

Experiences of Being Detained within UK Immigration Removal Centres: A Phenomenological Inquiry.

By Jennifer Amy Leech

1527916

A thesis submitted in partial fulfilment of the requirements of the School of Psychology, University of East London for the degree of Professional Doctorate in Counselling Psychology

September 2021

Abstract

Persecution, conflict, famine, globalisation, climate change and human right violations continue to forcibly displace millions of people each year. Detaining people whilst immigration applications are processed is a worldwide practice. The United Kingdom (UK) has one of the largest detention estates in Europe. The health and well-being of detainees in UK detention centres has faced increased scrutiny over the last decade. A paucity in the literature was identified, which provided a rationale to conduct this research, which aimed to investigate the lived experience of people who had been held within an immigration detention centre in the UK. The research was framed through the lens of Counselling Psychology, with a particular emphasis on commitment to engaging with issues of social injustice and inequality through both theoretical and practical actions. The study's methodology was informed by Max van Manen's hermeneutic phenomenology. Semi-structured interviews were conducted with six people who had previously experienced being detained in a UK Immigration Removal Centre. Emerging themes included: The Violation of Space; Altered Time; Altered Body; Shifting Self and Relationship with the State. The research aims to highlight the experiences of those who have been detained and allow practitioners (Counselling Psychologists and other mental health clinicians) an insight into the impact this experience has on wellbeing. At service level, the research aims to highlight the difficulties detainees face when accessing support and make recommendations for clinical implications and future research.

Table of Contents

Abstract	2
Table of Contents	3
List of Tables	6
List of Abbreviations	7
Acknowledgements	8
1 Introduction and Literature Review	10
1.1 Introduction	10
1.1.1 Search strategy	11
1.1.2 Definitions of Detention	11
1.1.3 Detention in the UK	11
1.2 Legality of Detention	13
1.2.1 Policy	13
1.2.2 Detention Centre Rules	15
1.2.3 Stephen Shaw Report	15
1.2.4 Adults at Risk Policy	16
1.3 Socio-Political Context	16
1.3.1 Colonial and Post-Colonial Theory	18
1.3.2 Non-Governmental Organisation Reports	19
1.3.3 UK Media Representation	19
1.4 Experiences of Detention	20
1.4.1 Identity	21
1.4.2 Waiting and Uncertainty	22
1.4.3 Experience of Time	23
1.4.4 Privacy	24
1.4.5 Healthcare	25
1.5 Ways of Coping	26
1.5.1 Suicide and Self-harm.	26
1.5.2 Resilience	28
1.6 Mental Health Diagnosis' in Detention	30
1.7 Constructions of Trauma	31
1.8 Attachment Theory	32
1.9 Rationale for Current Study	33

1.10	Relevance and Contribution to Counselling Psychology.....	35
1.11	Research Question	36
2	Methodology	37
2.1	Overview	37
2.1.1	Defining the Science	37
2.1.2	Quantitative vs. Qualitative Research Methodologies.....	38
2.1.3	Epistemological Considerations and Reflections	38
2.1.4	Epistemological and Ontological Standpoint.....	40
2.2	Rationale for Choice of Methodology	40
2.2.2	Overview of Phenomenology	42
2.2.3	Hermeneutic Phenomenology	44
2.2.4	Rationale for Hermeneutic Phenomenology	46
2.3	Methodological Reflexivity.....	46
2.4	Data Collection	48
2.4.1	Recruitment Process	48
2.4.2	Sample.....	49
2.4.3	Inclusion and Exclusion Criteria	50
2.4.4	Interview: Setting, Style and Protocol	50
2.5	Procedure: Data Analysis	54
2.5.1	Treatment of the Data	54
2.5.2	Analytical Process	54
2.5.3	Validity and Rigour.....	54
2.6	Ethical considerations	55
2.6.1	Guidelines and Minimum Standards	56
2.7	Summary of Chapter	57
3	Analysis	58
3.1	Overview	58
3.2	Overview of Emerging 'Themes'	60
3.2.1	Spatiality The Violation of Space.....	60
3.2.2	Temporality Altered Time	67
3.2.3	Corporeality Altered Body.....	71
3.2.4	Relationality Shifting Self	76
3.2.5	Other Relationship with the State	81

3.3	Summary	83
4	Discussion	86
4.1	Overview	86
4.2	Personal Reflexivity	86
4.3	Unpacking Emerging Themes	88
4.3.1	The Violation of Space	89
4.3.2	Altered Time.....	92
4.3.3	Altered Body	93
4.3.4	Shifting Self	96
4.3.5	Other Relationship with the State	98
4.4	Summary of Chapter	99
5	Conclusion	101
5.1	Limitations of Research.....	101
5.2	Implications for Counselling Psychology.....	103
5.2.1	Clinical Implications for Social Justice.....	103
5.2.2	Clinical Implications for Services.....	104
5.2.3	Clinical implications for Therapeutic Practice	104
5.3	Implications for Future Research	108
5.4	Summary of Thesis	110
	References	111
	Appendixes.....	132
	Appendix I: Application for Research Ethics Approval.....	132
	Appendix II: Notice of Ethics Review Decision	151
	Appendix III: Request for Amendments.....	154
	Appendix IV: Change of Title Request.....	162
	Appendix V: Charity Confirmation	165
	Appendix VI: Invitation Letter	166
	Appendix VII: Consent Form.....	170
	Appendix VIII: Interview Question	172
	Appendix IX: Debriefing Letter	173
	Appendix X: Reflective Journal Extract	177
	Appendix XI: Example of Transcription	178
	Appendix XII: Example of Transcript	179
	Appendix XIII: Research Integrity Certificate	196

List of Tables

Table 1: Participant Demographics.

Table 2: Refugee Health Screener.

Table 3: Emerging Themes.

List of Abbreviations

AVID- Association of Visitors to Immigration Detainees

BBC- British Broadcasting Company

BPS- British Psychological Society

BMA- British Medical Association

CBT- Cognitive Behavioural Therapy

DA- Discourse Analysis

DSM- Diagnostic and Statistical Manual of Mental Disorders

EHRC- Equality and Human Rights Commission

EMDR- Eye Movement Desensitization and Reprocessing

EU- European Union

FDA- Foucauldian Discourse Analysis

FNO- Foreign National Offender

HCPC- Health and Care Professions Council

HMPPS- Her Majesty's Prison and Probation Service

IPA- Interpretive Phenomenological Analysis

IRC- Immigration Removal Centre

NET- Narrative Exposure Therapy

NICE- National Institute for Health Care and Excellence

NGO- Non-Governmental Organisation

PTSD- Post Traumatic Stress Disorder

UEL- University East of London

UK- United Kingdom

UNHCR- United Nations High Commissioner for Refugees

The following parts of this thesis have been redacted due to containing sensitive information:

Appendix I: Application for Research Ethics Approval-132

Appendix II: Notice of Ethics Review Decision- 151

Appendix III: Request for Amendments-154

Appendix IV: Change of Title Request-162

Appendix V: Charity Confirmation-165

Appendix X: Reflective Journal Extract-177

Appendix XI: Example of Transcription-178

Appendix XII: Example of Transcript-179

Acknowledgements

To my dear friend and flatmate Leroy, who we lost unexpectedly in January 2020. Your kindness and encouragement helped me begin this journey and your wisdom and humour will never be forgotten.

Mum, it's been so hard not being able to see much of you over the last year because of the pandemic. Thank you for your support and unconditional love- words are not enough to express my gratitude to you, but I'll keep trying.

Dad, I simply could not have done this journey if it wasn't for you, thank you for always believing in me, you forced me forwards when I wanted to curl up! You really are, *simply the best*.

Karen, my dear friend, thank you for your continued support and encouragement during the most difficult year- we will dance, sing & laugh again.

Robb & Emma- thank you for being there at the darkest times, but also the lightest- the birth of beautiful Elizabeth, who is a continued source of joy!

My brothers & sister: Dan, Robb, Jack & Lucy- thank you for being there, even though we are far apart.

My friends- you are my anchors and guide me home when I can't see- thank you.

To my cohort - you made this journey unique, and I am forever grateful to have met all of you. Dipesh- thank you for always making me laugh, even when I wanted to cry! The world of classrooms seems so far away- I look forward to the day we can all meet again.

My supervisor Dr Claire Marshall, thank you for your *unwavering* passion, commitment, kindness, knowledge, and sensitivity. You've taught me so much, and I am deeply grateful.

And finally, my participants- without you, none of this would have been possible. Your courage, tenacity and wisdom were astounding. Thank you.

*“Deep inside the hearts of each and every one of us,
we are all always reaching, for a place, that we can call home.”*

(Bola, 2018)

1 Introduction and Literature Review

This chapter will first provide an overview and critique of the literature that represents contemporary discourses on immigration detention practices within the United Kingdom (UK). The legality and policies of detention are then discussed. Thereafter, emerging themes from the reviewed literature are examined. Modern conceptualisations of distress in relation to the literature on experiences of detention will then be explored. Then the chapter will highlight the gap in the research on detention, and outline the aim of the study and the research question. Finally, the relevance of the research to the field of counselling psychology is discussed.

1.1 Introduction

An unprecedented number of people were forcibly displaced in 2019; persecution, conflict, famine, climate change and human rights violations displaced 79.5 million people (United Nations High Commissioner for Refugees (UNHCR), 2020). According to Fiddian-Qasmiyeh et al. (2016) the world currently faces a 20-year high in the number of forcibly uprooted people. Unsafe legal migration routes often result in people taking perilous journeys overseas to claim asylum (UNHCR, 2018); tragically this can lead to needless deaths. Since 2013, 15,000 migrants have died trying to reach Europe by sea (International Organisation for Migration, 2017). Europe has responded to the increase in movement of people largely with hostility, with the erection of wired fences, harsh asylum practices, and ‘refugee camps’ that have faced increased scrutiny over the last decade (Refugee Council, 2020). Many people who have experienced forced displacement and crossed state recognised borders whilst traveling to Europe enter into a country ‘illegally’ and are then faced with submitting an application to the host state so that their immigration status is legal. Other people, having crossed state recognized borders, enter into a country ‘legally’ however thereafter their visa expires. People who do not have ‘legal’ immigration status can be placed into an immigration detention centre. Detaining people whilst their immigration status is ascertained, or their immigration application is processed is a practice used by nation states worldwide.

1.1.1 Search strategy

The following databases were searched using keywords in relation to this study: 'PubMed'; 'Taylor & Francis'; 'Science Direct'; 'Sage Journals' and 'Psych Net'. The keywords used for the unrestricted search included: Immigration AND detention OR Immigration Removal Centre AND mental health AND asylum seekers OR migrants AND UK. Academic books, government reports, inquiries and charity commissioned reports were also searched.

1.1.2 Definitions of Detention

Definitions of detention differ; however, all include a proclaimed necessity to detain individuals in relation to asylum claims. UNHCR (2014) defines the practice of detention as "the deprivation of an individual's liberty, usually of an administrative character, for an alleged breach of the conditions of entry, stay or residence in the receiving country" (Majcher et al., 2020, p.6). In the UK, the British Red Cross (2018) defines detention as the "government practice of detaining asylum seekers and other migrants for administrative purposes, typically to establish their identity or to facilitate their immigration claim resolution and/or their removal" (p.7). Immigration removal centres (IRC's) were formally known as 'Detention Centres' by the UK government (Bosworth, 2014). Despite the formal terminology change in 2002, they are still widely known as 'detention centres' (Association of Visitors to Immigration Detainees (AVID), 2019). For the purposes of consistency, they will be referred to as 'detention centres' in this research.

1.1.3 Detention in the UK

The first detention centre was established in 1970; but the estate grew rapidly in the early 1990's under the former Labour Prime Minister Tony Blair (Bosworth, 2018). The UK detention estate is one of the largest in Europe. The UK and Ireland are the only European countries not 'parties to the European Union (EU) Returns Directive' (Majcher et al., 2020). Essentially, the UK government opted out of providing a time-limit for detention in the UK and, together with Ireland, they serve as the only countries in Europe who detain people

indefinitely. As of 2019, there are seven IRC'S in the UK: Morton Hall (run by Her Majesty's Prison and Probation Service (HMPPS)); Brooke House and Tinsley House (run by G4S and managed by Serco from 2020); Colnbrooke and Hammondsworth (run by Milte); Dungravel (run by GEO) and the only female centre, Yarl's Wood (run by Serco). All detention centres are managed by private companies for profit, aside from Morton Hall, a former prison, now run by the Government's prison service (McIntyre, 2018). The UK is the only nation within Europe to outsource the majority of its detention estate. In addition to detention services, the deportation process is also outsourced. Private companies have been employed by the government to deport failed asylum seekers since the 1980's (Athwal, 2014). Towards the end of 2019, 24,441 individuals entered the detention estate; this is a 3% reduction from the previous year (Home Office, 2019a). Men account for the largest percentage of detainees, in 2019 over 80% of detainees were male (Detention Action, 2019). The detention of children was restricted in 2014, although it has not been completely banned as 73 children were detained in 2019 (Migration Observatory, 2019). In 2019, the top five nationalities detained were: Albanian, Indian, Romanian, Chinese and Iranian (Home Office, 2019a). The average daily cost to keep someone detained is £92 and the annual cost of detention is approximately £89 million (The Migration Observatory, 2019). Once in detention, it is decided whether people will be released back into the community or deported to their country of origin. According to Corporate Watch (2018) approximately 12,000 migrants annually are deported to their country of origin by forceful removal from the UK and an additional 20,000 removed through the voluntary returns route; a non-forceful, voluntary return to a country of origin (The Migration Observatory, 2019).

People can be detained at different times; on arrival to the UK, whilst reporting at an immigration reporting centre (also known as 'signing'), after attending an asylum screening interview and following an arrest by a police officer, or following the end of a prison sentence (Bindmans, 2020). Foreign Nationals Offenders (FNO) who are serving a custodial sentence can be detained under immigration powers and held in prison; they can also request to be transferred to a detention centre whilst serving their sentence (Bindmans, 2020). In addition, people can be picked up from their homes (often at dawn), at their workplace, during immigration raids and at stop-and-searches at train and bus stations (Right to Remain, 2018). Oftentimes, it is immigration officials, dressed in uniform, who come to announce that they

are being taken to a detention centre. People usually arrive at detention in an armoured van and are not told how long they will be detained. Once at reception, new detainees are subject to routine health and risk assessments including documentation of any visible evidence of torture (Bosworth, 2014). According to Bail for Immigration Detainees (BID) (2019) many people who arrive at detention do not have legal representation. Whilst in the detention centre, people are mostly free to move around the building during the daytime but are forbidden to leave. If detainees are taken to hospital they are often handcuffed (Bosworth, 2014; AVID, 2018). Most people are locked in their rooms throughout the night and sometimes also during the day (Shaw, 2016). Certain things are prohibited inside detention centres, for example, Home Office policy specifically prohibits detainees from having access to a mobile phone linked to the internet or that can record, live-stream or take photographs (Home Office, 2018a). Support is limited however all detention centres provide access to a medical doctor (who usually prescribe painkillers such as paracetamol), chaplains offering religious council and all detainees are entitled to have visitors, if agreed and arranged in advance (Right to Remain, 2018).

1.2 Legality of Detention

1.2.1 Policy

According to the Home Office, the decision to detain an individual inside an immigration detention centre is in the interest of maintaining effective immigration control (UK Visas and Immigration, 2019). The Home Office state detention should be used “sparingly, and for the shortest period necessary” (Home Office, 2021, p.7). The movement of people into the UK is controlled by Border Force, a Home Office law enforcement command (Home Office, 2013). One of the priorities of Border Force is to enable the ‘legitimate movement of individuals’ into the UK, whilst preventing others who ‘may cause the UK harm’ entering into the country (Home Office, 2013). Individuals can be detained if they do not have permission, or ‘leave’, to either remain or enter the UK. Leave to remain is applicable to someone who is already residing within the UK, but who may not have permission to be there, or their visa may have expired. Leave to enter is permission to arrive into the UK (Right to Remain, 2018).

Permission is granted by British immigration officers, on behalf of the government (Home Office, 2016b). The Home Office (2021) state people are detained for the following reasons:

- To effect removal;
- Initially to establish a person's identity or basis of claim;
- Where there is reason to believe that the person will fail to comply with any conditions attached to a grant of immigration bail.

(Home Office, 2021, p.6)

The Home Office claim that the UK government does offer a presumption in favour of immigration bail and, wherever possible, alternatives to detention are used (Home Office, 2016b). FNO's are also subject to presumption in favour of immigration bail, however the decision to detain is decided alongside their risk of re-offending and their risk to the public (Oldman, 2020), this is "evidenced by a past history of lack of respect for the law" (Home Office, 2021, p.6). The power to detain is largely granted by the Immigration Act 1971. This law acts as the principle legal power and offers guidance for detention in the UK (Home Office, 2018). In addition, the 'Immigration Act 2016' serves as important guidance for detention (Refugee Council, 2020). According to the UK government, the Immigration Act (2016) will "introduce new sanctions on illegal working, prevent illegal migrants accessing services and introduce new measures to enforce immigration laws" (Home Office, 2018). According to 'Schedule 10' of the Immigration Act 2016, once people have been detained for seven-days they are eligible to apply for bail to be released from detention (Home Office, 2018). According to BID (2014) there are two options: Secretary of State Bail (Home Office Bail) or Bail from an Immigration Judge (First-Tier Tribunal). The most common option is the former, which requires people to complete a form called the '401' (BID, 2014). If bail is granted, there are certain conditions required, such as regular reporting at immigration centres. If a decision is made to deport someone, they are legally entitled to receive 72 hours' notice prior to the removal flight. Deportations are largely carried out through scheduled flights, although the UK government also uses private charter flights to remove people. Experiences and policies concerning deportation go beyond the scope of this research. Hasselberg (2016) examined the complexities of deportation and the impact deportation has on the lives of 'deportees', reporting they experienced profound uncertainty. There are several key documents regarding

the legality of detention in the UK (Green, 2018). Two of the most relevant are the 'Adults at Risk' legislation and the 'Detention Centre Rules 2001', which because of their importance in the process and impact on the detention experience, are outlined further below in sub-sections 1.2.2 and 1.2.4.

1.2.2 Detention Centre Rules

Detention Centre Rules (2001) is a statutory legislative document; statutory legislations are passed by acts of parliament, by-laws or regulations. (AVID, 2019). Two rules within this legislation are particularly relevant. Upon arrival in detention, people who are detained are subject to a general health screening known as 'Rule 34', a medical examination upon admission. The second rule is 'Rule 35'; this is intended to protect people who are deemed vulnerable from being detained; this includes, but is not limited to, victims of torture (Home Office, 2001).

1.2.3 Stephen Shaw Report

In 2016 the UK government commissioned a review into the treatment of vulnerable people in detention conducted by Stephen Shaw (2016), detainees were interviewed and several charities submitted evidence. Conclusions highlighted a plethora of recommendations for improving the welfare of detainees. The overarching concern outlined in the report was the impact of detention upon detainees' mental health. It also highlighted the need to implement a system to care for vulnerable people in detention, which Shaw (2016) reported to be lacking. In 2018 a follow up review was published by Shaw (2018), which concluded several recommendations from the original review had not been met. One of the criticisms that featured strongly in this review was an argument that the Adults at Risk Policy was not being used appropriately in practice (Detention Forum, 2018), which will now be discussed in more detail.

1.2.4 Adults at Risk Policy

In response to the Shaw report (2016), the government introduced the Adults at Risk Policy. It was also introduced to comply with section 59 (guidance on detention of vulnerable persons) of the Immigration Act 2016 (The National Archives, 2016). The Adults at Risk Policy (Home Office, 2018b) refers to people at risk (in ways that will now be defined) and who therefore should not be held in a detention centre. An individual will be regarded as being an adult 'at risk' if they have experienced a traumatic event (such as trafficking, torture or sexual violence), or if those considering detaining an individual are aware the individual is suffering from a condition, have experienced a traumatic event, or if they believe detention would render them particularly vulnerable to harm. Finally, observations from members of staff can deem an individual to be at risk (Home Office, 2018). Additionally, section 60 of the Immigration Act (2016) placed a time-limit of 72 hours on the detention of women who are pregnant (Home Office, 2016) and the Shaw Report recommended a complete ban on the detention of pregnant women (Shaw, 2016). The Adults at Risk policy has faced substantial criticism. Women for Refugee Women (2017) criticised the Adults at Risk Policy, arguing it is not being properly implemented as vulnerable women are still being detained (for example, they found 'At Risk' survivors of sexual and gender-based violence continued to be detained). Medical Justice (2018) has gone further to suggest that rather than protect vulnerable people, the policy instead places more people at risk. Namely, Medical Justice (2018) argued the policy leads people to be detained for longer periods and fails to protect vulnerable people from being detained and receiving appropriate care within detention.

1.3 Socio-Political Context

The decision to indefinitely detain an individual for administrative purposes exists within a social and political context. The UK Conservative Party have remained as the elected government (or as a coalition government) for over a decade. In 2010 the former Conservative Home Secretary, Theresa May, introduced the UK's 'Hostile Environment Policy'; a policy designed to discourage illegal migration, and to foster an environment that encouraged voluntary return for people who no longer had the right to live in the UK (Kirkup & Winnett, 2012). Immigration concerns continued to feature strongly in Conservative Party

manifestos (Conservative Party, 2015; 2017; 2019) and in Labour Party Manifestos (Labour Party, 2015). According to Migration Watch (2020) immigration was perceived to be one of the “most important issues facing the British public in 2015-2016” (Migration Watch, 2020, p.4). The 2019 Conservative Party manifesto stated, “The vote to leave the EU was, among other things, a vote to take back control of our borders.” (Conservative Party, 2019, p. 20). The detention estate incorporates part of the Home Office’s plan to control immigration in the UK (Home Office, 2021). Detainees are positioned within a system that denies and restricts certain privileges, such as freedom of movement. The existence of a nation-state is arguably used to justify the securitisation of borders, including the practice of detention in the UK. Divisions are created between those inside the state, and those outside the state, “It’s crucial condition of possibility is the distinction between an inside and an outside, between the citizens, nations and communities within and the enemies, others and absences without” (Nyers, 2018, p, xi). The political decision to detain some people, rather than all people, could be further understood through Giorgio Agamben’s ‘State of Exception’ (2003) who argued rights can be diminished by the government (or laws temporarily changed) for exceptional circumstances (such as an emergency) but their extension can become normalised (Agamben, 2003). For example, within the Human Rights Act, Article 8 protects peoples’ right to privacy (Equality and Human Rights Commission (EHRC), 2018). Yet, the Human Rights Act does not protect all people in the UK equally: exceptions are made for those who are detained. This also fosters an environment of ‘irregular’ versus ‘regular’ bodies (Nyers, 2018), those subject to rights, and those who are not. In addition, migrants are often portrayed as a ‘threat’ from outside the state (Fiddian-Qasmiyeh et al., 2016, p.5). This perceived threat provides a platform for hostile government policies which have a direct impact on migrant populations, legitimatised by the government to keep those ‘inside’ safe. Whilst immigration control remains part of the public debate, the practice of detention as a means of controlling migrant populations remains uncertain. An independent government inquiry conducted by Stephen Shaw (also discussed below in section 1.3.3) concluded “detention is not a particularly effective means of ensuring that those with no right to remain do in fact leave the UK” (Shaw, 2016, p. 191).

1.3.1 Colonial and Post-Colonial Theory

Covering in depth the racialised nature of detention is beyond the scope of this research, however it is important to touch upon. Research into detention ought to acknowledge the historical impact of colonialism because it continues to impact the dynamics of migration in the UK and worldwide. Colonialism is defined as “The policy or practice of acquiring full or partial political control over another country, occupying it with settlers, and exploiting it economically” (OUP, 2020). The British Empire was notoriously complicit and relied upon colonialism between the 16th and 18th centuries (Kennedy, 2016). Post-colonialism, though vast in its definition (Childs, 2016), broadly refers to people formally colonised by Western countries. Colonialism continues to shape modern day thought and institutions. Mayblin & Turner (2019) highlight the ‘War on Terror’ as an example of colonial influences on policy, namely, how security and the notion of ‘securing’ borders in the UK is bound with colonial rule: “Border security thus aims not only to contain people outside of the West... but also to govern communities within Western states- through enforced integration and counter-terrorism” (Hage, 2017 in Mayblin & Turner, 2020, p. 141). Thus, border practices in the UK are structured by Britain’s colonial past and deeply rooted in modernism; the notion that wealthy states are ‘modern’ whilst other, non-European, non-white, states are denounced as ‘inferior’ (Bhabra, 2009). Despite the deep entanglement colonialism has with British history, it remains *largely* absent from migration research (Mayblin & Turner, 2020). Many people detained in the UK were originally born in countries formally colonised by the British (Turnbull, 2017). According to Mayblin (2017), migration barriers that dictate who is ‘legal’ vs who is not, “re-inscribe that very immobility which characterized subjugation” (p.24). Racism is also synonymous with colonial rule. Like Colonialism, racism entails domination and power. Turnbull (2017) states detention in the UK is a racist practice and links this to broader ‘strategies of governance’. Athwal (2014) examined life and death in detention centres, linking them with disproportionate force against people of colour and a culture of racism. Colonialism created a global system of economic and wealth disparity, but it does not remain in the past, it is omnipresent and arguably further perpetuated by global capitalism, which in turn forces the movement of people. Namely, where colonialism historically forced people from their land, Mayblin & Turner (2020) argue that capitalism now shapes and dictates who can move across borders, framed by securitisation.

1.3.2 Non-Governmental Organisation Reports

Numerous reports have highlighted concerns regarding access and availability of healthcare, legal help and general conditions in detention centres (Institute of Race Relations, 2015; Women For Refugee Women, 2015, 2017; Migration Observatory, 2016; The Detention Forum, 2018; British Red Cross, 2018) and specifically regarding the legality of detention (Bar Council, 2017) and mental health concerns (British Medical Association, 2017; Campbell, 2017; Medical Justice, 2019). Criticism is also commonplace in relation to the Adults at Risk Policy, as discussed previously (Section 1.2.4). Medical Justice (2018, 2019) have delivered evidence of the harmful impacts of detention for over a decade. For example, in 2019 they highlighted the High Court's conclusion that conditions of detention amounted to 'inhuman and degrading treatment', in breach of Article 3 (prohibition of torture) of the Human Rights Act (Medical Justice, 2019). British Medical Association (BMA) (2017) raised similar concerns, highlighting the impact detention has on the mental health of those who are detained, highlighting "Consecutive government policies claiming to protect vulnerable people from the harmful impact of detention have failed to achieve their stated purpose" (BMA, 2017, p.1). Notably, BMA (2017) cite healthcare as a fundamental obligation of the state to people who are detained; yet note the current policies and practicalities in place act as obstacles to delivering care to their patients. Mental health is highlighted as in need of greater consideration inside detention; BMA (2017) argue psychological therapies available in the community ought to be equally available within detention. Notable in all reports is concern for the harmful impacts of detention, campaigns for an end to indefinite detention and the need for urgent reform regarding the Adults at Risk Policy (Home Office, 2018b).

1.3.3 UK Media Representation

Detention in the UK has faced scrutiny from the UK media. Over the last two years there have been numerous reports on the treatment of detainees. The media have reported on hunger strikes (Bulman, 2018), conditions inside IRC'S (Taylor, 2018) and the use of forced deportations using shackles and handcuffs (Gentleman, 2018). In 2018, ambulances were called to detention centres in England 10 times a week, often for overdoses and suicide

attempts (Marsh & Siddique, 2018). More recently, the wrongful detention by the UK government of people who have been victims of torture or trafficking has also faced media scrutiny. For instance, a victim of child trafficking who was wrongfully detained successfully sued the Home Office and Ministry of Justice after they were subject to an attempted rape whilst being detained at Morton Hall (Kelly, 2019). The outsourcing of detention has also faced media scrutiny, including decisions by the government to renew contracts of companies that have faced substantial criticism. For instance, Serco secured a deal to take over the management of Tinsley and Brooke House from G4S, in 2020 (Home Office, 2019a). G4S faced numerous allegations of abuse over the years (Majcher et al., 2020). This included a British Broadcasting Company (BBC) undercover documentary in 2017 which highlighted “alleged assaults, humiliation and verbal abuse of detainees by officers” (Grierson, 2020). Whilst detention centres have faced criticism from prominent charities (Medical Justice, 2018, 2019) and newspapers (Taylor, 2018) who have advocated an end to detention and hostile immigration policies; concerns regarding the potential negative impact of immigration have also featured prominently in the UK media. For example, an article in the Telegraph (Timothy, 2020) expressed concern for the lack of protection from a ‘new wave of immigration’, advocating further immigration control and offshore facilities to house asylum seekers in addition to tougher labour laws (Timothy, 2020). These concerns have largely been directed at immigration policy, rather than detention, however they demonstrate stronger immigration controls can also be favoured within UK media discourse.

1.4 Experiences of Detention

In terms of studies that have explored the lived experience of detention from the perspective of the people who have been detained in the UK, the author identified a paucity in the literature. Over two decades ago, Pourgourides, et al. (1996) conducted qualitative research that employed a grounded theory approach to examine the impact of detention on asylum seekers. Unfortunately, the original paper is no longer available online, but Pourgourides’ (1997) published a review of her research that is available. The research remains relevant; particularly her concerns over the practice of indefinite detention and the uncertainty this causes, and the detrimental impact detention can have on people’s mental health.

Pourgourides' (1997) also raised concerns for high levels of suicide and self-harm. As the research detailed aspects of detention that are covered in contemporary discourse (that will now be described in more detail), it is evident that concerns for the welfare of detainees, raised over 20-years-ago, continue to be problematic today. The following section will provide an overview of the contemporary literature that was reviewed on the topic of immigration detention in the UK. This will be organised by the main themes which emerged from the literature.

1.4.1 Identity

Within the contemporary academic literature that was reviewed, identity featured prominently. Identity is a central premise of detention, the Home Office (2021) claims people are detained because of the need to establish a person's identity. Identity in detention is a matter of policy; it determines where you may be deported to, or to which country you're 'legally' determined to belong. Identity is examined by Griffiths (2012) who carried out anthropological research over a period of two-years in one detention centre. The research aim was to explore questions of identification for people held in detention (Griffiths, 2012). Griffiths spoke with 160 detainees. Griffiths (2012) maintained detention and deportation should be 'understood in relation to discourses of identity and identification'. Participant interactions varied, from short phone calls, to face-to-face communications and observations. Griffiths approached her research from an interesting perspective, shedding light on identification from a wider political context. For example, by drawing upon the increased systems of identification in Britain and the impact this has on claiming asylum (Griffiths, 2012). Griffiths sought to comprehend the different ways identity and identification were understood; recognising these concepts expanded beyond detention, forming part of a larger discourse on identity, and legitimacy. Griffiths identified four themes surrounding identity: disputed identities, identity crimes, the un-deportable and embodied identity. The latter was particularly insightful, highlighting how claims of torture can be determined by the strength of medical reports. Although Griffiths recognised the existence of routine inspections of the body, she found medical reports were often overlooked during her research. Griffiths noted a more prominent use of the body was witnessed through the increased use of or 'bio-

metrics', such as digital data-base finger-printing verification. The reliance on biometrics, argued Griffiths, can leave people vulnerable to the state; labelled as deportable to countries where they were originally 'finger-printed' or unable to verify due to insufficient data on the detainee. The bodies of detainees were powerfully described by Griffiths as partly separated "as though part of one's person was bureaucratically trapped in a country by being fingerprinted there" (Griffiths, 2012, p. 1732). This research contributes to contemporary discourse on detention, particularly the various ways identity forms part of the experience of being detained. The pitfalls of this research perhaps rest in the ethical dilemmas of conducting research within a detention centre; detainees are there without choice, their decision to take part in the research must be considered in relation to this. Participants may fear their decision to take part may impact their application to stay in the UK or they may not reveal their experiences for fear it would negatively impact their experience inside detention. Griffiths took care to highlight she was guided by the Association of Social Anthropologists of the Commonwealth but also acknowledges the challenges: "I do note serious questions regarding the extent to which anyone in incarceration can give full consent given the wider context of forfeited rights" (Griffiths, 2012, p. 1730). Namely, people are detained, and denied the right of free movement; this denial could influence their decisions. This research offered insight from a wider context, as it explored identity from an anthropological lens.

1.4.2 Waiting and Uncertainty

As mentioned previously, there is no time limit for how long people can be detained within immigration detention centres in the UK. Contemporary academic discourse recognised the detrimental impact indefinite detention has on people's wellbeing (Griffiths, 2012). Turnbull (2016) carried out ethnographic research in detention on the impact 'waiting' had on those who were detained. She gathered fieldwork data based on time spent at four detention centres, and with detainees released and living in the community. Four main themes emerged: 'Passing time' 'On Being Stuck' (this included restricted movement) 'Playing the Waiting Game' and 'What is at Stake' (Turnbull, 2016). Waiting in detention was understood within a wider political context, described as being "subordinated to the will of others, an exercise of power that is enacted and re-enacted through acts of waiting" (Turnbull, 2016,

p.76). Turnbull posited the concept of waiting does not cease upon release, as people continued to live with uncertainty regarding immigration status'. The concept of waiting for detainees released into the community was also highlighted by Klein & Williams (2012). Turnbull expressed surprise that the majority of those she spoke with were 'compliant' with waiting; but also noted that most detainees had little choice. The notion of resilience is also highlighted by Turnbull, who stated she "met many individuals who were shattered by their detention, yet also others who showed remarkable resilience" (2012, p. 75). Resilience here was understood in a duality of either being 'shattered' by detention or showing remarkable 'resilience' and endurance through their waiting, the concept of resilience is further explored later in the chapter. Finally, Turnbull had open access to the detention centres, with a key to enter many areas. Further information on how this access could have impacted the participants may have provided additional insight into the research findings. In particular, the power she inadvertently held as a researcher with a key, as a key holds power (it can open the doors detainees are locked inside); and thus it could impact the research by creating an imbalanced power dynamic. Overall, the analysis was rich in detail and provided a unique discernment into the experience of waiting for detainees.

1.4.3 Experience of Time

In addition to conducting research on identity (Griffiths, 2012), Griffiths (2014) conducted ethnographic research on the temporal uncertainties of 160 refused asylum seekers located in the community (in Oxford), and a further 160 detainees located inside Campsfield detention centre. Griffiths argued an appreciation of time in research provided 'insights into understandings of mobility and deportability' (Griffiths, 2014). The research highlighted the effect 'not knowing' had on people who are threatened with deportation and identified four temporal themes: sticky (slowed), suspended (directionless), frenzied (fast) and ruptured (dramatic and sudden) time. Griffiths pertained previous research has neglected temporal dimensions in relation to mobility. Although does not acknowledge previous research which has recognised the impact of uncertainty with detainees released into the community (Klein & Williams, 2012). Griffiths highlighted how temporal uncertainties left refused asylum seekers feeling 'outside' of time, existing within a 'precarious, quasi-legal space' and

detainees as ‘simultaneously contending with imminent change and endless waiting’ (Griffiths, 2014). Griffiths acknowledges the detrimental impact numerous transfers have on people who have been detained, namely, the disruption to any continuity of care, for example legal help. Like Turnbull (2016) Griffiths notes the theme of ‘waiting’ as prominent in her research. Griffiths described conducting qualitative fieldwork, but did not detail the data collection, or analytical process, both of which impact the type of data produced. For example, Griffiths mentioned ‘interviews’ but did not describe the interview procedure; it is unclear if they were structured, or open-ended. Griffiths mentioned ‘speaking’ with detainees but does not describe the nature of the conversation or where they took place; for example if they were in the detainees room, or in a larger open space, and the difference this could have on the data provided. Due to the wide-ranging methods of collecting data that ethnographic research entails (observation, interviews, talking) in addition to the length of time spent inside the detention, further insight into the generation of themes from the data would have been useful. Although the research was not specific to detention, it offered rich insights into the varying ways temporality was described and understood in relation to experiences of mobility and deportation.

1.4.4 Privacy

Privacy in detention featured strongly in contemporary legal and academic discourses. As discussed previously, Article 8 of the Human Rights Act protects peoples’ right to privacy (EHRC, 2018), yet numerous reports into detention have cited privacy as being restricted or denied in detention (Women for Refugee Women, 2015; Shaw, 2016, 2018). The BMA (2017) concluded that privacy and confidentiality were difficult to maintain in detention as medical examinations were often conducted in inconvenient locations. In addition, the charity Women for Refugee Women, issued a report on the treatment of women in detention (Girma et al., 2015) and a follow up report (Lousley & Cope, 2017); both highlighted the lack of dignity and privacy in detention as negatively impacting the lives of detained women, including reports of male guards ‘bursting’ into the rooms unannounced (Lousley & Cope, 2017). Issues of privacy featured in qualitative research conducted by Arshad et al. (2018) that explored the experiences of pregnant migrant women held in detention centres in the UK. Arshad et al. (2018) employed a hermeneutic phenomenological approach to explore the experiences

of four pregnant women and two healthcare workers held in detention using semi-structured interviews. Four themes emerged from this research: 'challenges to accessing health care', 'exacerbation of mental health conditions', 'feeling hungry' and 'lack of privacy'. Arshad et al. (2018) described the lack of privacy as a direct result of reported randomized 'spot checks' of participants' rooms or during medical checks. For instance, one participant described experiencing a lack of privacy when they were taken for hospital appointments due to an immigration officer being present during an examination leaving her feeling upset. This research offered insight into the difficulties female detainees have faced and added to the academic literature on this topic. The study outlines its approach as 'hermeneutic phenomenology' but it is difficult to ascertain why the researchers chose this approach. A statement on their epistemological and ontological stance would have provided additional understanding, namely how the researcher positioned themselves in relation to the research. Although the methodology was hermeneutic phenomenology, the analysis remained largely descriptive. For example, descriptions of privacy were made alongside quotes from the participants, but how participants made sense of this lack of privacy remained vague. Finally, as reflexivity underpins phenomenological research (Finlay, 2008), a reflexive statement would have been insightful, including how the researcher felt they may have impacted the research process. According to Finlay (2009), for a phenomenon to reveal itself, the researcher must engage in 'dance'; namely, becoming aware of, and then manage, any pre-existing understandings.

1.4.5 Healthcare

Healthcare has featured prominently in the reviewed academic literature (Bosworth, 2014; Kellezi & Bosworth, 2016; Arshad et al., 2018) as well as in Non-Governmental Organisation (NGO) commissioned reports (BMA, 2017; Medical Justice, 2019). Difficulties in accessing healthcare in detention were highlighted by Afari-Mensah (2017) in her unpublished doctoral thesis which explored the 'inequalities' of healthcare access in detention. Afari-Mensah (2017) approached her research from the perspective of examining governing strategies of detention, with an interest in power relations. Interviews were conducted with two groups of people, who Afari-Mensah labels as service users (people who are detained) and service

providers (a detainee support worker, an immigration lawyer, the head of Her Majesty's Inspectorate of Prisons (HMIP) and a doctor). Apart from in one case, interviews with service users were conducted over the phone, while most of the interviews with service providers were conducted face-to-face. Afari-Mensah (2017) drew from Agamben's (2003) concepts of 'biopower' and the 'state of exception' to understand the experiences of people who access healthcare within detention, arguing detainees are treated as a threat to national security and as such labelled undeserving of basic human rights. The research concluded that hostile policies towards migrants impacted their access to healthcare in detention. It would have been helpful to gain further insight into the methodological approach. Afari-Mensah (2017) mentions adopting a phenomenological approach, but moves away from the lived experiences of those who are detained, drawing on a number of other sources; for example, secondary data is drawn on to "support and inform on the interpretation of some aspects of the interview data" (Afari-Mensah, 2017, p.69). It would be useful to gain an understanding on how the lived experiences here were merged (or not) with the secondary data. In addition, it may have been helpful to understand if the interpretation of the data differed when interviewing over the phone in comparison with face-to-face; particularly where the interviews with those who had been detained were predominantly over the phone as this may have resulted in different types of data received. This research offered an insightful examination of the difficulties detainees face in accessing healthcare in detention. Difficulties in accessing healthcare were often exasperated by a lack of trust from detainees towards medical professionals. The reported fear many detainees felt in trying to access healthcare was described as invariably due to the association medical professionals had with the Home Office; a distrust that was aided by a lack of transparency inside detention (Afari-Mensah, 2017).

1.5 Ways of Coping

1.5.1 Suicide and Self-harm.

Reviewed research demonstrated the varying ways detention can be experienced by detainees and also highlighted the prevalence of detainees who had experienced pre-existing trauma or mental health difficulties (Bosworth, 2014; Shaw, 2016; Afari-Mensah, 2017;

Arshad et al, 2018), this included victims of trafficking (Women for Refugee Women, 2017) or detainees who had suffered violence, torture or abuse in the countries they fled from (British Red Cross, 2018). Whilst reviewed literature highlights detention as having an adverse impact on the mental health of detainees (Griffiths, 2012; Turnbull, 2016; Griffiths, 2014; Afari-Mensah, 2017; Arshad et al., 2018), the process of detention can also further exasperate pre-existing trauma; increasing their vulnerability (Medical Justice, 2018). Concerns regarding suicide and self-harm as ways of coping inside detention have featured in contemporary research (Griffiths, 2012; Athraw, 2014) and reports on detention (AVID, 2019; Medical Justice, 2019). The Guardian newspaper reported in 2018 that there were two suicide attempts per day in detention centres (Taylor et al., 2018). Kellezi & Bosworth (2016) conducted a study which explored the prevalence of mental health diagnoses, self-harm and suicide at Yarl's Wood detention centre. They spoke with 25 detainees and six members of staff, using semi-structured interviews. The methodology and analytic process was not clear. They reported to find participants experienced high levels of depression, low-mood, and anxiety. In particular, they identified precarious immigration status, concerns for physical health and witnessing other people being removed, as contributing to the distress of detainees; reporting; "70% of those who had thought about killing themselves, and over 78% of those who had self-harmed" (Kellezi & Bosworth, 2016, p. 2). In relation to mental health care availability, the research claimed access was defined by distress and worry. The research also stated people feared reporting suicidal thoughts or plans in case it would impact their asylum case. Furthermore, uncertainty concerning deportation was reported to have a direct impact on the mental health of people detained. The study reported to find insufficient mental health training for staff, with detainees reporting a lack of care, although it was also noted that there were positive examples of care reported by detainees. It was not clear how the study defined self-harm, or the broader spectrum of mental health. The authors mentioned diagnoses of depression and anxiety but do not elaborate further on how these were defined or understood by the participants; understanding how this manifested in the everyday lives of the women who were detained may have provided further insight into their experiences. The research highlighted important recommendations, including the potential benefits of detainees being included in discussions concerning healthcare. It would also have been useful to include cultural consideration; namely, guidance for staff working cross-culturally. For instance, the research highlighted important concerns of language barriers

inside detention, and the impact this has on receiving care; “One of these women had taken part in a mental health support session but reported finding it very difficult and offensive. It is likely that the desensitisation technique used in that session was misinterpreted which led her to completely disengage with further health services” (Kellezi & Bosworth, 2016, p.4). The described desensitization technique (a form of behavioural therapy) may not have been a culturally appropriate method of support, rather than simply misinterpreted by the detainee. Perhaps, recommendations on cultural awareness in mental health support would have been more helpful. For example, the emphasis on disclosing feelings in counselling is not always appropriate within certain cultures (Wessells, 2009). Although the recommendations highlighted a need for more thorough understanding of mental health, it made little reference to the varying ways this can be conceptualised, and the barriers which may be in place due to socio-cultural contexts. Overall, the study highlighted important concerns for limited health care within detention, alongside helpful recommendations.

1.5.2 Resilience

The concept of resilience as a way of coping featured in the reviewed literature (Turnbull, 2016). Western interpretations of resilience are widely associated with self-help and are arguably related to neoliberal discourses which seek to place emphasis on the person, rather than the state (Cohen, 2018), “Neoliberalism... is premised on a belief in the capacity of free markets to deliver human well-being, coupled with a reduction in government expenditure and strong notions of individual responsibility” (Tseris, 2018, p.170). According to Schwarz, (2018) an emphasis on individualism neglects the variable social and economic circumstances individuals’ encounter. In relation to mental health care, neoliberalism arguably represents a move away from long-term support in favour of time-limited therapy, which is often manualised and rationalised as self-sufficient and cost-effective (Rustin, 2015). A manualised approach is advocated by Improving Access to Psychological Therapies (IAPT) (NHS England, 2018), a national programme which can recommend the use of Cognitive Behavioural Therapy (CBT) as a therapeutic intervention. CBT can favour locating ‘dysfunctional’ thoughts and replacing them with ‘functional’ thoughts; the emphasis remains with the individual (Zayfert & Becker, 2006). Like CBT, Western notions of resilience arguably do not offer a

contextualized understanding to the factors which contributes towards distress and the barriers in place for many when help-seeking, such as inequalities in access to healthcare, and the impact of government policies on healthcare (Zayfert & Becker, 2006). The concept of resilience was featured in an interpretative phenomenological analysis (IPA) conducted by Hollis (2019). This research explored the psychosocial experiences of people detained in the UK from a health and social care perspective. Hollis interviewed nine people retrospectively about their time in detention in the UK using semi-structured interviews with a particular focus on “identifying psychosocial stressors in detention... the impacts these stressors had on people who were detained, and the ways in which these individuals coped with their experiences and expressed resilience.” (Hollis, 2019, p. 78). Hollis discussed three main themes; in the first, ‘Entering Detention’; he reported participants questioned both themselves and the world on arrival; suggesting it “constituted a major assault on participants’ self-esteem, identity and worldview.” (Hollis, 2019, p. 79). Hollis was guided by Festinger’s (1957) theory of cognitive dissonance; he reported participants internalized a belief that they were becoming a criminal, or instead saw the UK as no longer holding previously perceived liberal values. The second theme, ‘Powerlessness of Detention’ highlighted participants’ sense of powerlessness borne from a neglect of both communication and physical and mental health needs. With reference to mental health, Hollis (2019) reported high levels of ‘depression, anxiety and hopelessness’. Hollis refers to models of distress associated with CBT “most participants described themselves falling into despairing patterns of ruminative thought.” (Hollis, 2019, p.85). It would have been helpful to understand how the experiences of the participants were interpreted as ‘ruminative’, as perhaps this would provide greater phenomenological insight, and arguably stay closer to their lived experiences. Resilience featured strongly in the research and the final theme ‘Resilience and Coping’. Hollis highlighted the importance of faith for participants in helping them cope with detention. Hollis takes care to acknowledge the varying ways resilience was constructed. He discussed resilience in relation to the cultural backgrounds of participants; for instance he noted one participant’s reference to detention as a “continuation of the ‘death-facing’ spirit of his Peshmerga fathers and uncles” (Hollis, 2019, p.85). The participants’ cultural lived experiences were in turn understood by Hollis through ‘transgenerational resilience with refugees and asylum seekers’. In recognising the significance of culture, Hollis referred to Antonovsky’s (1979) sense of coherence paradigm

to illuminate the experiences of resilience. This theory is based on a universal understanding of health (Antonovsky, 1979) and thus perhaps assumes people can be categorised. This is arguably not phenomenological as the lived experiences of participants are fitted into a paradigm. For example, coping was understood as engaging with activities and being 'proactive', whereas not coping was understood as 'maladaptive'; namely, not engaging with activities, and 'enduring' detention, rather than 'overcoming' or 'reframing' it. It would have been enlightening if the significance of resilience had been *further* contextualised and culturally informed, particularly as detainees come from a wide range of nationalities and cultural backgrounds (Home Office, 2019a). Furthermore, similar to Arshad et al. (2018), there was limited reflexivity. As Hollis engaged in an IPA, a reflexive statement would have been helpful. According to Finlay (2009), phenomenologists agree about the necessity to engage in a 'phenomenological attitude' arguing "the researcher strives to be open to the "other" and to attempt to see the world freshly, in a different way" (Finlay, 2009, p.12). Hollis' research offered fascinating insight into the struggles to access healthcare, communication, and general support in detention.

1.6 Mental Health Diagnosis' in Detention

Within contemporary academic discourses, the experience of people residing within immigration detention centres in the UK was often conceptualized and understood in terms of mental health diagnosis'. Reviewed research often highlighted a high prevalence of mental health diagnosis' inside detention (e.g. Kellezi & Bosworth, 2016; Hollis, 2019). A quantitative research study by Sen et al. (2017) examined the prevalence of mental health diagnosis' in UK detention centres. The aim of the research was to screen for mental health disorders and to ascertain whether psychiatric research was possible [inside detention]. The research stated there was a higher prevalence of mental health diagnosis' amongst asylum seekers and refugees in comparison to the general population but also argued that pre-existing mental health diagnosis' can be further worsened by immigration detention. They interviewed 101 male detainees, using six different questionnaires which invariably screened for numerous mental health disorders. The research highlighted some similar findings to other UK quantitative studies which examined mental health in detention (Robjant et al., 2009; Cohen,

2018; von Werthern et al., 2018). Namely, that a high prevalence of detainees are diagnosed with mental health disorders; including Anxiety, Depression and Post Traumatic Stress Disorder (PTSD), in addition to reports of self-harm and suicidal thoughts. The research found “75% of the sample screened positive for at least one mental health disorder” (Sen et al., 2017, p.631). Diagnosis of depression, personality disorders (including mood disorders with psychotic symptoms) and PTSD had the highest prevalence in detention (Sen et al., 2017). The methodology and study were clear and well-described. Notably, the study reported levels of mental health disorders inside detention were similar to levels reported inside prison populations. The use of diagnostic labels to categorise distress is perhaps understood to allow for greater generalization for suffering within detention and provides valuable data. Perhaps however, the generalisation can overlook a subjective reaction or feeling to an event. Namely, reactions are framed through the dichotomies of normal and pathological (Khoury et al., 2014) regardless of the context. Furthermore, diagnostic labels are developed through Western paradigms, understood through the lens of the Diagnostic and Statistical Manual of Mental Disorders (DSM) (American Psychiatric Association (APA), 2013). There is an assumption by the DSM that diagnostic labels exist in isolation, as objective truths (Szasz, 2010), which can be diagnosed, rather than individual reactions to an event. This will be discussed further below.

1.7 Constructions of Trauma

According to Lee & James (2012), trauma is “the emotional shock we feel following an extremely stressful or traumatic event... often unexpected, unpredictable, overwhelming, highly life-threatening” (p.3). The word ‘trauma’ originates from Greek, meaning ‘wound’ (Harper, 2019). In a contemporary context, the word trauma is often associated with forced migration, to an extent that Papadopoulos (2001) argues that the public is saturated by the trauma discourse. Trauma-informed approaches in migration often focus on refugees as ‘passive’ victims (Malkki, 1995); thereby framing them as powerless. There is often a power imbalance that requires on the one hand someone to have the knowledge and ‘fix’ the trauma, and on the other, assume someone needs to be fixed according to this model of distress; “The trauma discourse... makes Western ‘experts’... turning refugee lives into a site

where Western ways of knowing are reproduced” (Rajaram, 2002, p. 247). This model is arguably played out in contemporary discourses on detention in the UK, namely, the use of diagnostic labels such as PTSD, which are widely applied to the experiences of people who have been detained (Kellezi & Bosworth 2016; Sen et al., 2017; Hollis, 2019). This is helpful as a guide to understanding general distress within a Western paradigm. However, it can divert attention away from the experiences of those who are being categorised, assuming trauma discourses can be universally applied (Summerfield, 1999). Moreover, by specifying certain diagnostic categories, social, religious and cultural considerations can be missed or viewed within these paradigms. For example, Papadopoulos (2002) argues the notion of ‘returning home’ can be overlooked within trauma discourses, despite it being a fundamental aspect of human lives (Bollnow, 1961). Despite the examination of the difficulties of the trauma paradigm in relation to migration, it is also recognised that trauma features strongly in contemporary discourses and mainstream psychology. Importantly, treatment by mental health practitioners is often guided by recommendations which are diagnostically based, and a diagnosable mental illness is a pre-requisite for access to mental health services (Division of Clinical Psychology, 2011, p.24). Thus, diagnostic labels continue to inform treatment guidelines.

1.8 Attachment Theory

Identity featured strongly in the reviewed literature, both the process of identification and the concept of identity formation inside detention centres (Griffiths, 2012; Hollis, 2019; Home Office, 2021). A psychodynamic theory of identity remains part of the discourse within counselling psychology and will be briefly discussed below in relation to immigration detention. However, it is acknowledged there is a tension with the epistemological underpinnings of this research, as attachment theory is partly based on a deterministic developmental framework that views human being as biologically programmed toward attachment (Reuther, 2014). However, attachment theory also espouses that human beings are both ‘attuned and oriented’ within a social environment (Reuther, 2014). This research also acknowledges that human beings do not exist in isolation, rather they are situated within a social, historical, and cultural context; this is discussed in greater detail in the Methodology

Chapter. The formation of identity could be understood through John Bowlby's (1907-1990) 'Theory of Attachment' (Bowlby, 1988), although covering in depth the theory of attachment is beyond the scope of this research. Bowlby's theory of attachment is based on the premise that human beings are born with an innate drive to form attachments with a primary caregiver as infants. If a secure attachment is formed, they feel safe to explore, knowing when they return, their primary caregiver will be there. A secure attachment in infants, according to Bowlby (1988), leads to healthy development, and the ability to make secure attachments as adults. An individual's previous experience of relating to their primary caregivers serve as a foundation for adult human relationships; "attachment theory regards the propensity to make intimate emotional bonds to particular individuals as a basic component of human nature" (Bowlby, 1988, p.120). Bowlby argued that interaction with a primary caregiver allowed an infant to develop mental representations of the self, and others (Bowlby, 1988). The type of attachment an infant forms with a primary caregiver will have an impact on how identity forms later in life; thus, identity formation is a product of the co-construction with others (Pittman et al., 2011). Attachment theory highlights the inter-subjective nature of humans; "Bowlby's paradigm offers a framework for the early co-construction of representations of the self and other/world, with clear implications for behaviour across the life span" (Pittman et al., 2011, p. 36). The importance of the social environment also plays a key role in an individuals' ability to form healthy connections. According to Cozolino (2016) attachment patterns are not fixed, rather they are fluid, and can be adapted later in life due to the brains' neuroplasticity; its ability to adapt according social interactions and the environment (Cozolino, 2016). Thus, the environment and social connections in adulthood can have a big impact on our ability to form healthy connections with our self and with others. Taking this as a starting point one might understand that detention, even though an administrative process, can isolate people from society, and is in direct opposition of the intersubjective nature of individuals. The ability to connect with others can be disrupted by an environment that separates detainees from family and friends outside of detention.

1.9 Rationale for Current Study

The reviewed research highlighted detention as having a detrimental impact on the lives of people detained. This chapter began with an exploration of detention in the UK, including the

policies and socio-legal frameworks which govern detention practices. This included an examination of the Home Office's own policy on safeguarding vulnerable people, and the criticisms this has subsequently faced. The historical significance of colonialism was also highlighted, with specific reference to Post-Colonial theory. The epistemological framework of this research acknowledged the subjective experiences of people who are detained cannot be objectified and labelled, and should be understood in context, as they are orientated in time and space. It is recognised that knowledge is co-constructed and thus dependent on an individual's relationship with the world. Reviewed literature on the experience of detention highlighted a growing concern for the detention policies in place which have a direct impact on the lives of people detained. The concept of identity, the experiences of waiting and time, limited privacy and healthcare all emerged as contributing to a negative experience in detention. Themes within the reviewed literature were often examined through Western concepts of trauma and mental health diagnosis. Reported ways of coping in detention included suicidal thoughts and self-harm to escape painful feelings, but also resilience. According to Schwarz (2018), there is a growing call for research which seeks to situate research in context, rather than to rely on paradigms to illustrate migrant experiences. The available phenomenological research provided helpful insights into the experiences of being detained. Specific to phenomenological research, Hollis' (2019) research was an insightful approach from a health and social care perspective yet its link to wider models of distress or theories of resilience made it at times difficult to grasp at the lived experiences of detainees, furthermore reflexivity was vague, which Finlay (2009) highlighted as an important aspect of phenomenological research. Another phenomenological study Arshad et al. (2018) highlighted the lack of healthcare in detention and was descriptive in its analysis, yet interpretation was equivocal. There was a gap in research from a psychological, phenomenological perspective which sought to understand the lived experiences of being detained, with a particular emphasis and commitment to engaging with issues of social injustice and inequality.

To address this gap, this research adopted a qualitative method, informed by hermeneutic phenomenology, guided by Max van Manen (1997). It sought to stay close to the lived experiences of those who were detained and was careful to not impose further paradigms. It was heuristic, there were no prescribed steps to follow, which was arguably more appropriate

when working cross-culturally. Participants have already faced impositions, some have been forced to leave their country of birth due to social-normative influences, others have faced stigma in relation to their immigration status in the UK. Detention arguably imposed further impositions, such as limited access to healthcare. This research also recognised the role of the researcher in the research process, acknowledging that knowledge is co-constructed, and thus cannot be bracketed. This will be discussed further in the following chapter.

1.10 Relevance and Contribution to Counselling Psychology

This research inquired upon the individual experiences of people who have experienced detention and acknowledges that these experiences are unique to the participants. This aligns with the values of Counselling Psychology, which seeks to reduce distress and promote wellbeing by focusing on the subjective experience of individuals (British Psychological Society (BPS), 2019). The values of Counselling Psychology also recognise the co-constructed nature of human relationships, and in doing so does not assume there is one way of working with people in distress; rather, it embraces a pluralistic approach (BPS, 2019). The implications of the conclusions drawn from this research on the discipline of Counselling Psychology, including implications for practice (Health and Care Professions Council (HCPC), 2017) will be further discussed in the conclusion chapter. This research also provided a unique contribution to the field of Counselling psychology and its commitment to social justice. According to the BPS (2017), social justice remains an integral part of Counselling psychology. Addressing and researching the experiences of detention in the UK highlights an important social reality; detention represents wider psychological, political, and social issues. Goodman (2009) argues that the social justice work of counselling psychologists is both scholarship and professional action. Furthermore, the unprecedented number of people who continue to be displaced worldwide (UNHCR, 2019) suggests detention in the UK will continue to feature in contemporary discourses. Counselling psychology encourages the importance of looking beyond diagnostic categories; this research creates space for human experiences of detention to be voiced and understood within a wider context; “If we recognise that the impact of social reality has a large part to play in either supporting well-being or causing and contributing to distress, we will begin to see the flaw in our current logic of treating individuals (Thatcher &

Manktelow, 2007). Counselling Psychologists cannot be separated from these realities (Srawbridge & Woolfe, 1996).

1.11 Research Question

Research methods provide ways of approaching, and hopefully answering, research questions. According to Willig (2008) a research question “calls for an answer that provides detailed descriptions and, where possible, also explanations of a phenomenon” (p. 20). In contrast to a hypothesis, which seeks to make an objective claim or prediction, a research question is open-ended. This factor is important as it helps identify the phenomena to explore, and in particular the phenomena of being detained in UK detention centres. The question for this research is: *How do people experience being detained within UK detention centres?* The next chapter will examine the methodological approach taken to explore this question.

2 Methodology

2.1 Overview

This chapter will focus on the choice of methodology used in this research, and why this methodology was chosen to answer the research question outlined in the previous chapter. The epistemological and ontological underpinnings will be discussed in relation to this research and their role in informing the rationale for choosing a hermeneutic phenomenological methodology. The different methodologies considered will also be discussed. Following this, the practicalities of this research are discussed. Namely, the process of data collection, data analysis, and the ethical considerations.

2.1.1 Defining the Science

According to the BPS (2019) the aims of a Counselling Psychologist are as follows:

“to reduce psychological distress and to promote the wellbeing of individuals by focusing on their subjective experience as it unfolds in their interaction with the physical, social, cultural, and spiritual dimensions in living” (p.6).

Counselling psychology emphasises the importance of being both a scientist-practitioner and a reflective-practitioner; “counselling psychology philosophy and practice embraces a broader definition of ‘evidence’ that synthesises research and practice and encompasses the paradoxes and divergences encountered in a variety of research paradigms” (BPS, 2019, p. 6). In addition to an emphasis on scientific thinking, Counselling Psychology, influenced by humanistic and phenomenological philosophies, places equal importance on the relationship between the client and the therapist. The definition of scientist-practitioner has been questioned; in particular the definition of ‘evidence’ and how this relates to a client’s subjective experiences in therapeutic practice; “the traditional scientist-practitioner model simply cannot capture the essence of the therapeutic relationship that is so integral to counselling psychologists’ work, and that it is therefore, as a model, unsustainable” (Douglas et al., 2016, p. 114). Counselling psychologists are encouraged to work within a framework

that is arguably diagnostic whilst emphasising the importance of subjective experiences over diagnostic paradigms (Strawbridge & Woolfe, 2010). The diagnostic framework is informed by the DSM (Black & Grant, 2014). The DSM is widely used to treat, inform and diagnose service-users. Davies (2013) argued that a number of 'disorders' within this framework are not based on evidence, but rather on 'consensus'. Perhaps however, scientist-practitioner can also be approached from a subjective stance, Stricker (1992) proposes "the research of one generation presages the practice-based developments of the next, so we could argue that a similar process occurs for each of us at an individual level" (p.212). It could be suggested that Counselling Psychology is science-informed and practice-led but 'phenomenological-focused, respectful of diversity and interested in the uncovering of subjective truths' (Woolfe & Dryden, 1996). This research acknowledged the role of science but remained phenomenologically focused.

2.1.2 Quantitative vs. Qualitative Research Methodologies

As mentioned in the previous chapter, a qualitative, rather than quantitative, method of inquiry was chosen for this study. A qualitative approach allowed for lived experiences of detainees in the UK to be voiced, rather than quantified. According to Willig (2012), qualitative research can "capture the quality and texture of their research participants' experience" (p.1). Qualitative research is concerned with meaning; how individuals make sense of their world and how they experience it (Willig, 2013). Furthermore, Counselling Psychology's emphasis on the subjective experience can be also addressed by a qualitative method.

2.1.3 Epistemological Considerations and Reflections

Consideration of the philosophical underpinnings of qualitative research, including the philosophical foundations of epistemology and ontology is important when engaging with research of this kind. Omission of this consideration, according to Ponterotto (2005) can lead to 'post-positivising' of qualitative research; namely, the application of quantitative research paradigms to qualitative approaches. These considerations will now be briefly discussed. Epistemology is a philosophical division which aims to understand how we 'know what we know' (BPS, 2019). Epistemology is the study of knowledge; in research it is interested in the

relationship “between the ‘knower’ (the research participant) and the ‘would-be knower’ (the researcher)” (Ponterotto, 2005, p.131). Epistemological positions are defined in various ways. Willig (2013) highlights three broad epistemological definitions: realist, phenomenological and social constructionist, whereas Ponterotto (2005) offers slightly different interpretations; he identifies positivism, post-positivism, constructivism and critical theory. This research will be guided by Ponterotto (2005) definitions of epistemology, adapted from Guba and Lincoln (1994).

In psychology as a whole, the dominant paradigm is positivism. Positivism suggests that truth can be measured; the goal of research therefore is to deliver an objective result; it is “understanding that is impartial and unbiased, based on a view from ‘the outside’, without personal involvement or vested interests on the part of the researcher” (Willig, 2013, p.3). According to Ponterotto (2005) positivism takes the position of realism. Realist paradigms posit that there is a measurable, external reality, separate from ourselves (Willig, 2013). Post-positivism in turn posits that knowledge can be approximated but can never truly ‘capture reality’; it shares many traits with positivism, namely, both seek prediction and control of phenomena (Ponterotto, 2005). Constructivism is understood to be a *co-construction* of meaning between researcher and participants. Within this co-construction there is no objective truth (Ponterotto, 2005). Constructivists can adhere to a critical realist ontological position, whereby they assume a pre-social reality exists, independent of the observer, or can take a relativist ontological position that assumes there are multiple, constructed realities. Critical theorists assume reality is shaped by social, ethnic, cultural, gendered and political values (Ponterotto, 2005). Where epistemology is concerned with how we know what we know, ontology can be broadly defined as a ‘study of being’, and the question of what *can* be known (BPS, 2019), this includes the assumptions of the researcher on what it is to be human and the nature of reality, and what can be known about reality. A realist ontological position posits there is one measurable reality. In contrast, relativism would pertain there to be multiple, constructed realities (Ponterotto, 2005).

2.1.4 Epistemological and Ontological Standpoint

This research was guided by a constructivist epistemological approach. Constructivism posits that the interaction between researcher and participant is central to capturing and describing lived experience (Ponterotto, 2005). This interaction aligns with hermeneutic phenomenology, the chosen methodology for this research. Hermeneutic phenomenology is both descriptive and interpretive; “interpretation, and the awareness (and analysis) of what the researcher brings to the text, constitute an integral part of phenomenological analysis” (Willig, 2013, p. 255). The methodology requires the researcher to be actively engaged in the co-construction of the text; thus, the interaction between researcher and participant remains integral to the research process. Constructivism is in contrast to positivist epistemological positions, whereby the researcher’s involvement would be observed as contributing towards bias in the research process (Ponterotto, 2005). Positivism would posit that knowledge should be sought in a ‘controlled’ environment, rather than being co-constructed. A constructivist epistemological position supports a hermeneutic approach which “maintains that meaning is hidden and must be brought to the surface through deep reflection” (Ponterotto, 2005, p.129). Peck & Mummery (2017) believe the adoption of a constructivist approach to hermeneutics allows for an exploration of phenomena at a much deeper level. The ontological position of this research is relativist; it is believed that there are numerous constructed realities; “constructivism adheres to a relativist position that assumes there are multiple, apprehendable, and equally valid realities” (Ponterotto, 2005, p.120). It was understood that a different researcher would possibly uncover different meanings, and rather than object to this, this research adhered to a reflexive approach, acknowledging the role of the researcher in the research.

2.2 Rationale for Choice of Methodology

As part of the rationale for choosing a hermeneutic phenomenological approach, two alternative methodologies were considered: Foucauldian Discourse Analysis (FDA) and Interpretative Phenomenological Analysis (IPA).

2.2.1.1 Foucauldian Discourse Analysis

FDA is a type of Discourse Analysis (DA). DA explores the role of language and discourse. Discourse includes “all forms of spoken interaction, formal and informal, and written texts of all kinds’ (Potter & Wetherell, 1987, p. 7). Discourse plays an important role in both DA and FDA. FDA was influenced by post-structuralist ideas; in particular ideas propelled by Michel Foucault (1979). Post-structuralism is concerned with the relationship between human beings, the world, and the practice of making and reproducing meanings (Belsey, 2002, p. 5). FDA was introduced to ‘Anglo-American’ psychology in the 1970s (Willig, 2013). FDA is broadly concerned with language, and its role within society, culture and history; it could be loosely defined as an analysis of discourse (Foucault, 1980). The approach is interested in the relationship between discourses and how people think (subjectivity) and what they may do (practice) (Willig, 2013). Rather than focusing on phenomena, FDA expands its analysis to explore the role of power, ideology and culture; focusing on “the ‘rules of discourse’ that allow our present-day talk about these things to make sense” (Parker, 1992, p.131). FDA explores what ‘discursive elements’ make certain phenomena possible (Parker, 1992). It represents a macro view of discourse, less interested in the intent of the participant than with the ‘broader patterns of social structures and practices’ (Willig, 2013, p.381). This approach was considered due to an interest in the discursive practices and institutions of the detention estate in the UK; an FDA would arguably provide an opportunity to examine these discourses on a wider scale. However, it was decided that such an approach would not address the research question and inquire on the lived experiences of being detained. The importance of culture, society and history is also considered in other research approaches.

2.2.1.2 Interpretative Phenomenological Analysis

IPA was also considered due to its emphasis on exploring the subjective experiences of people who are interviewed. IPA has become a dominant methodology in qualitative research, particularly in the field of health and psychology (Smith et al., 2019). The clear methods it offers for carrying out research have seen it rise in popularity in recent years. According to Smith et al. (2009) IPA is a “qualitative research approach committed to the examination of how people make sense of their major life experiences” (Smith et al., 2019, p. 1). The

methodology, though extremely popular, has faced criticism. Max van Manen (2019) argues the application of the term 'lived experience' within IPA does not correspond with the philosophical origins of phenomenology; "usages often have little or nothing to do with phenomenological method." (van Manen, 2019, p.812). In particular, van Manen (2019) observed the term, 'lived experience' cannot be fully understood without phenomenological questioning which, he posits, IPA fails to address. This critique could be further understood by examining IPA's adoption of a step-by-step approach to conducting research. Although the methodological steps offer a path to follow, these steps could arguably move the researcher away from the study of the human experience as it presents itself. Smith (2019) disputes this claim, suggesting phenomenology is a 'complex and multifaceted', entity. The hermeneutic aspects of IPA have also been critiqued. Chamberlain (2011) suggests IPA's attempt to be interpretive and hermeneutic is questionable. Namely, the direction to follow a method, rather than a phenomena; Chamberlain claims this commands "researchers to search the data closely for 'sub-themes', then to classify and link these into broader 'themes' or analytical categories and present these, supported by data quotations, as the findings" (p.50). Thus, there is perhaps an emphasis to search for sub-themes over a deeper reflection on the phenomena, whereas van Manen (2017) pertains "Themes are only the intermediate reflective tools for phenomenological inquiry and reflective writing." (p.777). IPA's step-by-step analytical process renders the attempt to *capture* the phenomena through reflection and interpretation arguably challenging. IPA was considered as a phenomenological approach but was not chosen because a more open methodological method was chosen to answer the research question.

2.2.2 Overview of Phenomenology

Phenomenology could broadly be defined as a philosophical movement founded in the early 20th century by Edmund Husserl (1859–1938) and later developed by Martin Heidegger (1889–1976). The term phenomenology derives from the Greek words, 'phainómenon' 'that which appears' or, 'that which shows itself' and 'lógos', the study of 'making something manifest' (Harper, 2020). Phenomenology is a philosophy, a 'theory of the unique' (van Manen, 1997). According to Wertz (2005), phenomenology is a "low-hovering, in-dwelling, meditative philosophy that glories in the concreteness of person-world relations and accords

lived experience” (p. 175). It is both a philosophical tradition and a method of research. Phenomenology is a study of human existence and explores how phenomena appear; “describing the world as it appears to people” (Langdridge, 2007, p. 11). Husserl was the founder of transcendental (descriptive) phenomenology, he emphasised the role of intentionality; a desire to see things ‘as they appear’, rather than question why they appear. Husserl used the Greek terms ‘noema’ meaning ‘what is appearing’ and ‘noesis’, the ‘way it is experienced’ when discussing the term intentionality (Langdridge, 2007). In addition to intentionality, he emphasised the importance of ‘epoché and reduction’. ‘Epoché’ is the stripping away of pre-conceptions, and reduction “continues the process initiated with the epoché” (Langdridge, 2007, p.18). This form of phenomenology is descriptive, not interpretative.

Whilst Husserl laid the foundation for phenomenology, Martin Heidegger (1889-1976), inspired by existential philosophers such as Søren Kierkegaard (1813–1855), founded existential phenomenology (Langdridge, 2007). Heidegger developed Husserl’s ideas but largely departed from his understanding of epoché. Heidegger acknowledged the role of epoché but did not believe it could be fully achieved without interpretation; “The meaning of phenomenological description as a method lies in interpretation” (Heidegger, 1962, p. 37). In addition to description, Heidegger placed an emphasis on the role of hermeneutics, a word derived from the Greek male adjective ‘hermeneuein’, meaning "to interpret" (Harper, 2020). Interpretation, according to Heidegger, is understood to be a part of ‘being in the world’ (Laverty, 2003). Interpretation in language is inevitable, it is the unavoidable act of existing in the world. According to Heidegger (1962), it was not possible to separate oneself from the world; one is situated within a historical and cultural context, this way of existing has language at its core, namely, to be both interpreted and described. The two branches of phenomenology (transcendental and existential) serve as foundations for a variety of phenomenological approaches.

2.2.3 Hermeneutic Phenomenology

The chosen method for this study is hermeneutic phenomenology, informed by Max van Manen (1997, 2013); an approach influenced by existential phenomenology. Van Manen's work originates from the Dutch school of thought, known as the 'School of Utrecht', whose interest in phenomenology was not 'purely philosophical, but had a clear professional and practical orientation' (Errasti-Ibarrondo et al., 2018). Van Manen advocated a heuristic approach to phenomenology and in addition to drawing inspiration from the pioneers of phenomenology; Edmund Husserl (1859-1938) and Martin Heidegger (1889-1976), was also influenced by Hans-Georg Gadamer (1900-2002) (Lavety, 2003). Like Heidegger, Gadamer believed language to be a central aspect of being in the world. Interpretation for Gadamer, was understood to be a 'fusion of horizons' moving within a hermeneutic circle, with no beginning and no end (Landridge, 2007). To understand the parts, you look at the whole, and to understand the whole you look at the parts; "each one is at first a kind of linguistic circle, and these linguistic circles come into contact with each other, merging more and more." (Gadamer & Linge, 2008, p.17). Gadamer (2014) believed language to be situated both historically and culturally. Van Manen (1997) viewed language as something which reveals itself through deep reflection; "To truly question something is to interrogate something from the heart of our existence, from the centre of our being" (van Manen, 1997, p. 43). The importance of the body in research was also acknowledged by van Manen (1997) who drew inspiration from Merleau-Ponty's (1945) claim that the body is not merely a physical entity, rather, it structures 'ones' situation and experience within the world' (Merleau-Ponty, 1945, p.xi). A subject-object dichotomy was contested by Merleau-Ponty (1945), who argued "I understand the other person through my body, just as I perceive "things" through my body" (Merleau-Ponty, 1945, p.191). Van Manen believed anything that presents itself as conscious is of interest to phenomenology, believing it can provide an opportunity to study an individual's world as they live it, hoping to gain an understanding of their experiences: what it means, deeply, to live in the world (van Manen, 2015). Phenomenologically, in research, it provides an opportunity to grasp at the essential meaning of a phenomena under study, drawing upon the phenomenological term "Zu den Sachen", which means both "to the things themselves" and "let's get down to what matters!" (van Manen, 1990, p.184). Van Manen offers an approach that is both descriptive and interpretative to orientate towards lived

experience. He does not prescribe a rigorous method of carrying out research, rather, he offers a guide for the researcher, recommending:

- I. *Turning to a phenomenon which seriously interests us and commits us to the world*
- II. *Investigating experience as we live it rather than as we conceptualise it*
- III. *Reflecting on the essential themes which characterise the phenomenon*
- IV. *Describing the phenomenon through the art of writing and rewriting*
- V. *Maintaining a strong and oriented psychological relation to the phenomenon*
- VI. *Balancing the research context by considering parts and whole*

(van Manen, 1997, p. 30)

2.2.3.1 *Life-Worlds*

Aforementioned, van Manen (1997, 2014) does not offer a prescriptive approach by which to carry out phenomenological research, although he does offer different ‘guidelines’ for *organising* phenomenological research (van Manen, 1997). Existential life-worlds were chosen as a guide for this research. These life-worlds were outlined according to van Manen (2014) as: lived space (spatiality) this is *felt* space, it *affects* the way we feel; lived body (corporeality) which refers to the phenomenological fact that we are always bodily in the world; lived time (temporality) which is subjective time, as opposed to objective time, and lived self-other (relationality); namely, how self and others are experienced in relation to the phenomena. According to van Manen (1997); fundamental questions will always correspond with these life-worlds; denoting them “productive categories for the process of phenomenological question posing, reflecting and writing” (van Manen, 1997, p. 102). It is important to note however, that such experientials do not exist in isolation. It is assumed these life-worlds interact, for instance, relationality is understood to be both temporal and embodied; we are always temporarily in-body as we relate to others and ourselves.

Participants experiences were not fitted into these life-worlds, rather it served as an organisational tool. The method will be expanded upon later in this chapter (Section 2.5).

2.2.4 Rationale for Hermeneutic Phenomenology

This method was chosen as the research sought to stay as close as possible to the lived experiences of people who had been detained. This approach allowed the researcher an attempt to grasp at the essence of the phenomena of being detained, whilst remaining within a hermeneutic circle (seeing the whole and the parts). The aim was to engage with the method rather than to follow a step-by-step approach to analysis, this was also in consideration to the people who were interviewed, and the conceptualisations of distress and trauma which have been used to categorise experiences of detention. Van Manen (1997) emphasised the importance of writing (and re-writing) and the power of language; this heuristic approach required an active engagement with the text (or transcripts). Van Manen (1997) highlights the important role of the researcher in the co-construction of meaning, this corresponds with the epistemological position of this research that views knowledge as co-constructed. He posited that writing forces an individual into a reflective attitude. Once themes or 'meaning-making structures' have been isolated, this art of writing and re-writing is encouraged; "one rewrites the theme while interpreting the meaning of the phenomenon or lived experience" (Sloan, 2014, p. 10). In addition, he highlights a 'theory of unique', that aligns with the ontological position of this research, a position that views reality as relative. Reality is not 'replaceable' as it is unique to the participant and the researcher (van Manen, 1997). As a researcher, van Manen's phenomenology provides an attempt to uncover and locate meaning from their stories and to listen openly. In addition, this approach required constant reflection on the researcher's own position, to be challenged and to remain in a state of 'wonder' (van Manen, 1997) on the phenomena of being detained.

2.3 Methodological Reflexivity

With the intention of remaining within a reflexive space, this section will be written in the first-person tense. According to Finlay (2003), reflexivity is defined as a "process of continually

reflecting upon our interpretations of both our experience and the phenomena being studied so as to move beyond the partiality of our previous understandings and our investment in particular research outcomes” (p.108). Van Manen (2002) described this as a form of hermeneutic reduction, requiring the researcher to adopt openness and wonder; to be aware of the researcher’s biases in relation to the research question and their own motivation; “In the reduction one needs to overcome one’s subjective or private feelings, preferences, inclinations, or expectations that may seduce or tempt one to come to premature, wishful, or one-sided understandings of an experience” (van Manen, 2002, p.185).

My values and lived experiences (axiology) were not separated from the research process (Ponterotto, 2005). Preconceptions on the damaging impact of detention in part motivated my research question which required constant reflection during the interview and analysis. This critical reflection took place in the form of journal writing throughout my research journey, providing space to consider participants’ lived experience and the co-constructed space between us. I am also a practicing counselling psychologist in training; simultaneously working as a researcher and a practitioner. This required active reflection on my position; noticing when I may be slipping towards a psychologist’s position and away from that of a researcher, namely, staying close to the lived experience rather than moving towards the emotional impact. How my own subjectivity may impact the research and findings was therefore considered. Namely, the act of writing, and re-writing, allowed me as a researcher to shift back and forth between the parts and the whole. This process involved stepping back and taking note of any emerging feels or assumptions I may hold, before returning again to look at the participants’ experiences freshly (Finlay, 2009). Thus, viewing the whole by examining the parts and observing how the parts are contributing to the whole. This was a circular, not linear process. It was through writing that thoughts emerged, writing is thus an attempt to make visible the phenomena of being detained, “Writing and rewriting is the thing... Writing is a reflexive activity that involves the totality of our physical and mental being” (van Manen, 1997, p.132). Cultural consideration was also critically examined. I am a white woman who interviewed black participants, there is an aspect of their lived experiences in relation to race and ethnicity which I can never identify with. Although I am conscious of the structural discrimination inherent in the culture of which I am a part and the benefits afforded to me because of the colour of my skin, this does little if I do not recognise and

unpack this in relation to research. The impact of being a white researcher was considered at all stages of the research, from recruitment, to the interview and the analysis. As a researcher there is an awareness of how being white person can further perpetuate a dominant discourse, that of a western white person, interviewing and researching a person of colour. It is a position that I continue to reflect and grapple with. The chosen methodological approach

considered this dynamic; the lived experiences of my participants were sought by choosing an open methodological framework, rather than following a step-by-step process. This is further unpacked below.

2.4 Data Collection

The research comprised of six semi-structured interviews with people who had experienced detention. The interviews were recorded and transcribed verbatim. The following section outlines the process of data collection, data analysis and the ethical considerations.

2.4.1 Recruitment Process

Initially, the aim was to interview participants inside a detention centre. This was not straightforward. At the time of writing, all but one of the centres (run by HMPPS) were outsourced by the government to private companies, meaning there was little public accountability. Law firms, journalists and charities who work within the centres were contacted for initial enquiries but were unable to offer support. It was decided that access would not be possible for this research, and thus a decision was then taken to interview people who had been released into the community. This would also ensure they had access to relevant support following the interview (as outlined in the debrief letter, Appendix-IX). Recruitment outside of detention was also difficult. The decision to recruit through charities was subsequently taken. Following ethical approval (Appendix-I) a charity in east London offered to assist with recruitment. The charity manager contacted people he knew had been detained (who had been in previous contact with the charity) and asked them if they would be happy to be contacted by the researcher. If they agreed they were then invited to take part in the

research. It was made clear to the potential participants that their decision on whether they took part would have no impact on their relationship with the charity. Most participants were recruited through the charity in east London. However, following difficulties with recruitment, one participant was recruited through a separate charity, following ethical approval (Appendix-III). This participant was interviewed in the same location as the previous participants, and the manager of this charity contacted participants in the same way as first charity, and thus the same reassurances and precautions were taken.

2.4.2 Sample

Table 1 (below) outlines the participant demographics. One participant asked to be withdrawn from the study early on in the research process, another participant was sadly re-detained days before the arranged interview (but subsequently released two-weeks later), and a further participant did not turn up on the day of the interview. A total of six people took part in the research. The consideration for the number of people interviewed was informed by the approach, van Manen (2014) asks “how many examples of concrete experiential descriptions would be appropriate for this study in order to explore the phenomenological meanings of this or that phenomenon?” (p.353). It was decided that six participants would be a sufficient number to orientate towards the phenomena of being detained. The decision to not seek a strict homogeneous sample in terms of gender, ethnicity, race or culture was informed by the methodology; which aims to illuminate lived experience and ways of being, without categorising; this also applies to a population that is all too-often categorised.

Table 1: Participant Demographics.

Assigned Name	Age	Gender	Number of times Detained
Jamelle	30-40	Female	Four times
Robert	40-50	Male	Three times
Kambili	30-40	Male	Once
Abel	30-40	Male	Once (two different detention centres)

Tano	30-40	Male	Once
Samuel	30-40	Male	Two times.

2.4.3 Inclusion and Exclusion Criteria

All participants invited to take part in the research were adults (over 20-years-old), spoke English, and had experienced detention in the UK. A screening questionnaire was used prior to the interviews to safeguard against any serious presenting mental health concerns (see Table 2 below). If participants scored highly on this screening questionnaire, they were not asked to participate in the research, this is discussed further in the Appendix I, and in the ethical considerations (Section 2.6).

2.4.4 Interview: Setting, Style and Protocol

Prior to the interview starting, an introduction to the research, the cultural background of the researcher and interest in the research were discussed. Time was then spent going over the invitation letter and subsequent consent form (Appendix-VI & Appendix-VII). All participants filled out a screening questionnaire 'The Refugee Health Screener-15' (Pathways to Wellness, 2011) (see Table 2 below) which is discussed in more detail in the ethics application (Appendix-I). The screening questionnaire was chosen with cultural consideration, namely, in addition to a small questionnaire inquiring on their feelings and potential levels of distress, there was a picture of a distress monitor with a sliding scale requesting participants to draw a line where they felt their distress would be. This ensured that if any questions were misunderstood, or not clear, they had opportunity to highlight any feelings of distress prior to the interview. If the questionnaire revealed too high a score, participants would not be asked to participate due to concerns that it may be too distressing. None of the participants scored too highly and all were comfortable taking part in the research. Participants were made aware that they were free to leave at any time during the interview, without the need to provide a reason.

Interviews were conducted in a private room which sought to allow the participants to feel safe and comfortable. Time was spent introducing them to the space and they were offered

a glass of water. The interview lengths varied between participants, but on average were approximately 50-minutes. Interviews were conducted in English. Interpreters were considered to invite people to take part who did not speak English, or felt more comfortable speaking in their first language, and thus possibly feel able to express their experiences directly. Although it was decided this would have made it difficult for both researcher and participant to co-construct meaning. In addition, as a researcher, it may have been challenging to grasp the phenomena when it is translated, considering the art of capturing lived experience is already a hermeneutic endeavour, it is always being translated. All the people the charities spoke with had a good grasp of English, and all participants were comfortable to speak in English. Following the interview, all participants were provided with a debrief letter with numbers of local and national helplines should they need extra support following the interview (Appendix-IX). Additionally, a follow-up phone call was offered by the researcher a week after the interview to see if they had any further questions or queries regarding the interview.

The interview style was semi-structured, it had one main question, with prompts if necessary; as is suggested for hermeneutic phenomenological research; “The specific question asked is generally very open in nature, with follow up discussion being led not so much by the researcher, but by the participant” (Laverty, 2003, p.29). Interviews started with a more general inquiry on where the participant felt their story of detention began, this allowed the participants to begin where they felt most comfortable. Care was taken throughout to ensure the researcher always adopted a position that took for granted what they communicated was true (to avoid participants not feeling believed, as is often the case in Home Office interviews). Interview questions can be found in Appendix-VIII. The main question posed in the interview was as follows: ‘How would you describe the experience of being detained?’.

Table 2:

2.4.4.1 Refugee Health Screener-15

REFUGEE HEALTH SCREENER (RHS-15)

Instructions: Using the scale beside each symptom, please indicate the degree to which the symptom has been bothersome to you over the past month. Place a mark in the appropriate column. If the symptom has not been bothersome to you during the past month, circle "NOT AT ALL."



SYMPTOMS	NOT AT ALL	A LITTLE BIT	MODER- ATELY	QUITE A BIT	EXTREMELY
1. Muscle, bone, joint pains	0	1	2	3	4
2. Feeling down, sad, or blue most of the time	0	1	2	3	4
3. Too much thinking or too many thoughts	0	1	2	3	4
4. Feeling helpless	0	1	2	3	4
5. Suddenly scared for no reason	0	1	2	3	4
6. Faintness, dizziness, or weakness	0	1	2	3	4
7. Nervousness or shakiness inside	0	1	2	3	4
8. Feeling restless, can't sit still	0	1	2	3	4
9. Crying easily	0	1	2	3	4

The following symptoms may be related to traumatic experiences during war and migration. How much in the past month have you:

10. Had the experience of reliving the trauma; acting or feeling as if it were happening again?	0	1	2	3	4
11. Been having PHYSICAL reactions (for example, break out in a sweat, heart beats fast) when reminded of the trauma?	0	1	2	3	4
12. Felt emotionally numb (for example, feel sad but can't cry, unable to have loving feelings)?	0	1	2	3	4
13. Been jumpier, more easily startled (for example, when someone walks up behind you)?	0	1	2	3	4

REFUGEE HEALTH SCREENER (RHS-15)

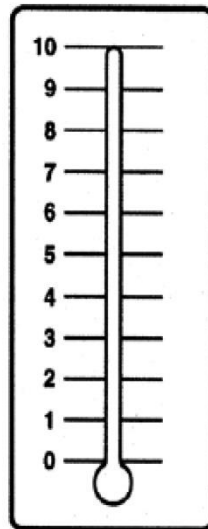
14. Generally over your life, do you feel that you are:

- Able to handle (cope with) anything that comes your way0
 Able to handle (cope with) most things that come your way1
 Able to handle (cope with) some things, but not able to cope with other things.....2
 Unable to cope with most things.....3
 Unable to cope with anything4

15.

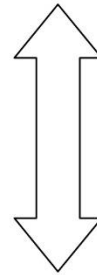
Distress Thermometer

FIRST: Please circle the number (0-10) that best describes how much distress you have been experiencing in the past week including today.



Extreme distress

“I feel as bad as I ever have”



“Things are good”

No distress

ADD TOTAL SCORE OF ITEMS 1-14: ____

SCORING

Screening is POSITIVE

1. If Items 1-14 is ≥ 12 OR
2. Distress Thermometer is ≥ 5

Self administered: ____

Not self administered: ____

CIRCLE ONE:

SCREEN NEGATIVE

**SCREEN POSITIVE
REFER FOR SERVICES**

2.5 Procedure: Data Analysis

2.5.1 Treatment of the Data

The interviews were all transcribed verbatim; during transcription all identifying details were removed, and names were changed to protect confidentiality. All data (transcripts, recordings, consent forms) were kept on a secure laptop that only the researcher had access to.

2.5.2 Analytical Process

Analysis followed the transcription. This was guided by van Manen (1997), who offers various approaches in the treatment of data: a holistic approach, a selective reading approach and a detailed reading approach. This research took a selective reading approach, namely, transcripts were read several times, and statements or phrases that seemed “particularly essential or revealing about the phenomenon or experience” (van Manen, 1997, p.93) were noted. Thus, notes were made on all six transcripts during the analysis stage. In general, the left-side of the transcript noted emerging themes, and on the right-side general comments surrounding the phenomena were noted. These notes were eventually grouped into clusters which reflected themes emerging from the transcript. Following this process themes were isolated; see Appendix-XII for an example of a transcript. Each theme was unpacked and engaged with a hermeneutic phenomenological lens. Following the identification of the themes, they were then organised according to van Manen’s existential life-world’s: lived-space (spatiality), lived-body (corporeality), lived-time (temporality), and lived-human relation (relationality), and an additional theme ‘Relationship with the State’.

2.5.3 Validity and Rigour

In order to maintain a high standard of psychological research, Lucy Yardley’s (2000, 2008) criteria for assessing validity and rigour in qualitative research were followed. The four principles; sensitivity to context, commitment and rigour, transparency and coherence and impact and importance, will now be discussed in relation to this study:

This research demonstrated sensitivity to context firstly through a thorough literature review, namely, it examined the context of detention in the UK, in addition to policies and existing discourses concerning migration and the relevance of post-colonial theory. A review of the relevant literature on experiences of detention in the UK was also examined. The method chosen established sensitivity to context, as it sought to stay as close to the lived experiences of the participants as possible. Commitment and rigour were demonstrated through attendance of regular research supervision with an academic supervisor. In addition, an in-depth engagement with the topic was paramount, van Manen (1997) stresses the importance of writing, and re-writing to fully engage phenomenologically with a text. A reflective journal was used throughout the research journey (see Appendix X, for an example). Coherence was demonstrated through an understanding of the philosophical underpinnings of phenomenology and a commitment to ensuring these were in line with the methodological approach and research question. Yardley notes the importance of coherence as a “fit between the research question and the philosophical perspective adopted, and the method of investigation and analysis undertaken” (Yardley, 2008, p.22). Finally, the implications addressed in the discussion chapter ensured both the impact and importance of this research were considered and examined.

2.6 Ethical considerations

Research ethics refers to the moral principles guiding research from inception through to completion and publication of results (BPS, 2011). This research is being submitted as part of a Doctorate in Counselling Psychology; a programme approved by the BPS (2011). Ethical approval to recruit participants and engage in this research was granted by the University of East London (UEL). See Appendix I for the application for ethical approval, which outlines the ethical considerations in detail. This research complied with the ethical procedures as outlined by HCPC standards of conduct performance and ethics (HCPC, 2017) and the BPS Code of Ethics and Conduct (BPS, 2014), which is detailed more fully below.

2.6.1 Guidelines and Minimum Standards

The BPS Code of Ethics and Conduct (2014) is the most recent code of ethics. This serves as the primary moderator for psychological research and was followed throughout this research journey. The section below outlines how their main principles were adhered to.

Respect for the autonomy, privacy and dignity of individuals and communities.

Participants were provided with clear information in their invitation letter regarding the nature of the research, both in written form (Appendix-VI), and orally prior to each interview. This included their right to withdraw from the research: participants could withdraw at any time before or during the interview, and any recordings or information would be immediately destroyed. After participating in the interview, they could also withdraw at any point during the following 3-weeks (from the day of the interview) and if they chose to withdraw, their data would be destroyed. It was made clear that after 3-weeks had passed it would not be possible to withdraw from the study. Although data was not gathered anonymously, real names and identifying references have been omitted from the reporting of data and transcripts. All data was kept on a password protected computer that only the researcher had access to, in line with university policy (UEL, 2018).

Scientific integrity and minimising harm

The BPS state that “research should be designed, reviewed and conducted in a way that ensures its quality, integrity and contribution to the development of knowledge and understanding” (BPS, 2011, p.9). The methodological approach taken and the supervision of the thesis by academics ensured that the standards for scientific integrity and minimising harm were adhered to. The aims of the research were clearly outlined to all participants. The chosen methodological approach of this research considers potential harm to participants, namely, talking about an experience that could be distressing or cause uncomfortable memories to resurface; the process by which this was addressed is outlined in detail in the ethical application (Appendix I). All participants were required to complete a screening questionnaire ‘The Refugee Health Screener-15’ (Pathways to Wellness, 2011) (see Table 2 and section 2.4.4).

Social responsibility

BPS highlight the important role psychologists have within the wider context of society. This collective duty for the welfare of others was addressed in the research; the experiences of being detained are experiences shared within UK society. It has been argued that wider social and political issues have not been widely addressed in research; and research ought to address the social realities that participants and researcher both exist within (Thatcher & Manktelow, 2007). This research acknowledges that psychological knowledge on the experience of being detained contributes to wider debates on detention in the UK, thus contributing toward a common good.

2.7 Summary of Chapter

This chapter explored the process by which the methodology was selected, including the philosophical foundations that informed this decision and the procedural steps for analysis. The chosen methodology, hermeneutic phenomenological inquiry, was conversant to the ethos of Counselling Psychology that places importance on lived experience. The next chapter will discuss and explore the emerging themes from the analysis.

3 Analysis

3.1 Overview

This chapter will offer a description of the emerging themes gathered from the research according to the theoretical underpinnings of the chosen method, hermeneutic phenomenology. The themes were delivered from the accounts and perspectives of the people who took part in this research. The sub-themes are tentative and serve as a way of interpreting a frame of understanding; they reflect the researchers making sense of the participants making sense of their experience. The interview themes emerged from the data and were then organised through four fundamental life-world themes or ‘existentials’ inspired by Max van Manen (1997, 2014). These life-world themes, namely: relationality (lived self-other), corporality (lived body), spatiality (lived space) and temporality (lived time), alongside a separate ‘theme; ‘Relationship with the State’. These proved helpful guides for reflection in the research process. The emerging theme ‘Relationship with the State’ explored the broader spectrum of society, a notion discussed by all participants. Although helpful avenues of reflection, existentials were chosen as guides, as it is suggested we all experience our world and reality through these life-worlds, the emerging themes however, will be the context.

The analysis remains both descriptive, and interpretative. It is firstly descriptive as it seeks to be attentive to ‘how things appear’; but this attentiveness, is itself an interpretation “the phenomenological “facts” of lived experiences are always already meaningfully (hermeneutically) experienced” (van Manen, 1997, p.181). The themes below are not independent; they are co-constructed and speak to the phenomena of what it means to be ‘detained’ for the participants collaborating in this study.

Table 3: Emerging Themes

3.2.1. Spatiality | The Violation of Space

- I. Arriving at Detention
- II. The Lived Space
- III. Denial of a Home
- IV. Loss of Freedom

3.2.2. Temporality | Altered Time

- I. The Paradox of Time
- II. Orientation of Time

3.2.3. Corporeality | Altered Body

- I. Denied Body
- II. Violation of Body
- III. Embodied Connection

3.2.4. Relationality | Shifting Self

- I. Identity
- II. Self as Threatened
- III. Treated as a Threat

3.2.5. Other | Relationship with the State

3.2 Overview of Emerging 'Themes'

The first theme; *The Violation of Space*, represented the journey to detention, the space within detention, the concept of home in relation to detention, alongside the loss of freedom. The second theme; *Altered Time*, represented participants altered relationship with time; experienced as paradoxical, uncertain, and something that was managed or taken away. Their relationship with the past, the present and the future was altered as the future became uncertain, and the past became ever-present. The third theme *Altered Body* described detention as a felt denial of humanity as bodies became evidence of suffering; denied and violated, rather than embodied connections to the world. Theme four, *Shifting Self* represented the experience of threat as participants connections to themselves and others altered in a sinister way. The fifth theme, *Relationship with the State* represents the feeling of being separated from the state, whilst existing within it; a denial of citizenship, of irregular subjectivity, or a denial of human rights.

3.2.1 Spatiality | The Violation of Space

"It's like a little city of mad, of acceptable madness." (Robert, 385-386)

The lived space of detention extended beyond the walls and building that confined those detained. The journey to detention, the guards, the locked doors and the concept of freedom and a denial of home, all spoke of the experience of being detained. It was also felt in the everyday items, items which under the guise of detention were transformed; ordinary objects such as a bed or a toilet were described as symbols of repression, violation or restraint. The building conjured images that were all-encompassing; association with the building became an extension of this lived space.

3.2.1.1 Arriving at detention

The journey to detention was described as an integral part of the phenomena of being detained for all participants. Participants spoke with visceral description of the journey and arrival to detention. Some participants were arrested and taken to detention during their

regular reporting for immigration, others were arrested whilst at work; one in front of his colleagues and patients, having worked at a hospital for many years. Detention for participants was often experienced as having power exerted over them. One participant, Robert, described this as being 'played with'. The arrival process was constituted by layers of power being played out in the relationships participants encountered with the guards, the system, and even the physical architecture of the building. Here, the experience of arriving is synonymous with provocation and manipulation. 'Being played with' impacted not only mood but physical experiences, as the participants were touched, their bodies open to being attacked and their whole physical presence disappearing, taken away from the spaces they inhabited previously, Robert describes this vividly:

"I walked with him, unknowing that he was the immigration officer and he goes, 'This, do you know this person?' and I say 'Yes, it is me'. He says you have been working illegally in the country... And that was how the journey started. I was handcuffed at the work place, in front of my colleagues, in front of the doctors, and even in front of the patients that I was just looking after, and taken to the boss of the firm which they parked outside the hospital, that everyone was imagining 'who is this person?'... And that's to show how, how, humiliated I felt cos I was handcuffed in front of the patient ... onlookers, staff and everything, and taken" (Robert, 56-77)

Robert was detained three times; the first time he was arrested and detained in front of his colleagues at a hospital where he had worked for many years. He was then detained again three years later whilst reporting:

"I mean I don't like that day cos she, my mood was played with. I was at one point very happy that oh finally, after three years of coming to sign, and then after 15 minutes of waiting, two gentlemen now came to say 'we need to have an interview with you' (Robert, 133-137)

The experience of being arrested during a regular signing was shared by Kambili. The closeness of home was described by Kambili as making the pain unfathomable, turning an everyday event of going home for dinner, to something unspeakable. The journey to detention was understood to permeate into the body as hunger sets in. The journey was also accompanied with confusion as Kambili described being treated like a criminal, despite having committed no crime:

“It started when I went for signing... I go every two weeks... so you do not expect to be detained... cos I've signed for many years... so, unluckily that very day, I went for signing... they asked me to sit down, and have an interview, so I was shocked when they now took me in... but as we, was the worst moment of my... my partner was waiting for me at home... I was very hungry... Not that I'm running away, I've not committed crime... why should they treat me in such a manner?” (Kambili, 5-23).

Participants experiences of detention began before they arrived at detention; the violation of space was witnessed in the way immigration officials took them from familiar places (such as work or home) and forced them to unfamiliar spaces. All participants described feeling shocked at the unexpected arrest, this shock was synonymous with denial, a denial of free movement, but also denial of food or information upon arrival.

3.2.1.2 The Lived Space

Upon arrival to detention, the building and lived-space were frequently described by participants as ‘prison-like’. It became a space of incarceration, representing the host country, and with it, the objects and sounds within the lived space became an extension of the building. Jamelle described the noise of the guards as a constant, unsettling reminder of the potential for unexpected intrusion. For Jamelle, the noise of the keys as the guards moved was the most potent memory which continued to linger and disturb; the building was described as remaining within her, despite no longer being detained:

“It’s like the picture is still there... I can’t get rid of... those things, especially the noise, the keys you know...they can just open the door at any time, with their keys, those noises are still, I can still hear it... it’s still disturbing me ” (Jamelle, 106-117)

The lived space was also described as facilitating self-harm and infection. Below, Robert depicts a chaotic environment, where he witnessed people harming themselves. He vividly describes a ‘madness’ that was introduced into a private space as he washed. This described madness extended to the inability to control infection. Robert describes being detained during different virus outbreaks. In addition to feeling like a prison, the space became a

harbour of something 'contagious'. Robert's repetition of the word 'very' added to the velocity of disturbance he felt:

"We had three mad people in there, wonder what a mad man was doing in detention, the guy was talking to himself he would come over when your washing yourself, with vaping, cutting himself, and you call that a detention centre... Now there was another for TB outbreak... when I was there I heard there was another one of chickenpox, and all these things are very contagious, you expose people in... it very, very, very, very mentally disturbing being locked down for over 24-48 hours" (Robert, 435-447)

The feeling of incarceration was described as extending beyond the atmosphere and the walls; the building changed the relationship participants had with ordinary things. Below, Jamelle describes a plastic knife used for eating dinner within detention transforming into a weapon, its intentionality changed from something which facilitates dinner, to something which facilitates harm. Jamelle's description was amplified in the gesture of her hands, she imitated cutting her own wrist. Jamelle posits that when detained, you are either strong or you become unwell, you will harm or kill yourself. Strength here was perhaps understood as resistance to harm:

"Some people do hurt themselves... with a knife you know... the dinner knife, although its plastic, it's very sharp [imitates this] some people hurt themselves with this... when they can't really take it anymore, you know some people like try to harm them, kill themselves, things like that... If you're not really strong enough you, you end up being mental" (Jamelle, 150-158)

Certain spaces within detention also served as a way of coping. The Church within the centre served as a place of refuge for many. Despite being within detention it transformed into a separate space, a powerful reminder of how felt space is subjective. The Church temporarily became a space of hope. Jamelle spoke of Church as the only thing which 'kept her going':

"There is a church in there, meet other people, so when it's time to go to church I just go there to meet other people as well (R: mmm) that was the only thing that was really keeping me going." (Jamelle, 121-125)

The lived space facilitated a sense of being trapped in a chaotic environment. Being locked inside a room with no certainty or time when they would be released was understood to

create a powerlessness; the guards and the objects within the centre all became an extension of this felt space.

3.2.1.3 *Denial of a Home*

When describing their experience of being detained, participants often spoke of home. Home carried significance in a myriad of ways; to be home was to be rooted. Heading *home* does not necessarily mean to a house, it is perhaps to be familiar, to be at ease. Detention was described as stripping those who are detained of the notion of *home*. For Abel, home was synonymous with sleep; to sleep without unexpected intrusion. His bodily gestures added to this experience, he smacked his hands in the air as he tried to describe how the whole building moved, suggesting a need to use more than words to allow insight into the lived experience:

“You can’t sleep properly like you have been in your house... no you can’t do that ... when you sleep sometimes some people will be banging the door ‘bang, bang’ all the building will [smacks hands in the air] so that’s part of stress” (Abel, 418-422)

An aspect of home for Samuel was choosing the food he ate. Samuel described having to repeatedly eat the same food, he appeared to stutter when talking of the ‘same food’, hinting perhaps at the painful lived reality of the monotony of food in detention. Perhaps to be home was to choose your food, to be in detention was to be denied the *ritual* of eating:

“Back home, we don't eat the same meal every day, but we eat the same meal every day but we eat the same meal every blessed day, every blessed day the same t-t-t type of meal... because you don't allow you to eat er, to bring your own meal or even someone to bring it for you” (Samuel, 541-547)

Robert spoke of home as something to leave and thus also a place to return. Although sunshine cannot be physically confined, Robert described it as ‘locked away’ in detention; perhaps the experience of being detained was to witness nature being withdrawn. The ordinary freedom which allows one to ‘get sunshine’ and return-to-home, was denied. Below, Robert compares being free, with being detained:

“I can go to the park and run around and play and get sunshine as much as I want, because in the detention centre, sunshine was locked away... it’s a good feeling, at least knowing you can get up from the house at any time you want and no one um, you don’t have to take permission to exit the door.” (Robert 603-609)

Most participants described detention as synonymous with losing their home; home was stripped away from them when they were arrested and taken to detention. The inability to return home was also a denial of the familiar. Home was rarely described with physicality, rather, it was described through the denial of familiar comforts. For participants, the importance of home was highlighted by its very denial, to be *not* at home.

3.2.1.4 *Loss of Freedom*

The concept of freedom was discussed in a myriad of ways; whether directly, as a concept, or indirectly, as a state of mind. Freedom was often surmised as the simplicity of leaving your home or seeing friends, but also a freedom to be private. All participants were denied the freedom to leave the building, and most were locked inside their rooms at night. Below, Abel described a sense of helplessness in relation to his loss of freedom, there was ‘nothing’ he could do; his physical gestures speak of a frustration he was perhaps unable to describe with words alone:

“[deep breath] There is nothing I can do... I need to, there is nothing, I can’t do anything... so far you are in there, in that, in that situation, in that position... [bangs table] you can’t do anything, its until, until one day they free you- your judgement- they free you.” (Abel, 200-205)

The denial of freedom was described as synonymous with a denial of privacy. The word *privacy* first appeared in the 1590s and can be defined as a "state of freedom from intrusion" (Harper, 2020): the meaning remained apt here. Jamelle described how the private became public in detention, and the freedom to be private was taken away. She described privacy as something not afforded to her in the space of detention; privacy to use the toilet or the shower without unwarranted intrusion was denied:

“Because there's no privacy...when you in your room, be male or female can just bang in your room, open your door at any time, sometimes some people are naked in the room so if someone... in the same room you have a toilet and shower, inside ... so there's no privacy” (Jamelle, 167-172)

Freedom was described as not fully granted upon release from detention. Kambili described himself in an embodied way: half his body was free, the other half was not, it spoke of an internal sense of freedom, that prevailed over the physical, cosmic world. His physical gestures added to the lived experience, his body illustrated the frustration that perhaps words alone could not:

“I'm not completely free (R: Yeah) that's what I mean, I'm not completely free, one, one leg in, one leg out, so I'm just [bangs on table] in the middle... of life” (Kambili, 409-412)

The intrusions witnessed within the space of detention are also understood to not dissipate on release; private spaces remained invaded. For Jamelle, the denial of privacy extended beyond the walls of detention. The space lingered physically and emotionally; she continued to hear the sound of detention. Being treated without subjectivity and care has left Jamelle feeling ‘destroyed’; her fear appeared palpable and absolute:

“so mentally physically, just destroyed your life... Even today, I can't be able to sleep, keep hearing noise... people are being scared, you know, particularly me, they totally d-destroyed my life... cos I been detained four times, four times... There's no respect, no privacy, no good food... you know they just treat people the way they want, you know?” (Jamelle, 23-36)

Lack of freedom was described by participants as extending beyond the inability to leave the building; detention also denied participants the freedom to be private. The ability to choose who was in their lived space was taken away. For Kambili and Jamelle, their freedom continues to be violated, Kambili feels only ‘half’ free, and for Jamelle, her freedom to sleep remains invaded by the noises of detention.

3.2.2 Temporality | Altered Time

“As I speak, those flashbacks are still there... will there ever be a time when I would not remember this? But I don't think so because it looks like it's gonna be a life-long experience.” (Robert, 450-453)

Participants described the orientation of time as altered in detention, in comparison to the experience of being ‘outside’. This altered temporality was expressed by all participants; their relationship with the past, present and future was portrayed as altered and uncertain during, and after detention. The experience of time was described as overtly subjective (lived), rather than cosmic (objective). Participants spoke of time as something to pass or possess in detention. It was also presented in a paradoxical fashion; time was taken away abruptly, or it dragged out indefinitely.

3.2.2.1 The Paradox of Time

Time was described by participants as a paradox, it was indefinite, yet it was also experienced as something finite. When arriving at detention, participants described a race against time as they rushed to seek legal advice before being deported. For those detained for months, time changed; it became something to ‘pass’ or ‘endure’. Below, Kambili describes a sense of urgency on arrival to detention, time was described as something existing within a limited space, as if the space itself was shrinking with time. Accessing legal rights were dependent on being ‘fast enough’:

“once you are detained... if you're not fast enough... they will quickly remove your stuff, give you a removal notice, thereby trying to block you from accessing any legal help” (Kambili, 118-123)

In contrast to time being something to beat, participants also spoke of time as stretching out and slowing down. Below, Tano described his experience in detention as a ‘heaviness’; he embodied this experience, he described the need to take a deep breath, as if in preparation for his stay in detention to be indefinite. He compared this to being imprisoned, only without a release date, and not having committed a crime:

“My own one experience I think was heavy for me, there, when I was taking very deep breath, like, because I didn't, when you're in there, number one thing when you're in detention is, you know when you go to prison they tell you 'oh you're spending one year' and you will be released, so, so yeah. But in detention, they don't tell you the date of your release” (Tano, 202-209)

The slowing of time in detention was also experienced as boredom. Robert experienced boredom as being conscious of time passing slowly, time was measured by how many guards passed by, it was subjective. He portrayed a vivid depiction; his body illustrated a physical manifestation of boredom; boredom could be interpreted as taking to a task that had no meaning; to ‘poke’ and ‘tear’ into something. Robert reflected on how his experience of time, his temporality, was altered in comparison to home. He described detention as bringing out ‘insanity’; boredom within detention is in relation to insanity, it *takes away* the ability to be ‘normal’:

“I got so bored that I could, I was pushing my nail in the, in the tangerine, you know?... I was putting poking at it and tearing into it. And then I would use the peel, or just you know, when you press it together it spits water, and then it pings in your eye, I couldn't imagine enough there was a day in those two hours... and then I would sit down and check how many bosses would pass within 5, even things like I would normally not do ... when I'm home, you know? That's bringing out the, insanity in me” (Robert, 372-382)

On release, time was reclaimed by Robert, he described a powerful moment when leaving detention and being called by a guard, his temporal way-of-being in the world transformed and he described having the freedom to choose how he engages with time, and those who make claims on it:

“when I was leaving, I saw him by the exit and waved at him, he said, 'one minute' and I said 'no, I don't have time' that is what I said to him. I said, 'sorry I don't have time, bye’” (Robert, 512-515)

All participants experienced time invariably as altered. Whilst some found themselves having to pass time with sleep or food, without a release date, they were simultaneously aware they could be deported or released with short notice, and thus experienced a strange paradox of time moving slowly, whilst preparing for it to move quickly.

3.2.2.2 *Orientation of Time*

In detention the orientation of time was experienced by participants as altered. Detention was invariably understood to be a suspension of temporality, the past was often forcibly retold, and the future remained uncertain. Samuel recalled being forced to re-tell his experience of war in the country he was forced to leave, where his mother was killed in front of him. The experience appeared painful and vivid, and not one he wanted to re-live. His repetition of the phrase 'so many' in relation to atrocities he witnessed provided a glimpse into the painful memories he sought to avoid re-living with a stranger, despite this, he was forced to re-live them:

"In Sierra Leone the war burst out... so then we have to face the war, my mum was killed in that war, in front of me, so many, so many, so many, atrocities happen in, in front of my mum... (.) I wish, I don't want to be, I don't want, I don't want to be repeating that, that again... because if, if, if I went to that interview, then, it would remind me that, but I keep telling them 'I don't want to go to this interview' but the young, the young guy, forced me" (Samuel, 105-114)

Jamelle felt her present was defined by her past, especially her four separate experiences in detention. Following release from detention, she continued to report to immigration, where she described her body reacting alongside her mind. She described a loss of certainty; it had been pulled away. Jamelle described the fear of going back to detention as ubiquitous, as a 'nightmare' that she could not cope with. The past experiences of detention impacted the present; her temporal way-of-being in the world was altered, the past lingered in the present, a present that feels temporary, it appeared as if she was waiting for disruption:

"The anxiety part is when you know it's time for me to go report... you know it make my situation worse, wondering, asking, just thinking 'what's going to happen when I get there' ... I don't want to be detained anymore, you know that's, mind, you're mind keep beating and being scared, what's going to happen to me... and until you in, and out, that's when you can be able to feel relaxed a little bit... you know, but this, to the day, it's a nightmare, I can't cope with it." (Jamelle, 317-327)

Jamelle spoke of fear as an almost separate entity, the past remained within her, her hand gesture can only provide a glimpse of the fear she embodied as she touched her chest; this fear had a direct impact that she cannot describe, only the words depression and anxiety

emerge. Jamelle was the victim of torture, she was trafficked to the UK, but detention for Jamelle remains 'one of the worst things that ever happened':

"They've really caused damage to my life... you know, its, it's like the fear... it's still in me [touches chest]... going to report [sighs] I don't know how to describe it, you know it's, its real, ah, the depression, the anxiety, ah, its, it's horrible ... because it's the worst thing that ever happened, one of the worst that ever happened to me."
(Jamelle, 43-51)

Time was also experienced as uncertain in detention. Participants described feeling uncertain if they will be placed onto a flight and deported or released to the community. Below, Samuel described detention as waiting for the unexpected. In addition to his body, he described his belongings being subject to unexpected removal. His temporality is disrupted by uncertainty, he could not orientate himself in the future. The disruption was embodied by Samuel, as he banged on the table, asking someone else to place themselves in that situation, a situation that felt unbearable as he spoke:

"Every day you don't know when, when, when someone will call you... you don't know what the message they gonna give you... they gonna g-give you a ticket today?... And they, or, in the midnight, you are sleeping and someone be bang on your door tell you 'oh [name] you got to pack your things, to pack up, you are leaving [thumping on table] this afternoon, or this night... so how would you feel for someone to come and bang on your door, knocking on your door, tell you have 10 minutes to pack up... that you are leaving today, where are you living ... where are you going?" (Samuel, 203-216)

Certainty is not granted upon release from detention, a fear of being re-detained lingered with many participants. In the following excerpt, Kambili reflected on a loss of certainty as he feared being detained or deported when he goes to report each week. The experience of detention has resulted in a palpable fear that left him feeling unwell. Certainty was only temporarily gained after he signed:

"When I go and sign you don't know whether you will come back home that day, you feel so unwell during that period... uncertainty when you go for signing, you are not sure... until you sign out and you go out" (Kambili, 244-249)

Participants described being unable to orientate themselves in time and space inside detention; the past, present and future became altered. Uncertainty was experienced by all participants; uncertainty inside detention included not knowing how long they will be detained and when they may be deported, but also uncertainty upon release from detention; whether they will be re-detained and taken away again.

3.2.3 Corporeality | Altered Body

“You hear them screaming, you hear the person screaming 'don't take me away, don't take me away' before you, before you know they've taken the person away.” (Kambili, 258-261)

Detention was described as irrevocably changing the relationship participants had with their body, taking away their ability to perform; to express and move. Most participants described their bodies as no longer autonomous; they were controlled; pulled, dragged, spoken for; described as numbed, withdrawn, and unfeeling, for some this extended to being treated differently because of the colour of their skin. Our bodies are vessels of communication, they are our intentionality, how we connect with the world. Those who have been detained described their connection to the world as perilously denied.

3.2.3.1 Denied Body

Participants described a denial of bodily intentionality; a restriction of movement that extended to the ability to have agency over what happened to the body or how it was treated. Below, Kambili described witnessing bodies being forcibly removed, and treated without self-determination. The act of forcibly removing was described as conducted in secret, at night-time, when the body was ‘sleeping’. The act therefore was one of dragging the recently woken. The description of torture conjures a threat to the body, Kambili’s gestures were embodied as he banged on the table, facilitating a rich insight into his experience:

“It was a regime of a normal day of a migrant of torture, there is torture, very hard regime... any small mistake they can deport people... they come to you at night, when

people are sleeping, they just bang on the gate [imitates banging] drag someone out... if you don't want to come um, if you don't want to abide by the, the rules than they use force... they force you out.” (Kambili, 216-226)

Abel described his voice as withdrawn in detention, it was taken away, there appeared a duality of denial; his voice was taken away, and his ability to intend toward a phone was denied. He described human connection as monitored: he was spoken *for* rather than *with* or *to*:

“You know all these speak for you, you cannot use a thing, you cannot use this phone [gestures to his phone]” (Abel, 104-106)

The denial of the body extended to the way participants described being treated without agency or subjectivity. Samuel described being treated differently because of his race. As a black man, he felt an assumption was made; his needs or his ability to enjoy tea, were subject to questioning. It was insinuated that because he is from ‘Africa’ that his needs were open to debate. The palpable struggle to bring the words into the space added to the velocity of the confusion and anger as Samuel spoke:

“The chef... will be telling you 'When, when you were in Africa, did you, did you take water on your tea or do you t-take sugar in your tea?'... You know? It's kind of racist... how can someone, someone, a chef over there, they put there, to look after the detainee to is, is, is, telling you 'when, when you are back in Africa do you, do you, do you, used to take sugar on your tea, or did you used to take butter on your breakfast?’” (Samuel, 327-336)

Robert described being aware of how he was treated differently by an English person because of his skin colour. He drew on the physicality of the body, the blood which ran through his veins, to demonstrate the confusion of being treated differently. This embodiment of humanity is a palpable description of what makes him human, to be alive. Yet Robert, felt he was treated as if he had less value:

“We all have blood running in us... if this person can be treated this way, and the other person cannot be treated the same way this person is treated, then you can tell me the definition of that... He's an English boy behind the desk there... he was, because he's been treating everybody the same way like 'sit down there' and 'sit down there'”

so [name removed] also has to 'sit down there'... but no [name removed] is not that same, no." (Robert, 478-559)

Within wider power relations the descriptions of racism inside detention could be understood, or interpreted, through a lens of colonisation. Robert was born in Nigeria, a country colonized by the British, and within detention he found himself almost re-colonised; his subjectivity was denied, and control appropriated without his permission.

3.2.3.2 Violation of Body

In addition to denial, participants described violations of the body in detention. Violation was understood and observed in numerous ways; self-inflicted, from others and in the ways the body was used to legitimise suffering. Jamelle described below observing sexual abuse in detention, and described this witnessed abuse as 'wholly bad'; the experience of observing abuse is entire in its observation, it left no element of doubt and it remained vivid in Jamelle's description:

"I don't know if that many things have changed but, with the proof of what I've been there it remains the same, even some of the officers even abuse some ladies. I know about one or two ladies, they get pregnant there by the officers in there... it was a wholly bad situation... they take advantage of some ladies, um [sniffs] (Jamelle, 417-425)

Violations of the body were also described as self-inflicted by some participants. Kambili described detention as all-encompassing; it affected how he thought, in addition to how he felt. For Kambili, a feeling of shame coincided with a tangible physicality, that of wishing to end his life; shame here was experienced in relation-to-body. Detention was described as taking away his desire to live in his body. Feeling is located within the body; that of shame, but also fear; fear drove Kambili to move toward a desire to 'let go':

"Yeah, it affected everything, the way I think yeah... I don't know how to classify it, it was very shameful things to me... whether to commit suicide ... Yeah, the fear, it was pushing to a point... because they can push you to the worst... that you, you yourself can't do one, do one or two things just to, to let go." (Kambili, 429-445)

The denial of the body extended to the regulation of sleep. To sleep is to be still and suspended from consciousness. One 'goes to bed' you intend toward sleep; the day is working towards night, and night, for many is when sleep occurs. For participants, sleep in detention took a different meaning, for many it was denied, for others it was used to pass the time with, something to facilitate a rest away from thinking, or something to be woken from. Jamelle below spoke of an aggressive waking, with counting and banging. It appears sleep here was permissible to break into, end or monitor:

"In the morning when you wake, in fact they will be the ones, I told you, we don't really, we don't really sleep, they will be the ones to wake you, they say, they do roll count, as early as maybe 6, 5, 6-o'clock in the morning, roll count, open all the door, boom, boom, counting, counting" (Jamelle, 200-205)

For some participants, the violation of the body was witnessed in the way their bodies were used to legitimise suffering. Most of the participants experienced violence in their countries of birth, not everyone revealed this whilst being recorded. As witnesses to violence, they were often required to use the physicality of their bodies to provide tangible evidence of pain. Samuel was tortured in his home country and witnessed heinous, personally directed violence towards himself and his mother, who was murdered in front of him. Samuel was asked to legitimise his torture experience using his body, it became demonstrable evidence for pain which was invisible. There is an assumption of separation from mind and body; the body was treated as a separate entity, it served as evidence of torture, open to clinical inspection:

"The nurse and the doctors, they check on my body and they find out that er, I have something er I have um, a gunshot, I have um, something a wound, so they-they tell home office that I'm, that I shouldn't be in detention because um I have gunshot and wound. They shouldn't d-d-d-detain me." (Samuel, 51-57)

Samuel embodied the felt disruption in the manner of his speech; he stuttered when he spoke about detention; the experience of detention appeared difficult to articulate; the words were stuck between his body and the world. It was as if the experience was locked, his struggle to speak of this experience remains concrete and raw. Participants described violation in detention as existing in both the every-day experiences, such as sleep, and the extraordinary experiences, such as witnessing sexual abuse, feeling suicidal, or having their bodies inspected.

3.2.3.3 *Embodied Connection*

Participants described their connection to the world as changed, altered, or numbed by detention. This alteration extended to the ways in which participants described a felt change in how they connected to others, the world, and themselves. Below, Kambili described detention as something too painful, that it eventually took away the power to feel: his connection to the world was severed in order to cope. The impact of detention for Kambili was stark, he described a scenario of a person falling ‘completely’, building a visceral depiction of a person stripped of connection, a shift from who he was outside detention, experienced as a separation from the world he knew:

“You know when they, when they push you to the walls, you don't have any choice, I been pushed to the wall, so the situation I am in now, I don't feel anything, you understand?... it's like you are in a world that you don't, if someone is like, if someone is down, hmm, when someone falls completely, he is down... what would you feel? You feel nothing no more.” (Kambili, 339-347)

Ways of coping in detention were at times synonymous with self-harm. Jamelle noticed that detention led her towards a desire to hurt her body to cope with the experience of detention; of being confined in a room with a stranger. The decision to harm her body feels like a desperation to not feel: a usually ‘quiet person’ was hitting her head against a wall. The embodied gestures as she spoke added to the intensity of an experience that continued to feel painful:

“I'm a quiet person... you know I don't, whatever you do I overlook... sometimes, I know sometimes I get angry... I am human but not to the extent to be fighting or things like that, no I don't do that... you know even the last one, my roommate was so um, when she sleeping, she snores, you know very loud [claps]... my head was almost, sometimes I just hit my head on the wall when I can't really take it.” (Jamelle, 392-402)

In addition to not wanting to feel, participants described a change in how they connect to their emotions. For Robert, the ability to ‘feel’ required an inanimate object. To feel happy, Robert had to reach out and touch his phone. He described being ‘dependent’; a word originating from late 14^c, to mean ‘relying for existence on;’ (Harper, 2000). The meaning remains appropriate here, namely, a reliance to feel. There appeared a technologisation of

emotion; Robert viewed his phone as his only connection to something; without it there was a void of happiness. Robert described the 'taste of happiness' as 'lost'. His experience was not cognitive but bodily. Technology crept in to facilitate happiness; unable to see his family in person, the intimacy of touch and relationality was 'lost', altered:

"Then I became a dependent on my mobile phone, talking to my family... that is where my happiness now realised... each time I need to be happy, I need to pick up a mobile device before I become happy... so the taste of happiness was lost." (Robert, 354-359)

Participants all invariably described their embodied connection to the world as altered inside detention. For Kambili, detention took away his ability to feel. For Robert, his existence as a feeling person is reliant on a phone. For Jamelle, her connection was understood to be severed as a desperation to not feel. This severing led her towards hurting her body, in order to cope with the experience of detention.

3.2.4 Relationality | Shifting Self

"Some people judge you by the cover, rather than the book... but they don't see what is inside the book... they don't see, what, who you are...not when you are in there." (Tano, 467-472)

Alongside an altered relationship with the body in, and following detention, participants experienced their relationality; the relationship with their self and others, as shifted. They spoke of the numerous ways they felt criminalised, othered, pacified or 'less than' both within, and outside of detention. Feeling threatened in detention was also discussed; these threats were multiple, both tangible and indirect.

3.2.4.1 Identity

Identity is the primary motivator for someone becoming detained. Although used by the Home Office to determine the 'legality' of a person (Home Office, 2019a), and thus functioning as a determining factor for whether someone remains detained, participants in

this research described detention as altering their subjective sense of self. This was described as manifesting in a myriad of ways; feeling lost, withdrawn, or disconnected. Below, Jamelle described witnessing other people permanently lose themselves following detention. The person was described as erased and reliant on medication, the medicalisation of the self a direct result of detention. Jamelle's own experience appeared unspeakable, she began by using her brain as an elaboration of the damage, but was unable to continue, only to use her body to physically make sound. The self was experienced as almost unspeakable in relation to the phenomena of being detained:

"Some people can never get themselves back again, after being through all of this, some people are on medication when they can never stop... someone like me, I can't sleep for how many years now, my brain is [bangs table] I don't know, so... they should really do something about it" (Jamelle, 533-538)

Below, Tano described himself almost separated from his body; he described a desire for his body to escape the thoughts of his mind; the feelings appeared so powerful that they took him out of his ordinary state of mind. His experience was as much cognitive, as it was emotional, his desperation to not 'think' led him to thoughts of ending his life:

"There was a time I was almost going out of my mind, I was asking for sleeping tablets because I wanted to sleep... that was the only time I find myself like I feel like 'I want to die' in there, because I feel like, I can't, all the thinking, no more." (Tano, 163-169)

Robert reflected on how his sense of self changed in detention, he described being lost in his thoughts. He experienced detention as taking away his desire to look after himself. Robert illustrated an embodied sense of feeling 'dirty'; detention here was understood as dirty, to neglect yourself, being outside was to be clean, to take care. To belong, or to feel belonging in a place is described by Robert as 'taken away'; as if it has been physically 'taken' by detention. The word 'belong' can be traced back to the 14^c meaning 'to relate to' (Harper, 2020); this definition remains relevant, without relation to a sense of place, Robert felt detached, and cared less:

"Self-neglect. I must tell you, no matter how clean or neat you are if you go in there and not very strong, you end up becoming very dirty person... the urge to go and wash yourself is not even there, cos your lost in thoughts in the ward which you are in at

that moment, like that, sense of belonging has been taken away... you notice that you care less about yourself... at some point I had my nose grown, my beard everywhere... which wouldn't happen when I was on the out." (Robert, 359-370)

Robert experienced himself as unpredictable in detention. He described impositions being placed upon him; illustrated by the introduction of 'mood swings' and feeling 'withdrawn'. The 'setting in' of anxiety suggests a powerlessness too, to his emotions. Robert described feeling 'all over the place'. Detention did not create certainty; it was instead chaotic. His relationship with himself was also questioned, he recalled a 'different me':

"Um, yeah, um (.) it feels, all over the place, um, anxiety sets in, anxiousness, um [pause] withdrawn, and then I'm unable to perform when I'm being in there, it's like a different me... and, psychologically demoralising... and then it introduces mood swings which I never used to have one minute I might be happy, the next minute I'm sad." (Robert, 348-354)

Most participants described their sense of self as shifted in detention; understood as *moving away* from who they were outside. Robert described a marked shift in the ways he related to others. For Jamelle, it was an unspeakable shift, one that words could not describe. For Tano, detention was so painful at one point he no longer wanted to be alive. Identity in detention expanded beyond the legal identification requirements of the state. It was also described as a subjective shift by participants. For many, this shifting identity continued outside of detention.

3.2.4.2 *Self as Threatened*

Feeling threatened in detention was described by participants in a numerous of ways: denial of medication, communication, or legal help, and feeling threatened by others. Threats were described as remaining after participants had left detention, particularly the threat of being 're-detained', a threat of the future. Below, Tano described the denial of medication as making him feel like he would 'lose it'; this denial had a direct bearing. Without access to medication, he described his depression in a physical manifestation: it was 'kicking up and kicking in'. His experience of seeking help was described as chaotic and unpredictable:

"I'm there, I almost lose it again because my depression was kicking up and kicking in, and I don't have medication so I have to, even sometime even, their hospital in there

is, is terrible as well...Yeah, when they give you an appointment... to come to the doctor, sometimes, they tell you the doctors not available, and they already give you an appointment, when you get there, they tell you to come back again" (Tano, 151-161)

Limited access to technology within the detention centre also emerged as threatening. Kambili spoke of witnessing people end their lives in detention, and the prohibition of a camera to document this. He paused briefly after he mentioned 'suicide', suggesting perhaps a pain that could not be described with words. He differentiated between the inside and the outside: what happens inside is not spoken about outside; alluding to secrecy:

"And I been there, I experience so many suicide (.) when suicide happens they tend to chase everybody in to their rooms so that people, so nobody can take a camera, they take away your camera and give you a phone that doesn't even have a camera as well. So all these things in the room, they don't sit outside do you understand, once inside there... people committing suicide and they keep quiet" (Kambili, 93-100)

Participants also described feeling threatened by others. The violence was perceived as senseless, without reason, and so without a means to predict. Below, Tano described a vulnerability when witnessing violence, fearing it will happen to him. The repetition of 'I've not done anything' highlights the helplessness he felt:

"Yeah, so he was upset with him for... putting on his slippers. and they punch him and boom, on the floor, that means somebody else can do it to me too... that means I'm not safe in there... I've not done anything; I've not done nothing." (Tano, 276-281)

Poor communication resulted in Samuel him being wrongly taken to an airport to be deported, he described below wanting to be deported to an unfamiliar place, rather than be detained. The sense of desperation was still vivid as Samuel described this, borne from the frustration and struggle to receive information, the disregard he felt was profound. Upon arrival at the airport, he was then sent back to the detention centre, with little-to-no communication:

"So, they put me they put, put me in that van that took me to... airport, I don't know what happened, they put me back again-I said no! I don't, I don't wanna stay here again, I wanna leave, I, I, I, don't wanna stay in this, in this, in this, in this, in this prison again, they put me back there again"(Samuel, 243-248)

Samuel experienced himself as *without* information; the prevalence of secrecy placed a tension, and way of being that was both uncertain and threatening. Samuel had no choice, he couldn't stay, and he couldn't leave. Feeling threatened inside detention extended beyond physical threats from others, it manifested in the difficulty's participants faced in accessing communication. In addition, a sense of secrecy created a threatening environment of distrust.

3.2.4.3 *Treated like a Threat*

Participants also described experiencing themselves in relation to others invariably as a threat; as a criminal, despite having committed no crime. Descriptions of 'criminal' and 'immigrant' are understood to be synonymous with being monitored and objectified. Samuel described being taken to a hospital in handcuffs, this led him to question himself and how he appeared to others. He described his identity shift as something 'done to' him, a passive recipient of the detention estate, which extended beyond the physical space of detention. He described his body being forcibly managed; handcuffed and restrained. These impositions were described as evoking feelings of shame. There was a powerlessness observed here, of being unable to shift this perception:

"I feel sad, people you know, you know people in hospital be looking at you... like this 'oh, th-this guy is, is a criminal' ... It's very sad, it made me ashamed of yourself... so why, because of, because of, because I'm, I'm, I'm, an immigrant that's why I be I, I was handcuffed, leg and here, and arm... even, even when your w-w-when you're a-a admitted in to a-a-a h-hospital... they have to handcuff you, one hand and one, your toes, they are, they are [gestures hands tied to toes] to your bed." (Samuel, 399-410)

Samuel surmises people must fear him, the physical restraint for Samuel suggests he was seen and perceived as a hardened criminal, he feels this fear, yet is unable to let them 'know' who he is, to be really seen. He reflected on the difficulty of using words to describe his experience, allowing an insight into his experience, as something unspeakable:

"If someone came to the, came to the hospital to the-the that ward, and the person think, oh this guy is a is a, is, is, is a hardened criminal... I dunno how, I don't know how to put it in words. I take it, I take it they were afraid so there is nothing I can do" (Samuel, 416-423)

The perception of being labelled as criminal in detention was synonymous with being an immigrant for Kambili, who went further to suggest that there is no separation between a criminal and an immigrant in relation to his self in detention, this was understood by him as a madness, the repetition of madness added to the velocity of this statement:

“It was madness... it was madness, cos there is no, cos there is no difference between criminal and an immigrant... there’s no difference.” (Kambili, 87-90)

The etymological meaning of criminal originates from ‘sinful or wicked’, whereas immigrant is to ‘to remove, go into, move in’ (Harper, 2000); the two are markedly different, one denotes illegality, the other connotes moving towards something. However, for many participants inside detention, the labels placed upon them were understood to be used interchangeably. Participants were treated as a threat in the ways they were arrested, restrained, and locked inside their rooms during the evening, rather than be allowed to move freely across the site.

3.2.5 Other | Relationship with the State

“Being in detention is no good for a human being... whether the person has no right to live in this country or not” (Samuel, 170-174)

Participants’ relationship with the state was discussed in a myriad of ways, particularly the UK government as a nation-state, and its treatment of people born outside the UK but seeking refuge within its borders. Political spatiality was demonstrated through the dynamics which dictated those who ‘belong inside’ and those who ‘belong outside’. Participants reflected on their position *with* society, whilst simultaneously feeling separated *from* it. This described sense of separation from the state was understood almost as an *un*belonging. Below, Robert described his refusal to be handcuffed by the state when he was arrested, as he sought to claim human rights he felt were accorded to him. Citizenship was described by Robert as something to be granted because of his son’s birth into the state, over any other claim or feeling of legitimacy, or belonging within the country. His contention for eligibility is understood to be political, rather than subjective:

“I will never have handcuffs in this arm again as long as I do not commit any crime, I am eligible for a stay in this country, as my son has turned 10 four-months-ago... he is a British boy, I am a parent of a British son, I need some sort of rights to be accorded to me.” (Robert, 192-197)

Samuel reflected on his confusion regarding the threat of deportation to Nigeria. Deportation here was assumed to be viable as Samuel was a ‘citizen’ of another state, despite leaving the country at the age-of-five. His nationality was externalised, there appeared an assumption that his being, his identity, belonged in a place he was not familiar with. He does not know anyone in Nigeria, yet he says his belonging was contested and determined within the UK. Despite this, because of experiencing detention, Samuel described wanting to be deported to an unfamiliar place, rather than continue being detained:

“They try to deport me to Nigeria, I said listen, I left Nigeria when I was 5-years... I don't know anybody in Nigeria.... they said my nationality is in Nigeria... I say that my mom she told me I'm from Nigeria, then I went to Nigerian embassy... they issue a passport for me, they issued a passport for me here, in London!... that is the reason why they said I must deport to Nigeria... I don't know anyone... ok, one day, its ok, I'm tired of staying in this detention, I don't wanna be here” (Samuel, 217-237)

For Kambili, detention represented a separation from society, in feeling separated from society he felt *without* society. He described this sense of separation in an embodied way, as if he was physically ‘detached’. There appeared an almost inside-outside dynamic here, with the outside being ideal, and the inside (detention) as without society:

“Well, to me, it's not, is not a good place for someone to go, for anyone to go because it detach you from, an ideal society, de-detach you from... its, from the society.” (Kambili, 371-374)

In addition to a separation *from* the state, the relationship *with* the state was also discussed. Participants described feeling questioned, confused, and shocked by the state. Samuel described his relationship within the state as one based on ‘believability’. He described the state as making decisions based on whether they felt someone was telling the ‘truth’; he reflected a feeling of suspicion here, that his experience can be perceived as judgement, rather than fact:

“This country is a country that when you say something, they look at it whether it’s true or not, so they, they, they say they tell you ok so 'no, no, no' this guy we don't believe what he told, what he, he saying, they don't, they don't believe.” (Samuel, 475-478)

Many participants have lived in the UK for several years prior to being detained. Below, Tano described the confusion he experienced at being detained, he recalls asking the guards why he was being detained and denied legitimacy. He reflected on his life being determined by a sheet of paper; paper which regulated his right to be in the UK:

“Why am I being detained for, because of I don’t have a paper... I do not forget I have a responsibility, I already in this system, of being, having a responsibility, I already got my paper, I’m working before, I’ve got ID, experience of this but, they don’t care.” (Tano, 335-341)

Kambili described his family and private life as taken away by the state, viewed through a lens of British colonialism, he views their ‘preaching’ as a contradiction in relation to his care by the state. Rights are described as spoiled, the physical gesture added to his experience of frustration here, he banged on the table as he spoke of the country:

“...they are there talking about to family life and private life, they came to Africa, preaching about human rights, but then they are the ones making, they are the ones spoiling the lot (R: Mmm) there is [bangs table] this is Great Britain man” (Kambili, 571-576).

Participants spoke of the concept of illegality in relation to their being-in-the-world; as a human deemed illegal, or legal. Belonging to the state served as way of relating to the UK, of being ‘legitimate’. They spoke of the various ways they felt separated from the state, whilst still existing within it.

3.3 Summary

In summary, this chapter presented five emerging themes. These themes were revealed following an orientation to the lived experience of being detained within UK detention

centres. Firstly, the experience of detention was described as expanding beyond the walls and confines of the detention building. The journey to detention was experienced as something that continues to impact the lives of detainees; participants described the unexpected nature of being arrested as a lingering fear which continues to permeate those who have been released. Upon arrival to detention, participants described a prison-like building; this sense of incarceration stretched beyond the physicality of the building, it was described as something that *turned* participants into prisoners; the fear of the building remained with those who have been released. The experience of detention was described as a denial of home, a place to-return-to; this in turn created a sense of suspension and unfamiliarity. The space of detention was also experienced as a restriction of freedom; this restriction was invariably described as harmful and was felt both internally and externally. In particular, freedom from intrusion made the boundaries of public and private appear obsolete, and with it, the right to be private. Temporality within detention was pronounced as both never-ending and finite, it was experienced as something to beat or endure. This unpredictability left participants struggling to orientate themselves within detention, this sense of ‘unknowing’ was understood as impacting their mental health, the uncertainty was described as ‘too much’ and at times led to thoughts of suicide. Detention was expressed as stripping participants of being oriented towards the future, the future remained and remains uncertain; fear of being re-detained was omnipresent. Detention was also experienced in-body, and this was understood in the ways participants described how their bodies were denied, taken over, controlled and monitored, such bodily control left participants feeling shocked, abused, violated and ‘destroyed’. Participants witnessed other detainees being forcibly removed and dragged and described detention as altering their embodied connection with the world. Their relationship with themselves, and others was also brought into question; feeling like a threat, and feeling threatened: namely, feeling threatened by poor or non-existent access to legal help, healthcare and communication. This was described as leaving participants feeling vulnerable. Finally, participants spoke of the ways they felt separated from the state, whilst being under its guise. Politics is understood as having a direct impact on those who are detained. This sense of imposed separation led to feelings of unbelonging, of being denied the right to be human.

This chapter has covered the analysis and has attempted to present the lived experience of being in detention for the participants in this study through the themes presented. The next chapter, the discussion, will consider how these themes sit in relation to contemporary discourses on detention, as outlined in the literature review.

4 Discussion

4.1 Overview

The previous chapter explored the themes which emerged following an orientation to the lived experience of being detained within UK detention centres. This chapter will link these themes with wider discourses discussed in the literature review. Firstly, an overview on how reflexivity informed and guided this research journey will be discussed, with particular reference to personal reflexivity on the interviews. Secondly, a broader discussion of the emerging themes will be unpacked, explored and linked to contemporary discourses on the phenomena of being detained in the UK, followed by a summary of the chapter.

4.2 Personal Reflexivity

The importance of reflexivity in research is emphasised in Counselling Psychology (Kasket, 2013) and the chosen method. The methodology chapter explored reflexivity in relation to the chosen method, personal reflexivity will be discussed below. In an attempt to stay as reflexive as possible, this section will be written in the first-person, active voice. I was drawn to this research following a conversation with a friend who had been detained; they'd lived and worked in the UK for a number of years, and unexpectedly found themselves locked in a detention centre. Many of the participants I spoke with had similar stories of unexpected arrest and detention.

The interviews and analysis remain vivid in my memory. Kambili was the first person I spoke with. He said he was grateful for the opportunity to be heard and as he said this, I felt an immense sense of responsibility (my hands were shaking, I had to hold them together under the table). Kambili felt incredible anger at being detained, this anger filled the room. I felt the anger inside my body as he spoke, this was amplified further as he banged his fists on the table. As someone born in this country, I wondered what part of that anger was mine to hold, I felt responsible in some way. I had to ensure I noticed my own anger at the injustices he faced in the UK and made a note of this in my journal and kept it in mind as I began the analysis process.

Abel arrived late for the interview we had arranged two times previously: he had an understandably busy, unpredictable and uncertain life, uncertainty that often is experienced by people who have been given precarious immigration statuses. His experience was centred around his loss of freedom. During the first Covid-19 lockdown, in April 2020, it was Abel I thought of in relation to restrictions. This idea of freedom as a construct, as a mindset, stuck with me. Freedom to Abel was not necessarily being able to leave, it was the ability to, the choice.

Samuel's experience of detention was very embodied, during the transcription I felt a particular connection to his words and at times his struggle to get his words out. I felt bound to his words as he made the effort to bring them to the space between us, at times the words felt painful as they emerged, they remained in the air. When he spoke, I could feel my body tense up, I felt incredibly moved by his experience.

Robert spoke in a very poetic way; he had been looking forward to our meeting and greeted me with a huge smile. He had a way of using his hands to describe his words, they were constantly moving and building a picture. When he described boredom as manifesting in the peeling of a tangerine it was incredibly visceral to me, I could smell the tangerine. He recalled this usually mundane moment and yet, it became such a meaningful utterance because it was so ordinary, in such an extraordinary environment. I felt a pounding in my chest when he described the moment he was arrested. I realised at the end of his experience, that I'd been sat at the edge of my seat, as if moving as close as possible to his experience, but of course, never close enough.

Tano was detained for a considerably shorter time than the other participants I spoke with, yet the experience remained with him. Similar to Robert, it was the described ordinary experiences which remained with me; the sadness he felt at not being able to pick up his children from school, an event so ordinary, yet its denial devastating, to the point he considered taking his own life.

The interview with Jamelle remains with me. Her words stayed with me long after the interview, and as I re-played and re-read the transcript, the impact never lessened. She was detained on four separate occasions, a survivor of torture, and trafficking, yet the experience of detention appeared to be the most painful. At times there appeared to be no words for her experience, and her pain. I felt a need to speak more, as she appeared more anxious in the silence, less so when we spoke. I was tentative to ensure she was in control of her narrative. She remains in my mind, as all of the participants do, as van Manen writes below, to be *affected* is part of the process:

“Textual emotion, textual understanding can bring an otherwise sober-minded person (the reader but also the author) to tears and to a more deeply understood worldly engagement” (van Manen, 1990, p. 129).

There were times during this process that I needed to step away from the research, this enabled me to then return afresh to the parts, and the whole. This felt necessary due to unexpected personal circumstances, including a very close bereavement and subsequent house move. This was in addition to a global pandemic, and three lockdowns, making familiar family contact no longer possible. At times this made it difficult to stay orientated to research. Regular supervision, personal therapy and my on-going reflective journal ensured I had the space to address these challenges, and notice when I needed to step back, before returning again.

4.3 Unpacking Emerging Themes

This research offered a new perspective on experiences of being detained in the UK, organised through the life-worlds of spatiality, temporality, corporeality, relationality and an additional theme ‘Relationship with the State’ which incorporates the lived experiences in relation to wider social and cultural contexts. Five themes, with 12 sub-themes, emerged following orientation to the phenomena of being detained. The literature review highlighted various emerging themes from available research on detention. Namely, detention resembling a prison (Shaw, 2016; Hollis, 2019; Afari-Mensah, 2017) the concept of identity (Griffiths, 2012;

Hollis, 2019) and the experience of time in detention (Griffiths, 2014; Turnbull 2016). Lack of privacy, healthcare and legal help within detention was also a concern raised in the literature (Ashrad et al., 2018; Hollis, 2019; Afari-Mensah, 2017). Ways of coping with detention were also examined, this included self-harm, suicide, and resilience (Athraw, 2014; Griffiths, 2014; Kellezi & Bosworth, 2016; Turnbull, 2016; Hollis, 2019). Detainees were often pathologized and conceptualised through western paradigms and labels (Kellezi & Bosworth, 2016; Sen et al., 2017; Hollis, 2019), that tended toward conceptualising people who were detained by diagnosis. For instance, within the reviewed literature the concept of resilience, PTSD and trauma were often used in relation to the experience of people who have endured detention (Kellezi & Bosworth, 2016; Sen et al., 2017; Hollis, 2019). Contrary to this, participants in this research did not speak about their experiences through these paradigms in an explicit sense; instead they offered their own lived experiences. For example, participants described being unable to return home, denied the right to privacy, forced to re-live painful memories, having their bodies objectified, feeling threatened or criminalised, all as invariably harmful experiences. This is in line with Summerfield (2001) who warned against the use of diagnostic labels to categorise subjective experiences. This research supported other findings within the wider field but also offered a psychological contribution, guided by life-worlds, on the subjective, lived experiences of detention in the UK. The themes will now be discussed in relation to the existing literature as outlined in the literature review chapter.

4.3.1 The Violation of Space

4.3.1.1 *Arriving at Detention*

The journey and arrival to detention featured strongly in the participants narratives. The literature on the arrival to detention highlighted the varying ways someone can become detained. Bindmans (2020), Right to Remain (2019) and BID (2019) all document the legality of detention; and the processes by which someone can be arrested, handcuffed and taken to detention. Taylor (2018, 2019) highlighted the controversies surrounding the detention of people who have lived in UK for many years. Gentleman (2018) detailed the process of arriving at detention including the use of handcuffs and the policies in place. Hollis (2019)

highlighted the shock participants in his research felt at being detained. Participants in this study also described the arrest and subsequent arrival to detention as a shock. The fear of being re-detained or deported had a tangible impact on their daily lives, which is a phenomenon supported within the existing literature (Hasselberg, 2016). The notion of powerlessness also links to previous literature (Hollis, 2019). The descriptions of arrival at detention uncovered experiences that were not raised in the literature. The experience of arriving is synonymous with provocation, manipulation and denial of free movement. Participants described their bodies being handled and restrained, for Robert, a direct result of this restraint was a feeling of shame and humiliation.

4.3.1.2 The Lived Space

The lived space of detention was invariably described as a prison by participants in this study, and it changed their relationship with ordinary things. Shaw, (2016), Hollis (2019) and Afari-Mensah, (2017) highlighted the varying ways detention resembled a prison. The space was described as facilitating violence, self-harm and suicide. The prevalence of self-harm and suicide was discussed further in the theme 'Violation of Body'. The descriptions of the lived space being 'infectious' were not uncovered in the reviewed literature. This observation was striking as during the analysis stage of this research there was and continues to be, a Covid-19 pandemic; itself a very contagious and sadly sometimes deadly, disease. Medical Justice (2019) and Detention Action (2020), highlighted the ongoing high risk for outbreaks of Covid-19 inside detention centres. The descriptions of the space of detention uncovered additional aspects not covered in the reviewed literature. Detention was described as a phenomenon which changed the relationship participants had with ordinary things; for example, plastic dinner knives became weapons. Finally, the space also facilitated ways of coping, a Church was described by Jamelle as the only thing that kept her going. Religion as a coping mechanism was also highlighted by Hollis (2019) who described faith as providing meaning for detainees in detention.

4.3.1.3 Denial of Home

According to van Manen (1997) the home “reserves a very special space experience which has something to do with the fundamental sense of our being” (p. 101). The significance of home in relation to detention was shared by all participants. Many spoke of a denial of home. Existing literature has acknowledged the importance of home. Turnbull, (2016) highlighted how people were denied the opportunity to go back ‘home’ when they’d lived in the UK for many years. Similar to Turnbull (2016), home was the UK for many years for participants in this study; deportation out of the UK was also a denial of a place they’ve called home. The significance of home in relation to migration was discussed by Papadopoulos (2002), who argued the loss of home was often neglected in refugee discourses. For participants in this study, the lived experience of detention was synonymous with a denial of home; both the physicality of home, but also the felt sense of home, feeling ‘at home’. It was also a denial of nature, of sunshine. Such denial was described as creating a sense of upheaval.

4.3.1.4 Loss of Freedom

Participants all spoke about a loss of freedom in detention; both the inability to leave the lived space alongside the varying ways confinement was understood to impact their daily lives in detention. Turnbull (2016) discussed lack of freedom when referring to detainees being ‘stuck’ in detention. Shaw (2016) highlighted the correlation between prison and a lack of freedom. Hollis (2019) linked freedom with Antonovsky’s (1979) ‘sense of coherence’ theory within detention, describing detainees as ‘empowering’ themselves from the physical confines of detention. Participants in this study offered an understanding of freedom in relation to spaces they previously inhabited. Loss of freedom was understood as a denial of privacy and autonomy; freedom to be private: to shower or to sleep without intrusion. Denial of privacy was discussed in the reviewed literature; Arshad et al. (2018) described lack of privacy as illustrated by unexpected intrusions on female detainees. Participants in this study described the loss of freedom as continuing to impact their lives despite being released, and the sounds of detention as continuing to disturb them. Furthermore, freedom was described as embodied; Kambili described being split in two, one leg in, one leg out, offering a glimpse of freedom as something that is felt in-body; as well as space.

4.3.2 Altered Time

4.3.2.1 *The Paradox of Time*

Whilst in detention, participants described an urgency in relation to accessing legal help upon arrival, yet time was also indefinite, it stretched out. Turnbull (2016) surmised that waiting was synonymous with uncertainty. Turnbull (2016) concluded the practice of detention *could be* productive for detainees. Contrary to this, participants in this study found little productivity in waiting. The experience of time as a paradox linked with Griffiths (2014) who argued temporality in detention was experienced in dual uncertainty. As with Griffiths' research, participants in this study described time as a paradox. Descriptions of time were often embodied, participants clapped their hands or gestured, as if to express the speed or urgency they felt. Although this research shared Turnbull's (2016) descriptions of time being an exercise of control, one participant powerfully described taking back 'time'; Robert described 'taking back control' of his time when he left detention, telling a guard he didn't 'have time' for him.

4.3.2.2 *Orientation of time*

Participants described their temporal landscape as altered in relation to being detained. The future was described as unknown- and the present became defined by the past. Griffiths (2014) discussed time as dramatically altering the present and future of detainees. This is also supported by Turnbull (2016). Like Griffiths (2014) and Turnbull (2016) participants in this study described detention as altering their relationship with time. The lived experience of detention was described as altering participant's relationship with the past, as it became used to legitimise suffering. The Adults at Risk Policy (Home Office, 2018b) was implemented by the Home Office to address concerns raised by Shaw (2016), that vulnerable people were being detained. The policy recommended that victims of torture or trafficking should not be detained. Jamelle was a victim of torture and trafficking yet was detained on four separate occasions. Concerns over the detention of vulnerable people have been echoed in numerous charities and reports (Institute of Race Relations, 2015; Migration Observatory, 2016; Women

For Refugee Women, 2017; British Red Cross, 2018; Medical Justice, 2018; The Detention Forum, 2018). Participants described their temporality being irreversibly altered in detention, and this was often experienced as being both denied an orientation to a future, whilst simultaneously been forced to re-live the past. The orientation of time was also experienced as uncertain in detention. Kellezi & Bosworth (2016) mentioned uncertainty in detention as having a direct impact on mental health for people who are detained. Griffiths (2014) illustrated uncertainty through the inability of detainees to plan for their future. Like Griffiths (2014), participants experienced uncertainty as to whether they would be deported. This research highlighted how time was also experienced as power being exerted over participants, with guards coming for them 'at any time', this was described with fear and uncertainty. Uncertainty remained with participants after they left detention. Often, this fear was embodied as they feared for the future whilst living with precarious immigration status.

4.3.3 Altered Body

4.3.3.1 *Denied body*

Participants described a denial of bodily intentionality and autonomy in detention. For instance, with descriptions of bodies being 'dragged' or forcibly removed. Violence [or use of force] in detention was acknowledged in the reviewed literature. BID (2019) found excessive force was used when people were removed from detention. This was also confirmed by the Shaw Report (2016) which outlined instances where physical force had been used toward detainees by staff members. Similar to Shaw (2016), and BID (2019) participants in this research described being awoken by the noise of people being deported; the practice of early morning deportation flights was shared in wider reports (Shaw, 2016, 2018). Taylor (2019) reported on the routine handcuffing of detainees. Like Taylor (2019), participants in this study described being handcuffed when arrested or receiving medical care; it was synonymous with feelings of shame and powerlessness. Participants also described being treated without agency or subjectivity, this extended to the ways they felt they were treated differently because of the colour of their skin. Literature highlighted the prevalence of racism in detention centres. Bosworth (2014) suggested that, like prisons, detention estates are highly racialized and gendered institutions. Turnbull (2017) highlighted the historically

disproportionate number of black, compared with white detainees in detention. Afari-Mensah (2017) discussed institutional racism in the UK as impacting healthcare access, and Athwal (2014) examined the culture of racism and the impact of privatisation in relation to detention estates. Racism was referred to explicitly by some participants. All participants identified as black and are from West or East Africa; three from countries formally colonized by Britain. The wider impact of colonialism on migration was examined by Mayblin (2017) and Mayblin & Turner (2020); both highlighted how colonialism can be witnessed in modern day policies of migration, this is discussed further under the theme 'Relationship with the State'. This research highlighted additional lived descriptions of racism in detention as something which was embodied and experienced in the daily lives of those who are detained, from eating dinner, to speaking with guards and officers. Thus, racism in detention exists on a macro level; institutional racism of a system that is disproportionate in its detention practices (Turnbull, 2017), as well as on a micro level, it was felt in-body and in the daily lives of detainees.

4.3.3.2 Violation of Body

Violation of the body in detention was understood and observed in numerous ways; the violation of sleep, of the self, or the observed violation of others. This included witnessing abuse, violence and suicide. Existing literature highlighted concerns for abuse towards detainees from staff members. A BBC documentary secretly filmed members of staff abusing, humiliating, and failing to protect detainees (Grierson, 2020). Jamelle also described witnessing abuse by guards towards female detainees. This described witnessed abuse adds to other existing reports of abuse in Yarl's Wood by Women for Refugee Women (2015), who highlighted concerns regarding treatment of women inside detention. Concerns for the high prevalence of suicide, self-harm and distress have been documented in contemporary discourses (Griffiths, 2012; Taylor et al., 2018; AVID, 2019; Medical Justice, 2019). Athwal (2014) identified a system of neglect as a factor in suicide in detention. Kellezi & Bosworth (2016) identified detainees precarious immigration status', concerns for physical health and witnessing other people being removed, as contributing to suicidal thoughts and self-harm in detention. Participants described the experience of detention as being synonymous with violation of the self. Suicidal thoughts were experienced by Kambili, who described wanting

to end his life at one point. Participants described a loss of agency; it was understood to be permissible to wake participants bodies from sleep, to take away their intentionality, their choice to wake up. As discussed in the literature review, detainees are routinely inspected upon arrival to detention; this included assessment for evidence of torture (Home Office, 2001). Griffiths (2012) noted the inspection of bodies in detention as instrumental to the strength of an asylum claim. Similarly, participants in this study described their bodies being used as evidence to prove past suffering; their emotional experiences were often reduced to the visible wounds on the body. Like Griffiths (2012), participants' wounds were inspected in a clinical environment, the body, the flesh, the bone- were treated as evidence, and as such their narrative was then determined to be 'true' or not.

4.3.3.3 Embodied Connection

According to van Manen (1997) we are always bodily in the world; we meet the world, and others, firstly in body. Participants described their embodied connection with the world as altered and this was understood in a variety of ways. Embodiment was explored by Griffiths (2012), who highlighted the routine inspection of the body, and its use in the 'legitimation' of identities in detention. Specifically, the use of biometrics to finger-print detainees and determine their identity (Griffiths, 2012). Unlike Griffiths (2012) participants in this research did not refer to biometrics in relation to identity or embodiment, rather they described their lived connection to the world as altered. Participants described a gradual disconnection from their lived body, understood to be a withdrawal in order to cope in detention. Robert described his way of connecting to the world and to others as dramatically transformed in detention, his ability to feel was dictated by, and experienced through, a phone. Kambili described the connection with his body as severed, his experience was understood to be so all-encompassing that he described not being able to feel anymore. Previous literature highlighted the prevalence of self-harm in detention (Athwal, 2014; Kellezi & Bosworth, 2016) as discussed in 'Violation of the Body'. Jamelle witnessed a marked change in how she viewed herself in detention, highlighting the embodied impact of detention; a usually quiet person felt such anger that she banged her head against the wall to cope with painful feelings.

4.3.4 Shifting Self

4.3.4.1 Identity

Contemporary discourse noted the importance of identity in relation to the experience of detention in the UK; both the processes of identification (Griffiths, 2012) and the broader subjective experiences of identity inside detention (Hollis, 2019). Issues concerning identification serve as a primary motivating factor in determining who is detained; it is part of the 'administrative' purpose of detention, according to the Home Office (2018b). Griffiths (2012) examined the process of identity in detention from a macro view, exploring identification and the ways it is open to dispute, and leaves people vulnerable to criminalisation or indefinite detention. The subjective experiences of identity were also examined in contemporary discourse. Hollis (2019) referred to a paradigm in exploring the experiences of people detained in the UK, using Antonovsky's (1979) SOC theory to understand how well-being can be interpreted. Participants in this research described their self and identity as shifted in a myriad of ways; they described feeling lost, withdrawn, or separated from who they used to be. For Robert, detention was experienced as a neglect of himself. He recalled feeling like a 'different me' in detention, in addition to feeling anxious and withdrawn. Griffiths' (2012, 2014) Kellezi & Bosworth (2016), Sen et al. (2017) and Hollis (2019) all highlighted the prevalence of anxiety inside detention. The long-term impact of detention was examined on a macro scale by Klein & Williams (2012) who argued people released from detention were not prepared or supported. Jamelle described other detainees as never 'getting themselves back again' after being released from detention; referring to people she knows who are now reliant on long-term medication following their experience of detention. Finally, detention isolated participants from their social world; reviewed discourse on attachment theory (Bowlby, 1988) positioned individuals as innately orientated towards the social world (Reuther, 2014). Participants descriptions of feeling disconnected inside detention perhaps highlights the importance of connection with others; "Bowlby's main message... is that human beings are contact-seeking: our wellbeing depends on the state of our relationships" (Gomez, 1997, p. 168). Namely, participants described altered sense of self could be understood to be in part due to the disruption to their relationships (with their self and others), in an unfamiliar environment, with limited social contact.

4.3.4.2 Self as a Threatened

Reviewed literature stated many people can feel threatened inside detention. Griffiths (2012) argued 'contested identities' often left people in limbo because of incorrect documentation. This also supported wider debates on contested identities (Nyers, 2019). Afari-Mensah (2017) reported that detainees often felt 'threatened' by removal or transfers to other detention centres, in addition to being fearful of requesting adequate healthcare for fear it would impact their asylum application. Poor access to healthcare and the impact this has on well-being was well documented in the literature on detention (Afari-Mensah, 2017; Ashrad et al., 2018; Hollis, 2019). In line with the reviewed literature, Tano described difficulties in receiving medication in detention. This was understood to also be threatening- a threat borne out of neglect to his healthcare needs. Furthermore, participants' descriptions of seeking and receiving help was unpredictable. Feeling threatened by poor access to communication extended to the ways in which participants described being unable to obtain information or use cameras. Having a camera, or a mobile phone with access to the internet is forbidden by the Home Office (2018a). BID (2019) highlighted the difficulties detainees faced in accessing legal care or information regarding bail, this is arguably made more difficult by language barriers and exacerbated by limited access to information. Hasselberg (2016) argued detainees who have been released fear being re-detained, this fear had a tangible impact on people who have experienced detention. Like Hasselberg (2016), the threat of detention for participants in this research was understood to be long-lasting; namely a fear of being re-detained.

4.3.4.3 Treated as a Threat

Participants' descriptions of feeling they were treated as a threat were consistent with previous literature which highlighted the criminalisation of detainees. Afari-Mensah (2017) argued detention is synonymous with prison, and detainees are often perceived as criminals (and thus a threat to security); particularly those with undocumented status. In a wider context, Fiddian-Qasmiyeh et al. (2016) argued migrants are often criminalised through the act of seeking asylum. Hollis (2019) argued detainees were often treated as a threat, he referred to Festinger's (1957) theory of cognitive dissonance to understand the lived

experiences of detention. Hollis (2019) posited participants internalized a belief that they were becoming a criminal. This is dissimilar to participants in this study, who felt 'labelled' as a criminal; but did not internalise this label, rather, being seen through the eyes of others as a 'threat' to society was experienced as disempowering. Similar to Afari-Mensah (2017) and Fiddian-Qasmiyeh et al. (2016), participants shared insight into the lived experience of being treated as a criminal, and in turn a threat; from being arrested at their workplace or being handcuffed to a bed whilst in hospital. This links to wider discourses on the mechanisms that seek to construct 'refugees, migrants and asylum seekers' as a threat (Korac-Sanderson, 2017).

4.3.5 Other | Relationship with the State

The relationship with the state was described as part of the lived experience of being detained by participants in this study. Policies which turned 'migration' into a 'securitisation' issue for states were highlighted by Korac-Sanderson (2017). Nyers (2019) highlighted the divide between those who legally 'belong' within a state, against those who do not. Griffiths (2012) argued migrants are also often victims of criminalisation when denied 'citizenship' or have no 'agreed' identification. Participants in this study described their experience within detention as a felt separation from the state. This was described explicitly by Kambili who described feeling detached from society- being in detention was to be *without* society. Citizenship in the UK as a concept was also called into question by participants in this research. Samuel was threatened with deportation to an unfamiliar country; despite having lived in the UK for many years. He described being provided with a nationality he was not familiar with, thus becoming a non-citizen of the UK. In addition to feeling separated from the state, participants also described confusion as they existed within it. Existing discourse on post-colonial theory (Mayblin, 2017; Mayblin & Turner, 2020) highlighted the historical impact of colonialism in shaping modern-day migration policies. Turnbull (2017) highlighted the high prevalence of people from formally colonized countries being detained in UK detention centres. In line with Mayblin & Turner, (2020) and Turner (2017) the impact of colonialism continues to impact migration- and present-day detention practice. This was witnessed in the experiences shared by participants; Kambili spoke of the contradictory nature of the state, noting the UK's criticism of countries within Africa of failing to adhere to human rights, yet Kambili described

the UK as not providing rights to him, a person born in a country formally colonised by Britain. Furthermore, Samuel described the state as something which 'decides' whether someone is truthful; this described suspicion assumes a relationship based on 'believability'.

4.4 Summary of Chapter

This chapter discussed the emerging themes from the analysis. These themes were in line with existing discourses on detention as discussed in the literature review and offered insights from the lived experiences of being detained. The violation of space confirmed existing research on detention, namely, detention resembling a prison (Shaw, 2016; Afari-Mensah, 2017; Hollis, 2019). In addition, the journey to detention was described as synonymous with shame and humiliation, bodies were handcuffed, and autonomy stripped away. The lived space was often associated with a denial of home and familiarity, this was in line with Papadopoulos (2002) who argued that trauma discourses often neglect the loss of home. The lived space was also experienced as infectious. Although participants were not detained during the Covid-19 pandemic, concerns for the safety of people during the pandemic were raised by Medical Justice and Detention Action (2020). The alteration of time is in keeping with what has been documented within existing research which states time is experienced with dual uncertainty (Griffiths, 2014) and experienced as an exercise of control (Turnbull, 2016). Participants, unlike what has been discussed in the literature reviewed, also experienced time as being 'taken away' and managed by the guards. It was also described as altering the relationship participants had with their past; the past was used to legitimize suffering. The detention of participants who have experienced torture or trafficking is in line with criticism of the 'Adults at Risk Policy' which was highlighted in the literature review (Institute of Race Relations, 2015; Shaw, 2016, 2018, Migration Observatory, 2016; Women For Refugee Women, 2017; British Red Cross, 2018; The Detention Forum, 2018; ECRE, 2019). This research also highlighted lived experiences of racism in detention, as discussed by Athwal (2014), Turnbull (2017) and Afari-Mensah, (2017). Participants highlighted how racism was embodied in detention; in the felt ways people described being treated differently because of their skin-colour. The experience of detention was described as synonymous with violation of the self. This included witnessing abuse, and a high prevalence of suicide and self-harm; this is in line the reviewed literature (Griffiths, 2012; Athwal, 2014; Kellezi & Bosworth, 2016;

Taylor et al., 2018; AVID, 2019; Medical Justice, 2019). Violation of the body was also described in the ways participants were denied sleep. The intricate experiences of detainees were also negated by an administrative process that sought to legitimize experiences through an inspection of the body, this confirmed existing research (Griffiths, 2012). Participants also described their connection to the world as altered, drawing both on the technologization of emotion, and the described stripping and severing of connection from self-to others. Identity and a sense of self featured strongly in participants narratives, which was in line with existing research (Griffiths, 2012, 2014; Bosworth, 2014; Hollis, 2019). Furthermore, detention was experienced by some as becoming separated from who they were previously, feeling anxious, withdrawn, and neglecting their own needs in order to cope with detention. Being treated as a threat linked with wider discourses that construct migrants as a 'threat' (Fiddian-Qasmiyeh et al., 2016; Korac-Sanderson, 2017). Experiences of poor communication, healthcare and fear of deportation was in line with existing research (Griffiths 2012; Afari-Mensah 2017; Ashrad et al., 2018; Hollis, 2019); this research highlighted how these difficulties were interpreted as threatening. The theme 'Relationship with the State' linked to research covered in the literature review on contested identities (Nyers, 2019) and the securitization of nation-states (Korac-Sanderson, 2017). Participants described a paradoxical relationship with the state; on the one hand existing within it whilst simultaneously feeling separated from it; and thus being denied rights afforded to UK citizens. Finally, the relevance of colonialism links to Mayblin, (2017) and Mayblin & Turner's (2020) arguments on the importance of recognising the impact of colonialism in relation to migration. This research highlights how this recognition extends to detention in the UK.

Detention was described as overwhelmingly impacting participants lived, subjective experiences of spatiality, temporality, corporeality, relationality, and society; these did not exist in isolation, for example, the violation of the body was orientated in time and the lived space of detention. The following chapter will conclude the thesis by discussing the limitations of this research, the clinical implications for Counselling Psychology, as well as make suggestions for future research.

5 Conclusion

This chapter will firstly provide a discussion on the limitations of this research, including the methodology, recruitment and positionality of the researcher. Secondly, the implications for Counselling Psychology will be explored, in practice, and in research. Finally, the implications for future research will be discussed, followed by a small summary of the thesis.

5.1 Limitations of Research

Although the research confirmed emerging themes from previous research and added new insights into the phenomena of being detained, there were limitations which will now be discussed. It is acknowledged that despite a hermeneutic phenomenological approach being taken to avoid further impositions on the people interviewed; the methodology itself *is* a paradigm. A paradigm can be defined as a “set of interrelated assumptions about the social world which provides a philosophical and conceptual framework for the organized study of that world” (Filstead, 1979, p. 34). This dynamic was addressed by adopting a reflexive position, understanding that although hermeneutic phenomenology itself is a paradigm, it was engaged with tentatively, in the hope of allowing space for the lived experiences of being detained to be explored fully. This research inquired upon the lived experiences of six people who had been detained. It cannot be generalisable to all people who have experienced detention; whilst this does offer insight; it does not claim to be applicable for all experiences of detention. The demographics of people detained varied widely (Home Office, 2019a). All participants in this research were originally born in West or East Africa and only one was female, thus reflecting only a section of the demographics of people who are detained. Despite participants mixed ages, genders and lived experiences, they all shared similar insights into the experiences of detention. Although this research did not seek for a homogeneous sample due to the methodological considerations, and its ontological and epistemological position, the homogeneity served as a limitation insofar as the experiences were limited to a particular group of people.

A further limitation of this study was the recruitment process. Participants’ were recruited through two charities. The managers in both charities contacted people who they thought

might be interested in taking part, based on information they had of those they had worked with. This in turn presented a dilemma; participants may have felt obligated to take part as the charities supported them in the past and fear that not taking part might have implications for future care if they were to re-engage with the service. To mitigate against this, the managers made it clear that participation would have no impact on the support they received by the charities. Furthermore, the precarious immigration status of those who took part, and the discussed difficult dynamics people had with immigration officials and the Home Office, may have led some participants to feel fearful of talking about their lived experiences in too much detail (for fear it may negatively impact their applications to stay in the UK). This was also considered throughout, particularly the methodological choice; for instance, the interviews were open (it was important that participants did not feel they had a set of questions to answer) and the tone of the interview was purposefully tentative and empathic. The researcher adopted a position that took for granted the information participants communicated was true (to avoid participants not feeling believed, as is often the case in Home Office interviews), and made it clear they could terminate the interview, without explanation or consequence, at any point.

Another limitation of this research was its reliance on language as a method to understand lived experience. Max van Manen's (1997) heuristic approach allows for data to be gathered beyond interviews and words, such as poetry or music. This research study was limited by time and resources to allow a more dynamic gathering of data. In addition to this, the reliance on language also relied on the participants ability to talk about their lived experience, a transcript highlights the "ways in which an individual *talks about* a particular experience within a particular context, than about the *experience itself*" (Willig, 2008, p. 67). The importance of reflexivity is paramount here. Yardley's (2000) guidelines for rigour and quality were followed to address this limitation. My own preconceptions impacted the research; this included the interview, the transcription and the analysis. This was discussed in the reflexivity section and acknowledged throughout by use of a reflexive journal. It is understood that a different researcher would yield different interpretations from the same transcript, and while it is in line with a constructivist epistemology, it is also acknowledged that it is just one way of interpreting the data.

Finally, the researcher's positionality as a white researcher, and trainee psychologist created a power imbalance with the participants. Although every attempt was made to address this by choice of methodology, ensuring the interviews were participant-led and reflexive; this imbalance existed in a myriad of ways. Namely, the researcher had not experienced detention, is white, lives in the UK, has UK citizenship (and thus did not have to 'prove' their nationality, nor fear it will be taken away or changed), and was privileged to be gaining an education. The uncomfortable dynamics of being a white researcher were also discussed in the reflexivity section in the methodology chapter.

5.2 Implications for Counselling Psychology

5.2.1 Clinical Implications for Social Justice

This research has implications for Counselling Psychology in both research and practice. Firstly, it addresses BPS's (2017) commitment to social justice, which is an integral part of Counselling Psychology's values; "Building bridges and raising issues is important. Without this, services offered by counselling psychologists may not uphold the principles of Counselling Psychology and social justice and thus fail to serve the entire community in the best way possible" (Tribe & Bell, 2018, p.118). This research has a strong social justice element, a main goal of social justice is to address 'oppression, disparity, and marginalization' (Leong, Pickren, & Vasquez, 2017). In studying the experiences of detention, this research hopes to, once published, challenge and address social injustice and inequality. The detention centre is used as a symbolic gesture by the state and political decisions have a direct impact on the wellbeing of detainees. The increased securitisation of asylum seekers is demonstrated by the practice of detaining people seeking asylum in the UK. Recognising the negative impact detention has on those who are detained acknowledges there is an injustice in the way people are treated; and that such injustice is systemically routed in social, historical, political, and economic decisions. For clinicians, social justice requires considering broader systemic factors in therapeutic interventions (Chung & Bemak, 2012). It requires an acknowledgment that people and social processes cannot be understood apart from their context, this necessitates clinicians to continually self-examine their position (Goodman et al., 2004).

5.2.2 Clinical Implications for Services

At a service level, this research highlighted the difficulties participants faced when accessing support inside detention. Difficulties in accessing support were often understood and experienced as threatening and had a direct impact on their well-being. Improving access to mental health services within detention was a recommendation by Shaw (2016, 2018). This research highlighted how accessing support remained unpredictable for participants in this research, and a need for further intervention in this area. Participants' described encounters with both the Home Office and Immigration officials as extremely difficult; for instance, being forced to re-live painful memories, not being believed, or having to use their bodies as 'proof' of suffering. This ought to be considered broadly within mental health provision and care. Detainees and people living in the community may fear not being listened to, or believed, during clinical assessments and therapy, and may not wish to speak about certain experiences. Moreover, this may not be culturally appropriate (Wessells, 2008). The importance of developing trust and facilitating a safe space with therapeutic services is therefore vital.

5.2.3 Clinical implications for Therapeutic Practice

The literature review highlighted how paradigms are often used to frame the experiences of people who have been detained. Counselling psychology encourages the importance of looking beyond diagnostic categories; this applies also to the labels used to categories others (BPS, 2017). Reviewed literature often conceptualised people who have been detained within Western models of mental health; in both their distress (e.g. trauma) and ways of coping (e.g. through exercising resilience). It is noted that within a larger scale of mental health provision (such as the NHS) such paradigms are necessary to deliver and receive care. Perhaps this research, however, highlighted the importance of understanding the lived experiences of people who have been detained cannot always be framed under Western paradigms. Policies within detention were understood to have a direct impact on the lives of detainees. Namely, the indefinite nature of detention, the lack of freedom, time spent locked in one shared room, and limited access to healthcare, legal help and communication. Seeking support was also understood to be unpredictable and difficult, leaving people feeling threatened and

vulnerable. It is worth highlighting that detainees are *taken* into detention, at times by force and denied subjectivity and choice. Therapeutic approaches ought to acknowledge the impact of this imposition. For example, it should be made clear they have autonomy in therapy, can choose what they wish to disclose, and can choose to end therapy if they feel uncomfortable. Ways of coping inside detention included suicidal thoughts as an attempt to escape painful experiences. Participants described feeling shame and humiliation in detention. Unlike the literature reviewed, participants were not understood to be exercising 'resilience'; rather, they coped subjectively with the situation they found themselves in. Participants felt a disconnection with their own sense of self or felt they could no longer *feel* in detention, some banged their head against the wall, or sought medication (sleeping tablets) to avoid painful feelings. Feeling withdrawn was understood in a myriad of ways; and is of clinical importance for practitioners; understanding this can help to inform their shared clinical formulations.

The experiences of detention were often described and understood as embodied by participants in this study. The mind and the body were not understood to be separated; some participants would stay silent or use their body to express distress (taking a deep breath or banging their fists on the table). The lived experiences of participants appeared at times limited by language (this was explicitly stated by one participant with 'I can't find the words'). Counselling psychologists can hold the embodied experiences of clients who have experienced detention in mind within therapeutic practice and acknowledge when ways of communicating appear limited by language, and in doing so give voice to unspoken words (Luca, 2019). For example, noticing when a client may struggle to articulate a word, or when they may yawn excessively, and bring this awareness into the therapeutic space (Luca, 2019). Furthermore, the lived experiences of detention highlighted the importance of spatiality in relation to detention. Participants described their lived space invariably as violated. Detainees may have experienced detention as prison-like; ensuring the therapeutic space has windows and a clear exit during therapy may allow them to feel more comfortable. For psychologists working inside detention, the space would need to be carefully considered, particularly as both the literature (Girma et al., 2015; Arshad et al., 2018) and participants in this study, described detention as violation of privacy, ensuring the space feels confidential and private is therefore crucially important.

The type of therapy offered to both detainees and former detainees would need to be carefully considered. For example, a CBT approach may not be culturally appropriate because of its emphasis on pathologizing individuals. It is important to understand the structural and contextual issues which may give rise to distress (Tribe & Bell, 2017). An integrative and holistic approach to therapy (Luca et al., 2017), which places the client at the centre of the work may be more appropriate when working with clients who have experienced detention. The below evidence-based therapeutic approaches may be beneficial models of practice when working with people who have experienced detention. Acknowledging the different theoretical models available to a client, depending on their individual needs, adheres to the pluralistic practice of Counselling Psychology (BPS, 2019).

5.2.3.1 Narrative Exposure Therapy

Narrative Exposure Therapy (NET) is a therapeutic approach that aims to encourage individuals to build a coherent life narrative, in order to contextualise traumatic experiences (APA, 2017). Although the focus is on processing traumatic memories; NET also places emphasis on incorporating positive life experiences (APA, 2017). The narrative, or testimony, is often written down and kept by the clients. The focus of NET is the completion and integration of traumatic events in their lifetime, including “sensory, physiological, emotional and cognitive experiences” (Schauer et al., 2005, p.35). NET featured in a systemic review by Tribe et al. (2017), who reviewed the literature on psychosocial interventions for adult refugees and asylum seekers in the UK, to make recommendations for research and clinical practice. This review found a lack of culturally appropriate treatments were currently available but found NET offered a positive response in reducing distress (Tribe et al., 2017). NET as a treatment for asylum seekers has had promising, albeit moderate, results (Neuner et al., 2009; Stenmark et al., 2013). NET is one of the recommended treatments for PTSD by the National Institute for Health Care and Excellence (NICE) (NICE, 2018). As a therapeutic approach it perhaps offers a more contextual, client-led approach to therapy which may be more suitable for people who have experienced detention.

5.2.3.2 Eye Movement Desensitization and Reprocessing

Eye Movement Desensitization and Reprocessing (EMDR) therapy is a recommended treatment by NICE (2018) for PTSD. In addition to PTSD, EMDR serves as a comprehensive therapy for a wide range of presentations, and can incorporate personal, relational, and societal considerations during clinical formulation and interventions (Shapiro, 2017). As a therapy, EMDR aims to help a client reprocess difficult memories and desensitise them to the emotional impact of the memory (EMDR Association UK, 2020). Francine Shapiro (2017) defined EMDR as a phase-based model which aims to “liberate the client from the past into a healthy productive present” (Shapiro, 2017, p.2). EMDR focusses on exploring potentially difficult memories in a structured but contained manner, whilst integrating eye-movements in the process (Cozolino, 2016). According to Cozolino, (2016), the side-to-side eye movements used in EMDR are reported to desensitize a client to an upsetting memory, the movement is “likely to trigger systems for memory updating” (2014, p.238). EMDR may be appropriate for people who have experienced detention and have difficulty to articulate their experiences with words alone. Heide et al. (2014) posit EMDR may “minimalize language issues because speech is not always necessary and has been found efficacious with patients from a non-Western cultural background” (p.147). People who have experienced detention may benefit from a therapeutic intervention which does not require detailed recounting of specific events (UK Psychological Trauma Society, 2017). Research has examined the effectiveness of EMDR; for example, with refugees (Lehning et al., 2017) and within refugee camp settings (eg, Acarturk et al., 2015, 2016). However, Heide et al. (2014) cautioned the need for further cultural consideration when working from an EMDR perspective, and a systemic review by Tribe et al. (2017) concluded that the effectiveness of EMDR for refugee population remains limited, identifying a need for further research in this area.

5.2.3.3 Psychodynamic Theory

Therapeutic interventions could also draw upon psychodynamic theory when working with people who have experienced detention. Alessi & Kahn (2017) advocated the use of psychodynamic theories for trauma-informed interventions; drawing upon a case study, they demonstrated psychodynamic therapy can offer a sense of ‘internal and relational safety’

(Alessi & Kahn, 2017). This confirms existing discourse, for example Schottenbauer et al. (2008) argued for an increase in the use of psychodynamic approaches for trauma-informed interventions. Attachment Theory (Bowlby, 1988) may be an appropriate intervention for people who have experienced detention. Attachment theory emphasises the importance of facilitating a secure base, both as an infant, and in the therapeutic setting. In therapy, ensuring the client feels safe to explore their experience is fundamental; the importance of safety was highlighted by participants in this research study. Furthermore, Bowlby's work on loss, mourning and separation (Bowlby, 1969a, 1969b, 1980), could offer important therapeutic contributions; "psychodynamic therapy offers a critical space for immigrants and refugees to mourn loss, separation, trauma and discontinuity and to bridge cultural experiences" (Tummala-Narra, 2019, p 291). Tummala-Narra (2019) suggests the application of psychodynamic therapy for refugee and migrant populations can also be applicable by placing emphasis on the importance of cultural identity, and how this identity is negotiated throughout an individual's lifetime. The demographics and cultural background of detainees varies (Home Office, 2019a); therefore, placing significance on cultural identity may be of particular importance when working with people who have experienced detention, and are now living in the UK.

5.3 Implications for Future Research

The findings have revealed important aspects of the phenomenon that could be further investigated. The experience of detention left many participants feeling acutely fearful when signing at immigration reporting centres, as they fear they will be re-detained during this process. A phenomenological inquiry could provide further insight into the experiences of signing at immigration centres. Research into this area is limited and may yield further insight into the impact of signing on people with precarious immigration status'. Both the politicising of people as 'illegitimate' and the lived experiences of having to 'sign', with reference to the dual fear of deportation or detention. Further research could also explore the impact of detention following release back into the community in the UK. Detention continues to impact the subjective lived experiences of people who have been detained and having further understanding into the impact of detention could help to guide interventions within

Counselling Psychology and mental health services. For example, their experiences of receiving mental health support outside of detention, and any potential barriers they may encounter. Gaining an understanding of these potential barriers would provide services and practitioners the opportunity to raise awareness on areas that need to be improved.

This study highlighted detainees experiences of racism inside detention, which linked to wider research that highlighted institutional racism, such as disproportionate force used against people of colour (Athwal, 2014) and the continued legacy of colonialism; many people detained are originally born in countries formally colonised by the British (Turnbull, 2017). Further research could investigate race and ethnicity in detention centres from a psychological perspective. There was a paucity of research which examined racism inside detention, possibly due to the difficulties in gaining access to detention centres (which this research also encountered). A psychological perspective, with a commitment to engage with social injustice, could investigate lived experiences of race and ethnicity within detention. Clients should have the space to address experiences of racism in therapy and feel safe to do so. In order to provide a safe space to address this, counselling psychologists ought to acknowledge the wider racialised issues which exist within mental health care as a whole (Moodley et al., 2018). The racialised nature of mental health can be further perpetuated by not being aware or exploring this in both therapeutic practice and research. Similarly, a neglect in examination of the racialised nature of detention risks further perpetuating injustices that many detainees and former detainees may experience. Research in this area is relevant when considering therapeutic interventions with people who have experienced detention.

5.4 Summary of Thesis

In summary, to my knowledge, this was the first phenomenological inquiry which explored the lived experiences of being detained within a UK detention centre from a Counselling Psychology perspective; and the first hermeneutic phenomenological inquiry. The study highlighted how administrative purposes and policies within detention have a harmful impact on those who were interviewed. This confirmed previous research and literature in this area. Furthermore, it also highlighted how the subjective experiences of detention have been described as a violation of lived space, it was a denial of home, and a loss of freedom and privacy. Detention altered participants relationship with time; stripping some of a future and forcing others to recollect painful memories of the past. In addition to an alteration of time, participants described their body as altered in a myriad of ways (e.g., inspected, taken, handcuffed), their embodied connection to the world was also described as altered. The self was understood to be shifted within detention; this included feeling threatened and being treated as threat; namely, being an immigrant was described as synonymous with being a criminal. Finally, participants described a felt separation from the state, whilst existing within it. The emerging themes can provide practitioners in psychology and in a wider field an insight into the lived experiences of detention; its impacts go beyond the experience of detention; they continue to impact the lives of people who have been detained in harmful, and embodied ways. Furthermore, the historical legacy of colonialism continues to impact the present and can be witnessed through the increased securitisation of borders and the racialised nature of detention. The practice of detention is a political gesture that indefinitely restricts mobility and freedom of people. The increase in hostile government immigration policies (Walker, 2021) suggests the reality of practitioners working with clients who have experienced detention is increasing. Counselling psychologists and mental health practitioners exist not in isolation, they are situated historically and socially. Thus, being aware of the impact detention has on the lives of detainees requires continued engagement, reflection, and self-examination. In the words of Paulo Freire (1990): “Knowledge emerges only through invention and re-invention, through the restless, impatient, continuing, hopeful inquiry human beings pursue in the world, with the world, and with each other.” (p.72). To inquire into human lives, we must acknowledge and engage with the social fabric they exist within.

References

- Acarturk, C., Konuk, E., Cetinkaya, M., Senay, I., Sijbrandij, M., Cuijpers, P., & Aker, T. (2015). EMDR for Syrian refugees with post-traumatic stress disorder symptoms: results of a pilot randomized controlled trial. *European Journal of Psychotraumatology*, 6(1), 27414. <https://doi.org/10.3402/ejpt.v6.27414>
- Acarturk, C., Konuk, E., Cetinkaya, M., Senay, I., Sijbrandij, M., Gulen, B., & Cuijpers, P. (2016). The efficacy of eye movement desensitization and reprocessing for post-traumatic stress disorder and depression among Syrian refugees: results of a randomized controlled trial. *Psychological Medicine*, 46(12), 2583–2593. <https://doi.org/10.1017/s0033291716001070>
- Afari-Mensah, E. (2017). *Migrant Detention and the Inequities in Healthcare Access* [Unpublished doctoral dissertation]. University of East London.
- Agamben, G. (2003). *State of Exception*. University of Chicago Press.
- Agyeman, G. S. (2008). White researcher- black Subjects: Exploring the challenges of researching the marginalised and “invisible.” *The Electronic Journal of Business Research Methods*, 6(1), 77–84.
- Akala. (2019). *Natives: Race and class in the ruins of empire*. Two Roads.
- Alessi, E. J., & Kahn, S. (2017). Using psychodynamic interventions to engage in trauma-informed practice. *Journal of Social Work Practice*, 33(1), 27–39. <https://doi.org/10.1080/02650533.2017.1400959>
- Allen, M. (2017). *The SAGE encyclopedia of communication research methods*. SAGE.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders: DSM-5*. (5th ed.). American Psychiatric Association.
- American Psychological Association. (2017). Narrative Exposure Therapy (NET). <https://www.apa.org>. <https://www.apa.org/ptsd-guideline/treatments/narrative-exposure-therapy>.
- Amnesty International. (2017). *A Matter of Routine: The Use of Immigration Detention in the UK*. <http://www.aviddetention.org.uk/sites/default/files/images/Amnesty%20Matter%20of%20routine%20immigration%20%26%20detention%20report%20ADVANCE%20COPY>.
- Eriksson, A. M. (2017). *Punishing the other: The social production of immorality revisited*.

Routledge.

Antonovsky, A. (1969). *Health, stress, and coping*. Jossey-Bass Publication.

Arshad, F., Haith-Cooper, M., & Palloti, P. (2018). The experiences of pregnant migrant women in detention: A qualitative study. *British Journal of Midwifery*, 26(9), 591–596.
<https://doi.org/10.12968/bjom.2018.26.9.591>

Association of Visitors to Immigration Detainees (AVID). (2019). *Detention Policy*/ AVID.
www.aviddetention.org.uk. <http://www.aviddetention.org.uk/immigration-detention/detention-policy>.

Athwal, H. (2014). “I don’t have a life to live”: deaths and UK detention. *Race & Class*, 56(3), 50–68. <https://doi.org/10.1177/0306396814556224>

Athwal, H., & Bourne, J. (2015). *Dying for Justice*.
[http://www.aviddetention.org.uk/sites/default/files/images/Dying for Justice web.pdf](http://www.aviddetention.org.uk/sites/default/files/images/Dying%20for%20Justice%20web.pdf)

Bail for Immigration Detainees. (2014). *Frequently Asked Questions (FAQs)*. Bail for Immigration Detainees. <https://www.biduk.org/pages/88-frequently-asked-questions-faqs#FAQ7>

Bail for Immigration Detainees. (2019). *Nothing good comes from detention: Voices from Detention*. Bail for Immigration Detainees. https://hubble-live-assets.s3.amazonaws.com/biduk/redactor2_assets/files/803/Voices_from_Detention_Website.pdf

Bartram, D. (2015). Forced Migration and “Rejected Alternatives”: A Conceptual Refinement. *Journal of Immigrant & Refugee Studies*, 13(4), 439–456.
<https://doi.org/10.1080/15562948.2015.1030489>

Belsey, C. (2002). *Poststructuralism: A very short introduction*. Oxford University Press.

Bhabra, G. K. (2009). *Rethinking modernity: Postcolonialism and the sociological imagination*. Palgrave Macmillan.

Bindmans. (2020, June 4). *Understanding Immigration detention in the UK*. Bindmans LLP.
<https://www.bindmans.com/insight/blog/understanding-immigration-detention-in-the-uk>.

Bola, J. (2018). *Refuge: The Collected Poetry of JJ Bola*. London, Own It! Entertainment Ltd.

Bollnow, O. F. (1961). Lived Space. *Philosophy Today*, 5(1), 31–39.
<https://doi.org/https://doi.org/10.5840/philtoday1961513>

- Bollnow, O. F., Shuttleworth, C., & Kohlmaier, J. (2011). *Human space*. Hyphen.
- Bosworth, M. (2014). *Inside immigration detention*. Oxford University Press.
- Bosworth, M. (2016). *The Impact of Immigration Detention on Mental Health: A Literature Review*. Papers.ssrn.com. <https://ssrn.com/abstract=2732892>
- Bosworth, M., & Kellezi, B. (2016). Doing research in immigration removal centers: Ethics, emotions and impact. *Criminology & Criminal Justice*, 17(2), 121–137. <https://doi.org/10.1177/1748895816646151>
- Bosworth, M., & Kellezi, B. (2017). *Mental health services inside immigration removal centres*. Nottingham Trent University.
- Bowlby, J. (1969a). *Attachment and loss* (Vol. 1). Basic Books.
- Bowlby, J. (1969b). *Separation: Anxiety And Anger* (Vol. II). Basic Books.
- Bowlby, J. (1980). *Loss, sadness and depression* (Vol. III). Basic Books.
- Bowlby, J. (1988). *A secure base: Parent-child attachment and healthy human development*. Basic Books.
- Braun, V., & Clark, V. (2012). Thematic Analysis. In *The Handbook of Research Methods in Psychology*. American Psychological Association.
- Braun, V., & Clarke, V. (2006). Using Thematic Analysis in Psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Braun, V., & Clarke, V. (2013). *Successful qualitative research*. Sage Publications Ltd.
- British Psychological Society. (2009). *History of the British Psychological Society*. <https://www.bps.org.uk/sites/www.bps.org.uk/files/History%20of%20Psychology/Timeline%20of%20the%20BPS%201901%20to%202009.pdf>
- British Psychological Society. (2011). *Good Practice Guidelines on the use of psychological formulation*. <http://www.sisdca.it/public/pdf/DCP-Guidelines-for-Formulation-2011.pdf>
- British Psychological Society. (2017). *Division of Counselling Psychology*. BPS. [www.bps.org.uk. https://www.bps.org.uk/member-microsites/division-counselling-psychology](https://www.bps.org.uk/member-microsites/division-counselling-psychology).
- British Psychological Society. (2019). *Standards for the accreditation of Doctoral programmes in counselling psychology The British Psychological Society Promoting excellence in psychology*. <https://www.bps.org.uk/sites/www.bps.org.uk/files/Accreditation/Counselling%20A>

[ccreditation%20Handbook%202019.pdf](#)

British Red Cross. (2018). *Never Truly Free: The humanitarian impact of the UK immigration detention system*. The British Red Cross.

Bulman, M. (2018, November 26). *"It's like hell": Yarls Wood women launch hunger strike against their indefinite detention and imminent charter flight*. The Independent. <https://www.independent.co.uk/news/uk/home-news/yarls-wood-women-hunger-strike-detention-centre-home-office-flight-a8653111.html>

Bulman, M. (2020, November 15). *Self-harm incidents surge 2,000% in detention centre holding Channel asylum seekers*. The Independent. <https://www.independent.co.uk/news/uk/home-news/self-harm-detention-brook-house-asylum-seekers-b1668406.html>

Bury, D., & Strauss, S. M. (2006). The Scientist-Practitioner in a Counselling Psychology Setting. In *The Modern Scientist-Practitioner: A Guide to Practice in Psychology* (pp. 112–126). Routledge.

Campbell, R. (2017). *Locked up, locked out: Health and Human Rights in Immigration Detention*. British Medical Association (BMA). <http://www.aviddetention.org.uk/sites/default/files/images/Locked-up-locked-out-Immigration-Detention-Report-BMA-2017.pdf>

Chamberlain, K. (2011). Troubling Methodology. *Health Psychology Review*, 5(1), 48–54. <https://doi.org/10.1080/17437199.2010.520113>

Childs, P. (2016). *Introduction to Post-Colonial Theory*. Taylor & Francis.

Chung, R. C.-Y., & Bemak, F. (2012). *Social justice counseling: the next steps beyond multiculturalism*. Sage Publications.

Cohen, B. (2018). *Routledge international handbook of critical mental health*. Routledge.

Cohen, J. (2008). Safe in our hands?: A study of suicide and self-harm in asylum seekers. *Journal of Forensic and Legal Medicine*, 15(4), 235–244. <https://doi.org/10.1016/j.jflm.2007.11.001>

Conservative Party. (2015). *Strong Leadership. A Clear Economic Plan. A Brighter, More Secure Future*. The Conservative Party.

Conservative Party. (2017). *The Conservative and Unionist Party 2017*. The Conservative Party.

Conservative Party. (2019). *Get Brexit Done: Unleash Britain's Potential*. The Conservative Party.

- Conservative Party. (2020). *Taking back control of our borders*. [www.conservatives.com.
https://www.conservatives.com/our-commitments/taking-back-control-of-our-borders](https://www.conservatives.com/our-commitments/taking-back-control-of-our-borders)
- Corporate Watch. (2018). *Deportation Charter Flights*. [Corporatewatch.org.
https://corporatewatch.org/deportation-charter-flights-updated-report-2018/](https://corporatewatch.org/deportation-charter-flights-updated-report-2018/)
- Cozolino, L. J. (2016). *Why therapy works: Using our minds to change our brains*. W.W. Norton & Company.
- Cwerner, S. B. (2004). Faster, Faster and Faster. *Time & Society*, 13(1), 71–88. <https://doi.org/10.1177/0961463x04040747>
- De Silva, W. (2010). Otto Friedrich Bollnow's concept of human space. A Critical Discussion on the Fundamentals of the Concepts of Space. *Built-Environment Sri Lanka*, 7(2), 40. <https://doi.org/10.4038/besl.v7i2.1942>
- Deliovsky, K. (2017). Whiteness in the Qualitative Research Setting: Critical Skepticism, Radical Reflexivity and Anti-racist Feminism. *Journal of Critical Race Inquiry*, 4(1). <https://doi.org/10.24908/jcri.v4i1.6369>
- Douglas, B., Woolfe, R., Strawbridge, S., Kasket, E., & Galbraith, V. (2016). *The handbook of counselling psychology*. Sage.
- Doward, J. (2020, October 25). *Asylum seekers sue UK over unlawful detention*. The Guardian. <https://www.theguardian.com/uk-news/2020/oct/25/asylum-seekers-sue-uk-over-unlawful-detention>.
- Duncan Smith. (2020). *Legal challenge concerning Covid-19 launched by Duncan Lewis*. [Duncanlewis.co.uk.
https://www.duncanlewis.co.uk/news/Duncan_Lewis_Solicitors_instructed_by_charity_Detention_Action_to_issue_legal_challenge_over_the_Government%E2%80%99s_failure_to_safeguard_those_held_in_detention_from_\(20_March_2020\).html](https://www.duncanlewis.co.uk/news/Duncan_Lewis_Solicitors_instructed_by_charity_Detention_Action_to_issue_legal_challenge_over_the_Government%E2%80%99s_failure_to_safeguard_those_held_in_detention_from_(20_March_2020).html)
- Equality and Human Rights Commission (EHRC). (2018, November 15). *The Human Rights Act | Equality and Human Rights Commission*. [Equalityhumanrights.com.
https://www.equalityhumanrights.com/en/human-rights/human-rights-act](https://www.equalityhumanrights.com/en/human-rights/human-rights-act)
- Errasti-Ibarrondo, B., Jordán, J. A., Díez-Del-Corral, M. P., & Arantzamendi, M. (2018). van Manen's phenomenology of practice: How can it contribute to nursing? *Nursing Inquiry*, 26(1), e12259. <https://doi.org/10.1111/nin.12259>
- Esslemont, M., & Lousley, G. (2021). *Survivors Behind Bars*. Women for Refugee Women.

<https://www.refugeewomen.co.uk/wp-content/uploads/2021/02/Survivors-Behind-Bars-1.pdf>

- European Council on Refugees and Exiles (ECRE). (2019). *Vulnerable Adults still being Detained Despite Legislation*. UK: Vulnerable Adults Still Being Detained despite Legislation. <https://www.ecre.org/uk-vulnerable-adults-still-being-detained-despite-legislation/>
- Fassin, D. (2001). The biopolitics of otherness: Undocumented foreigners and racial discrimination in French public debate. *Anthropology Today*, 17(1), 3–7. <https://doi.org/10.1111/1467-8322.00039>
- Fereday, J., & Muir-Cochrane, E. (2006). Demonstrating Rigor Using Thematic Analysis: A Hybrid Approach of Inductive and Deductive Coding and Theme Development. *International Journal of Qualitative Methods*, 5(1), 80–92. <https://doi.org/10.1177/160940690600500107>
- Festinger, L. (1957). *A theory of cognitive dissonance*. Stanford University Press.
- Fiddian-Qasmiyeh, E., Loescher, G., Long, K., & Sigona, N. (2016). *The Oxford Handbook of Refugee and Forced Migration Studies*. Oxford University Press.
- Filges, T., Montgomery, E., & Kastrup, M. (2016). The Impact of Detention on the Health of Asylum Seekers. *Research on Social Work Practice*, 28(4), 399–414. <https://doi.org/10.1177/1049731516630384>
- Filstead, W. J. (1979). Qualitative methods: A needed perspective in evaluation research. In *Qualitative and quantitative methods in evaluation research*. Sage.
- Finlay, L. (2003). Through the looking glass: intersubjectivity and hermeneutic reflection. In *Reflexivity: a practical guide for researchers in health and social sciences*. Oxford: Blackwell Science.
- Finlay, L. (2008). A Dance Between the Reduction and Reflexivity: Explicating the “Phenomenological Psychological Attitude.” *Journal of Phenomenological Psychology*, 39(1), 1–32. <https://doi.org/10.1163/156916208x311601>
- Finlay, L. (2009). Debating Phenomenological Research Methods. *Phenomenology & Practice*, 3(1). <https://doi.org/10.29173/pandpr19818>
- Foucault, M. (1980). *Power/knowledge: selected interviews and other writings, 1972-1977*. Pantheon Books, A Division of Random House.
- Foucault, M., & Senellart, M. (2011). *The birth of biopolitics lectures at the college de France, 1978-1979*. New York Palgrave Macmillan.

- Freire, P. (1990). *Pedagogy of the Oppressed*. Continuum.
- Gadamer, H.-G., & Linge, D. E. (2008). *Philosophical hermeneutics*. University of California Press.
- Gallagher, A. (2017). *The impact of immigration detention on the mental health of adults* [Unpublished Phd Thesis]
- Gentleman, A. (2020). *WINDRUSH BETRAYAL: Exposing the hostile environment*. Guardian Faber Publishing.
- Girma, M., Kershaw, I., Lousley, G., Radice, S., & Walter, N. (2015). *I am Human- Refugee Women's Experiences of Detention*. Women for Refugee Women.
- Girma, M., & Lousley, G. (2017). *The Way Ahead An asylum System without Detention*. Women for Refugee Women. <https://www.refugeewomen.co.uk/wp-content/uploads/2019/01/women-for-refugee-women-reports-the-way-ahead.pdf>
- Global Detention Project. (2019). *Global Detention Project Annual Report 2019*. Global Detention Project.
- Gojer, J., & Ellis, A. (2014). *NEW ISSUES IN REFUGEE RESEARCH: Post-Traumatic Stress Disorder and the Refugee Determination Process in Canada: Starting the discourse Policy Development and Evaluation Service*. <https://www.unhcr.org/53356b349.pdf>
- Gomez, L. (1997). *An Introduction to Object Relations*. Free Association Books.
- Goodman, L. A., Liang, B., Helms, J. E., Latta, R. E., Sparks, E., & Weintraub, S. R. (2004). Training Counseling Psychologists as Social Justice Agents. *The Counseling Psychologist*, 32(6), 793–836. <https://doi.org/10.1177/0011000004268802>
- Green, L. A. (2018). *The Law on Immigration*. Migration Watch UK. <https://www.migrationwatchuk.org/key-topics/legal>
- Grierson, J. (2020, February 20). *Serco given £200m contract to run two more immigration removal centres*. The Guardian. <https://www.theguardian.com/uk-news/2020/feb/20/serco-given-200m-contract-to-run-two-more-immigration-removal-centres>
- Griffiths, M. (2012). Anonymous Aliens? Questions of Identification in the Detention and Deportation of Failed Asylum Seekers. *Population, Space and Place*, 18(6), 715–727. <https://doi.org/10.1002/psp.1723>
- Griffiths, M. (2013). Living with Uncertainty. *Journal of Legal Anthropology*, 1(3), 263–286. <https://doi.org/10.3167/jla.2013.010301>

- Griffiths, M. B. E. (2014). Out of Time: The Temporal Uncertainties of Refused Asylum Seekers and Immigration Detainees. *Journal of Ethnic and Migration Studies*, 40(12), 1991–2009. <https://doi.org/10.1080/1369183x.2014.907737>
- Guba, E. G., & Lincoln, Y. S. (1994). Competing paradigms in qualitative research. In *Handbook of qualitative research*. Sage Publications, Inc.
- Hans-Georg Gadamer. (2014). *Truth and method*. Bloomsbury Academic. (Original work published 1998)
- Hansen, R. (2014). State Controls: Borders, Refugees, and Citizenship. In *The Oxford Handbook of Refugee and Forced Migration Studies*. Oxford Publications Online.
- Harper, D. (2020). *Online Etymology Dictionary: Origin, history and meaning of English words*. www.etymonline.com. <http://www.etymonline.com>
- Hasselberg, I. (2016). *Enduring uncertainty: Deportation, punishment and everyday life*. Berghahn Books.
- Hayden, B. (2006). What's in a Name? The Nature of the Individual in Refugee Studies. *Journal of Refugee Studies*, 19(4), 471–487. <https://doi.org/10.1093/refuge/fel021>
- Health and Care Professions Council. (2017). *Fitness to practice annual report*. <https://www.hcpc-uk.org/globalassets/resources/reports/fitness-to-practise/fitness-to-practise-annual-report-2017.pdf?v=637112255260000000>
- Heide, F. J. J. ter, Mooren, T. T. M., Knipscheer, J. W., & Kleber, R. J. (2014). EMDR With Traumatized Refugees: From Experience-Based to Evidence-Based Practice. *Journal of EMDR Practice and Research*, 8(3), 147–156. <https://doi.org/10.1891/1933-3196.8.3.147>
- Heidegger, M. (1962). *Being and time*. Stellar Books.
- Heinonen, K. (2015). Max van Manen's method and reduction in a phenomenological hermeneutic study. *Nurse Researcher*, 22(4), 35–41. <https://doi.org/10.7748/nr.22.4.35.e1326>
- Tajfel, H. (1981). *Introducing social psychology*. Penguin Books.
- Hollis, J. (2019). The psychosocial experience of UK immigration detention. *International Journal of Migration, Health and Social Care*, 15(1), 76–89. <https://doi.org/10.1108/ijmhsc-04-2018-0024>
- Holt, A. (2017). *What I saw when I went undercover*. www.bbc.co.uk. <https://www.bbc.co.uk/news/resources/idt->

[sh/g4s brook house immigration removal centre undercover](#)

Home Office. (2001). *Detention Rule 35 Process*. GOV.UK.
<https://www.gov.uk/government/publications/detention-rule-35-process>

Home Office. (2013, December 9). *Border Force*. GOV.UK.
<https://www.gov.uk/government/organisations/border-force/about>

Home Office. (2016a). *Immigration Act 2016 Factsheet -Detention of Pregnant Women (Section 60)*
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/537240/Immigration Act - Part 3 - Pregnant Women.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/537240/Immigration_Act_-_Part_3_-_Pregnant_Women.pdf)

Home Office. (2016b). *Immigration Rules part 1: Leave to enter or stay in the UK - Immigration Rules - Guidance - GOV.UK*. [www.gov.uk. https://www.gov.uk/guidance/immigration-rules/immigration-rules-part-1-leave-to-enter-or-stay-in-the-uk](https://www.gov.uk/guidance/immigration-rules/immigration-rules-part-1-leave-to-enter-or-stay-in-the-uk).

Home Office. (2018a). *Detention Services Order 05/2018: Mobile phones, internet enabled devices, and cameras*.
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/917908/Mobile phones and cameras in immigration removal centres.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/917908/Mobile_phones_and_cameras_in_immigration_removal_centres.pdf).

Home Office. (2018b). *Immigration Act 2016: Guidance on adults at risk in immigration detention*.
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721237/Adults at risk in immigration detention - statutory guidance 2 .pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721237/Adults_at_risk_in_immigration_detention_-_statutory_guidance_2_.pdf).

Home Office. (2019a). *How many people are detained or returned?*.
<https://www.gov.uk/government/statistics/immigration-statistics-year-ending-december-2019/how-many-people-are-detained-or-returned#:~:text=In%202019%2C%2024%2C512%20people%20left>.

Home Office. (2019b). *Media factsheet: Detention time limits*. [Homeofficemedia.blog.gov.uk. https://homeofficemedia.blog.gov.uk/2020/06/29/media-factsheet-detention-time-limits/](https://homeofficemedia.blog.gov.uk/2020/06/29/media-factsheet-detention-time-limits/)

Home Office. (2020). *Serco awarded contract to run Gatwick immigration removal centres*. GOV.UK. <https://www.gov.uk/government/news/serco-awarded-contract-to-run-gatwick-immigration-removal-centres>.

- Home Office. (2021). *Detention: General instructions*.
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/992285/detention-general-instructions-v1.0.pdf.
- House of Commons. (2019). *Immigration detention Fourteenth Report of Session 2017-19*.
<https://publications.parliament.uk/pa/cm201719/cmselect/cmhaff/913/913.pdf>.
- Hovil, L. (2014). Local Integration Katy Long, and Nando Sigona. In *The Oxford Handbook of Refugee and Forced Migration Studies*. Oxford University Press.
- Husserl, E., & Alston, W. P. (2010). *The idea of phenomenology*. Dordrecht Kluwer Academic.
- Hutchinson, M., & Dorsett, P. (2012). What does the literature say about resilience in refugee people? Implications for practice. *Journal of Social Inclusion*, 3(2), 55.
<https://doi.org/10.36251/josi.55>
- Ilcan, S., & Rygiel, K. (2015). “Resiliency Humanitarianism”: Responsibilising Refugees through Humanitarian Emergency Governance in the Camp. *International Political Sociology*, 9(4), 333–351. <https://doi.org/10.1111/ips.12101>.
- International Detention Coalition. (2013). *What is immigration detention? And other frequently asked questions – International Detention Coalition*. Idcoalition.org.
<https://idcoalition.org/about/what-is-detention/>.
- International Organisation for Migration (IOM). (2017). *YEARS IOM’s Global Migration Data Analysis Centre GMDAC Fatal Journeys Volume 3 PART 1 Improving Data on Missing Migrants*.
https://publications.iom.int/system/files/pdf/fatal_journeys_volume_3_part_1.pdf
- Isin, E. (2013). Theorizing Acts of Citizenship. In *Acts of Citizenship*. Zed Books.
- Joint Council for the Welfare of Immigrants. (2019). *The Hostile Environment explained*. Joint Council for the Welfare of Immigrants. <https://www.jcwi.org.uk/the-hostile-environment-explained>.
- Kasket, E. (2013). The counselling psychology researcher. In *Applied psychology*. BPS Wiley Blackwell.
- Keller, A. S., Rosenfeld, B., Trinh-Shevrin, C., Meserve, C., Sachs, E., Leviss, J. A., Singer, E., Smith, H., Wilkinson, J., Kim, G., Allden, K., & Ford, D. (2003). Mental health of detained asylum seekers. *The Lancet*, 362(9397), 1721–1723.
[https://doi.org/10.1016/s0140-6736\(03\)14846-5](https://doi.org/10.1016/s0140-6736(03)14846-5).
- Kellezi, B., & Bosworth, M. (2016). *Mental health, suicidal thoughts and self-harm inside*

- immigration detention*. Nottingham: Nottingham Trent University.
- Kelly, A. (2019, May 2). *Child trafficking victim wins £85,000 from UK government over rape attempt*. The Guardian. <https://www.theguardian.com/global-development/2019/may/02/child-trafficking-victim-wins-85000-in-state-compensation-over-sexual-assault-home-office-ministry-of-justice-morton-hall>.
- Kennedy, D. (2016). *Decolonization: A very short introduction*. Oxford University Press.
- Khoury, B., Langer, E. J., & Pagnini, F. (2014). The DSM: mindful science or mindless power? A critical review. *Frontiers in Psychology*, 5(602). <https://doi.org/10.3389/fpsyg.2014.00602>.
- Kirkup, J., & Winnett, R. (2012). We're going to give illegal migrants a really hostile reception. *The Telegraph*.
- Klein, A., & Williams, L. (2012). Immigration Detention in the Community: Research on the Experiences of Migrants Released from Detention Centres in the UK. *Population, Space and Place*, 18(6), 741–753. <https://doi.org/10.1002/psp.1725>.
- Korac-Sanderson, M. (2017). Bordering and Rebordering Security: Causes and Consequences of Framing Refugees as a “Threat” to Europe. In *Towards Understanding of Contemporary Migration Causes, Consequences, Policies, Reflections*. Belgrade Institute for Sociological Research.
- Kriegler, S., & Bester, S. E. (2014). A critical engagement with the DSM-5 and psychiatric diagnosis. *Journal of Psychology in Africa*, 24(4), 393–401. <https://doi.org/10.1080/14330237.2014.980629>
- Lambert, J. E., & Alhassoon, O. M. (2015). Trauma-focused therapy for refugees: Meta-analytic findings. *Journal of Counseling Psychology*, 62(1), 28–37. <https://doi.org/10.1037/cou0000048>.
- Lane, D. A., & Corrie, S. (2015). *The modern scientist-practitioner: A guide to practice in psychology*. Routledge.
- Langdridge, D. (2007). *Phenomenological psychology: Theory, research and method*. Pearson / Prentice Hall.
- Laverty, S. M. (2003). Hermeneutic Phenomenology and Phenomenology: A Comparison of Historical and Methodological Considerations. *International Journal of Qualitative Methods*, 2(3), 21–35. <https://doi.org/10.1177/160940690300200303>.
- Lee, D., & James, S. (2012). *The compassionate mind approach to recovering from trauma*:

- Using compassion focused therapy.* Robinson.
- Lehnung, M., Shapiro, E., Schreiber, M., & Hofmann, A. (2017). Evaluating the EMDR Group Traumatic Episode Protocol with Refugees: A Field Study. *Journal of EMDR Practice and Research*, 11(3), 129–138. <https://doi.org/10.1891/1933-3196.11.3.129>.
- Leong, F. T. L., Pickren, W. E., & Vasquez, M. J. T. (2017). APA efforts in promoting human rights and social justice. *American Psychologist*, 72(8), 778–790. <https://doi.org/10.1037/amp0000220>.
- Levinas, E. (2009). *The Levinas reader* (S. Hand, Trans.). Malden Blackwell.
- Lewis, P., Pegg, D., Walker, P., & Stewart, H. (2020, September 30). Revealed: No 10 explores sending asylum seekers to Moldova, Morocco and Papua New Guinea. *The Guardian*. <https://www.theguardian.com/uk-news/2020/sep/30/revealed-no-10-explores-sending-asylum-seekers-to-moldova-morocco-and-papua-new-guinea>
- Lindley, D. A. (2017). *Injustice in Immigration Detention Perspectives from legal professionals*. http://www.aviddetention.org.uk/sites/default/files/images/171130_injustice_in_migration_detention_dr_anna_lindley.pdf
- Logie, R. (2012). EMDR - more than just a therapy for PTSD?. The Psychologist. *Bps.org.uk*. <https://thepsychologist.bps.org.uk/volume-27/edition-7/emdr-more-just-therapy-ptsd>.
- Lousley, G., & Cope, S. (2017). *We are Still Here: The Continued Detention of Women Seeking Asylum in Yarl's Wood*. Women for Refugee Women.
- Luca, M., Marshall, C., & Nutt, J. (2017). *Integrative Theory and Practice in Psychological Therapies: New Directions*. Open University Press.
- Majcher, I., Flynn, M., & Grange, M. (2020). *Immigration detention in the European Union: In the shadow of the "crisis."* Springer.
- Malkki, L. H. (1995). Refugees and Exile: From "Refugee Studies" to the National Order of Things. *Annual Review of Anthropology*, 24(1), 495–523. <https://doi.org/10.1146/annurev.an.24.100195.002431>
- Manyena, S. B. (2006). The concept of resilience revisited. *Disasters*, 30(4), 434–450. <https://doi.org/10.1111/j.0361-3666.2006.00331.x>
- Marlowe, J. M. (2010). Beyond the Discourse of Trauma: Shifting the Focus on Sudanese Refugees. *Journal of Refugee Studies*, 23(2), 183–198. <https://doi.org/10.1093/jrs/feq013>

- Mayblin, L. (2017). *Asylum after empire: Colonial legacies in the politics of asylum seeking*. Rowman & Littlefield International.
- Mayblin, L., & Turner, J. (2020). *Migration Studies and Colonialism*. Wiley.
- McIntyre, N. (2018, October 10). *Private contractors paid millions to run UK detention centres*. The Guardian. <https://www.theguardian.com/uk-news/2018/oct/10/private-contractors-paid-millions-uk-detention-centres-some-firms-making-30-percent-profit>
- Medical Justice. (2018). *Putting Adults at Risk: A Guide to Understanding the Home Office's "Adult's at Risk" Policy and its History*. Medical Justice.
- Medical Justice. (2019). *Failure to Protect from The Harm Of Immigration Detention*. Medical Justice Network Limited.
- Merleau-Ponty, M. (1945). *Phenomenology of Perception*. Forgotten Books.
- Migration Watch. (2020). *UK Public Opinion toward Immigration: Overall Attitudes and Level of Concern - Migration Observatory*. Migration Observatory. <https://migrationobservatory.ox.ac.uk/resources/briefings/uk-public-opinion-toward-immigration-overall-attitudes-and-level-of-concern/>.
- Mirjana Bobić, & JankovićS. (2017). *Towards understanding of contemporary migration causes, consequences, policies, reflections*. Belgrade Institute for Sociological Research, Faculty of Philosophy, University of Belgrade.
- Moodley, R., Mujtaba, F., & Kleiman, S. (2018). Critical race theory and mental health. In *Routledge International Handbook of Critical Mental Health*. Routledge.
- National Institute for Health Care and Excellence. (2018). *Post-traumatic stress disorder*. National Institute for Health Care and Excellence.
- Neuner, F., Kurreck, S., Ruf, M., Odenwald, M., Elbert, T., & Schauer, M. (2009). Can Asylum-Seekers with Post-traumatic Stress Disorder Be Successfully Treated? A Randomized Controlled Pilot Study. *Cognitive Behaviour Therapy*, 39(2), 81–91. <https://doi.org/10.1080/16506070903121042>
- NHS England. (2018). *NHS England: Adult Improving Access to Psychological Therapies programme*. England.nhs.uk. <https://www.england.nhs.uk/mental-health/adults/iapt/>
- NHS England. (2019). *NHS England workforce*. England.nhs.uk. <https://www.england.nhs.uk/mental-health/adults/iapt/workforce/>

- Nussbaum, M., C. (1995). Objectification. *Philosophy & Public Affairs*, 24(4), 249–291.
- Nyers, P. (2006). *Rethinking refugees: Beyond states of emergency*. Routledge.
- Nyers, P. (2019). *Irregular citizenship, immigration, and deportation*. Routledge.
- Oldman, O. (2020, June 4). *Understanding Immigration detention in the UK*. Bindmans LLP.
<https://www.bindmans.com/insight/blog/understanding-immigration-detention-in-the-uk>
- Oxford University Press. (2020). *English Dictionary, Thesaurus, & Grammar Help | Lexico.com*.
 Lexico Dictionaries. <https://www.lexico.com/>
- Papadopoulos, R. (2002). *Therapeutic Care for Refugees: No Place Like Home*. Routledge.
- Parker, I. (1992). *Discourse dynamics: critical analysis for social and individual psychology*.
 Routledge.
- Pathways to Wellness. (2011). *REFUGEE HEALTH SCREENER -15 (RHS-15)*.
https://x9yjk2t4l9ghu7ty7bhu81ac-wpengine.netdna-ssl.com/wp-content/uploads/2012/09/RHS15_Packet_PathwaysToWellness-1.pdf
- Phillips, A. (2013). *Our Bodies, Whose Property?* Princeton University Press.
- Phillips, C., & Webster, C. (2014). *New directions in race, ethnicity, and crime*. Routledge,
 Taylor & Francis Group.
- Pittman, J. F., Keiley, M. K., Kerpelman, J. L., & Vaughn, B. E. (2011). Attachment, Identity, and
 Intimacy: Parallels Between Bowlby's and Erikson's Paradigms. *Journal of Family
 Theory & Review*, 3(1), 32–46. <https://doi.org/10.1111/j.1756-2589.2010.00079.x>
- Ponterotto, J. G. (2005). Qualitative research in counseling psychology: A primer on research
 paradigms and philosophy of science. *Journal of Counseling Psychology*, 52(2), 126–
 136. <https://doi.org/10.1037/0022-0167.52.2.126>.
- Potter, J., & Wetherell, M. (1987). *Discourse and Social Psychology: Beyond Attitudes and
 Behaviour*. Sage.
- Pourgourides, C. (1996). A second exile: the mental health implications of detention of asylum
 seekers in the UK. *Psychiatric Bulletin*, 21(11), 673–674.
<https://doi.org/10.1192/pb.21.11.673>
- Pourgourides, C. (1997). A second exile: the mental health implications of detention of asylum
 seekers in the UK. *Psychiatric Bulletin*, 21(11), 673–674.
<https://doi.org/10.1192/pb.21.11.673>
- Rajaram, P. K. (2002). Humanitarianism and Representations of the Refugee. *Journal of*

- Refugee Studies*, 15(3), 247–264. <https://doi.org/10.1093/jrs/15.3.247>
- Refugee Council. (2020). *Overview of the legal framework*. Asylum Information Database. European Council on Refugees and Exiles. <https://asylumineurope.org/reports/country/united-kingdom/overview-legal-framework/>
- Reiter, K., & Koenig, A. (2015). *Extreme punishment: Comparative studies in detention, incarceration and solitary confinement*. Palgrave Macmillan.
- Reuther, B. T. (2014). On our everyday being: Heidegger and attachment theory. *Journal of Theoretical and Philosophical Psychology*, 34(2), 101–115. <https://doi.org/10.1037/a0033040>.
- Right to Remain. (2018). *Detention*. Right to Remain. <https://righttoremain.org.uk/toolkit/detention/>
- Robjant, K., Hassan, R., & Katona, C. (2009). Mental health implications of detaining asylum seekers: systematic review. *British Journal of Psychiatry*, 194(4), 306–312. <https://doi.org/10.1192/bjp.bp.108.053223>
- Robjant, K., Robbins, I., & Senior, V. (2009). Psychological distress amongst immigration detainees: a cross-sectional questionnaire study. *The British Journal of Clinical Psychology*, 48(Pt 3), 275–286. <https://doi.org/10.1348/014466508X397007>
- Rustin, M. (2015). Psychotherapy in a neoliberal world. *European Journal of Psychotherapy & Counselling*, 17(3), 225–239. <https://doi.org/10.1080/13642537.2015.1059869>.
- Rutberg, S., & Öhrling, K. (2012). Migraine – more than a headache: Women’s experiences of living with migraine. *Disability and Rehabilitation*, 34(4), 329–336. <https://doi.org/10.3109/09638288.2011.607211>
- Said, E. W. (1993). *Culture and Imperialism*. Vintage.
- Schauer, M., Neuner, F., & Elbert, T. (2005). *Narrative Exposure Therapy: A Short-term Intervention for Traumatic Stress Disorders After War, Terror, Or Torture*. Hogrefe Publishing.
- Schleicher, T., Berry, A., & Birdi, T. (2016, September 11). *New immigration detention policy for “adults at risk” needs urgent review | Letter*. The Guardian. <https://www.theguardian.com/society/2016/sep/11/new-immigration-detention-policy-for-adults-at-risk-needs-urgent-review>.
- Schottenbauer, M. A., Glass, C. R., Arnkoff, D. B., & Gray, S. H. (2008). Contributions of

- Psychodynamic Approaches to Treatment of PTSD and Trauma: A Review of the Empirical Treatment and Psychopathology Literature. *Psychiatry: Interpersonal and Biological Processes*, 71(1), 13–34. <https://doi.org/10.1521/psyc.2008.71.1.13>.
- Schwarz, S. (2018). Resilience in psychology: A critical analysis of the concept. *Theory & Psychology*, 28(4), 528–541. <https://doi.org/10.1177/0959354318783584>
- Schymyck, A. (2020, August 5). *What is the Adults at Risk policy?* Free Movement. <https://www.freemovement.org.uk/what-is-the-adults-at-risk-policy/>
- Sen, P., Arugnanaseelan, J., Connell, E., Katona, C., Khan, A. A., Moran, P., Robjant, K., Slade, K., Tan, J., Widyaratna, K., Youd, J., & Forrester, A. (2017). Mental health morbidity among people subject to immigration detention in the UK: a feasibility study. *Epidemiology and Psychiatric Sciences*, 27(6), 628–637. <https://doi.org/10.1017/s2045796017000269>
- Shapiro, F. (2017). *Eye Movement Desensitization and Reprocessing (EMDR) Therapy, Third Edition Basic Principles, Protocols, and Procedures*. New York Guilford Publications.
- Shaw, S. (2016). *Review into the welfare in detention of vulnerable persons*. HM Government.
- Shaw, S. (2018). *Assessment of government progress in implementing the report on the welfare in detention of vulnerable persons*. HM Government. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/728376/Shaw_report_2018_Final_web_accessible.pdf
- Siddique, H., & Marsh, S. (2018, December 26). *Ten Ambulance Callouts a week to Detention Centres*. The Guardian. <https://www.theguardian.com/uk-news/2018/dec/26/ten-ambulance-callouts-a-week-to-detention-centres>
- Sloan, A., & Bowe, B. (2014). Phenomenology and hermeneutic phenomenology: the philosophy, the methodologies, and using hermeneutic phenomenology to investigate lecturers' experiences of curriculum design. *Quality & Quantity*, 48(3), 1291–1303. <https://doi.org/10.1007/s11135-013-9835-3>.
- Smith, J. A., Flowers, P., & Larkin, M. (2009). *Interpretative phenomenological analysis: Theory, method and research*. Sage.
- Steel, Z., Silove, D., Brooks, R., Momartin, S., Alzuhairi, B., & Susljik, I. (2006). Impact of immigration detention and temporary protection on the mental health of refugees. *British Journal of Psychiatry*, 188(1), 58–64. <https://doi.org/10.1192/bjp.bp.104.007864>.

- Stenmark, H., Catani, C., Neuner, F., Elbert, T., & Holen, A. (2013). Treating PTSD in refugees and asylum seekers within the general health care system. A randomized controlled multicenter study. *Behaviour Research and Therapy*, 51(10), 641–647. <https://doi.org/10.1016/j.brat.2013.07.002>.
- Suleiman, S. R. (2008). Judith Herman and Contemporary Trauma Theory. *WSQ: Women's Studies Quarterly*, 36(1-2), 276–281. <https://doi.org/10.1353/wsqr.0.0016>
- Summerfield, D. (1999). A critique of seven assumptions behind psychological trauma programmes in war-affected areas. *Social Science & Medicine*, 48(10), 1449–1462. [https://doi.org/10.1016/s0277-9536\(98\)00450-x](https://doi.org/10.1016/s0277-9536(98)00450-x)
- Summerfield, D. (2001). The invention of post-traumatic stress disorder and the social usefulness of a psychiatric category. *BMJ*, 322(7278), 95–98. <https://doi.org/10.1136/bmj.322.7278.95>
- Summerfield, D. (2012). Afterword: Against “global mental health.” *Transcultural Psychiatry*, 49(3-4), 519–530. <https://doi.org/10.1177/1363461512454701>
- Swinford, S. (2019, December). Election 2019: Boris Johnson vows end to migrants “treating Britain as their own.” www.thetimes.co.uk. <https://www.thetimes.co.uk/article/election-2019-johnson-vows-end-to-migrants-treating-britain-as-their-own-nczv7r97n>
- Szasz, T. S. (2010). *The Myth of Mental Illness Foundations of a Theory of Personal Conduct*. Harperperennial.
- Tapsfield, J. (2018, May 16). Diane Abbott vows to CLOSE immigration detention centres. *Mail Online*. <https://www.dailymail.co.uk/news/article-5736333/Diane-Abbott-vows-CLOSE-immigration-detention-centres.html>
- Taylor, D. (2018, October 11). *Worse than prison: life inside Britain's 10 deportation centres*. The Guardian. *The Guardian*. <https://www.theguardian.com/uk-news/2018/oct/11/life-in-a-uk-immigration-removal-centre-worse-than-prison-as-criminal-sentence>
- Taylor, D. (2019, August 11). Shackles and restraints used on hundreds of deportees from UK. *The Guardian*. <https://www.theguardian.com/uk-news/2019/aug/11/shackles-and-restraints-used-on-hundreds-of-deportees-from-uk>
- Taylor, D., Walker, P., & Grierson, J. (2018, October 11). Revealed: two suicide attempts every day in UK deportation centres. *The Guardian*. <https://www.theguardian.com/uk-news/2018/oct/11/revealed-two-suicide-attempts-every-day-in-uk-deportation-centres>

[news/2018/oct/11/revealed-two-suicide-attempts-every-day-uk-deportation-detention-centres](https://www.bbc.com/news/2018/oct/11/revealed-two-suicide-attempts-every-day-uk-deportation-detention-centres)

Thatcher, M., & Manktelow, K. (2007). The cost of individualism. *Counselling Psychology Review*, 22(4), 31–39.

The Detention Forum. (2018). *The wait is over: The second Shaw Review is finally published*. Detention Forum. <https://detentionforum.org.uk/2018/08/06/the-wait-is-over-the-second-shaw-review-is-finally-published/>

The Detention Forum. (2019). *Immigration Detention in the Media*. Detention Forum. <http://detentionforum.org.uk/resources/immigration-detention-in-the-media/>

The EMDR International Association. (2020). *About EMDR Therapy*. EMDR International Association. <https://www.emdria.org/about-emdr-therapy/>

The Labour Party. (2015). *The Labour Party Manifesto*. The Labour Party. https://b3cdn.net/labouruk/e0e65bbcfdd383c61f_mlbr0j2o6.pdf.

The Migration Observatory. (2019). *Immigration Detention in the UK*. The Migration Observatory. <https://migrationobservatory.ox.ac.uk/resources/briefings/immigration-detention-in-the-uk/>

The National Archives. (2016). *Immigration Act 2016*. Legislation.gov.uk. <https://www.legislation.gov.uk/ukpga/2016/19/section/59>

Thompson, C. T., Vidgen, A., & Roberts, N. P. (2018). Psychological interventions for post-traumatic stress disorder in refugees and asylum seekers: A systematic review and meta-analysis [Review of *Psychological interventions for post-traumatic stress disorder in refugees and asylum seekers: A systematic review and meta-analysis*]. *Clinical Psychology Review*, 63, 66–79. <https://doi.org/10.1016/j.cpr.2018.06.006>

Timothy, N. (2020, August 9). Britain has no way to protect itself from this new wave of immigration. *The Telegraph*. <https://www.telegraph.co.uk/politics/2020/08/09/britain-has-no-way-protect-new-wave-immigration/>

Tribe, R. H., Sendt, K.-V., & Tracy, D. K. (2017). A systematic review of psychosocial interventions for adult refugees and asylum seekers. *Journal of Mental Health*, 1–15. <https://doi.org/10.1080/09638237.2017.1322182>.

Tribe, R., & Bell, D. (2018). Social justice, diversity and leadership. *The European Journal of*

- Counselling Psychology*, 6(1), 111–125. <https://doi.org/10.5964/eicop.v6i1.145>
- Tseris, E. (2018). Biomedicine, neoliberalism and the pharmaceuticalisation of society. In *Routledge International Handbook of Critical Mental Health*. Routledge.
- Tummala-Narra, P. (2019). Working with immigrants and refugees in psychodynamic psychotherapy. In D. Kealy (Ed.), *Contemporary Psychodynamic Psychotherapy Evolving Clinical Practice* (pp. 319–334). Academic Press.
- Turnbull, S. (2016). “Stuck in the middle”: Waiting and uncertainty in immigration detention. *Time & Society*, 25(1), 61–79. <https://doi.org/10.1177/0961463x15604518>
- Turnbull, S. (2017). Immigration detention and the racialized governance of illegality in the United Kingdom. *Social Justice*, 44(1) <https://eprints.bbk.ac.uk/id/eprint/20508>
- UK Visas and Immigration. (2019). *Immigration detention - Home Affairs Committee - House of Commons*. Publications.parliament.uk.
<https://publications.parliament.uk/pa/cm201719/cmselect/cmhaff/913/91304.htm>
<https://publications.parliament.uk/pa/cm201719/cmselect/cmhaff/913/91305.htm>
- United. (2018). *List of 34,361 documented deaths of refugees and migrants due to the restrictive policies of “Fortress Europe.”*
<https://uploads.guim.co.uk/2018/06/19/TheList.pdf>
- United Nations High Commissioner for Refugees. (2018). *Desperate Journeys - UNHCR*. Desperate Journeys - UNHCR. <https://www.unhcr.org/desperatejourneys/>
- van Manen, M. (1997). *Researching Lived Experience: Human Science for an Action Sensitive Pedagogy*. Routledge Taylor & Francis Group.
- van Manen, M. (2006). Writing Qualitatively, or the Demands of Writing. *Qualitative Health Research*, 16(5), 713–722. <https://doi.org/10.1177/1049732306286911>
- van Manen, M. (2010). The Pedagogy of Momus Technologies: Facebook, Privacy, and Online Intimacy. *Qualitative Health Research*, 20(8), 1023–1032. <https://doi.org/10.1177/1049732310364990>
- van Manen, M. (2014). *Phenomenology of Practice: Meaning-Giving Methods in Phenomenological Research and Writing*. Routledge/Taylor & Francis Group.
- van Manen, M. (2016). *Pedagogical tact: Knowing what to do when you don’t know what to do*. Routledge.
- van Manen, M. (2017). Phenomenology in Its Original Sense. *Qualitative Health Research*, 27(6), 810–825. <https://doi.org/10.1177/1049732317699381>

- van Manen, M. (2018). Rebuttal Rejoinder: Present IPA For What It Is- Interpretative Psychological Analysis. *Qualitative Health Research*, 28(12), 1959–1968. <https://doi.org/10.1177/1049732318795474>
- van Manen, M. (2019). Rebuttal: Doing Phenomenology on the Things. *Qualitative Health Research*, 29(6), 908–925. <https://doi.org/10.1177/1049732319827293>
- von Werthern, M., Robjant, K., Chui, Z., Schon, R., Ottisova, L., Mason, C., & Katona, C. (2018). The impact of immigration detention on mental health: A systematic review. *BMC Psychiatry*, 18(1). <https://doi.org/10.1186/s12888-018-1945-y>
- Walker, P. (2021, March 18). *UK considers sending asylum seekers abroad to be processed. The Guardian*. <https://www.theguardian.com/uk-news/2021/mar/18/asylum-seekers-could-be-sent-abroad-by-uk-to-be-processed>
- Wertz, F. J. (2005). Phenomenological research methods for counseling psychology. *Journal of Counseling Psychology*, 52(2), 167–177. <https://doi.org/10.1037/0022-0167.52.2.167>
- Wessells, M. G. (2008). *Trauma, Peacebuilding and Development: An Africa Region Perspective*. HHRI. <https://www.hhri.org/publication/trauma-peacebuilding-and-development-an-africa-region-perspective/>
- Wessells, M. G. (2009). Do No Harm: Toward Contextually Appropriate Psychosocial Support in international emergencies. *American Psychologist*, 64(8), 842–854. <https://doi.org/10.1037/0003-066x.64.8.842>
- Willcox, S. (2017). Trafficked into detention: How victims of trafficking are missed in detention. In <https://detentionaction.org.uk/wp-content/uploads/2018/08/Trafficked-into-detention-How-victims-of-trafficking-are-missed-in-detention.pdf>. Detention Action.
- Willen, S. S. (2007). Toward a Critical Phenomenology of “Illegality”: State Power, Criminalization, and Abjectivity among Undocumented Migrant Workers in Tel Aviv, Israel. *International Migration*, 45(3), 8–38. <https://doi.org/10.1111/j.1468-2435.2007.00409.x>
- Willig, C. (2008). *Introducing qualitative research in psychology: Adventures in theory and method*. Open University Press.
- Willig, C. (2012). Perspectives on the Epistemological Bases for Qualitative Research. In *APA Handbook of Research Methods in Psychology* (p. 1). American Psychological

Association.

- Willig, C. (2013). *Introducing qualitative research in psychology* (3rd ed.). McGraw Hill Education, Open University Press.
- Willig, C. (2019). Ontological and epistemological reflexivity: A core skill for therapists. *Counselling and Psychotherapy Research*, 19(3), 186-194. <https://doi.org/10.1002/capr.12204>
- Woolfe, R., & Dryden, W. (1996). *Handbook of counselling psychology*. Sage.
- Yanos, P. T., & Ziedonis, D. M. (2006). The Patient-Oriented Clinician-Researcher: Advantages and Challenges of Being a Double Agent. *Psychiatric Services*, 57(2), 249–253. <https://doi.org/10.1176/appi.ps.57.2.249>
- Yardley, L. (2000). Dilemmas in qualitative health research. *Psychology & Health*, 15(2), 215–228. <https://doi.org/10.1080/08870440008400302>.
- Yardley, L. (2016). Demonstrating the validity of qualitative research. *The Journal of Positive Psychology*, 12(3), 295–296. <https://doi.org/10.1080/17439760.2016.1262624>.
- Zamawe, F. (2015). The Implication of Using NVivo Software in Qualitative Data Analysis: Evidence-Based Reflections. *Malawi Medical Journal*, 27(1), 13. <https://doi.org/10.4314/mmj.v27i1.4>
- Zayfert, C., & Becker, C. B. (2006). *Cognitive-behavioral therapy for PTSD: A case formulation approach*. The Guilford Press.



PARTICIPANT INVITATION LETTER

You are being invited to participate in my research study. Before you agree it is important that you understand what your participation would involve. Please take time to read the following information carefully.

Who am I?

I am a postgraduate student in the School of Psychology at the University of East London and am studying for a Doctorate in Counselling Psychology. As part of my studies I am conducting the research you are being invited to participate in.

What is the research?

I am conducting research into the experiences of people who have experienced being detained within a UK Immigration Removal Centre (IRC). The research is particularly interested in the 'lived experience' of those who have been detained; hearing about your experience, from your own point-of-view.

My research has been approved by the School of Psychology Research Ethics Committee. This means that my research follows the standard of research ethics set by the British Psychological Society.

Why have you been asked to participate?

You have been invited to participate in my research as someone I am looking for to help me explore my research topic. I am looking to interview adults who have experienced detention in a UK immigration holding centre.

I emphasise that I am not looking for 'experts' on the topic I am studying. You will not be judged in any way and you will be treated with respect.

You are quite free to decide whether or not to participate and should not feel forced to take part in any way.

What will your participation involve?

If you agree to participate you will be asked to read and sign a consent form. You will then take part in an informal interview with me, the researcher. The interview will last around one hour. This interview will take place on a date and time that is convenient for you. The interview will be digitally recorded and transcribed (typed into text). The transcribing will be done by myself, your name will be changed when the research is written up for confidentiality purposes. I will not be able to pay you for participating in my research but your participation would be very valuable in helping to develop knowledge and understanding of my research topic. Travel expenses in London to the interview location will be paid. This can cover London Underground and buses from zones 1-4, the cap will be £7.80.

Your taking part will be safe and confidential

Your privacy and safety will be respected at all times.

- You will not be identified in the data collected (the recordings and transcript), on any written material resulting from the data collected, or in any write-up of the research. Comments made in the interview will be used in the write up of the research, however all information that might identify you (for example: names and places) will be removed.
- You do not have to answer all questions asked and can stop their participation at any time, you will not have to give me a reason for doing so.

What will happen to the information that you provide?

Your participation will be kept confidential.

- Your written consent form, recordings and transcript will only be accessible via a password-protected computer and a locked filing cabinet- only I will have access to these.
- Your written consent form, recordings and transcript will be kept after the study has finished with the view to develop the research further (e.g., for publication) for 5-years- after this it will be safely destroyed.
- Any information identifying you (like the consent form and/or your contact details) will be stored separately from the typed copy of your interview- in a locked filing cabinet only I have access to.
- The study will be written up and submitted as a research project as part of a Doctorate in Counselling Psychology.

What if you want to withdraw?

You can withdraw at any time before or during the interview and any recordings or information gathered will be immediately destroyed there and then. After participating in the interview, you can withdraw at any point for a duration of 3 weeks (from the day of the

interview) and during that time period, if you choose to withdraw, your data will be destroyed. Thereafter, it will not be possible to withdraw from the study.

Contact Details

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

Jennifer Leech- u1527916@uel.ac.uk

If you have any questions or concerns about how the research has been conducted please contact the research supervisor Claire Marshall. School of Psychology, University of East London, Water Lane, London E15 4LZ,

Email: c.marshall@uel.ac.uk

or

Chair of the School of Psychology Research Ethics Sub-committee: Dr Tim Lomas, School of Psychology, University of East London, University Square Stratford Campus, 1 Salway Pl, London E15 1NF.

(Email: t.lomas@uel.ac.uk)



Consent Form

Research title: **Experiences of being detained within UK Immigration Removal Centres: A Phenomenological Inquiry.**

Researcher details: Jennifer Leech, Counselling Psychologist in training.

Student No. u1527916

Institution: University of East London, University Square Stratford Campus, 1 Salway Pl,
London E15 1NF.

Participant (please tick if you agree):

- ☐ I have read this form and I am aware that I am being asked to participate in a research study.
- ☐ I have read the Participant Invitation Letter (attached to this form) and understand the information that is included.
- ☐ I have had the opportunity to ask questions and have had them answered to my satisfaction.
- ☐ I am aware I can continue to ask questions throughout my involvement in the study and that I can withdraw at any stage of the research process.

- ☐ I understand that consent will be checked with me before, during and after the interview.
- ☐ I understand that I will be offered time after the interview to discuss my experience and raise any concerns.
- ☐ I am aware that the researcher is bound by duty of care to disclose any information which alludes to risk to my-self or other people.
- ☐ I voluntarily agree to participate in this study. I am not giving up any legal rights by signing this form. I will be given a copy of this form.

Print name

Signature

Date and time

Appendix VIII: Interview Question

Interview Questions.

Main question:

- How would you describe the experience of being detained?

Prompts: Could you describe a 'typical day'

The aim was to stay as close to the lived experience as possible, additional prompts such as '*In what way*', '*can you give me an example*' were used to expand on the phenomena if necessary.

Additional questions:

- Can you describe how you have been since leaving detention?
- Is there anything else you would like to tell me, that you feel is important for me to know?



Participant debriefing sheet

UNIVERSITY OF EAST LONDON

University Square Stratford Campus, 1 Salway Pl, London E15 1NF.

Thank you for agreeing to participate in this research.

The general purpose of the research is to gain an understanding into the experiences of people who have been detained within a UK Immigration Removal Centre (IRC). The research is particularly interested in the 'lived experience' of those who have been detained; hearing about their experience, from their own point-of-view.

In this study you were invited to participate in an individual interview where you were given the opportunity to talk about your personal experience of being detained within an immigration removal centre.

Following this interview, if you would like to further address your experiences in a safe environment, you may find the following sources of help useful:

Agencies providing advice, support and information:

- **Advice Local**

<https://advice.local.uk/>

Just enter a postcode and choose an advice topic to find tailored information for your area, including details of independent advice organisations who can help you get the advice and support that you need. Advicelocal can help you with questions relating to: welfare benefits and tax credits; council tax, including exemptions and discounts; debt and money advice; housing and homelessness; employment and work issues; disability and social care; and asylum and immigration.

- **Asylum Aid: 020 7354 9264**

www.asylumaid.org.uk

Advice and assistance to refugees on their applications for asylum in the UK, conducting appeals against refusal or asylum, providing advice on related areas such as welfare rights and housing.

- **Asylum Support Appeals project (ASAP):**

Advice Line: 0203 716 0283

www.asaproject.org

Access to free competent legal advice and representation concerning asylum support appeals at the Asylum Support Tribunal against decisions by the UK Border Agency decisions to stop or refuse support.

- **Gatwick Detainees Welfare Group:**

01293 657070

www.gdwg.org.uk

To care for and support any of the 150 asylum seekers detained at Tinsley House at Gatwick who request help. Visit and befriending, listening, caring and meeting small practical needs.

- **Migrant Help:**

01304 203977

www.migranthelpuk.org

Advice and support to vulnerable migrants in the UK.

- **Refugee Action:**

www.refugee-action.org.uk

To assist refugees in conditions of need, hardship and distress, advice and support to asylum seekers who are dispersed without choice to the North West, East Midlands, South Central and South West Home office regions.

- **Refugee Council:**

www.refugeecouncil.org.uk

Gives practical advice and promotes refugees rights in the UK and abroad. Provides vocational training courses, English as a second language, support and orientation into UK work culture and job search methods, employment preparation courses, advice and guidance.

- **Samaritans:**

Offer a safe place for you to talk any time you like, in your own way – about whatever’s getting to you. You don’t have to be suicidal.

Telephone number: [116 123 \(UK\)](tel:116123) This number is FREE to call. You don't have to be suicidal to call them. They are available round the clock, 24 hours a day, 365 days a year. **Email:** jo@samaritans.org

The interviews will be audio-recorded and transcribed. All names, dates, addresses and any other identifying details will be changed on your recording and transcript to ensure that you cannot be identified and will remain anonymous. Information provided for the purpose of this study will remain strictly confidential. However, if a disclosure is made during the interview that you are harming someone now, or you are being harmed, then the I will discuss this with you and I may need to alert the manager of Hackney Migrant Centre. If you would like to withdraw from the study, and no longer have your interview and transcript used for my study,

within 3 weeks of the interview, your data will be destroyed- this includes the transcript, the recording and your consent form.

After this time, you are still free to withdraw however I reserve the right to use the anonymised data for any further analysis, and in the write-up of the study.

If you have any further questions about the study, please contact the researcher, Jenny, via email; u1527916@uel.ac.uk. Additionally, if you have any concerns about how the study has been conducted, please contact the director of studies: Claire Marshall. Email: c.marshall@uel.ac.uk

Thank you again for your participation.

CERTIFICATE of ACHIEVEMENT

This is to certify that

JENNIFER LEECH

has completed successfully
Research Integrity Modules

26 February 2019

End of course quiz - Social and Behavioural Sciences Grade: 75.00 %