoughtful and then being pulled up by the power of the state. Quick backtrack. Discourse?: You like UK too much, you came two times – suggestion of having to justify multiple trips. Meaning: He is nice, but I am scared. Not of him, but of committing to being an asylum seeker. Why? Does this feel like an irrevocable decision? Or an admission that something has fundamentally changed? I don't know if this is my decision. You don't know? Making something up. Why? To seem normal? Because not sure what to say? More waiting. Taking time out. Twelve hours. Not sure where to go, what to do. Agency : stirred into action by the thought of other Yemenis Thinking Social media. Finding compatriots. Very important. Someone can advvise me what to do. Took train, bus, train. Sheffield IdentityWhen to Sheffield in search of Yemeni community and just looked for restaurant.

Appendix 10: Evidential support for elements of model - excerpt

Elements of Institutional Disempowerment – Evidential Support

Contents

Element 1: Social networks/social support

Theory

Social harm is a notion developed in the field of criminology to recognise forms of harm that are not encompassed in the concept of crime. This includes acts and omissions by states and institutions resulting in harm. The concept helps move away from the individualisation of culpability to recognise that certain social actions can inflict harm on individuals and communities physically, materially (financially/economically) and socially or through 'cultural safety', "encompassing notions of autonomy, development and growth, and access to cultural, intellectual and informational resources generally available in any given society" (Hillyard & Tombs, 2007, p. 17). Pemberton (2015) argues capitalist societies prioritise interpersonal harms over organisational and structural harms, naming relational harm as one form of social harm encompassing exclusion from social relationships and harms of misrecognition. Charles Taylor (2021) framed the concept of misrecognition arguing that "our identity is partly shaped by recognition or its absence, often by the *mis*recognition of others, and so a person or group of people can suffer real damage, real distortion, if the people or society around them mirror back to them a confining or demeaning or contemptible picture of themselves. Nonrecognition or misrecognition can inflict harm, can be a form of oppression, imprisoning someone in a false, distorted, and reduced mode of being" (p.21).

Description:

Importance of support by a charity is huge and common to most: Nassir, Khadija, Rachida, Tariq, Gail, Krista, Jason. This is in the identity of being an asylum seeker, but also considering other elements of identity: gender, nationality, motherhood, etc.

Many participants described the benefits on mental health of being socially connected and the negative impact of being socially disconnected. This took the following forms:

- Importance of connecting with one's own community
- Importance to mental health of making friends
- Importance to mental health of support networks, including with charitable organisations and professional supporters (therapists, mentors, solicitors).
- Negative impact on mental health of being cut off from community

- Negative impact on mental health of being surrounded by strangers/people perceived as dangerous or alien.
- Isolation of being ashamed to tell family, friends

While it is arguable that these are features of any form of migration and of fleeing one's country irrespective of the functioning of the asylum process, aspects of the UK asylum process arguably exacerbate the effect. For example: housing people with strangers with whom they do not share a culture or language; moving people at short notice and without telling them where they are going; moving people long distances from where they have established relationships.

Ahmed's account of the people in the house providing access to a GP and a bank account but no other support to help manage the stress of uncertainty and waiting is an example of how the institutions/actors fail to support well-being in the asylum process (*omission* – not providing activities, outlets, etc.). This is added to the act of *commission*, putting people in housing which is stressful on numerous levels: smells, food, noise, strangers, etc. Saleema says the same thing. Also Xavier, who recounts how the six housemates in shared housing had clashes which were not managed by the housing provider: "we had housing mates that, because it's six rooms and the housing- G4S, the housing manager wasn't a good (laughs) wasn't a good navigator of people and we had some really, real issues with personal space and understanding personal space."

This also speaks to the issue of contagion, with one person's misery making another's worse. I noted in coding Ahmed's account of waiting for the results of his interview at the same time as his brother was detained, that there were compounded stressors: he was affected by his own experience, the experiences of his brother, and the mirroring or resonance between the two. Just as laughter is contagious, so too are other emotions (is this true? Need to look this up and bottom it out, add to theory).

There is something very powerful in the account of how his pleasure in receiving his asylum determination is enhanced by it being Eid – a shared celebration – and also in the pleasure of his friends on his behalf. It is marred, however, by the knowledge that his brother is still waiting and waiting. It is illustrative of how intertwined our lives are, which is something the existing system does not seem to take into account. It seems actively isolationist, making it difficult for people to maintain existing relationships or form new ones. This is not only due to the way that housing is organised, but also the way people are moved from place to place without notice, often away from their support base.

Excellent quote from Jamal illustrates how good friends can make things better and the wrong people can make things much, much worse: "I got some nice friends, they said, you're okay. Always you choose nice friends and good friends. They can help you. But if you choose wrong, they always you know, they give you negative energies."

Evidence

Element	Who/What	Quote/comment
Importance of connecting with one's own community / one's community as a safe place and a place of support	Tariq: Arrived and went first to another city to find compatriots to guide him and a compatriot solicitor	
	Ahmed learning from other people about how to manage the waiting	"I found Sudanese guys in the, in the house. And one Syrian guy. They helped me and they told me where I have to go. Because the person that he responsible they should tell us to go to the post office to get your money... just the best thing he did I think they they register us with the GP. And then has left us. Everything they told us the people that they live with us at home. They told me about the city and you don't have to stay at home. For some people, when they came they start staying at home thinking about when they can get their their interview... does it make him feel bad.... I went out with Saeed. He told me where there's like different places to study. Even sometimes in one day we go like three different places to get like little words to improve English. Find the people their food, talking, you make friend."
	Gail: Abandoned at Gatwick airport remembers she knows someone some from the Caribbean community.	
	Ahmed: on the way to detention and then in other parts of detention locates	"You know, when who finds people from Sudan, straight away like your family, so. (Trust) Yeah, yeah. That time we don't feel bad. But he told us about, you know, the country everything. And I think

	compatriots. Importance of compatriots to understand processes	about the problem in Sudan, seeing the people come here from government of Sudan, and they make problems with them, and they send them to the prison. And they stay like one year there. So for us, like we found there for... to help us. So they help us in Birmingham, he's a good guy, (name). And even for people they wrote the cases and told him about what they, uh, have to say. They ask him, exactly. And I remember one, I think he was a teenager when he came here, and they sent him - he's from Sudan, but because of thinking, and he's waiting for the paper, and they sent him like, the family, he don't want to stay with the family because they have got dogs. He explained everything for us."
	Jamal's situation improves when he another Sudanese person moves into his room. Helpful as he gives advice	This may have been deliberate – impossible to know, but they may have made an effort to put Sudanese people together.
	Saleema gets her solicitor through family contacts. No formal support appears to have been offered through the accommodation (e.g. solicitor). Saleema is also introduced to the people at the church by someone from her own community at the accommodation.	
	Semere goes to a solicitor recommended by a friend in Eritrea. Also gets guidance on the process from others Being with friends very important.	"I have a lot of friends which has been come from my country. I will discuss all the things, they have been sharing me their experience. Because always we will have somebody before you, then you can... just the things you (unclear) from his life experience. He can guide you about the things that's facing you. If you need to communicate about something that is happening he will tell you about the things to do - this rule, this regulation."
	Youssef gets information from the officials in the detention centre, but it isn't clear to	

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	him and nothing makes sense until he talks to another detained man who speaks a little Arabic.	
Factors militating against social/family connection	Ahmed describes his brother coming out of detention and being moved to L, then to R. He had to chase from one place to another to find his brother. Time, stress and cost: L and R are more than an hour apart by train and the cheapest return ticket would cost between £15 and £20. Later, his brother was moved back to detention and then to London and then to Cardiff	"you know, I came new, but I travelled around to all the cities (all laugh). They send him L, I went to L. And then they sent him R, I went R. And then they sent him London, went to London, and then Cardiff and short and I got around all."
	Semere lost contact with his family when he lost his phone.	
	Farouk didn't have internet – harder to be in contact with family, presumably, as you can contrast this with Semere.	
Mental health impact of being cut off from family and worrying about them	Manchester focus group talk about how as Africans, as Sudanese, they have a closeness that is not understood in the UK. The idea of being apart in this way is jarring – link with culture.	
	Saleema's brother arriving and the positive impact of having him there.	
Importance to mental health of making friends Query – is there a difference between men and women in this regard? My	Khadija	"This is always my advice to newcomers: Make friends, make friends, make friends. Because these friends really help your mental health. Help you come out from everything you're struggling with. They will physically help you, support you. Practical uh, I mean solution for everything you have, honestly."
	Farouk can't share with family, relies on people in same situation	"I feel I'm not okay, I'm just visiting, Elbagir or visiting some people. T` hey're still the same like me, you know, we are sharing the worry together."

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sense is no. This is worth putting in.	Saleema	"the people you are in get in touch, you are in touch with, they are also having impact on your... it's very important to have a right people by your side so that if you are feeling low and you can get some motivation from that people."
Importance to mental health of support networks, including with charitable organisations and professional supporters (therapists, mentors, solicitors)	Tariq – helping others and personal growth.	"Because I saw a lot of people suffering. And I want to help people. This number one. Number two, to know a country and to be integrated very well, you have to work with charity. You have to work with charity because I went to the office site (?). They asked me the same question why you want to work with us? I said because you are giving A lot of services free of charge, and equality and in different levels and benefits in family clinics, all levels. So I think I can do make the lives of people much better. So I think I want to contribute in this first. second, I want to know about the rules and regulations about the country, I want to understand the country. I can understand if I'm sitting, if I'm sleeping at the room or... I want to see people. I want to do some work. I want to know, learn."
	Saleema's volunteer work both helps further her goals and allows her to make social connections, reducing her loneliness	"I engage myself and distract myself, and there is a time I feel positive - I know the this time will pass - but sometimes you are new in country, I feel like lonely? But yeah, I engage by volunteering and meeting people... There is that, there is a church in front of the hotel, there was a church in front of our hotel so, and every Friday they there was a gathering so I, they, they, allow all the immigrants to come and meet different people so, yeah, that was a good part of that accommodation."
	Xavier was getting depressed from the lack of progress in his case and the living circumstances, but volunteer work helped pull him up.	517-519 "got in a bit of a depressive state, but I I got out of it quickly though by finding some voluntary work with [organisation] and finding myself a destitution officer."

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	Also link with identity	Xavier 1089-1096: "the fact that I was helping other people around and being of use to other people really loosened up the the rope for me with my issues, where I didn't have to focus that much anymore on myself and just get- see myself fade in the background. And that was good. It worked for me I can't say will work for everyone, but for me it worked. Especially someone with my personality and how I see myself. I'm not focusing on myself and focusing on my problems. Dealing with other folks problems I got to understand my problems and how to deal with them at the same time.Especially someone like me and how I see myself" toward the end of the interview – something there about identity –
	Youssef's relationship with Susan and her helping introduce him to activities that help him feel more grounded.: • Sport • Meeting people • Learning English • Doing voluntary work.	
Negative impact on mental health of being cut off from community	Nassir describes the experience of moving into integration as isolating	"The only thing that, on that period, the uncertainty. So, and you feel like you're alone. You don't have friends, you don't have relatives, you don't have... So the loneliness is is is is very hard, was killing me. And I'm a social person. Yeah. So I'm... sometimes I speak with the window, I speak with the walls, I speak with the mirror... I realised that at that moment how people get mad. So previously, it was very strange to me, how people lost their mind. And at that point of time, I know how people lost their mind. *So many stress, stress, stress, stress, without any relief, and you feel like any single stuff in the world is fighting you. And you are fighting alone. and*

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		even sometimes, your family is fighting with you. Now there is no family or friends or daughter, no children, no wife. No dad, no mom. So you are alone here. And the thought that coming to my mind, if I sleep at night, and I pass away... What will happen?"
	Farouk describes how difficult it is to be accommodated in an area remote from others/things to do. Also feels very exposed in a place where everyone knows each other. Being doubly excluded – by distance and by social exclusion C S Kahn 32:13 So...it feels as you're talking about it feels like you felt very excluded. Farouk 32:19 Yeah, exactly. it's it's not feeling, it's true. (yeah) It's true. Physically we are excluded, you know, and mentally we are excluded.	"And I can't go anywhere and the house is was very far because it was in the... even the location you know, the location is very important for the house where we are living. It's contribute on on on this issue. So we were on the countryside. Remote. yeah is remote.... Far away. Far away from activities even from the town and you know, the young people they need to go out they need, they need to exploring things they need to talk. And it's all the, uh, you know, local people they know each other. This is the main issue. So when we are going outside they recognise we are not from here. We are new people. Yeah that's that's the thing."
	Berhane talks about the challenge of not being to learn English from others and the impact of not being able to express oneself in English	"The problem is just in speaking in English the most important thing is, communication is important. So many of friends we don't have a chance to do that. Specially, I am so lucky, I understand most of things you are saying, but when I go to Augusta street, I can't hear most of this. Yeah, uh, most of my friend they hear but they problem is they can't speak. Because it needs practice or it needs someone to (unclear). I tried to speak myself with mirror inside the house where I was staying to improve my English. That's the only reason. So we don't have contact with anyone. We don't

		have any vocabulary... I have got so many things starting from today. That is why."
	Rachida gets support from helpful nurse at the hotel and from a volunteer at a charity.	"Ohh yeah they they supported me in several ways, actually. Financially, even, like, mentally emotionally. I had support from uh, she works at the charity?... So she was very supportive, especially when the uh, when I had an issue like recently with the dispersal letter, she helped me a lot... We were talking every single day. She was trying to umm to find like ways to talk to other charities. I don't know any any any kind of solution to challenge this dispersal. She was like a family to me and I said that to her. 'Ohh, you're like a family to me.' (laughs) She was very supportive. Ohh my God, I didn't expect. I mean, it's not that I didn't expect that. I mean, I was surprised. Umm, how much she was supportive, you know?"
	Malik talks about the difficulty of going to the post office in the community where he is housed near L with no interpretation and no one knowing how to deal with them.	"[that] was really difficult because our, our English in that time not... not enough English, and then even the people to the, to the post office, they don't know our situation we are new here or... they ask us about something we don't know. They don't have interpreter there. This is the was difficult situation in that area."
	Farouk talks about the difficulty of making connections during the integration phase. Feeling a gulf between asylum seekers and the people who support them and the people in the world around. In the third quote, the feeling of exclusion is very strong. It evokes an image of people desperately trying to break through and failing.	"I hit by the community walls, then." "I'm not blaming here just some I'm telling what I feel at that time - I don't like the blaming way to play with people or blaming anyone. Yeah, but you know the communities there, it was only on the, uh, what they call, for the asylum people. Only our own communities." "I moved outside. I thought I'm going to, for the open life, but I you know I hit by the community walls then." "I don't have the exact figure but if I will assume that this every ten person, one of them they get access to the community. Every ten person, yeah, you can say one or two."