Women’s experiences of indignity in immigration detention and beyond

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Abstract
In this article, I set out to define dignity in immigration detention and beyond. Throughout this piece, I will examine the role of dignity in detention, and the way in which the existence of ‘dignity’ in detention impacts on people when they are in detention and after they leave. Based on interviews and research with women who have experienced immigration detention in the United Kingdom, it is clear that this experience of indignity has had a lasting impact on women, causing them distress both in detention and after they leave. The key themes emerging out of this research into violations of dignity include vilification, lack of autonomy and ‘diminishment’. In light of this, I suggest that immigration detention is incompatible with the concept of dignity that has been defined by the women in this study.

Keywords
Immigration detention, dignity, women, incarceration

Introduction
Immigration removal centres are sites of incarceration used for the purpose of containing individuals before their administrative removal from the United Kingdom. These sites of incarceration are increasingly of interest to scholars as key elements of their administration, appearance, and affect, appear to cause substantial distress to the individuals held within them (Bosworth, in Shaw, 2016). The use of institutions that are prison-like in appearance, and that hold people for indefinite periods of time, are drawing substantial criminological scrutiny for the way in which this particular type of administrative detention challenges traditional notions of legitimacy and
punishment, and the way in which it embodies the criminalisation of migrant bodies (Bosworth, 2014; Bosworth et al., 2016; Bosworth and Turnbull, 2015).

Despite the consistent academic concerns published, immigration detention still remains a problem in 2022. The number of people held in immigration detention has varied substantially across recent years, though the number of men and women held between 2009 and 2019 typically ranged between 1600 and 3500 at one time (Silverman et al., 2020). At time of writing there are six immigration removal centres in the United Kingdom, and the latest available figures show that in the year ending December 2020, 14,773 individuals passed through immigration detention (Home Office, 2021). In this article, I am to add to the literature on detention by exploring the experience of women in detention, in an attempt to extricate what it is about immigration detention that makes it so painful for the people held there.

In a letter to the Joint Committee on Human Rights of 3 December 2018, the Minister of State for Immigration set out a government strategy for managing immigration detention (Nokes, 2019). Within this letter, the government proposes four areas of priority: ‘encouraging and supporting voluntary returns; improving the support available to vulnerable detainees; increasing transparency around immigration detention; and a new drive on dignity in detention (Nokes, 2019)’. The fourth area of priority, ‘dignity in detention’, is the topic of this article. Dignity is not an easy concept, and scholars across academic fields have found the definition of dignity to be elusive. Where scholars have settled on a definition, they tend to differ across time and field of enquiry, and we are left with definitions that are both conflicting and vague in the broadest sense. How then, do we apply this ambiguous concept to immigration detention? How likely is the government to succeed in their proposal of creating a space of immigration detention that is dignified? In this article, I set out to define dignity in immigration detention and beyond. Throughout this piece I will examine the role of dignity in detention, and the way in which the existence of ‘dignity’ in detention impacts on people when they are in detention and after they leave. Explicitly, I answer the questions: What does detention mean in the context of immigration detention? And how does dignified, or not, treatment impact people in immigration detention and after they leave?

The definition of the concept of dignity is contested. There exists investigation into the definition across multiple disciplinary fields, and across history. Yet, we still remain without a consensus. The philosopher Immanuel Kant is often linked with defining dignity, believing that it is an immutable human characteristic. Dignity, he says, is something we are born with, and we must all act accordingly to respect it (Kant, 1996; Killmister, 2010; Misztal, 2012; Rosen, 2012; Shell, 2003). This definition is only helpful to a point, as it declares we have this special entitlement as humans, but it does not explain why, and how to respect each other in light of the statement.

The Kantian definition of dignity is typically referred to as ‘human dignity’. This definition is important for practical fields of law and human rights, as it forms the underlying principles of human rights standards and expectations throughout the world. The Universal Declaration of Human Rights (UDHR) refers to the inherent dignity of humans, and the rights ascribed to us as a result (United Nations, 1948). The UDHR has been intrinsically important to the treatment of individuals with dignity since its inception, as have other tools and protocols based around the concept (Donnelly, 1982; Dupré, 2009; Feldman, 2000; McCrudden, 2008; Misztal, 2012). The use of human dignity in this way suggests that it is important, and that it must be protected. However, a criticism of dignity as a concept, and of human rights protocols, is that dignity is an abstract concept that is difficult to define in practice (Beitz, 2013). While many agree on the value of the principle of dignity, that we as humans have dignity, and that we must maintain moral standards
in light of this (Dales, 1977; Johnson, 1971; Korsgaard, 1992), it is a challenging task without operationalising the term in some way.

There is an alternative conceptualisation of dignity that offers a solution to the abstraction offered by human dignity scholars, and that is the concept of ‘social dignity’. The idea of social dignity stems from health and social care scholars who concern themselves with the consequences of violations to the dignity of an individual (Chilton, 2006; Jacobson, 2007, 2009, 2010; Mann, 1998). In this field, to be treated with dignity is defined by behaviours expected towards people in the care of others, and the interactions that result in either protection or damage to the persons dignity. For example, in an aged care home a woman may take pride from her appearance, however, she is no longer able to fully care for her own needs. If a carer is aware of her wish to look neat, and helps to brush her hair before family are due to visit, the care provided helps to protect the dignity of the woman. The usefulness of the ‘social’ dignity approach can be seen here in the relationship between treatment and consequences that relate to dignified care. If the woman takes pride in her appearance, but is left to appear unkept, she is likely to feel embarrassed. Her feelings are connected to the dignified, or undignified, treatment provided to her.

The work of Jacobson (2010) and Mann et al. (1994) shows why dignity is important, and especially espouses the consequences of dignified treatment; people treated with dignity are likely to experience increased feelings of self-worth and motivation, where those who are not can suffer from negative, and long term, social, physical and mental health outcomes. Dignity is a feature of notable National Health Service (NHS) frameworks in the United Kingdom, such as the NHS plan (NHS, 2000), the NHS framework for older people (DoH, 2001) and the NHS essence of care (DoH, 2010). In health care frameworks and academic literature certain dimensions of dignity are ensured, in theory, such as patient autonomy, and individuality. In these works, it is recognised that to ignore an individual’s autonomy and individuality is to treat them as less than human, and is thus an unacceptable violation of their dignity (Gallagher and Seedhouse, 2002; Haddock, 1996; Henry et al., 2015; Skorpen et al., 2014; Sugarman et al., 2015).

Dignity is operationalised by health care scholars in practical examples, providing useful in application throughout care homes, hospitals and any other medical institution. For example, autonomy is defined as ensuring an individual is able to control their situation within the restrictions of their medical situation. To do this, medical practitioners, carers and nurses must recognise the ability of individuals to make decisions regarding their treatment, and to respect such decisions. Failure to do this results in patients feeling they are treated like children, and therefore their dignity is challenged (Gallagher and Seedhouse, 2002; Gennip et al., 2013; Henry et al., 2015; Sugarman et al., 2015).

Also pertinent in the health care literature is the illustration of the impact of challenges to the dignity of patients. When examining dignified treatment in care, failure to follow the principles of dignified treatment results in losses to individuals sense of self-worth, self-esteem and their confidence (Gallagher and Seedhouse, 2002; Gennip et al., 2013; Henry et al., 2015; Sugarman et al., 2015). Further, evidence in this field suggests that the consequences of undignified treatment go further than psychological notions of the self. Being treated without the respect that is due to a human can result in a build-up of chronic and acute stress, ultimately leading to the embodiment of stress as physical and mental health symptoms (Chilton, 2006; Jacobson, 2010; Mann, 1998).

The embodiment of stress as physical and mental health symptoms in health care patients who have suffered from undignified treatment is similar to the outcomes that are also notable in the accounts of immigration detention, both during and after time spent there. There is a growing body of literature that shows a substantial link between immigration detention and mental health...
problems particularly (Robjant et al., 2009; Bosworth in Shaw, 2016), and even more that link
general distress in those held in immigration detention (Bosworth, 2014; Kellezi and Bosworth,
2016; Coffey et al., 2010; Canning, 2017; Hasselberg, 2016; McLoughlin and Warin, 2008;
Silove et al., 2001; Steel and Silove, 2001). Based on this, I argue it is important to begin to
define what dignity looks like in relation to immigration detention in the United Kingdom.

The concept of dignified immigration detention is not new. In fact, it is referenced by the Home
Office in the statement of purpose for immigration removal centres, published in 2001:

The purpose of detention centres shall be to provide for the secure but humane accommodation of
detained persons in a relaxed regime with as much freedom of movement and association as possible
consistent with maintaining a safe and secure environment, and to encourage and assist detained
persons to make the most productive use of their time while respecting in particular their dignity and
right to individual expression (Home Office, 2001).

However, evidence from academic researchers (Bosworth, 2014; Griffiths, 2013; Hasselberg,
2016; Turnbull, 2016), NGOs (Bacon, 2005; BID, 2009, 2013; Girma et al., 2015) and government-
mental inspection and reporting bodies (AAPG, 2015; HMIP, 2013) suggest the treatment of individuals
in immigration detention has been anything but dignified. None of this evidence delves into the
complexities of dignity, nor labels their findings as violations to dignity, yet their findings are lit-
tered with examples of treatment that has offended individual’s sense of dignity. In one annual
report from HM Inspectorate of Prisons, for example, the Chief Inspector refers to immigration
detention as ‘safe, but degrading’ (HMIP, 2013). Further, since 2011 the High Court of Justice
in England have ruled that the treatment of a number of men and women in immigration detention
was inhuman and degrading (Royal Courts of Justice, 2011a, 2011b, 2012, 2013, 2014b, 2014a).
This is all despite statements of intent from removal centres that dignity shall be of particular
importance to immigration detention. It appears then, that there is likely a disjuncture between
the definitions and operationalisation of dignity as ascribed by the UK government bodies and
the lived experience of women in detention.

One of the defining features of the ‘social dignity’ offered by health care scholars is that dignity
is socially constructed. In the health care literature noted above patients and families of patients are
consulted to help define and operationalise what dignity means in a care home, hospital or other
place of care. Following this practice, I believed that it was important to ask people in immigration
detention what dignity means to them, in order to ensure their definitions of dignity are being
respected in the same way as attempts are made in healthcare to protect the subjective dignity of
individuals in care there. In the following article, I present these definitions of dignity and offer
them alongside women’s experience of immigration removal centres to illustrate how dignified
treatment is not practiced towards the people incarcerated there.

Methods

This paper is based on qualitative interviews with 76 women who had experience of immigration
detention in the United Kingdom. The research was conducted over the course of a year, and the
women participated in the research from three distinct field sites. The first group were in Yarl’s
Wood Removal Centre at the time of interview. The second group of women had been ‘released’
from detention into the UK community. The third group had been removed to Jamaica following deten
tion. All interviews took place between January 2015 and January 2016.

Three fieldwork sites were chosen for this project as immigration removal centres have been shown to continue to define the lives of people after they leave detention (Klein and Williams, 2012). Immigration detention was the focal point of this research and 38 women were interviewed during their stay at Yarl’s Wood. I spent four weeks in the removal centre, staying nearby and trav-
eling into the centre during the day. I carried keys to the establishment and had the freedom to roam
the centre for the purpose of speaking to the women there. Most interviews took place in the privacy
of women’s rooms. All women in the centre were welcome to participate in the study, regardless of
nationality. ‘The UK community’ more broadly was chosen to investigate what had happened to the
women released from detention. At the time of fieldwork approximately 50 percent of women held
in detention were typically released back into the UK community. I interviewed 12 women across
the United Kingdom, they were living in London, the Midlands, Scotland and North West England.
Women in this group were recruited through NGO’s and charities who work with women who have
formerly been in immigration detention in the United Kingdom. As with detention, women from a
range of nationalities participated in the interviews. Finally, Jamaica was chosen as a site of removal
to establish a case study of the outcomes when a removal from the United Kingdom is complete.
Twenty-six women were interviewed there, all of whom had spent some time in immigration deten-
tion before their removal to Jamaica. I was assisted in Jamaica by an NGO called the National
Organisation of Deported Migrations (NODM), who acted as a gatekeeper and facilitated interviews
with the women there. The choice to conduct this research in Jamaica was largely pragmatic; the
United Kingdom has historically removed a substantial population of women to the country,
there was a large proportion of removed individuals living in the capital of Kingston, and there
was an NGO in the city who was willing to help me to find participants.

The concept of dignity is subjective, and so care was taken to ensure the women in this study
were the ones to define the concept for their own personal circumstances. To this purpose I designed
my interview schedules in two distinct sections. The first section covered the experience of deten-
tion, release or removal and I ensured women were able to freely speak of their experiences without
presenting any questions on dignity until they had concluded speaking. Then, I introduced the idea
of ‘dignity’, where I typically asked women if they could define the concept, and whether their
experience of detention could be considered ‘dignified’. From the women’s subjective answers I
developed a coding framework that reflected their definitions and explanations of the subject. I
also utilised focus groups, where I worked with women from a local asylum and refugee group5
to ensure that my interpretations of the interview participants’ definitions of dignity were as reflect-
ive as possible of the interviews. All interviews were then transcribed and coded using thematic
analysis. The qualitative data analysis software ‘Nvivo’ was utilised to code data from the
interviews.

As scholars throughout history have also experienced, I found it challenging to present a single
and specific definition of dignity in order to offer a working definition of dignity in immigration
detention. There were broadly three definitions of dignity presented to me by the women in the
study; dignity as an action, dignity as a possession and dignity as a state of being. These definitions
are explored in more detail below, however, the collective definition from the three suggest that
dignity is a person’s believe that they are worth something. Dignified treatment is behaviour
towards an individual that respects this worth.

Ethics were undoubtedly important to this project and I took great care to do no harm. The
women interviewed for this research were undoubtedly vulnerable, and women were rarely ‘free’
of the control of the Home Office, even when in the community. Women removed to Jamaica were typically living in deprived areas and some struggled to feed their families regularly. The use of subjective definitions of dignity was a key part of respecting the women who participated in the study. Asking women to reflect on the concept of dignity in relation to their experience of immigration detention allowed for reflexivity through collaboration, described by Findlay (2008) as a way to challenge the traditional unequal power dynamic between the researcher and researched. I felt this was of particular importance for this project, with women subject to immigration control already suffering substantially from imbalanced power relationships with institutions of the UK government that severely curtailed their autonomy in many other aspects of their lives. As has been suggested before, it is largely impossible for a qualitative researcher to claim full objectivity in their work (Letherby et al., 2014; Ratner, 2002); however, I utilised the subjective definitions of dignity provided by the women to attempt to remain as objective as possible. In this I agree with Rhodes and Carlsen (2018) that the incorporation of an ethical reflexivity allows for a deeper sense of engagement and understanding of the people that we study.

Findings

When asked to define dignity, women who participated in this research were easily able to offer some explanation as to what the concept entailed. Defining dignity was posed to participants at the natural end of discussions surrounding their current situation, be that in detention, the UK community, or living in Jamaica. The purpose of this was to avoid influencing their testimony, allowing for responses that were as subjective as possible before asking them to delve into dignity. In a number of cases, the term had arisen naturally throughout the conversation, providing further evidence for the importance of the concept to the women involved. The discussions varied substantially, as expected; however, there were three prominent descriptions that were frequent throughout: Dignity as an action, dignity as a possession and dignity as a state of being.

Dignity as an action

Dignity as an action is the way in which someone is made, or requested, to perform an act. A violation to dignity in this context was described by women as forcing another individual into a situation, or setting them a task, that you would not be willing to do or be in yourself. A vivid example came from Abigay who utilised her Christian faith to help explain the concept to me. I met Abigay in immigration detention, she was from Jamaica and fighting her removal there because she feared she would be attacked by gangs if she was to return. Like most women in detention, our interview was held in Abigay’s room. On the desk in her room, Abigay had a carton of juice she had earlier purchased from the on-site shop. She used this to explain dignity to me. As Abigay picked up the carton of juice, she explained that if the carton of juice was too heavy for her to pick up, she would not expect me to pick up the carton. Much like the biblical ‘do unto others what you would have done unto you’, to not respect dignity in this way was to make a person undertake an act that you would not perform yourself. Edwina, who I interviewed in Jamaica, described it in a similar way, she told me that dignity was respect, and respect was shown through manners: ‘With manners. You pass someone with “hi, good morning.” Good evening, yeah. That is manners’. For Edwina these simple human interactions with other people illustrated dignity as an action.
Dignity as a possession

Dignity was described by other women as a kind of possession. It was an item that a person must hold on to in order to keep it, and notably, it was possible for others to take dignity, as a possession, away. Eve, who I met in Jamaica, had lived in the United Kingdom for four years before she was returned there. She had overstayed her visitor visa and was taken to detention after a chance encounter with the police where she was unable to provide evidence of her right to stay in the United Kingdom. She described dignity in such terms: ‘Your dignity is something that you hold onto, you understand? Your dignity is something you want die with. You understand? You don’t want somebody to take that from you’. Eve expressed this definition in the context of her struggles to earn enough money from a makeshift shop on the street in Jamaica to feed her children. She felt that her dignity was something she had to constantly fight for, in order to maintain it. In the case of Eve, and many others, she felt that holding on to her dignity was the difference between living a worthy life or a shameful one. Cassandra, who also spoke to me from Jamaica, was removed to the country after a failed asylum application. She provided a practical illustration of how this dignity as a possession was violated on her removal flight. She, along with another Jamaican woman, had been handcuffed when being seated on the plane, which was a commercial flight to Jamaica with other passengers:

It make us, our dignity, because knowing that other passengers were on the plane as well. I know they take away our dignity, our pride as well because we were ashamed. Because they handcuff us. Yeah.

Cassandra demonstrates here the way in which an action performed by others very clearly ‘takes away’ her dignity, as though it was an object that had been removed.

Dignity as a state of being

Others reflected on dignity as a state of being. Dignity was the way in which an individual held themselves. Audree had come to the United Kingdom to study, but was returned to Jamaica after two years when it was discovered she had overstayed her visa, she described dignity as a state of being, or a feeling: ‘Maybe your pride? Your pride and everything about yourself actually. Your pride, how you carry yourself. How you look about yourself and everything’. Reflecting on dignity in this way, women presented the image of a strong woman. She stands straight and tall, her shoulder braced as though fighting the wind, her head held high, an image of dignity, as described here by Cleona, who I met in Jamaica: ‘Well, dignity, I turn to myself, for my dignity I want to put myself, put my shoulder to the wind, lift up my head and certain things that I want to go out for, work, help meself’. This picture was the ideal, and women compared themselves to this. Lack of dignity, in the alternative, was presented as a woman cowering, she holds her head low, making herself as small and unassuming as possible.

The explanations and descriptions of dignity shared by the women in this study were varied and nuanced, and sometimes contradictory, but, they all link to the idea that dignity is a person’s belief that they are worth something. As an action, the belief in self-worth is that they are being forced into a situation or behaviour that they believe is below them. As a possession, when removed, part of the self is removed alongside their dignity which results in the value of the person to be lessened. Finally, as a state of being, dignity is embodied by the individual, and the person they feel they are can be visualised as somewhere between the woman standing strong, or the alternative image
of a woman, cowering and fearful of the world. In the following paragraphs, the stories of women in detention, and after, illustrate how acts which impact on dignity are experienced as painful, and how immigration enforcement ultimately chips away at women’s dignity.

**Key themes of dignity in immigration detention and after**

The examples of dignity violations in immigration detention and after were many, and diverse. Yet, there were three key themes that were consistent throughout most of the women’s experience: vilification, lack of autonomy and ‘diminishment’. In relation to women’s descriptions of the concept of dignity, the conditions of detention clearly offended their sense of dignity through forcing them into actions that felt undignified, in a way that made it difficult for women to hold onto their sense of self-worth. As a result, the indignity caused by these violations led to a collection of women who were greatly distressed by their detention. In the following paragraphs, the experience of detention is expressed through these three key themes.

**Vilification**

Vilification is to be made to feel as though you are in some way ‘bad’, or morally inferior. For women in detention the violation to their dignity arose from the disconnect between their own perceived sense of being a ‘good’ person, and their treatment at the hands of the Home Office. It is well documented in detention literature that detention centres have the look, and feel, of prisons (Bosworth, 2014, 2017; Bosworth et al., 2016), and the buildings are, in some cases, former prison buildings. Yarl’s Wood, the detention centre where this research was based, have made efforts to soften the environment for the women held there, including paintings on the walls, a craft room and the addition of a hair salon, for example. However, the centre is still unmistakably carceral, with high walls, barred windows, tall fences and gates surrounding the buildings. These attributes overwhelm any softening measures put in place in the centre. When I asked Samantha, who had been in detention for almost a year following a prison sentence, to explain to me in what way Yarl’s Wood looked and felt like a prison, she laughed at me, and pointed out the window of her room to the barbed wire, high walls and gates we could both see. She and others found the proposal that Yarl’s Wood was not a prison offensive.

The prison like environment implied to women that they were dangerous, that they were not safe to be in the community, and ultimately, the country. Luciana, who I met in detention, described how this made her feel:

They really really, they make us feel like we are dangerous people, they feel afraid of us. Look at me! I have never done nothing wrong. I feel as … yes, I don’t have papers. But you know, and they made me feel like they lock me, and they make sure I am lock and they look at me like, ok, you have to stay there. Because you … morally … I don’t know what they are thinking, but they make me feel really bad.

To women who had not committed a criminal offence, to be treated as though they were criminal was hurtful, because it was in direct opposition to their sense of self as an upstanding moral citizen. I met Wendy when she was in detention, she was facing removal to Jamaica after it was established she had overstayed her visa. She had a son and four grandchildren in the United Kingdom and she was fighting to stay to be with them, her partner had died many years ago and her UK family were
the only family she had. Wendy described to me how being taken to detention impacted her sense of dignity:

for the main fact that they bring you in here, I think my dignity gone. You know why I say that? I wasn’t looking to be in a place like this. My grandkids know that their grandmother in detention for nothing! You know, detained for nothing, you know.

Wendy could not comprehend the idea of a grandmother locked up in a removal centre as it was so far removed from her sense of identity as a caring and maternal figure.

Many women explained to me how they volunteered with charity organisations in their community, attended church regularly or looked after the children of their friends and family to help out. Maria had lived in the United Kingdom for four and a half years, she had a British husband and two-year-old daughter who would be left behind if she was removed. She spent much of our interview telling me of her good character, she used the example of a community garden she had helped to develop in her street, and how she was on good terms with all her neighbours.

where I lived for the last 4 and a half years, we even have, we made our streets look so pretty. We live up on ****8 and what we have done in 4 and a half years we have made our streets look so pretty, we’ve made flower boxes like the group of people who have made flower boxes and we make all the gardens around **** pretty.

Maria’s confidence was suffering from the label of criminal as a result of detention, and she told me she was becoming increasingly confused and nervous, as she was constantly trying to prove she was not a bad person. Maria went on to describe how her incarceration, having committed no criminal act, felt painful:

Imagine, you have your family. (laughs ironically). But it make you feel here … you know you didn’t steal (starts to cry), you didn’t do nothing wrong to no-one. That’s what make you feel really bad you know. We have a family, I have a baby. Yesterday she was four years.

Like Maria, many women felt that being in a prison was hurtful, and that their incarceration felt like a blow to their sense of self as a good moral person. The women could not understand what they had done wrong to deserve such treatment, and felt imprisonment was not a justifiable response to their administrative errors or transgressions in relation to their immigration status.

Women who had been in prison before their stay in immigration detention too felt their imprisonment there was unjust and felt vilified by it. For this population, the offence hinged on the indefinite nature of immigration detention. Most women in this group confessed relatively minor criminal offences such as fraud, shop lifting, or a fight that lead to a prison sentence, yet, they said, they were suffering the harsh punishment of much ‘worse’ offenders, such as ‘rapists’, ‘murderers’ and ‘terrorists’. In prison, they told me, they at least had a release date to work towards, and this gave them a sense of purpose and trajectory in time. In detention, where their incarceration is potentially endless, they did not have this crutch to help ease their pains of imprisonment. They felt this was undeserved, and that they too, were vilified much more than their sense of identity allowed. Regina, had previously been in prison, and told me of how she preferred it to immigration detention:
I like in prison you know, because you know the day you go out. Because they give you paper when you come in supposed to come to you within one week. You sentence is so so many days, but you do so so so and so so so, so you released then and then. Done. Ok. And you are sitting and waiting every day. That’s what you do in there. And here? At the moment I feel like I’m doing a life sentence. You know, nearly life, already seven months done (laughs ironically).

This preference for prison over detention was repeated by many women in the study, not only due to the tangibility of a release date but also the clear rules and regulations there that they felt were lacking in the removal centre.

**Lack of autonomy**

Autonomy refers to an ability to direct your own life (Dupré, 2009). Lack of autonomy, in contrast, suggests an individual is somehow constrained by another person or institution, in their ability to make decisions. In literature on health, an ability to direct your own life is a key determinant of dignified treatment (Griffiths, 2013; Jacobson, 2009; Nussbaum, 1997; Phelps, 2009), and the lack of this in detention was fundamental to the experience of women incarcerated there. The purpose of immigration detention is to hold individuals in a space that ensures they are available for return to their country of birth. There is an obvious lack of autonomy in the very nature of the institution of detention in this sense; however, the offence to dignity here is not the restriction of detention, per se, but rather the combination of indefinite detention and unnecessary and unfair restrictions that are due to the detention.

Immigration detention in the United Kingdom remains indefinite, an individual can never know if or when they will be released (or removed) from their imprisonment. This ‘indefinite sentence’ was seen as overtly punitive to the women and it led to the feeling of vilification in the population. But indefinite detention has another consequence, in that this practice inherently stops an individual from the ability to plan for their future, in the event of either outcome of release or removal. Vicky, who had been detained following a prison sentence, had been in the United Kingdom since she was a child, and spoke with a thick South London accent while explaining her frustration at the way her case was managed:

Look at me! with my sentence, and with the immigration matters, it’s over two years now and now you lot just decide to give me deportation decision and order all at once. Hold that. The decision should have come a year ago. Then I’ve got a year to fight whatever so they can make an order or not. Guess what, it’s your lucky day you’re getting it both at once. How do you work that one out? Who’s made this decision? Who is my case worker? I’ve never seen them in my life, and every couple of months they change.

It is notoriously difficult for individuals to fight their immigration case from immigration detention. In a review of casework in detention HM Inspectorate of Prisons (HMIP) and the Independent Inspector of Border and Immigration (ICIBI) showed access to lawyers while in detention was limited, and the service provided poor (HMIP and ICIBI, 2012). Existing academic work also illustrates the struggle faced by men and women to access good legal representation (Bosworth, 2014; Griffiths, 2013), and also the barriers detention created in gaining access to appropriate documentation that had been left in the community, such as evidence to support an asylum claim (BID, 2009; Griffiths, 2013). Further, case workers, who are the individuals that make the decision on whether to
remove an individual, are rarely accessible to people in detention. These barriers were experienced by women in detention as an affront to dignity, as they felt their detention was inherently unfair and the system disadvantaged them markedly. Luciana, while in detention, expressed to me the confusion she felt when trying to plan and organise her case:

There are a lot of people don’t know what is going to happen. No-body know. That is the problem, nobody know what is going on. Is no-one to come tell us. Oh, look that day you going to have this, or one day you gonna, you have to do this. We have to be looking, oh what I need to send, oh I need to … even sometimes we say we don’t know what we are doing but we do it. They no-one, to tell us.

The confusion expressed here by Luciana is indicative of an inability to have autonomy when in detention. The indefinite nature of the incarceration, combined with processes women found almost impossible to navigate left them feeling hopeless and helpless.

**Diminishment**

Diminishment is when an individual is made to feel smaller through the interaction they have with another person or institution (Jacobson, 2009). As described above, women in detention struggled to access case workers and lawyers to fight their case, resulting in a lack of autonomy. This was then confounded by perceived lack of concern regarding their complaints regarding access, and to the women, the Home Office were not concerned of their individual needs or circumstances in relation to their immigration case. This led women to feel they were unimportant to the Home Office, often describing a feeling that they had been forgotten or that they were being ignored. Anam, had been a student in the United Kingdom who was being detained before she was to be returned to her home country after the English testing centre she had used for her visa had been found to be fraudulently passing applicants. In perfect English she described how she felt ignored by the Home Office after multiple attempts to prove her English test results were legitimate:

It’s really painful, to be really honest That you are trying to convince someone that please, we are not telling that right or wrong. Just give us a chance to prove ourselves. But Home Office not wanting to give a single chance to us. I don’t know why they believe in all wrong things, why they not believing all the good things?

The way in which the healthcare provision worked in detention was also a substantial factor in women’s feelings of diminishment. The women I spoke with in detention complained, almost without exception, that they were suffering from a physical or mental ailment in detention. Some women had pre-existing conditions that had worsened while in detention, where others developed new problems since their imprisonment. The problems were varied but were often related to heart problems such as tightness in the chest, or irregular beating of the heart, unusual and prolonged bleeding from the bowel or uterus, headaches and stomach problems. All the women I spoke to felt neglected by the medical team on site in relation to their problems. A number had been turned away with what they felt were serious ailments and some women expressed fear that they would not get the medical help they required in an emergency. Women likened the treatment in relation to their health as less than an animal would receive in the United Kingdom, often referencing...
the general love of animals apparent in British society. I met Ryane in the community, she had been detained three times, though she was a victim of human trafficking. She explained various ailments in detention that went untreated, or treated improperly and how it made her feel:

Even the way they treat dog here, is like it is family, but the way they treated me, I fear, I was crying, I was crying all the time, I was like, what is going on? I was like, I want to go mad. You understand? It is not good, that place is not for anybody

Women felt diminished to the point of dehumanisation, and this reference to treatment as animals, or less was a common theme throughout. Esther described her detention as akin to chickens in a slaughterhouse:

So … my feeling about this place is … you’re like chickens (laughs), we’re the chickens in (laughs), we’re the chickens and all they have to do … (goes off and talks to someone who pops head in the door) … all we … all we are waiting for is which one they are going to say is to be slaughtered. That’s my feeling (laughs).

When I asked Esther the impact on her, as a person, to feel like you are a chicken waiting to be slaughtered, she answered: ‘The impact is devastating. The impact is absolutely … I don’t know. It’s heartwrenching’.

The impact of these violations to women’s dignity in detention was an overwhelmingly negative picture of women in general distress. The lasting effects of detention are important to recognise as they show an immigration enforcement regime that is harmful not only at time of incarceration, but also for an indefinite time after release. Renas, who I met in the community had fled her country fearing for her life after becoming targeted for her support of human rights. She had ambitions of doing a PhD in the United Kingdom, but found that the impact of detention had left her so unwell it was difficult to focus:

They make my situation worse, my depression, my ability, my memory, all this affect on my body … I lost my health, my healthy, my ability to think right way. I lost my hobby [academic work], my situation not like this. My confidence I lost, I lost my confident.

Renas was forward in telling me how this made her feel, and was clear that she blamed the system of immigration enforcement and detention for her feelings:

They like they kill us from inside. If you could [kill] you by any way this be easier, easier, cause they kill you from inside. So they are criminal, more than they kill me by knife or gun.

Renas had been free of detention for almost two years, but was still feeling the effects of her two month stay. This was common in the women who participated in interviews after being released from immigration removal centres to the community. These women’s sense of dignity had been substantially wounded while in immigration detention and most were deeply hurt and unsettled by their treatment there. Women’s sense of self-worth and self-esteem had plummeted since detention, as ongoing involvement with the Home Office compounded the indignity of detention. Most women I spoke with had ongoing mental health issues such as anxiety, depression and post-
Fear of being returned to detention is an important focal point in the discussion of the impact of immigration detention, and it illustrates the lasting anxiety caused by incarceration there. This fear also exemplifies the continuing offence to women’s dignity in the form of vilification, lack of autonomy and diminishment. When released from immigration detention most women were restricted by reporting conditions, where they had to attend a Home Office reporting centre regularly. The regularity of the reporting procedure was different for each woman, though usually appeared as once a week initially, extending incrementally the longer women were waiting for a decision from the Home Office in the community. Reporting to the Home Office was a focal point in the lives of the women, as people were often detained and taken to detention when reporting. Many women described increasing levels of anxiety, stress and depressive episodes in the lead up to the day in which they were to report. I met Brenda in the community following her release, she was visibly and audibly anxious when describing her fear of re-detention:

Whenever you be walking around, I be scared that maybe somebody is going to take me back to Yarl’s Wood (change in tone of voice here – trembling). So I was all the time scared, not feel good myself knowing that any time, every month to be counted again.

The practice of reporting was described as an affront to the dignity of women as it controlled their movements and activities, thus was an offence to their autonomy. Likewise, the act of reporting is similar to that expected of ex-prisoners, who report to parole officers. Reporting was seen by the women as vilifying and they felt ashamed by the practice. Likewise, they were embarrassed by their detention, hiding the event from new friends and families back home as the nuances between immigration detention and prison are not well understood both in the United Kingdom and abroad.

Discussion

It is clear from the definitions of dignity provided by women who had experienced immigration detention, and the resulting discussions of violations to this dignity experienced in immigration removal centres, that the dignity of women in detention was not protected while the women in this study were incarcerated there. Using their definitions, the very existence of immigration removal centres is an affront to their dignity. Placing an individual in indefinite detention, in a prison like environment, fails the dignity as an action, dignity as a possession and dignity as a state of being definitions of dignity defined by women who have experienced detention in a variety of ways.

In healthcare literature, autonomy, for example, is defined as the ability of an individual to control their situation within the restrictions of their medical situation, and it is generally recognised that this is possible (Gallagher and Seedhouse, 2002; Gennip et al., 2013; Henry et al., 2015; Sugarman et al., 2015). In immigration detention, however, the combination of vilification, diminishment and loss of autonomy makes dignified treatment, as defined by the women in this study, impossible. The statement of purpose for immigration detention, where a secure environment is proposed alongside respect for dignity, is simply unmanageable. The use of dignity in this context falls into the trap of the Kantian ‘human dignity’ in that the term has been used without a real understanding of what dignity feels and looks like for people held in detention.
The natural conclusion then is the abolition of immigration detention. Confinement that has greater legitimacy, such as prison, is known to be painful despite a wealth of protective human rights legislative and the power of legitimacy and justice (Carlton and Segrave, 2011; Hart, 2017; Ryan and Sim, 2016; Moore and Scafati, 2014; Ryan and Ward, 2015; Scott, 2013; Sim, 2009) that are also lacking in immigration removal centres. Similarly, institutions such as the prison still re-enforce unequal power relations in society, especially those surround gender and race (Sim, 2009). Immigration detention is an even greater beacon for social inequalities, race particularly, with the majority of people held there noticeably from marginalised groups (Bosworth, 2014). The institution of immigration detention then adds another layer to an already persuasive argument for penal abolitionism (see Gill, 2009; Ryan and Sim, 2016; Ryan and Ward, 2015), particularly when taking into account the questions of legitimacy that remain unanswered when detaining individuals for administrative reasons.

Though dignity as a concept is fraught with criticism and complexity, it clearly meant something to the women in this study, and that makes it an important concept in the context of immigration detention. In light of this, I would suggest more attention was paid to other sites of care, such as those described in the health care literature, such as care homes and hospitals, that have attempted to operationalise dignity for the benefit of individuals within their care. We can learn a lot from institutions that aim to care, rather than punish or expel, individuals. NGOs who promote abolition suggest more holistic approaches to immigration enforcement (IDC, 2015; Ohtani and Phelps, 2016), which, combined with greater focus on the population involved, such as use of the subjective definitions of dignity offered in this work, can go some way to improving the lives of people subject to immigration control in the United Kingdom. We can hope.

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Notes
1. Data from 2020 is notably different due to the global pandemic at the time.
2. This data is down substantially due to the global pandemic, with numbers reported at 40% less than 2019. Though this does follow an overall downward trend in the use of immigration detention from a peak of approximately 32,000 people in 2015 (Home Office, 2021).
3. For example, the International Covenant on Economic, Social and Cultural Rights (ICESCR) and the International Covenant of Civil and Political Rights (ICCPR) also pose human dignity as the underlying concept.
4. Yarl’s Wood Removal Centre is the United Kingdom’s only detention centre primarily designed to house women. Women can be held on units in other centres, for example in Dungavel IRC and Colnbrook IRC, however the main population in these centres are men. Men are also held at Yarl’s Wood in the family unit, where couples and adult children are held together, though the men do not mix with the general female population.
5. A substantial proportion of women from this group had either been in immigration detention in the United Kingdom or had been or was still under the control of the Home Office awaiting asylum decisions. I had built a relationship with this group over many months of visiting the group and feel they were reflective of the voices of women in the study. Some of the members of the focus groups had also been interviewed as part of the project.

6. All women I interviewed in the community were still awaiting a decision from the Home Office regarding their application to stay in the United Kingdom, with one exception, who had recently been granted a temporary protection visa.

7. All names are pseudonyms to protect the privacy of women in this study.

8. The name of Maria’s community has been hidden to maintain anonymity.

9. Notably these are all symptoms commonly ascribed to people suffering from severe stress.

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