

De Facto Detention: Examining the impact living in a
liminal ‘non-place’ has on female asylum seekers in
Ireland’s system of Direct Provision

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ABSTRACT

Years of increasing asylum claims in Western democratic states has been followed by an extraordinary rise in detention as a means to ‘manage’ migrant populations. In doing so these states have created ‘non-places’, which are physical manifestations of the insecurity migrants contained within them experience. The creation of these architectures of exclusion has been widely criticised by human rights groups, and as a result the state’s ability to institutionalise them often pivots on their ability to frame these policies as temporary, a short-term solution to deal with a crisis. Ireland’s system of ‘Direct Provision’, a form of ‘de facto’ detention, is an excellent example of this strategy as it too was introduced as a policy to temporarily control the influx of asylum seekers. However, this system is now the new normal, as new centres have continued to open since it was first established twenty years ago.

This research will contribute to the growing body of literature on the impact of detention, homing in on the experiences of female asylum seekers in ‘Direct Provision’ to do so. I will investigate the impact of living in liminality, which is the chronic sense of insecurity asylum seekers face. A review of relevant literature identified certain sites of consequence in which this liminality was most palpable, these sites related to asylum seekers’ health, ability to parent, and their employment opportunities. With consideration for these key sites, in-depth qualitative interviews of current female residents in ‘Direct Provision’ were conducted to examine the impact of living in a liminal ‘non-place’. This research provides an insight into the impact of liminality, but also interprets some of the ways residents actively resist the imposition of liminality by building resilience from within the system and integrating with the local community.

Key words: Direct Provision, Women, Asylum Seeker, Liminality, Non-Place.

QUOTE

“No one leaves home unless home is the
mouth of a shark” –

(Warsan Shire, 2009)

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INTRODUCTION

In the late 1990s, during Ireland's so-called 'Celtic Tiger' economic boom, a significant shift occurred in the country's pattern of migration. Having previously been a country synonymous with out-migration, Ireland instead began to see an unprecedented wave of in-migration. Asylum seekers represented a small, but noteworthy portion of this demographic change, with the number of applications for asylum jumping from 160 in 1990, to 12,000 by 2002 (Moran et al. 2017, 3). To deal with the sudden surge in the number of people applying for international protection, the Irish government implemented a 'temporary measure', in the form of emergency asylum legislation. This legislation enacted a system known as 'Direct Provision' (DP hereafter). DP was introduced in 2000 and was supposed to be in place for only six months until a more permanent legislative solution could be found. Instead, twenty years later, DP has become institutionalised and nearly 65,000 individuals have since passed through it (Pollak and Hilliard 2019).

DP is the term used to describe the system which provides the minimum state-funded support for those awaiting a decision on their claim for international protection status in Ireland. After an individual applies for asylum, they are provided accommodation in a 'reception centre' for approximately two to six weeks, after which they will be dispersed to one of the nearly forty DP centres in Ireland (Pollak 2019; Thornton 2014). In DP, asylum seekers are provided accommodation, their daily meals, a weekly allowance, and access to essential services like education and healthcare. However, this system puts a significant pause on asylum seekers' lives, as a decision on one's status can take several years to be processed. After a typically long decision-making period, asylum-seekers can be granted refugee status, subsidiary protection, or permission to remain. More likely, however, is the rejection of an asylum claim. Rejection means the person ceases to be an asylum seeker and has no legal right to reside in Ireland as a result, leaving them with the option to voluntarily return to their own country or face deportation (Sheridan 2017, 9).

DP has emerged as a fascinating example of detention in an era marked by its securitisation of irregular migrants by Western democracies (Schuster 2004; 2011). This is due to the fact DP is not technically considered to be detention by the Irish government, as residents are free to live in private accommodation instead. However, DP inevitably becomes 'de facto' detention for those who live there, as the overwhelming majority do not arrive with the financial means to support themselves, especially with respect to accommodation, as Ireland has one of the highest rent rates in Europe (Hamilton 2019). The intention that DP would serve as a temporary approach to migration management meant initially very few purpose-built accommodation centres were constructed. Instead, many of the sites take the form of repurposed hotels, hostels and prefabricated units

attached to existing structures (O'Reilly 2018). This haphazard design is significant, as residents must endure these conditions for an undetermined period.

Today, there are more than 7,000 people residing in DP, and the current waiting period for the first interview to be scheduled by the decision-making authorities is one year after arrival (UNHCR CERD Comments 2019). While twelve months is a lengthy wait for an interview, this current wait time comes as a recent and significant improvement to the system which previously had asylum-seekers waiting anywhere from one to ten years before receiving a status determination (Oireachtas Report 2019). DP presents challenges to individuals, as it is an inescapable reminder of the physical, social, and economic exclusion that asylum seekers face. This exclusion is heightened by the 'dispersal policy' which accompanied it (Moran et al. 2017). Upon introduction, this dispersal policy was framed as being a means to distribute the migrant population across the country. This policy has contributed to the creation of 'hidden villages' (Holland 2005), where asylum seekers are placed in very rural parts of Ireland with little access to services and stimulation (FLAC 2009). Dispersal also strips asylum seekers of their freedom to choose where they settle, and consequently removes them from potential social networks and community organisations. For these reasons, dispersal is commonly cited as a crucial factor in asylum seekers' sense of marginalisation and social exclusion (Schuster 2011, 5).

The purpose of this research is to better understand the impact of living in liminality (Turner 1967; 1969), which is a state of 'in between-ness' inherently felt by individuals, like asylum seekers, who occupy manufactured zones of exclusion known as 'non-places' (Augé 2009). Before we begin to understand the impact living in a constructed 'non-place' can have on female asylum seekers, there are certain sub-topics I will explore. These include, the debate around the definition of detention, the logic to perceiving DP as a 'non-place', the geo-political context which frames the Irish state's motivation to construct an architecture of exclusion, and the specific vulnerabilities of asylum seeking women. Despite the limitations of this research, to be detailed in a later chapter, the pursuit to uncover the impact of detention – de facto or defined as such – is critical in age where harmful practices continue to be the default approach developed states are adopting to manage irregular migrants (Schuster 2004; 2011).

To provide a more complete picture of the expanding practice of detention, my theoretical framework combines the concepts of liminality and the constructed 'non-place' with Giorgio Agamben's (1998; 2005) theory on the 'state of exception'. In doing so, DP, as an example of de facto detention, illustrates how harmful detention practices not only exist, but have expanded despite public criticism and international condemnation (Thornton 2014). Various forms of this amalgamated analytical framework have been adopted in the past by other researchers, both in Ireland using the example of DP (O'Reilly 2018) and in other European countries to examine similar populations (Gold

2019). However, my research is unique as it operationalises this combined theoretical framework to explore what impact DP has, in its current form, on female asylum seekers. O'Reilly's (2018) research is the most similar to my own, due to the fact it too uses this framework to analyse the experience of DP residents. However, the fieldwork which informs O'Reilly's (2018) article was collected via participatory photography of both male and female DP residents in 2010. While this approach was insightful, my research brings a new focus to the particular vulnerabilities that women face in DP in its modern form and uses in-depth responsive interviews to do so.

Indeed, the intrinsic value of this unique research design is not only in the methodological approach, but also in the value of emphasising the experiences of female asylum seekers. In designing this research, I chose to spotlight asylum seekers, rather than refugees, or another category of migrant because they face the most extreme form of exclusion. Similarly, the decision to focus on female asylum seekers is because of the vulnerabilities they experience at different points of the asylum process, including at detention, can differ greatly than men. In July 2019, UNHCR estimated there were 70.8 million forced migrants around the world, with women and children representing half of this population (UNHCR Global Trends 2019). Recent decades have shown not only a change in migration numbers, but the overall pattern of migration as more women begin independently migrating. Migration is not without its risks, some common challenges women meet in the course of their journey are sexual and gender-based violence, trafficking, stigma, poverty and discrimination (AkiDWA 2020).

While the increase in female migration is captured objectively in quantitative studies about the 'feminization' of migration (Donato et al. 2011), the subjective vulnerabilities of women are often invisible. There is also less qualitative research conducted on the issues women face once they arrive in host countries, and where research is conducted in detention facilities it has traditionally focused on the male experience (Reed 2003). This lack of understanding of women's perspectives translates into a systemic gap in their needs. In Ireland, gender-specific research is critical to ensure women's voices are reflected in any future policy and legislative changes.

In the following chapter, I will present a review of the literature concerning female asylum seekers in DP, and detention facilities in developed states more broadly. This analysis will discuss the debate that surrounds the definition of detention, and examine how health, parenting, and employment are key sites in which the consequences of liminality become tangible. Chapter Two will explore the concepts of liminality, the 'non-place', and the increasingly creative attempts by developed states to abscond from obligations enshrined in international treaties. The later three chapters will outline my methodological approach, present an analysis of the findings my in-depth interviews garnered, and conclude with comments on the positioning of this research within the academic debate and the future of DP.

CHAPTER 1: LITERATURE REVIEW

This chapter will first examine the literature surrounding the definition of detention, outlining how the conclusion that DP operates as de facto detention can be drawn. This debate is important, as it gives context to the setting in which a liminal 'non-place' can emerge. The latter sections will move to look at literature concerning the impact living in DP has on women, in doing so I have identified the consequences of liminality to be most apparent at three key sites: health, ability to parent, and employment opportunities.

1.1 Defining Detention

Along with deportation and dispersal, immigrant detention is considered one of the foremost strategies of exclusion and border management for Western democratic states (Schuster 2011). Immigrant detention can occur at multiple stages of the immigration process, whether it is detention following apprehension at the border, before deportation, or after detection of illegal residence within the state (Silverman and Massa 2012, 677).

While there is general consensus on the 'points' at which detention takes place in the immigration process, there is no accepted definition of detention. Indeed, the lack of an accepted definition for immigrant detention is one of the most intriguing aspects of studying it. In response to this gap, Stephen H. Legomsky (1999) proposed a conceptual approach based on the practice's intended use: first, immigrant detention is used to prevent absconding into the community; second, it separates potential known and unknown threats from the community, and, thirdly, it punishes undocumented and irregular migrants, thus deterring future movement of similar groups. While helpful, this understanding does not fully account for the wealth of research which demonstrates that not even the most stringent detention policies deter irregular migration (UNHCR Detention Report 2019).

Similarly to Legomsky, Guild (2006) conceptualises immigrant detention within the framework of the institutions that enact and enforce it, that is to say that detention is situated at the 'intersection between administrative and criminal law' (3). Guild (2006) outlines three types of immigrant detention: first, detention upon arrival; second, detention for the purpose of expulsion/deportation; and finally, the detention of those waiting for a decision within the asylum system (7). By combining these contributions from both Legomsky (1999) and Guild (2006), Silverman and Massa (2012) define immigrant detention as 'the holding of foreign nationals, or non-citizens, for the purpose of realising an immigration-related goal' (679). Their definition has three central elements: first, detention involves the deprivation of liberty; second, detention takes place in a designated facility in the custody of an immigration officer or official; and third, detention is carried out in the service of an immigration-related goal. What is intriguing about this definition is that it is 'suggestive of the new spaces

generated through the use of detention', that is to say that detention includes not only the physical architecture of centres or prisons, but the symbolic place of suspension and liminality in which detainees must merely exist while outside forces assess their legal status and credibility (Silverman and Massa 2012).

I have chosen to focus my research on Ireland, as its system of DP offers a particularly enigmatic conceptualisation of detention and detention practices. DP clearly fits two out three of Silverman and Massa's (2012) central characteristics. DP centres are accommodation facilities that have been ear-marked for the purpose of housing asylum-seekers. While some centres have been purpose built for DP, others include former hotels or hostels which have been taken over with this new intended purpose (Conlon 2010; Holland 2005). There are persons awaiting the outcome of their decision who are in 'emergency accommodation', as DP centres are too full to house them. Emergency accommodation often includes privately run hotels and Bed & Breakfasts which receive funding from the government to house and provide food for a small number of asylum seekers (Thornton 2014). DP also fits this definition of detention in the sense that it functions to fulfil an immigration-related goal, as it is a means of providing for asylum seekers as they await the outcome of their application for international protection status.

Crucially, politicians argue that DP cannot be considered detention due to the fact it does not constitute a deprivation of liberty (Oireachtas Report 2019). The rationale behind this argument is that individuals are free to leave, there are no bars on the windows, and those awaiting status determination are free to rent private accommodation. However, activists and those in DP reject this reasoning.¹ The government is fully aware that the overwhelming majority of those seeking protection in Ireland do not have resources to do this, whether it be language skills, financial security or education. This is the reason why DP is widely considered to be de facto detention, as the reality for those that live there is, they have no choice but to remain until they are told otherwise (Global Detention Project Report 2019).

1.2 The Impact & Consequences of Living in DP for Women

In Europe, conditions in detention centres vary greatly, however, common concerns permeate through the Member States that use it to manage migrant populations. Arising frequently is the fact individuals are denied liberty despite not committing a crime, being detained for an unspecified period of time, and not being properly informed of their rights or being provided with legal representation

¹ One of the most prominent anti-DP grass movements is the *Movement of Asylum Seekers in Ireland* (MASI), which were formed in 2014 after a series of protests in DP centres. MASI campaigns for the end of DP, dignity for asylum seekers, and opposes deportation.

(Global Detention Project Report 2019). In Ireland many of these issues are evident and are compounded by the lack of independence and agency DP affords those within it.

In researching the impact of DP on female asylum seekers in the Irish context, I identified a recurring pattern of negative consequences for those living in limbo as being with respect to their health, their ability to effectively parent their children, and their employment opportunities. While the experience of liminality is not limited to health, parenting and employment, it is helpful to focus on these areas, as they are the sites in which the impact living in a liminal 'non-place' become hyper-visible.

1.2.1 Health

As I previously noted in the introduction, many DP centres were not intended for short-term use and not built for the function of housing asylum seekers. This design has contributed to severe overcrowding and a myriad of unsuitable living conditions being reported in centres (Conlon 2010). The outbreak of Covid-19 has highlighted just how unsafe these cramped environments are for residents. In the Office of the Ombudsman's 2019 annual report, they noted that the contagious nature of Covid-19 'brings into sharp relief just how unsuitable and unsustainable it is to have three or more people in the same room as in the case in many Direct Provision centre' (Ombudsman Report 2019, 6). While Covid-19 may have brought the issue of health and safety for residents into focus, it has been a recurring cause for concern since DP began twenty years ago.

In 2013, the Irish journalist Carl O'Brien investigated unpublished inspection reports of DP centres. These inspections reported disturbing consequences of overcrowding, poor fire safety practices and a serious lapse in hygiene across several DP centres. The inspectors had found breaches in fire safety codes, included blocked emergency exits and multiple fire alarms in disuse. In one DP centre the inspector noted the issues were 'too extensive to catalogue' individually. Issues surrounding the quality of the food in DP is another common health concern for migrants (Ombudsman Report 2019). In several reports and studies, the food provided in DP has been described as unsuitable, with concerns it lacks essential nutrition, especially for children and those suffering from chronic illnesses (Kane 2008; O'Brien 2013).

Often more acute than physical safety, are the concerns surrounding the mental health of residents. Many women living in DP have fled extreme violence and persecution in their country of origin. Indeed, the mental health of migrant women is affected by a range of complex issues, making them particularly vulnerable mental health conditions like post-traumatic stress disorder (PTSD), and anxiety (AkiDwA 2012; 2019; 2020). Upon arriving in Ireland women must then face the probability of poverty and unemployment, as well as a lack of family, support networks, and dedicated services to help them cope (Moran et al. 2017).

AkiDwA, a national network of migrant women in Ireland, conducted a qualitative research project in 2020 to explore the mental health of migrant women in Ireland. Participants of this study

described their lives as devoid of purpose, filled with ‘waiting, thinking, worrying and hoping’ (AkiDWA 2020, 19). Some interviewees had been waiting several years for a decision, resulting in them experiencing a state of ‘permanent temporariness’ (19). Beyond the uncertainty of a long wait, was the fear that when a decision finally did come, they would be refused status and be facing deportation instead. A recurring theme in this study was a sense of powerlessness, as participants felt they had a lack of choice over basic things like where they could live and what they could eat. For others in DP, the lack of contact with the local community fostered a sense of isolation and loneliness. Participants felt disconnected from these communities, believing them to have a negative misconception about asylum seekers from the Irish media. This separation from community only heightened the loss of key social networks they left behind in their homeland. One participant explains how dealing with unexpected obstacles in isolation in DP without her family’s support impacts her mental health:

This is the most stressful because all of a sudden, we discovered that we left our loved ones behind. In Syria, for example, social life is very different from here and you would be surrounded by your extended families. I think it’s very difficult because you have to change the country, and you have no friends and you have no families, you don’t know the language, like you didn’t have nothing at all (AkiDWA 2020, 23).

Often our first port of call when experiencing mental health issues is to turn to informal support structures in the form of family, friends, and wider social networks. Smyth and Whyte’s (2005) research found that DP residents missed these informal networks the most, and their lack of access to them left them more susceptible to chronic mental health issues. Other informal supports like exercise and engaging in hobbies are also often missing in the lives of DP residents due to their lack of income, the isolated locations in which they live, and other cultural barriers e.g. language (AkiDWA 2020; Moran et al. 2017). These informal support measures, whether it is a conversation with a relative or escapism in the form of a hobby, have been found to be ‘invaluable for combatting feelings of uncertainty, abandonment and isolation’ (Moran et al. 2017, 6).

In the absence of informal support, residents turn to formal supports like the national health service. Residents of DP, and indeed all asylum seekers, are entitled to free healthcare and various tailored welfare services (AkiDWA 2020). A common theme in AkiDWA’s study (2020) was the perceived lack of integration between the asylum system and the healthcare services by the female participants. DP’s associated dispersal policy impacted on this, as women felt their care lacked continuity due to the fact they had been moved from several DP centres across Ireland. Participants

also noted there were long waiting lists for specialist care, particularly when it came to accessing psychologists and counsellors (AkiDwA 2020).

There are, however, a myriad of other barriers to accessing adequate care and support for migrants. Some of which are 'cultural beliefs of mental health, gender roles and marriage, communication problems and lack of appropriate services' (AkiDwA 2020, 27). This demonstrates the fundamental need for women in DP not only to have the proper access to existing services, but for the government to invest in training and resources to ensure the more complex needs of the migrant population are being met.

1.2.2 Parenting

For mothers, parenting and concerns over their child's development is a fundamental issue they face in DP (Moran et al. 2016; 2017; Fanning and Veale 2004). These concerns are one that disproportionately affect female residents, not only because women tend to be the primary caregivers for children, but also because there are many more lone female parents in DP than there are male. The state authority that manages DP, the International Protection Accommodation Service (formerly known as RIA – the Reception and Integration Agency), reported that 1,269 children were being raised in DP centres across the country in July 2018 (RIA 2018). Amongst this cohort, 447 of the responsible parents were lone females, while only 16 were lone male parents.² The wellbeing of children in DP has received a lot of attention from policymakers and academics in recent years (Thornton 2014). The situation in DP before child protection measures were introduced was quite alarming, with child protection training only being available for staff six years after the DP system was instituted (Smyth and Whyte 2005). While there have been many improvements, the reality remains that these centres are an unsuitable and unnatural existence for children and their mothers.

A key impact on a mother's ability to parent is the lack of adequate state provisions, fundamental to which is the meagre weekly allowance provided for adults and children. Fanning and Veale (2004) found that DP has created a system of state-funded child poverty, conflicting with the United Nations Convention on the Rights of the Child, Ireland's National Children's Strategy, and the National Poverty Strategy. This material deprivation is an inescapable reality for families who often share one bedroom due to overcrowding, irrespective of the age of the children (Moran et al. 2016; 2017). Moran et al. (2016) concluded that DP's cramped living conditions made it an ineffective learning environment for children, as parents were unable to create a culture of education in their

² The disparity between lone female and lone male parents in DP is interesting, as the total number of males in DP is much higher than the total females. In the category of single individuals (no spouse or child dependents accompanied them to Ireland) there are 1,953 men compared to 647 women.

limited conditions. These issues continue into the adolescent years, with teenage children subjected to 'enforced dependence and lack of private space' (Fanning and Veale 2004, 246).

Moran et al.'s (2017) research on the support structure for residents in DP found that mothers felt 'abandoned by the state' (1). The study's participants felt that without status in Ireland, they were removed from the policy-making systems thus leaving them powerless to help themselves. Moran et al. (2017) notes that this can be partially attributed to the 'closed' policy culture in Ireland, which does not have citizen involvement built into its decision-making framework. However, this exclusion is 'also indicative of broader processes of social marginalization, stereo-typing and racism that are often experienced by asylum seeking families' (2). When narratives of mothers coping with the stresses of parenting in DP do emerge in studies, they always note the importance of formal and informal social support. Some DP centres have strong community-based organisations that provide pre-school and creche care for children. There are several centres that have facilities like playgrounds and sports equipment, but there is no guarantee a family will end up at such a centre. In the instances where these supports were available, the parents commented on the importance of having this safe play place for children, while also noting that it gave them a break. In Moran et al.'s (2017, 11) study, one mother commented:

Without the services our lives would be horrible. Because when they go out you have time to breathe, time to run around, do shopping...I can get my hair done, take a shower and I can check my e-mails from home. It's important. It makes a difference to me.

The lack of support, and the general inability to have a typical family dynamic in DP does not go unnoticed by children. In research on their experience, children lament not being able to participate in activities that their peers could, including extracurriculars, attending sleepovers, and having pets (Arnold 2012). In 2015, the Department of Children and Youth Affairs commissioned a consultation with children living in DP to hear first-hand how it affected them. The 110 children surveyed across age groups described life in DP as opposed to that of a 'normal life' (8). This was particularly significant to hear from children who had been born or grew up in DP, as it demonstrates the inability to adapt, or thrive, in an in-between zone.

1.2.3 Employment

In 2018, Ireland adopted the European Communities (Reception Conditions) Regulations (S.I. 230 of 2018), from which the recast *Reception Conditions Directive* was transposed into domestic law. This EU Directive brought several key reforms, most crucially of which was providing asylum seekers with the right to work. Ireland now allows asylum seekers to request access to the labour market if they have not received a first instance decision on their claim after nine months (Oireachtas Report 2019).

The previous inability of asylum seekers to enter the labour market was one of the most ferocious criticisms of Ireland's asylum system, and of DP as a result (UNHCR CERD Comments 2019; Ombudsman Report 2019).

Unfortunately, significant barriers to employment remain for asylum seekers. A key issue with women finding suitable employment is the rural location of their DP centre, as access to public transport and centre-arranged shuttles to the nearest town are often irregular (Khambule and Mulhall 2018). This is a particularly salient issue for asylum seekers who cannot apply for driving licenses, and wholly rely on other means of transport to get to work.³ Another barrier is accessing a bank account, as many women find their identity documents or proof of residency rejected by banks (Khambule and Mulhall 2018). Women also face the issue of childcare, particularly lone female parents in DP (AkiDWA 2020). Other barriers include discrimination over gender, race, and overseas qualifications (AkiDWA 2019, 5).

Barriers to employment for female asylum seekers are not unique to Ireland, as a 2016 OECD report found that their rate of employment was 17% lower than that of men (OECD Report 2016, 19). An analysis of these findings found that a key reason for this was that women have a comparably lower rate of education than men. Another factor was their relatively low activity rate in the labour market in comparison to their male counterparts. The reason for this is thought to be cultural and can be partially explained by the low levels of female labour market participation in asylum seeking countries. Encouragingly, the findings also demonstrated that the employment outcomes for asylum seekers and refugees improve over time, as women become more integrated into the labour market. The time it takes to achieve this is significant however, with analysis demonstrating that it can take up to twenty years for the migrant population to catch up to the native born's employment rates across the European Union (OECD Report 2016).

In recent years there have been multiple reports of women in DP turning to sex work as a means of earning income, although the exact number women affected by this is unknown (Pollak 2019). A 2012 survey by AkiDWA found multiple women in DP had witnessed incidents in which male residents and ex-residents had attempted to prostitute women residents to the local community. One respondent believed there was a perception in the community that the female residents were 'available for sex' (AkiDWA 2012, 8). This was supported by other participants who recounted seeing women being followed by local men to and from their accommodation centre, and being offered work and money in exchange for sex (AkiDWA 2012, 8). Advocacy groups believe DP has created 'state

³ In early 2020, a significant decision was made by the Workplace Relations Committee (WRC) in the case of an asylum seeker who was refused a learner driver permit. In its decision, the WRC found the man had been treated less favourably than Irish or an EU applicant, and the adjudicator ruled the man suffered indirect discrimination. This case is being appealed by the Road Safety Authority.

sanctioned poverty' which leaves women with no other choice then to enter sex work to provide for themselves (Fanning and Veale 2004, 246). With significant barriers to employment remaining, asylum seekers must rely on the pitiful weekly allowance of €38.80 a week for adults and €29.80 a week for children.⁴

⁴ In March 2019, the weekly rate for both adults and children increased significantly. Until this increase the weekly payment for adults was €19.10, while children received only €15.60.

CHAPTER 2: THEORY

This chapter will explore 'liminality' and the 'non-place', two concepts that are fundamental to the means in which this research project will explore the impact DP has on female residents. This chapter will also demonstrate how the experience of liminality, and the construction of these 'non-places', have not occurred by accident, instead they are products of an architecture of exclusion that developed countries deploy through policies of marginalisation and securitisation. I will draw upon the work of Giorgio Agamben (1998; 2005) to better understand how despite widespread criticism, and a mound of critical evidence, these exclusionary practices have become the accepted norm in developed societies.

2.1 Liminality & Non-Places

The concept of 'liminality' highlights the lived experiences of asylum seekers, while also putting the state's modes of exclusion and treatment of the 'other' into frame (Mountz 2010; O'Reilly 2018). The idea of liminality was developed by the cultural anthropologist Victor Turner in his seminal piece: *Betwixt and Between: The Liminal Period in Rites de Passage* (1967). Liminality is derived from the Latin word 'limen', meaning 'threshold'. Turner (1967) looks at the point of transition, the 'in between-ness' in rites of passage, where an individual is 'neither here nor there; they are betwixt and between the positions assigned and arrayed by law, custom, convention and ceremony' (Turner 1969, 95). Several scholars (Conlon 2010; Mountz 2010; 2011; O'Reilly 2018) have used this notion of liminality to explore the experiences of asylum seekers.

Liminality affects asylum seekers in terms of time (i.e. the suspension of 'normal' or 'real' life while you wait a decision), space (i.e. temporary living arrangements with no fixed community) and legal status (i.e. some rights of citizens but not others) (O'Reilly 2018). Liminality is an inescapable topic when researching asylum seekers, as the space they occupy becomes a physical manifestation of the law and policy which apply to them, e.g. detention centres, remote accommodation centres, and holding centres in airports. Mountz (2010) argues that this liminality is manufactured, that states purposefully manipulate space to create 'geographies of exclusion' (124). These liminal spaces are often situated between and within borders, and leave the people contained within them being 'neither here nor there' (Mountz 2010, 138).

The liminality of DP is marked by the uncertainty of the lives of residents while they reside there. This uncertainty becomes 'exacerbated by shared and often cramped living accommodation, with residents unable to cook or choose where to eat and unable to make basic choices and decisions' (O'Reilly 2018, 824). O'Reilly's (2018) research used participatory photography to investigate the experiences of asylum seekers in DP and found the architecture of DP embodies the liminality felt by

the residents. DP centres are rarely purpose built, meaning residents find themselves occupying spaces which emphasise the sense of 'permanent temporariness' they feel, as one participant explained:

A hotel is a place when you go to another country to visit, you go into the hotel because you don't have family to go to. So now, people from outside they just see it as a hotel, but for me I don't see it as a hotel, I see it as a prison (O'Reilly 2018, 827).

These liminal spaces are examples of what the French anthropologist Marc Augé (2009) referred to as 'non-places', a term he coined to describe spaces of indistinction, abstract spaces where those that enter it are 'relieved of his usual determinants' (82). Non-places are sites of transience he identified to be spaces like motorways, hotel rooms, shopping centres, which are not designed to be lived in. Instead, by their very nature, they construct transience and the humans who briefly occupy them remain anonymous. This sense of existing in a 'non-place' is apparent throughout O'Reilly's (2018) research, with another participant finding significance in the number of her hotel room: '[W]hen I remember my home, I had no number, but this reminds me that I am in a temporary space where...they know me by this number' (827).

The peculiarity of living in a 'non-place' marked by liminality comes with feelings of being trapped and controlled. The roaming staff members and the security measures (e.g. CCTV cameras and electronic gates at the entrance) in DP cultivates a lack of autonomy over one's surroundings and a sense of powerlessness as a result. O'Reilly's (2018) investigation on the impact of liminality for residents found that 'time' was a recurring theme for participants, who described a place where there was no present and no conceivable future in the absence of a decision. Poignant physical reminders of their precarity included the packed suitcases in the bedrooms, demonstrating not only the issue of overcrowding but the need to be ready to leave at any moment, whether that is for a new life with status or back to an old one by deportation.

O'Reilly (2018) found that the outcome of existing in this constructed 'non-place' for asylum seekers was a sense of 'ontological liminality' (834). That is to say that residents had lost their sense of self, and had gone from being an individual, to just another number within a broader system. O'Reilly (2018) positions this ontological liminality as opposed to Anthony Giddens's (1986) work on the concept of 'ontological security', in which an important component of daily life is feeling safe and secure. This ontological liminality arises because asylum seekers within DP have no imagined future and very little means to participate in Irish society. In Turner's (1967) work, the loss of a social status in the liminal phase is associated with marginalisation and feelings of inferiority. This is clearly present

among residents of DP, as multiple studies highlight how they have internalised the representation of them as ‘freeloader[s]’ and a ‘burden’ to the state (Moran et al. 2017, 5).

One thing I noticed from my reading of other investigations into liminality and the ‘non-place’ was the theoretical nature of these concepts made the findings somewhat vague in parts. To avoid this in my own research, I used my literature review as an opportunity to identify specific ‘sites’ of consequences (i.e. health, parenting, and employment), in which the impact of living in a liminal ‘non-place’ can clearly be observed.

2.2. Understanding the Rise of Liminality and the Prevalence of Non-Places for Migrants

The next section will discuss how the detention of irregular migrants, and the construction of architectures of exclusion evident in the example of DP, can be understood through the lens of steadily increased and normalised securitisation policies in developed host countries. I will first trace some political and discursive shifts that have enabled the rise of liminal ‘non-places’, and then introduce Giorgio Agamben’s ‘state of exception’, to provide a more theoretical understanding of how state tactics, which undermines the value of certain categories of migrants, have become normalised and accepted.

2.2.1 Political & Discursive Shifts

Across the globe, countries are successfully undermining their commitments to international treaties, most fundamentally in the case of asylum seekers is the 1951 *Convention Relating to the Status of Refugees* and its 1967 *Protocol* (Mountz 2010). Huysman (2000) argues that this has been an almost imperceptibly gradual process, which began in the late 1960s and 1970s when immigration increasingly became ‘a subject of public concern’ (754). This marked a shift from more permissive immigration policies, to ones instead characterised by control (Hollifield 1992). In the 1980s, a Europeanisation of migration policy took place, leading to a concerted effort to coordinate and institutionalise specific practices. Over time, this resulted in significant legislative changes, most notably is the Dublin Regulation, which sets guidelines on how asylum applications should be handled when the individual has passed through several countries and/or already made asylum claims in a different country. The Dublin Regulation would not work without sophisticated securitisation tools like the Eurodac, the EU’s shared asylum fingerprint database (Huysman 2000).

The institutionalisation of stringent practices has ushered in our current era, in which irregular migrants are understood as ‘a new risk to the liberal world’ (Ibrahim 2005, 163). While migrants had once be framed as economically necessary, politicians instead began to argue that their existence contributed to the ‘destabilization of public order’ (Huysman 2000, 754). Mountz (2015) posits that it is these exclusionary discourses that make way for exclusionary practices, and that they will inevitably

reach the point of sustaining the production of one another. This process of 'othering' in the modern and civilised world has undoubtedly been assisted by 'new racism' (Barker 1981). While traditional racism was based on the debunked view of biological superiority, in today's world this rhetoric is no longer acceptable. Instead, a new brand of racism has emerged which Martin Barker (1981) has succinctly dubbed as 'new racism'. Barker (1981) argues new racism signals to the supposed cultural, rather than biological, differences as the criterion for exclusion and expulsion of the 'other'.

Ibrahim (2005) expands on this, contending that modern nation states have operationalised new racism by being perceived to develop distinct traditions is an effort to provide safety and stability to the population. The idea that immigrants will bring with them a myriad of different traditions and cultural influences, and thus distort those of the host country, is what connects migrants to 'the demise of the nation' (Ibrahim 2005, 166). The logic of new racism pivots on the idea that cultural pluralism will inevitably lead to an ethnic conflict with the potential to dissolve the unity of the state. This gives context to the rise of liminal 'non-places', and how the exclusion of vulnerable groups like asylum seekers, can be rationalised. New racism, and the discourse which has accompanied it, enforces the idea that irregular migrants should 'take what they are given' by the host state, and must be shown to 'prove themselves' before they obtain the privilege of residency entitlements (Ibrahim 2005).

It is in this political environment that we can begin to understand the construction of the 'non-place' and the liminality enforced upon asylum seekers as a result. Securitisation practices allow states to exclude the 'other', and by obscuring the recognition of their lives, they diminish the individual's claim and power to fight against marginalisation. Judith Butler (2004; 2009) has discussed similar exclusionist political strategies, positing that by engaging in such acts the state decides who counts as human, and 'what makes for a grievable life' (Butler 2004, 20). In the example of DP, the removal of asylum seekers from Irish society and their placement in a liminal zone signals to the public that their life is of little concern, which ultimately justifies any further mistreatment.

2.2.2 The State of Exception

This chapter has already explored how the experiences of female asylum seekers in Ireland can be understood through the concept of liminality and the 'non-place'. It has also tracked some of the shifts in policy and rhetoric that has enabled these processes to emerge and self-produce. However, it does not give a complete answer as to how the proven inhumane treatment of asylum seekers be maintained long-term. How, through all the criticism from government officials, residents, Committees of the United Nations, and academics, has DP moved from an 'exceptional' solution, to the accepted reality? To understand this, we must look at Giorgio Agamben's work on threshold

spaces and camps (1998; 2005), which is crucial to understanding sovereign power and the subsistence of liminal zones.

Agamben argues that the most serious threat to state power comes from those who try to elude state control because they have no direct stake in the nation-building project. It is for this reason why the state is so preoccupied with protecting and controlling their borders, to the point where they justify creating regimes of exception. The separation of the physical body from the body politic, captured in Hannah Arendt's analysis of the totalitarian state is central to the notion of biopolitics, which, as Agamben (1998, 71) puts it, is the 'inclusion of man's natural life in the mechanisms and calculations of power.' Agamben (1998) describes the inherent paradox sovereign power presents, in which rights are declared indivisible and inalienable, but at the same time, are operationalised in a social context that is anything but blind to things like class, gender, religion, and race. Agamben (1998) contends that states are hostile towards irregular migrants because they expose the 'fiction of modern sovereignty' (77). This is the reason states put great effort into labelling and categorising migrants, and why they treat those who they have declared ingenuine with little concern.

For Agamben, the refugee camp is the ultimate 'site of inclusive exclusion' (Darling 2009, 649), with the figure of the asylum seeker similar to the Roman law of the 'homo sacer' (Agamben 1998). The homo sacer is 'a subject in Roman law who has committed a particular crime that renders him or her outside of the rule of law that has been defined for citizens' (Darling 2009, 435). Neither 'exiled nor assimilatable' (Darling 2009, 649), this figure becomes suspended from all rights, possessing only the fact that he is human, his 'bare life' (zoe). Agamben connects the refugee and asylum seeker to the homo sacer, a figure who 'having lost every quality and every specific relation except for the pure fact of being human' is now in limbo (Agamben 1998, 160-161). By its very nature, the figure of the homo sacer is homogenized rather than individualized. The refugee camp or detention centres are the sites of this limbo, a 'state of exception', 'outside of the reach of national law, even when it is located inside a nation's territory' (Darling 2009, 435).

Ultimately, the threshold spaces where asylum seekers are detained provide a helpful means to understand state practices and the resulting plight of irregular migrants. Asylum seekers' treatment makes them homo sacer in the sense that their treatment sheds light on the 'techniques of sovereign power operating as inclusion through exclusion' (Mountz 2010, 386). Agamben contends that because these threshold spaces come into being during times of crisis, asylum seekers themselves become bound by narratives of crisis. For many, the term 'migrant' is now synonymous with the 2015 'migrant crisis', in which the experience and tragedy of migrants was depicted, distorted, and feasted upon by the media. A homogenous group was constructed, conflating terrorists, refugees, economic migrants, and human traffickers with one another, stripping migrants of a chance for individual identities.

Inevitably, who we are relates to where we are, and by placing asylum seekers in detention the state plays a powerful role in the subjectification of a person. Agamben (1998) spatialises this subjectification process, and highlights “the connection between detention, crisis and process of securitization, imagine ‘zones of indistinction’ and exception as emblematic of the essence of sovereign power” (Mountz 2010, 387). In this way, DP can be seen as a spatial expression of the struggle between the Irish state and its asylum seekers.

2.3 Conclusion

This chapter presented the analytical framework through which my research question will be examined. This framework is an amalgamation of the concept of liminality, the constructed ‘non-place’, and Agamben’s ‘state of exception’. Liminality provides a lens through which we can understand the state of being imposed on asylum seekers as they are suspended in a purposeful, and state-manufactured ‘non-place’. This ‘non-place’ is marked by liminality but is also characterised by a feeling of being controlled and surveilled. The ‘non-places’ which migrants find themselves enclosed in have emerged in a climate which ‘plays on the politics of fear, protecting and securing an imagined nation at home from dangerous threats elsewhere’ (Mountz 2015, 185). Agamben’s (1998; 2005) work provides a context for the emergence and subsistence of a liminal ‘non-place’. This is crucial, as it is not enough to understand that architectures of exclusion exist, we must also comprehend how they are maintained and reproduced.

CHAPTER 3: METHOD

The data I collected for this research project is derived predominantly from three in-depth interviews I conducted with current female residents of DP. To support my findings, I have also used data from interviews AkiDwA, a non-profit organisation which advocates for migrant women's rights in Irish society, conducted with female asylum seekers on the topic of mental health in 2019. This chapter will examine how the chosen design of this qualitative project complements my ontological and epistemological stances. I will also outline the data collection methods used and demonstrate how I gained access to my interview participants. The means in which the data analysis was conducted will also be detailed and justified. Finally, I will conclude the chapter with a discussion around the scope and limitations of this research.

3.1 Methodological Approach

The aim of this research is to uncover the impact living in a liminal 'non-place' has on female asylum seekers in Ireland's system of Direct Provision (DP). This qualitative investigation will approach this research puzzle from an experiential ontological perspective, as I am concerned with 'how life is experienced' by female asylum seekers, and how they interpret the world they encounter (Mason 2018, 12). It was important to me that this research was anchored in the understanding that the female participants are the experts of their own experience. This research is also inescapably influenced by structuralism, which enables me to understand DP as one example of how political structures have come to normalise detention practices in the developed world. These ontological perspectives are consistent with my epistemological stance of interpretivism, which seeks to elucidate individuals' meaning and the 'sense they make of their own lives' (Mason 2018, 8).

These ontological and epistemological vantage points are complementary to a qualitative research strategy, which is used to research 'the ways in which individuals interpret their social world' (Bryman and Bell 2011, 27). Qualitative research utilises data collection techniques – like interviewing and focus groups – to better understand their participants' world view (Bryman and Bell 2011). Qualitative research lends itself to an inductive approach, meaning it 'involves the search for patterns from observation and the development of explanations – theories – for those patterns through a series of hypotheses' (Bernard 2011, 7). The inductive qualities of qualitative research afforded me the flexibility as a researcher to tweak and alter my approach throughout this research project.

Initially, I had planned to collect data exclusively using desk-based research. The time constraint my six-month internship with the office of the United Nations High Commissioner for Refugees (UNHCR) posed was the deciding factor in this decision. However, the internship gave me the chance to learn about the complexities of DP, and to receive first-hand accounts of the refugees and asylum seekers who were struggling to negotiate aspects of Ireland's immigration system,

including the reception conditions. I also had the opportunity to attend and tour the reception centre in Baleskin, Co. Dublin. This is the facility where most asylum seekers will spend their first few weeks before being dispersed to a DP centre. It was here that I had the chance to meet with newly arrived asylum seekers and observe the facilities they can access. While helpful for my own understanding, the conversations I had with asylum seekers while interning at UNHCR are confidential and play no part in the findings. Be that as it may, the internship provided me with a nuanced understanding of the asylum system which encouraged me to seek participants for my own in-depth interviews. Ultimately, these first-hand experiences heightened my understanding of the issues facing asylum seekers and motivated me to go beyond existing literature.

3.2 Sampling

Another benefit of qualitative research when accessing hard to reach populations like asylum seekers a large sample size is not necessarily required (Baum 2002). Instead ‘sampling in qualitative research usually relies on small numbers with the aim of studying in depth and detail’ (Tuckett 2004, 2). As such, my priority was to gather a ‘richness of data’ to answer my research puzzle (Carey 1995, 492). Female asylum seekers who had been in DP for at least three months were sought for this study. I felt that in three months most subjects would have adequate personal experience and reflection of DP. I did not define or enforce any other criteria for the sample. Furthermore, no ‘type’ of DP centre was excluded (e.g. publicly or privately funded) as I did not want to suppress a chance for a multiplicity of perspectives.

I reflected on my method of recruiting participants carefully. Initially I considered using my own personal networks, however I realised this would not give a current snapshot of DP as my connections consist only of refugees and newly naturalised citizens. I decided instead to contact MASI – the Movement of Asylum Seekers Ireland – which is an independent network of migrants in Ireland who publicly campaign for migrant rights and the abolition of DP. I discussed my research with MASI’s founder, who in turn put me in contact with several women who run resident’s groups in various DP centres. Through this network I was able to find two women who were interested in being part of this research. However, after these initial interviews I had exhausted the contacts I had been introduced to at MASI. I then turned to snowball sampling, which is a technique often used by researchers trying to access hidden populations (Kath 2005). Snowball sampling works by asking existing subjects to use their own networks to recruit future participants. This method worked well, as a past interview participant was able to connect me with my third and final interviewee.

While the majority of the data presented in the next chapter will come from the interviews I conducted, I will also draw upon research AkiDwA published in 2020 to support my work. I chose to reference AkiDwA as they are considered an authoritative source on female migrant rights in Ireland, having frequently published research on issues facing female asylum seekers. The data I use to support

the discussion in the next chapter is derived from AkiDwa's (2020) report entitled, *Let's Talk: Mental Health Experiences of Migrant Women*, which used focus groups and interviews to investigate the topic of mental health with forty women from various DP centres around Ireland. In addition to AkiDwa's experience and rigorous methodology, I also chose this publication as it is very recent and therefore captures the experiences of women in DP at this moment in time.

3.3 Responsive Interviewing

Responsive interviewing is a form in-depth qualitative interviewing, which 'emphasizes flexibility of design and expects the interviewer to change questions in response to what he or she is learning' (Rubin and Rubin 1995, 7). I felt this approach to interviewing was particularly important to employ with such a sensitive research topic, as it enabled me to connect with the participant and adjust my questions according to their narrative.

Rubin and Rubin (1995) discuss the inevitability of making mistakes, no matter how prepared you are, as often you cannot anticipate how triggering questions can be for subjects, or how controversial a banal topic can be for that individual. In my interview guide, I had prepared open follow-up questions to allow myself to adapt to new information and any changes in direction that might arise in the interview. Risk management questions also formed part of my interview guide, the purpose of which was to make sure the interviewees were supported and reminded that they could end the interview at any time if they so wished. I also made sure to end the interviews on a positive note, often concluding with their hopes for the future or the positive experiences they have had of Irish society thus far. It was important to me that my interview participants did not feel like I was there to extract sensitive information for my own benefit. Instead, I employed responsive interviewing to facilitate natural conversation and to ensure the participants remained comfortable, and even benefited from discussing their experiences with me.

3.4 Data Analysis

The data uncovered from this research was interpreted using thematic analysis. According to Braun and Clarke (2006) thematic analysis is used to describe the 'method for identifying, analysing and reporting patterns (themes) within data' (79). This analysis was conducted inductively, that is to say that while I had identified key areas of concerns to women in DP from the literature (i.e. health, parenting, and employment), I allowed the thematic analysis to be data-driven. This thematic analysis occurred at the latent level, as it went beyond a semantic or surface level approach, and instead began to 'identify or examine the underlying ideas, assumptions and conceptualizations – and ideologies' that informed the chosen words of my participants (Braun and Clarke 2006, 84).

My ontological and epistemological stances informed how I came to understand my data, as my methodological framework did not speak to individual's motivations, but rather tried to

understand the sociocultural context and structural conditions that led those individuals to provide their personal account of DP.

3.5 Limitations & Ethical Considerations

When conducting research, it is essential to reflect on the limitations and ethical considerations pertaining to it. Limitations, as understood by Price and Murnan (2004), are the methodological characteristics of my research that influence the interpretation of my findings. Like most of my peers, I experienced a range of constraints; from the generalisability of my findings, to fundamentals like the limited time I had to gather and analyse the data.

The most unanticipated challenge I faced during this research was the Covid-19 global health crisis. I feel fortunate that this event did not affect me as badly as it could have, as my internship continued, and I was able to conduct my interviews remotely. At first it was difficult to remain motivated as I felt my research had become insignificant in the face of this global pandemic. However, the outbreak of Covid-19 brought certain consequences of living in DP sharply into focus. The literature I had read emphasised a deep concern for the mental health of women in DP, but this crisis provided a real-time example of how unsuitable DP's cramped living conditions were for individuals' *physical* health and wellbeing. Questions around Covid-19 played a significant portion in my interview guide, as in the month my interviews took place there were at least fifteen clusters of Covid-19 in DP, and nearly 200 recorded cases (Shamim 2020).

An unavoidable limitation upon me throughout this research project was time. I was in a more unique situation than my peers in the fact that my internship was six months, rather than three. This added time pressure meant I had to be exceptionally organised and realistic about what I could achieve. This time constraint, coupled with the fact I was researching a hard to access group, is what led me to interview only three participants. While I obtained a depth of data in these interviews, I recognise there would be an even greater richness in findings if I had more time to conduct additional interviews. Ideally, this study would have included interviews from a broader range of DP residents, spanning a more varied cohort of nationalities and length of time spent in DP. As I have already explored in Chapter One, the amenities and opportunities for residents differ greatly from centre to centre, therefore it is difficult to compare the experience of women across centres. This inability to extend findings to the wider population is an inherent disadvantage of qualitative research however, as the sample size is rarely representative (Atieno 2009).

As my research subjects are part of a vulnerable group in society, I reflected upon potential ethical considerations in conducting this research and how best to mitigate them before I started. One of the fundamental ethical principles in research is to 'do no harm'. Bryman and Bell (2011) consider harm as being that which involves physical harm, harm to participants development or self-esteem, stress, harm to career prospects, and inducing subjects to perform culpable acts (128). I identified

stress as being the most probable negative impact my interview could have on participants, as they may feel overwhelmed or upset being questioned on their experience of living in DP. To mitigate the risk of distressing participants I chose not to ask questions about their country of origin or their journey to Ireland, as I felt these details were largely irrelevant to understanding their experience in DP. That does not mean when these topics came up I ignored them, but rather I only pursued them if the participant themselves raised them. I also shared informed consent forms with my participants in advance of the interview, and where possible I tried to have a phone call with them a week before to confirm that they understood the consent form and to provide them the opportunity to ask me any questions they might not have felt comfortable doing over email.

To prepare myself for interviewing I felt it crucial to review literature on the history of mistrust in relation to the 'refugee experience' (Ager 1992; Daniel and Knudsen 1996). This traces how 'the refugee mistrusts and is mistrusted' (Daniel and Knudsen 1996, 1). Having an awareness of this research is paramount for anyone who plans to interview migrants on their experiences, as it gives context to the hesitation to share that may be tangible in subjects. I was conscious not to feed into stereotypes, as governments and development agencies have done in the past. I also did not want to repeat the mistakes of past researchers, who have understood the 'refugee woman' as a homogenous category, a view which has undermined 'the diversity in experience among them' (Baycan 2003, 23).

CHAPTER 4: ANALYSIS & FINDINGS

This chapter will analyse the findings of the three in-depth interviews I conducted with current female residents in Ireland's system of 'Direct Provision' (DP). The first woman I interviewed was Elena.⁵ Elena is a woman in her fifties from Zimbabwe. She is a widow, and a mother to three adult children who have remained in Zimbabwe. Elena has lived in a DP centre in the east of Ireland since 2016. I then interviewed Simone, a single mother in her forties who is also from Zimbabwe. Simone has two children and has lived in a DP centre in the east of Ireland with her teenage daughter since arriving in late 2019. My final interview participant was a South African woman named Tia, a single mother in her forties who has lived with her seven-year-old son in a DP centre in the south of Ireland since arriving in late 2018. As noted in the previous chapter, interviews AkiDWA (2020) conducted with asylum seeking women are occasionally cited in support of my own findings.

4.1 Living in Liminality

Liminality was the strongest theme to emerge from my analysis of the interview data. Each participant used the word 'temporary' to describe different aspects relating to their lives in DP at one point or another. Liminality was evident when participants discussed the length of time they had spent in DP, the particulars of their interim accommodation, and the uncertainty of obtaining permanent legal status once their asylum application had been considered. It was clear that living in limbo affected their sense of self, and examples of the negative consequences living in liminality could be discerned in conversations about their health, ability to parent, and employment opportunities.

Simone, who had been living in DP for just six months with her teenage daughter, was already feeling the innate uncertainty of life in DP:

I am still waiting for my interview and my accommodation is also temporary. Sometimes I think "oh I am here now, I can start school and my daughter is also going to start school"...but maybe as soon as we get accustomed to that environment then we will have to move and start again from scratch and it can be very frustrating to think of that. We do not know what tomorrow brings, what tomorrow holds, so we are just living in hope for the best, hoping they will tell us we can stay here until we get our documents.

Like many residents in the DP system, Simone is living in emergency accommodation, which means she does not know how long she and her daughter will be able to remain in their current centre. Living in emergency accommodation puts asylum seekers in a volatile position and complicates the efforts

⁵ The names of all my interview participants have been changed to protect their anonymity.

they make to break free of the 'non-place', separate from liminality, and integrate with the local community. Simone worried about the effect moving would have on her daughter's welfare, as she was looking forward to starting in the local school once summer had ended. Simone herself had enrolled in the local community college to study health care, and was concerned she would be moved before she could complete this course, and that the move would place her in an area where further education was no longer an option. Simone described this nonsensical policy of housing asylum seekers in emergency accommodation, which to her demonstrated a lack of concern and prioritisation the government body charged with housing asylum seekers – the International Protection Accommodation Service (IPAS) – has for their well-being:

They [IPAS] will never tell you, they just put you here and the next thing you get transferred and you don't even know where they are taking you to. At times most people get frustrated...you are removed from emergency accommodation, only to put me back into another emergency accommodation – it doesn't make sense! Why don't you keep me in that emergency accommodation until you find me a permanent place because it gets frustrating to be moved from point A, point B, point C and still you don't know when you will have a permanent location.

This is an example of the lack of control that characterises liminal spaces. The residents' lack of control is heightened by the visual reminders of the power DP has over them. Elena, who has lived in DP for more than four years, emotively describes DP as living in a 'cage' from which she cannot 'wait to be released'. Elena even compared her lack of freedom to that of a prison: 'I am being monitored, there are cameras all over, and our beds are next to one another, there is no privacy, we line for our food and it really makes me feel like a prisoner, if I miss the time then I miss the time and I can get nothing.' This sentiment was echoed by Simone, who noted there were 'cameras everywhere and gates.' Similarly, Tia expressed that this power imbalance meant that she could not find anything inherently 'homely' or 'warm' about DP.

Elements of my participants' experience of DP were evident in AkiDwa's (2020) interviews, where participants described the 'fear that sets in' when you lose your sense of self (18). This ontological insecurity – a consequence of living in a liminal 'non-place' – was summed up by Tia:

After eighteen months of this it is hard to remember who you are. I think this place has drained me of my best parts. I don't laugh much anymore...being unsure all the time changes you.

They [the Irish state] clearly do not think we deserve better treatment...it takes some time but then you start to think they are right.

It became apparent that the women I spoke to feel the architecture of exclusion they had internalised while living in liminality was a deliberate consequence of the government's design. By subjugating asylum seekers to prolonged liminality, by constructing DP as a 'non-place', they had stripped them of their agency and ability to demand better. Tia went on to explain how she did not think it was 'an accident' that the government had 'trapped' the residents in her centre, explaining that 'if there is no stimulation...then we become numb. After a few months of nothing to do, nowhere to go for help, you accept that no one will help you.' This sentiment demonstrates the effectiveness of unrelenting liminality and the power architectures of exclusion have to diminish one's agency.

4.2 The Impact of Living in Liminality

As discussed in previous chapters, my literature review identified health, parenting, and employment as being key sites in which the effects of living in a liminal 'non-place' become visible. Indeed, when interviewing my participants, the consequences of living in liminality manifested when discussing these topics. As such, the following sub-sections details participants' experiences of liminality in relation to their mental and physical health, their ability to effectively parent, and their employability and perception of employment opportunities.

4.2.1 Mental & Physical Health

My participants did not doubt that living in liminality affected one's mental health. They had ample anecdotes of their own personal struggles, and of friends and fellow residents in their centre. Elena described the first week in DP as 'terrifying', and how the anxiety of living there led her to be admitted to hospital soon after arriving. However, Elena had a positive experience of the clinical care, both physical and psychosocial, that she had received in her four years in DP. Tia and Simone had a more negative impression of the care and support available to residents. Simone noted that in the six months she has been in DP she had not yet met a social worker, and did not know who to go to 'when it feels like you are lost and the walls are closing in on you.' Tia felt the biggest improvement that could be made to the mental health of residents was not additional care, but rather an amelioration of the factors that impacted their desperation in DP:

We do not need more doctors on site. We need to be treated like human beings. It is not easy seeing people break around you, and you don't know if you may be next. Everyone has something that makes it all too much, maybe it is the food, the lack of money or

freedom...maybe you cannot wait in this centre any longer for a decision. You are more likely to have problems the longer you stay here.

Previous studies, including AkiDwA's (2020), provides a wealth of research on the effect living in liminality has on one's mental health. However, little research has been done on the impact liminality has on one's physical health. The Covid-19 pandemic is a harrowing case study of how living in a constructed 'non-place' can have negative consequences for one's physical health. The Irish Government's slow response to the pandemic was heavily criticised with respect to DP, a system in which 1,700 of the +7,000 residents were identified as not being able to 'physically distance themselves' due to overcrowding (Neil 2020).

The disparity in the management and facilities from centre to centre was apparent when discussing the response to Covid-19 with interview participants. Tia described how difficult social distancing was in her centre, and how a lack of information and transparency from the centre staff increased the fear of residents:

I was really scared that I would get it and be too sick to mind my son. We knew people had it. I remember so many people coughing bad in the TV room a week before the lockdown. You would see it in the meal hall as well, some people looked sick. Eventually those people disappeared, and then their roommates disappeared. We had to assume that they were now in self-isolation somewhere...but we never had the information where they went. No one told us anything.

Meanwhile in a different centre on the other side of the country, Simone and her fellow residents had contrasting experiences to Tia. Simone described the staff as 'proactive' when it came to supplying Personal Protection Equipment (PPE, e.g. gloves and masks) to the residents. The centre also improvised a medical centre, where residents would go to report on their health status daily. Elena was one of the many asylum seekers who was moved to a different centre due to the safety concerns surrounding the inability to physically distance in centres. While well intentioned, the movement of asylum seekers throughout centres at the beginning of the pandemic was poorly received in the Irish media. This is due to residents not being tested before being moved, and cases being spread unnecessarily to new DP centres as a result (Macintosh 2020).

In Elena's case however, she found the move incredibly beneficial. Her new DP centre was a hotel which had begun to take in asylum seekers at the government's behest during the pandemic. This environment, while still temporary, had better trained staff and better food. Most importantly,

Elena no longer felt that she was perceived or treated like an asylum seeker. The hotel's respect for Elena allowed her to regain a sense of self-worth and control, thus lessening the negative consequences of living in liminality. This change in how she was considered meant that after four years in the DP system Elena finally felt 'at peace.'

4.2.2 The Ability to Parent

All the interview participants were mothers. Elena was the only participant who did not live with her children in DP, as they are young adults and had remained in Zimbabwe. Elena practises what we called 'virtual parenting' during the interview. Elena explained that interacting with her children via WhatsApp groups and video calls had maintained her relationship and influence as their mother since coming to Ireland. Elena empathised with the single mothers she met and observed in her DP centre, especially during the Covid-19 pandemic: 'I felt sorry for people with children during this time, I could feel it myself how hard it was for them. If my children were around me what was I going to do?'

Tia and Simone, both of whom lived with their respective children in DP, would undoubtedly be examples of such mothers Elena would direct her compassion toward. A lack of privacy and a desire for a sense of normalcy were identified by Tia and Simone as being issues they felt incapable of solving for their children due to the nature of the DP system. Simone, who shared a room with her teenage daughter noted how these challenges were further compounded her DP centre's strict lockdown during Covid-19:

It's difficult, it's very difficult...a child wants to have their own space, their own room, their own privacy...but they can't because I have to share a room with her. It's difficult now because for things like shopping, I can't take her with me because she has to remain in the centre. This means she has not left here in ages.

Simone felt like the lack of freedom in the centre made the parents there feel like failures, as the constraints imposed on them meant they themselves were being 'parented as to how best to take care of [a] child'.

Tia has a seven-year-old son, and after living in DP for eighteen months, worried that his formative childhood memories will be of DP. Tia described how her, and several other parents had requested the centre management create more play and educational areas for the children. Tia was 'maddened' by the centre's response, which in short was that there would be no improvement to any facilities, as the children already had access to better resources than in most other DP centres:

Their reply made us feel like we were acting greedy...that it was unreasonable to ask for more investment in the facilities. The fact that this is better than what other children in Direct Provision have is shameful. Yes...there is a room with toys...but there is barely enough space for all the children and supervising parents to use it. There is a yard, but it is not always open for the children to play there. What about schoolwork? My son does his schoolwork on his bed, as that is where he has the most space to put his books. How can they say that is good enough? The children themselves know this is not a normal thing.

In AkiDwa's (2020) study it is apparent that participants also felt DP inhibited their ability 'to fulfil their role as mother' (20). Similarly to the women I interviewed, these mothers realised how difficult it was for their children to be identified as an asylum seeker, with the substandard living conditions being interpreted as a reflection of the wider society's view on their worth. Women discussed how difficult it was to be a role model for their children within the confinements of a 'non-place', as they often could not work, cook their children nutritious meals, or meet their basic request due to the financial constraints of the weekly allowance.

It struck me how these mothers were constantly managing their children's expectations, how after waiting in limbo for so many months, and being disappointed by a system that moved them around once they had settled, they were trying to teach their children to live with inherent uncertainty. Simone captured this sentiment well when she discussed the impact moving centre would have on her daughter if it came soon after she began school in September. Simone said her priority for her daughter was 'not promising her anything as I don't want to keep her hopes high...just her mind open.'

4.2.3 Employment Opportunities

All participants responded relatively positively when asked how they felt asylum seekers employment opportunities were in Ireland. Simone, who has not yet been in the system for nine months and therefore not able to work, acknowledged she had heard of some challenges of employers not understanding asylum seekers' right to work, and therefore not recognising their work permits. Simone also noted that she had heard stories about asylum seekers not getting the skilled jobs they are entitled to, as their qualifications are not recognised in Ireland. This lack of recognition of irregular migrants' qualifications is a well-documented issue across Europe. In a recent publication regarding migrant integration into Irish society, educational qualifications going unrecognised was identified as a key factor affecting migrant employment, and integration into Irish society as a result (McGinnity et al. 2020).

Similarly, in this research employment and volunteering opportunities resonated strongly with participants as a means to integrate in their locality. The women participated in the community in whatever means they could. This ranged from traditional employment to volunteer work. It was clear that employment was not just an economic motivation, but a means to escape, or even suspend, liminality for a while. Simone described how she came to understand Irish people's curiosity of the DP system, and the asylum seekers it contains, through her volunteer work. She commented that the locals she met while volunteering in a charity shop were welcoming, and 'keen to learn about asylum seekers...to know what we are about.' Elena, who is employed as a care home assistant, and a front-line worker during the Covid-19 pandemic, found great purpose in assisting during this global health crisis. Her concern was not for her own health, but for the care home residents she saw pass away from Covid-19, and for her community back in DP who she knew could be particularly vulnerable if she unwittingly carried the virus back after a shift.

Tia felt that although Ireland did provide job opportunities for asylum seekers, female asylum seekers were disadvantaged from their male counterparts with respect to childcare. Tia was in a 'unique' and 'lucky' position in that there was another South African woman with a similar aged child who would look after her son when she was at her part time job in a Bookmakers:

Our sons are good friends and we both work part time, so it makes it easier for us. I do know women who cannot work because their children need them however...it is difficult for the single mothers. However...I do think that we women, we find a way. It may be difficult for us to work and look after our children, but we are used to difficulties and we find solutions, rather than complain.

While she praised female asylum seekers' resilience in being able to find volunteering positions and indeed jobs despite the challenges, she remained critical of the lack of financial and childcare support offered to them. Tia had known women who had engaged in sex work due to their financial constraints and saw it as the 'only option' for them to earn money as an asylum seeker. Simone mirrored this sentiment, having known women who found it necessary to enter sex work for financial reasons: 'They will tell you that 38 Euros is nothing and that they have a family at home they need to look after, some people will be driven by that.' Elena too had felt the prevalence of 'this desperation' in her centre, and sensed it impacted how asylum seekers were perceived and treated by the local community, creating an assumption that all female residents were sex workers: 'I've seen many doing that, I've seen many women have that challenge, it's really happening... I remember once I met a man and the moment, I said I lived in DP that meant they could use me like a mop'.

4.3 Resisting Liminality

There were several instances in which participants described ways in which they could feel 'normal', or as Tia put it, 'feel like myself again.' For Tia, this was when she would go for a run with another woman in the centre. In Simone's case, this sense of normalcy was found in her volunteer work and her gardening. By engaging in these activities, the women could temporarily suspend the effects of living in a liminal 'non-place.'

A powerful means by which the women could resist the imposed liminality was by leaning on the supportive network of other residents in their centres. Elena, who mentioned several instances of bullying in her centre, spoke highly of the Residents' Group who were able to solve many of these disputes. It was noteworthy that in the absence of an effective centre manager, the residents in Elena's centre self-organised to resolve issues among themselves. Similarly, Simone found her fellow residents to be the most helpful source of information about the asylum process:

We could only get information from other residents. They will advise you this is how you do this, this is how you go with the process, you need to apply for legal aid, you need to apply for a PPS [social security] card.

When questioned about state support and the availability of mental health services, Simone commented that it was the residents themselves that encouraged one another 'not to think too much', and to persevere during difficult times. Tia also had examples of how important the initial support you receive from residents was when you arrive in DP:

My first few nights I cried... the other ladies in the centre must have been able to tell. There was one woman who was so kind to me. She understood how I was feeling and made such an effort to introduce me to other people in the centre. She taught things, like what time is the best to go down for meals and how to get your toiletries. I now always try and look out for the new ladies; I know how important it is.

Despite some incidents and mistrust, solace emerged from the fact other residents understood your struggle, whether this related to the unappetising food in the centre, the issue of overcrowding, or just the fact that you were another woman who fled your homeland due to persecution. When speaking about division and hope in the centre, Simone commented:

We try and overlook it...we are here, we are all from different backgrounds and different races we should unite and be proactive as women. We play soccer, we do gardening, just to keep

ourselves occupied. We have built a community within DP, we also make sure that our kids interact...yes we are all from different countries...but let this not be a stumbling block for us.

While acknowledging the consequences living in liminality had on various parts of their lives – be it their health, ability to parent, or employment – all participants shared positive hopes for their future in Ireland. It was poignant that despite having been mistreated by a system that had suspended them in a state of uncertainty, all three women were eager to leave and be recognised as active contributors to society: ‘Here I am an asylum seeker...with my papers I will be out there... as new people. I will be able to decide what I am, and my son can decide what he is’ (Tia).

CHAPTER 5: CONCLUSION

5.1 The Story So Far

Understanding the impact of liminality is highly significant in an era where detention has become the default approach to migration management in Western democratic states. My research has improved this understanding by examining the impact living in a liminal 'non-place' has on asylum seeking women in Ireland's system of 'Direct Provision' (DP). It did so by operationalising a combined analytical framework of liminality (Turner 1967; 1969), the 'non-place' (Augé 2009), and Agamben's (1998; 2005) 'state of exception'. I outlined how DP can be viewed as 'de facto' detention, and that its institutionalisation was facilitated by the architectures of exclusion that have proliferated in a political environment of increased and normalised securitisation policies. I positioned this liminality as an intentional strategy, arguing that it is in the host country's interest to construct liminal personas whose homogeneity make them ineffectual challengers to the system.

While previous research has used a similar analytical framework to investigate the impact of detention on the individual subject, none have done so with a specific focus on the experience of women. My emphasis on women is critical in the context of increased female migration (Donato et al. 2011), their specific vulnerabilities (AkiDWA 2012; 2019; 2020), and the fact that their experience of detention is an under researched area (Reed 2003). My methodological approach was also distinct, as no previous study has applied this framework to in-depth interviews. Another beneficial quality of this research in comparison to others, is that its structure was assisted by the analysis of a comprehensive review of detention related literature. This allowed me to identify specific sites of consequence in which the impact of living liminally in a non-place are acutely observed. Where previously the consequences of liminality had been approached theoretically, these tangible indicators surrounding health, parenting, and employment present constructive and practical findings for policymakers interested in improving the everyday lives of female asylum seekers in DP.

Liminal spaces 'imply a sense of placelessness and not-belonging' (O'Reilly 2018, 839). Not only does this research offer an insight into the consequences of this imposed sense of placelessness, but it demonstrates that despite their precarity, female asylum seekers find opportunities to suspend and renegotiate their liminality. They do this by building social networks within their DP centres, through supporting their fellow residents, or by engaging in the local community through employment or volunteer work. The women I interviewed found ways to resist becoming what Agamben (1998; 2005) referred to as the 'homo sacer'. This contribution is significant, as deepens Agamben's theory of the 'state of exception', by presenting evidence that individuals can find methods to resist and renegotiate the state's efforts to reduce them to 'bare life'. Further research could explore this resistance in greater detail. By overcoming the limitations of the small sample size, a fuller picture

could be captured of how liminality is resisted, and how the effects of living in a constructed 'non-place' can be suspended for a time.

5.2 The Future of Direct Provision

At the end of June 2020, a new government coalition was formed in Ireland. The agreed Programme for Government will see the DP system ended within the next five years. In discussing the abolition of DP, the government stated: 'We are committed to ending the Direct Provision system and will replace it with a new international protection accommodation policy centred on a not for profit approach.' (Holland 2020). The white paper on the future of DP will be informed by a current review of the system by the Expert Group on Direct Provision, which is being led by Dr Catherine Day, the former Secretary General of the European Commission. The Minister for Justice and Equality recently circulated a briefing note on the progress of this Expert Group. This statement reiterated the government's commitment to a 'root and branch reform of the system' (Department of Justice and Equality Press Release, 5 June 2020). The government has asked the Expert Group to evaluate various changes to the international protection system including extending the right to work, alternative housing models, providing driving licences, and compulsory training and networking for centre managers.

These changes are very worthwhile, and the political will seems to be present in Ireland to overhaul the DP system. However, an analysis of this research and others demonstrates that the core issue with DP, with respect to liminality and quality of life more broadly, is the length of time someone must spend there, and the inability to provide an estimation of when a status determination may be delivered. Living in cramped or unsuitable accommodation for six months is not ideal, but it would be manageable for asylum seekers while their application is being processed. The real issue is when individuals are stuck in the limbo that is DP for one, or even five, years. That is when the shortcomings of DP – the cramped living conditions, its marginalisation from the local community, its uncertainty – become embedded in your sense of self, and have devastating consequences for your physical and mental health, your ability to be a productive parent, and your employment opportunities. The proposed changes to DP, however positive, should not be a replacement for the most transformative solution, which would be to speed up the application process and allow people to regain control of their life and fully access their rights.

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