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Bodies in Protest:

Understanding self-harm in immigration detention

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Will you please observe through the wire
I am sewing my feet together
They have walked about as far
as they ever need to go.

Will you further observe
through the wire
I am sewing my heart together
It is now so full of
the ashes of my days
it will not hold any more.

Through the wire
one last time
please observe
I am sewing my lips together
that which you are denying us
we should never have
had to ask for.

(Mehmet al Assad, *Asylum*)



¹ Alwy Fadhel, *The Attack*, coffee on paper, painted in Villawood Immigration Facility, Sydney

Abstract

Self-harm in immigration detention is more than just a symptom of mental ill-health. This thesis argues that it should instead be seen as a form of communication – an act of resistance and protest by detainees in the face of the human rights violations of incarceration.

Currently, most research into self-harm in immigration detention focuses on the causal links between incarceration and high rates of self-harm. It does not seek to understand why people in immigration harm themselves, nor what these actions mean. This thesis argues that self-harm should be examined within the context of systemic violence and alongside a structural analysis of power, resistance, vulnerability and agency.

Data from interviews and research are examined within the prism of a theory of violence and sovereign power. This unique approach requires incorporating multiple disciplines including psychology, psychoanalysis, philosophy, political science and queer theory.

Relying heavily on the works of Michel Foucault and Judith Butler, this thesis concludes that even in situations of total power such as immigration detention, people are not passive acceptors of injustice. They retain the ability to act. In settings where official and conventional avenues of communication have been cut off, their resistance

takes on non-conventional forms and the body is a last resort of action. Detainees' bodies are literal sites where sovereign power is not only played out, but also opposed.

This research seeks to provide a more nuanced and structural understanding of self-harm. It also challenges the complicit reinforcement of dominant power structures which flow from traditional readings of self-harm. This approach ultimately allows the rehumanisation of immigration detainees and their actions.

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Dedication

This thesis is dedicated to the memories of Omid Masoumali, Robert Peihopa, Fazal Chengani, Reza, Khodayar Amini, Ali Jaffari, Mohammad Nasim Najaf, Raza, Omid Ali Avaz, Hamid Kehazaei, Leo Seemanpillai, Reza Berati, Rezene Mebrahta, as well as the many others who have died as a result of Australia's immigration regime. This thesis is also dedicated to the strength and courage of all those currently still held in Australian-run immigration detention centres. May those black sites soon be a place of the past.

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Immense gratitude also goes to all those who I interviewed – Professor Elizabeth Elliot, Poh Lin Lee, Nora Ramirez Castillo and two workers from Nauru who will remain anonymous. You didn't have to speak with me, but you so generously did. Your insights and work inspired me no end. A special thanks to Issaq and Sam. Your words profoundly affected me. Thanks also to Lucy Fiske – we didn't get to speak much, but your work is so inspiring, as are your politics. My thesis would not have been the same without having read your work.

Lastly, thanks to my family – Mum, Dad, Rose, my extended and chosen family – for supporting me and reminding me of the beauty in the world.

Introduction

Self-harm in immigration detention is a complex act of desperation, defiance, resistance and protest to the human rights violations of incarceration. To understand its complexity requires a structural analysis of violence. Moving beyond traditional ideas of self-harm which tend to pathologise the individual, this thesis seeks to locate self-harm within a context of violence and alongside an analysis of power, resistance, vulnerability and agency.

This is an exploration of how people within immigration detention express, communicate and show resistance in situations where their agency and liberty have been severely limited. In particular, this thesis seeks answers to series of questions: What does self-harm say about the context of immigration detention? What do these actions say about those enacting them? Are they entirely desperate acts? Can they be read as acts of communication? Can they be considered hopeful acts of resistance, agency or protest? Are they one, or none or all of the above at the same time?

Through a multi-disciplinary analysis of sovereign power, agency and resistance, this thesis places immigration detainees, their bodies and their actions, at the forefront of opposition to sovereign power. When traditional and conventional avenues of communication have been cut off, the body becomes a valuable resource. Central to this is the re-politicisation of the body. Where official avenues of communication have been eroded, the body becomes a tool of last resort through which to say that which is otherwise not heard. It is a literal site where sovereign power is confronted. Hence, beyond just a symptom of mental ill-health, self-harm is a powerful act of agency and an act of self-sovereignty² in defiance of systemic injustice and human rights abuses. Central to this thesis is a re-imagining of agency, resistance and political action within the setting of extreme power. This acknowledges that within immigration detention,

² The term self-sovereignty has been borrowed from social worker and philosopher Lucy Fiske's understanding of protest self-harm as an act of sovereignty over the self. In this thesis this term is taken and applied to all acts of self-harm – Fiske, Lucy. 2012. "Insider Resistance: Understanding Refugee Protest Against Immigration Detention in Australia, 1999-2005". PhD diss. Curtin University.

resistance and opposition will take on sometimes unrecognisable and unconventional modalities. Self-harm is the quintessential example of this.

Even within systems of total power and control, detainees are engaged in resistance with sovereign power, rather than acquiescence and silence. The impact of this re-framing is immense. Whilst still recognising experiences of oppression, detainees become more than just powerless and passive victims. This thesis seeks to recognise that in order not to replicate existing power dynamics, immigration detainees need to be recognised as political agents. Furthermore their actions, no matter how unconventional, are more than just an issue of mental health. The end result of this is a re-conceptualisation of detainees themselves and a more nuanced and enriched understanding of their agency.

i. Rationale

Discussion about self-harm in immigration detention is very necessary and highly relevant. In the summer of 2015, in the wake of the unfolding humanitarian crisis in Syria, Europe saw a decisive shift in political focus towards immigration as a central and key concern of governments. In current political debate support for hard-line responses resound loudly – borders become tighter, fences are erected, immigration detention numbers grow³ and policies of deterrence become an increasingly ‘legitimate’ aim.

In this context, Australia has become an unfortunate leader, with its long history of hard line immigration policies, including the mandatory detention of asylum seekers and the operation of offshore processing. Many politicians in Europe are considering Australia’s policies as real options.⁴ Australia is a primary focus of this thesis because of Australia’s contemporary relevance in Europe and the author’s experience working with people seeking asylum in Australia who came through the detention system. In

³ Global Detention Project and Access Info Europe. 2015. “The Detention of Migrants and Asylum Seekers in Europe”.

addition, Australia is also a natural focus due to the large availability of research and anecdotal evidence documenting the negative effects of immigration detention.

Whilst there is a growing body of research focusing on the negative impact of immigration detention, this thesis argues that more focus is needed explicitly on the phenomena of self-harm. It will be argued further that a shift from away from just a causal analysis of incarceration and self-harm is necessary. Detainees' and their voices need to be prioritised and questions need to be asked in pursuit of an understanding of why people self-harm and what it means to them.

Within the humanities, some work has explored explicit acts of protest self-harm – for example lip sewing and hunger strikes within the context of resistance, agency and power. The works of Lucy Fiske, Richard Bailey and Raffaella Puggioni in particular have contributed significantly.⁵ Building upon these foundations, this work seeks to extend the scope of application to all acts of self-harm within immigration detention, not just those explicitly verbalised as protest. Seeking to widen the discussion of what constitutes resistance, this thesis argues that all acts of self-harm within immigration detention can be read as a form of protest and resistance to the injustice of detention.

In moving beyond seeing self-harm as purely a symptom of mental ill-health, this research incorporates multiple perspectives including psychological, psychoanalytical, philosophical, political science and queer theories. Any one discipline is not broad enough to provide adequate understanding either of the nuanced action of self-harm and the complex structure of violence surrounding it. In supporting the theoretical approach of this thesis, expert interviews conducted with workers from Australian immigration detention in Nauru, Christmas Island and mainland Australia as well as an interview from Austria will be drawn upon. Austria was chosen as a contrast

⁴ see AFP. 2016. "Austrian Minister Wants to Replicate Australian Model for Refugees" *EurActiv*, June 6.

⁵ Bailey, Richard. 2009. "Up against the Wall: Bare Life and Resistance in Australian Immigration Detention." *Law and Critique* 20 (2): 113–32; Puggioni, Raffaella. 2014. "Speaking through the Body: Detention and Bodily Resistance in Italy." *Citizenship Studies* 18 (5): 562. And Fiske. 2012

to Australia due to the significantly different populations interned within immigration detention in the two jurisdictions. In Austria immigration detention is used primarily as a pre-deportation measure, whereas in Australia mandatory detention is compulsory for all who enter Australia through ‘unofficial channels’.

Self-harm is endemic in immigration facilities across the world. This thesis focuses on the phenomena both through extensive anecdotal evidence, and a growing body of clinical research. Of course many of the questions raised in this thesis are relevant to other detained populations – general prison populations and detainees in Guantanamo Bay, for example – but the author’s focus is limited to immigration detention. This has been stimulated by a specific interest in how ‘non-citizen’ status and migration journeys, coupled by high levels of uncertainty post-arrival, impact individuals experience of detention and in turn suggest increased vulnerability of self-harm.⁶ In part these questions can, and should, also be asked about restrictive and uncertain non-detention contexts such as refugee camps, Australia led resettlement on Nauru and Manus Island and community detention and bridging visa realities where asylum processes may be protracted, work and education rights might be restricted or refused, family reunification may be denied and conditions may be physically and emotionally difficult. This field warrants further research although given the limitations of this thesis, closed immigration detention remains the primary focus.

Self-harm is defined as non-suicidal-self injury. It is defined as an act inflicted by a person on themselves with the intent of causing damage and injury. It may include cutting, ingesting harmful objects and fluids, burning oneself, head banging, lip sewing, refusal to eat or drink as well as many other acts. As distinct from suicidal behaviour it occurs without a conscious desire to end one’s life even though in some cases it may result in death.⁷ Whilst self-harm may in some cases can be linked to suicidal behaviours and indeed be a risk factor for suicidality, the focus here is on self-harm as

⁶ Steel, Zachary et al. 2006. “Impact of Immigration Detention and Temporary Protection on the Mental Health of Refugees.” *British Journal of Psychiatry* 25: 58–64.

distinct from non-fatal suicidal behaviour. The author acknowledges that there are relevant and cross-over themes between self-harming and suicidal behaviours and many of the discussions within apply to both acts. The decision to limit discussion is more a question of scope rather than relevance.

Explicit protest self-harm, (commonly lip-sewing and hunger strikes) is often (although not always) carried out in groups, publicly and with express articulation of an intent to provoke change. On the other hand, self-harm not expressly articulated as protest is often, although not always, conducted in private and considered to be symptomatic of severe mental ill-health. This thesis argues however, that these acts exist on the same continuum. The main difference is one of explicit articulation of intent rather than difference in motivation of action. In both situations the body is used as a tool for communication and agency in opposition to a situation of injustice and human rights violations. In the context of sovereign power both categories can be seen as an act of protest conducted in a highly political environment, conducted by political agents.

In terms of language this thesis will speak of those within immigration detention as detainees. While particularly in Australia the majority of those within detention are asylum seekers and will eventually be found to be refugees⁸, a conscious decision to use the term “detainee” has been made in order to recognise that within detention different cohorts other than refugee and asylum seeker exist. Whilst the term detainee was used as a catch-all phrase for non-status migrants, it is also chosen to highlight the involuntary nature of detention and the extreme deprivation of liberty that exists in such contexts. The term “asylum seeker” refers to those fleeing persecution and/or war.⁹ It is distinct from the term refugee which is defined by the 1951 Geneva convention.¹⁰ Non-

⁷ Hoffman, Rachel M, and Victoria E Kress. 2008. “Narrative Therapy and Non-Suicidal-Self-Injurious Behavior: Externalizing the Problem and Internalizing Personal Agency.” *Journal of Humanistic Counseling, Education and Development* 47: 157–71.

⁸ McCulloch, Jude and Pickering, Sharon. 2009. “The Violence of Refugee Incarceration” in *The Violence of Incarceration* edited by Phil Scraton and Jude McCulloch, New York Routledge 2009.

⁹ McAdam, Jane and Chong, Fiona. 2014. *Refugees: why seeking asylum is legal and Australia’s policies are not*, UNSW Press

¹⁰ McAdam and Chong. 2014.

status migrant is also used and can refer to those without citizenship or visa status within a country such as potentially asylum seekers but also undocumented migrants as well.

ii. Methodology

This thesis applies data from interviews, research and detainees voices themselves to the prism of a theory of violence and sovereign power. It proposes a multi-disciplinary approach to a complex issue. It comprises a systematic analysis of existing clinical and scientific research into the effects of immigration detention with specific focus on self-harm. This is coupled with an analysis of psychoanalytic, political science, philosophical and queer theories of sovereignty, resistance, vulnerability and self-harm.

To substantiate the theoretical framework, this thesis incorporates empirical evidence from expert interviews and a review of secondary sources which have documented the voices of detainees through interviews. This helped facilitate an enriched understanding of the phenomena of self-harm beyond that which currently exists in mainstream research.

The majority of interviews for this thesis were made with professionals who work or have worked within Australian immigration detention facilities, though one interview was also conducted with a psychologist here in Vienna, Austria. A total of five interviews were conducted. The identity of the professionals interviewed is stated in all but two cases. In these latter cases the interviewees worked for an Australian government funded organisation on Nauru and as a result they are subject to harsh laws criminalising any attempt to speak publicly about their experiences.¹¹ The author wishes to thank their bravery and acknowledge the risk they took speaking with her, despite the very real possibility of retribution. Of these two workers, one worked as a caseworker in the refugee resettlement part of offshore processing in Nauru whilst the

¹¹ Barns, Greg and Newhouse, George. 2015. "Border Force Act: detention secrecy just got worse", *The Drum* accessed Feb 2016 .

other was a manager for the unaccompanied minor program in the detention centre. Both of them are social workers.

In addition one psychologist, a narrative therapist trained social work counsellor, as well as a paediatrician were interviewed. The psychologist, Nora Ramirez Castillo works for a torture and trauma counselling service in Vienna Austria and is part of a team of health professionals who conduct detention monitoring as part of the Optional Protocol to the Convention Against Torture requirements.¹² Poh Lin Lee is a narrative therapist and a social worker who spent several years on Christmas Island working for a torture and trauma service that supported asylum seekers held in detention. Paediatrician Professor Elizabeth Elliot was also interviewed about her experience as part of the inquiry into children in detention and in particular her monitoring of Wickham Point detention centre in Darwin.

Ideally, a second round of interviews would have been conducted with ex- and current detainees. However, due to concerns regarding re-traumatisation as well as access and logistical constraints, this was not able to occur. In order to fill this gap, numerous quotes from detainees sourced from reports and articles were used. These quotes were not cherry-picked to illustrate certain points. Rather, they may be considered representative of wider research.

iii. Structure

This thesis is structured in five chapters. After this introduction and a brief background on immigration detention, Chapter One sets the scene with a literature review of current research documenting the mental health impacts of detention, with specific focus on self-harm.

Chapter One sets out to describe and comment on this research, discussing the limitations that exist, most notably of access to detained populations and exclusive focus on the casual links between incarceration and self-harm rather than understanding

¹² see Association for the Prevention of Torture, 2015, *Austria OPCAT status*. accessed July 3rd.

the phenomena itself. This chapter looks at how self-harm is reported and recorded in immigration detention, and argues that at present issues with data make statistical analysis weak and ineffective. It also calls for more research to focus explicitly on self-harm. At present there is not enough research specifically looking into self-harm in immigration detention. This chapter also calls for a departure from researching self-harm as exclusively a pathological issue, with instead a greater focus on qualitative research seeking to understanding the lived experiences of those within immigration detention who self-harm.

Chapter Two outlines psychoanalytic theories on self-harm referencing the works of Anna Motz¹³ and Gillian Straker.¹⁴ Whilst not explicitly focusing on self-harm in immigration detention, this chapter sets up a theoretical reference point from which to draw in subsequent chapters. In this chapter self-harm as a form of communication, an act of identity-reconfirmation and as a hopeful act in response to the inadequate meeting of need, is presented.

Chapter Three introduces the concept of sovereign power. Foucault's notion of bio-power and Agamben's theory of bare life will be discussed. These theories seek to understand how life within immigration detention is defined, controlled and informed by sovereign power and are thus important theories for understanding how the actions of those within detention can be read. This discussion includes whether there is potential within detention for acts of agency when certain theoretical frameworks of power are applied. Here it will be argued that understandings of power, such as Agamben's notion of bare life, leave little room for seeing the agency or resistance of those within detention and thus leave little room for understanding self-harm as anything beyond an act of desperation.

¹³ Motz, Anna. 2009. *Managing Self-Harm*, Routledge London.

¹⁴ Straker, Gillian. 2006. Signing with a Scar : Understanding Self-Harm. *Psychoanalytic Dialogues*, 16:1(March), pp.93–112.

Chapter Four moves into the area of redefinition. It proposes a broader, more fluid understanding of power, in line with Foucault, in order to adequately represent detainees' actions, including the acts of self-harm. In adopting a Foucaultian definition of power, self-harm can be viewed as more than solely a desperate and pathological response to a violent situation. Instead it can be seen as an engagement with and against sovereign power and ultimately in defiance of it. Incorporating Butler's analysis of vulnerability and the narrative therapy concept 'everyday resistance', this chapter proposes that self-harm can simultaneously be a vulnerable act and an act of resistance.

Chapter Five places the body front and centre. Building upon Butler and narrative ideas the body is seen as a resource of vulnerability and resistance within the context of an oppressive system and the systemic violation of human rights. In the context of immigration detention, when official avenues have been cut off, the body is a valuable resource and is not voiceless. Self-harm can be seen as an act of self-sovereignty and a powerful act of control, enacted on the body in response to the dehumanisation of incarceration. Several quotes from expert interviews as well as the voices of detainees will be drawn upon to illustrate this point.

Finally in conclusion this thesis argues that even in situations of total power, such as immigration detention, people are not passive acceptors of injustice – they still have the ability to act. This research seeks to provoke a more nuanced and structural understanding of self-harm. It also challenges the complicit reinforcement of dominant power structures that come from traditional readings of self-harm. This ultimately results in the re-humanisation of immigration detainees and their actions.

iv. Global context and background on immigration detention

In this thesis, immigration detention refers to the detention of “non-citizens”, justified on the basis of their immigration status.¹⁵ The definition proposed is borrowed directly from the Global Detention Project which centres on understanding detention as

¹⁵ Flynn, Michael. 2011. Global Detention Project Special Report, *An Introduction to Data Construction on Immigration-Related Detention*.

the deprivation of liberty defined as “forcibly-imposed confinement within an enclosed space for any length of time”.¹⁶ This definition enables us to circumvent legal loopholes used by some governments to redefine on paper what constitutes an immigration detention centre as opposed to a facility by another name, such as an open air centre.¹⁷

Immigration detention occurs in purpose built facilities, ad hoc and temporary structures as well as in regular prisons.¹⁸ Detainees may include asylum seekers awaiting assessment of their refugee claims, in some cases detained until this claim is finalised; migrants who upon entry into a country do not possess documentation necessary for passage; non-citizens who may have breached or overstayed their visa requirements; non-citizens who have been criminally convicted resulting in the cancellation of their visa; and non-citizens who for a variety of reasons have been deemed a security threat. Different countries and centres may only detain a couple of these cohorts of non-citizens and may choose to distinguish facilities based on these categories.

Immigration detention is usually justified in order to confirm the identity of detainees, to facilitate protection or immigration claims or to forcibly arrange individuals’ removal from the country.¹⁹ Some countries, including many in Europe, use immigration detention predominantly as pre-removal centres for people deemed a ‘flight risk’ prior to forcible deportation. This may include people who have received a negative decision in relation to their asylum claim and are on a removal pathway, as well as people outside of the asylum process who have been issued a removal order. It may also include asylum seekers who were recorded as entering into the European Union via one country and then having tried to lodge an application in another country, breaking the conditions of the Dublin II Accord.²⁰ Other countries, including Australia, pursue policies of mandatory detention of asylum seekers and undocumented

¹⁶ Flynn 2011.

¹⁷ Flynn 2011.

¹⁸ Flynn 2011.

¹⁹ Immigration Detention Coalition, *What is detention?* accessed April 3rd.

migrants.²¹ Thus the demographics of those in detention differ greatly depending on the country.

It is hard to ascertain how many people are held within immigration detention globally. Research from the Global Detention Project has found huge inconsistencies in recording of detention statistics worldwide along with the measures with which data was recorded.²² Thus rendering data when available as questionable, inadequate and impossible to use in cross-country comparisons. Specifically within Europe, the Global Detention Project reported that there are currently no requirements for European Union organs or member states to collate data on the number of immigration detainees.²³ Some rough figures estimate that at the beginning of 2015 in the UK there were 3,915 people in detention with some 29,492 people being recorded as having entered detention in the previous 12 months.²⁴ In 2013 in France, Spain, and Hungary approximately 25,000, 9,000, and 7000 people were in immigration detention respectively.²⁵ In 2015 Australia recorded approximately 3,500 people in immigration detention facilities.²⁶ Currently the USA has a capacity in immigration detention of approximately 33,000 places.²⁷

Under international law, immigration detention is only considered permissible as a matter of last resort and where alternatives to detention have been exhausted

²⁰ Dublin II Regulation, 2003. European Council Regulation (EC) No [343/2003](#)

²¹ Under international law arbitrary detention is prohibited. Article 9 of the Universal Declaration of Human Rights states that “no one shall be subjected to arbitrary arrest or detention”. This is further enshrined through article 9 of the International Covenant on Civil and Political Rights. The Human Rights Committee of the United Nations has interpreted these provisions to apply to all deprivations of liberty including the cases of immigration detention. For more please see: The United Nations, 1948, The Universal Declaration of Human Rights. The United Nations General Assembly, 1966, International Covenant of Civil and Political Rights. And OHCHR 2016.

²² Global Detention Project and Access Info Europe, 2015.

²³ Global Detention Project and Access Info Europe, 2015.

²⁴ The All Party Parliamentary Group on Refugees & the All Party Parliamentary Group on Migration. 2015. “The Report of the Inquiry into the Use of Immigration Detention in the United Kingdom”.

²⁵ The All Party Parliamentary Group on Refugees & the All Party Parliamentary Group on Migration. 2015. p.21.

²⁶ Australian Government Department of Immigration and Border Protection, 2016.

²⁷ Global Detention Project, “United-States”, accessed Feb 2016.

beforehand.²⁸ In cases where detention is deemed necessary then it must be so for a short period of time (usually no more than a few months) and justified in order to conduct health or security checks or to verify someone's identity.²⁹ In Australia despite international law, the policy of mandatory detention came into effect in 1992 and allowed for the detention of all unauthorised arrivals, predominantly, although not exclusively, applying to all people seeking asylum who arrived by boat or by other means without a valid entry visa.³⁰ The law states that all non-citizens who are in Australia without a valid visa must be detained. Issues with repatriation of stateless individuals means that detention could in fact be indefinite, with some individuals in the past being detained for up to 7 years.³¹ The human rights abuses associated with these policies have been widely criticised.³²

From 1990-2000's Australia set up what became known as the "Pacific Solution". In this, Australia negotiated with the neighbouring countries of Nauru and PNG to set up offshore detention facilities in isolated locations with harsh and unforgiving climates. With the introduction of the Border Protection Bill in 2001, the Australian government had the power to remove any ship in Australian waters, using force if deemed necessary and preventing those from lodging asylum claims. During this period reporters, non-government employed clinicians and researchers were denied access to facilities and information going in and out of the centres was restricted. Several enquiries were commissioned and released documenting serious cases of maltreatment, neglect and widespread human rights abuses.³³

²⁸ OHCHR 2016.

²⁹ Australian Human Rights Commission, 2014. *The Forgotten Children Report*.

³⁰ Silove, Derrick, Patricia Austin, and Zachary Steel. 2007. "No Refuge from Terror: The Impact of Detention on the Mental Health of Trauma-Affected Refugees Seeking Asylum in Australia." *Transcultural Psychiatry* 44 (3): 359–93.

³¹ Silove, Austin and Steel 2007.

³² McAdam and Chong. 2014.

³³ for more see Palmer, Mick. 2005. *Inquiry into the Circumstances of the Immigration Detention of Cornelia Rau*, Department of Immigration and Multicultural Affairs, and Australian Human Rights and Equal Opportunity Commission, 2004, *A Last Resort? National Inquiry into Children in Immigration Detention*.

With a change of government in 2008 the “Pacific Solution” was abandoned and regional processing centres were closed. Reprieve, however, was short-lived. Within two years strict measures such as suspension of asylum applications based on country of origin (in this case Sri Lanka and Afghanistan) occurred, resulting in individuals being left in detention for long periods awaiting the reopening of their claims. The release of a government commissioned report in response to a series of tragic boat sinkings and heavy loss of life recommended a series of deterrents to prevent people trying to make the dangerous journey by sea to Australia from countries like Indonesia, Malaysia and India.³⁴ In response, offshore processing centres on Nauru and PNG were reopened. Due to capacity issues, only a proportion of people seeking asylum are transferred to offshore centres, whilst the rest are placed in detention in mainland Australia or issued bridging visas or places in community detention. Asylum seekers are informed that they may not be offered protection by Australia or may be resettled in third countries and that they will not be eligible for family reunification.

1. The mental health impact of immigration detention

There is a wide body of research documenting the negative impacts of immigration detention, including the prevalence of high rates of self-harm. This includes a small body of clinical research, together with other scientific studies and surveys, anecdotal and key witness reports as well as NGO and government reports. All this research emphasises the harmful impact of detention, particularly on the mental and physical health of detainees.

The purpose of this chapter is to review clinical, medical and scientific research documenting the impact of immigration detention on detainees with a focus on self-harm. Whilst it is acknowledged that this body of research effectively documents the negative impacts of detention, this thesis argues that limitations exist and further expanding the scope would allow a deeper understanding of self-harm. Limitations

³⁴ Houston, Angus. 2012, “Report of the expert panel on asylum seekers”, *Expert Panel on Asylum*

exist primarily due to issues of access. Researchers are severely constrained because detention centres are often highly regulated, geographically isolated and politically sensitive settings. This has limited how extensively detained populations have been researched. Where research is possible, findings are restricted due to small sample groups, with results pertaining to those studied only, as opposed to enabling widespread application. Issues of availability and quality of documentation around self-harm have also complicated the accuracy of statistics on self-harm, and the small sample size of groups, making numerical analysis weak and statistically unreliable. Whilst issues of access remain largely outside of researchers' control, research generally does not focus on self-harm. While evidence strongly suggests that rates of self-harm are endemic across most immigration detention centres, little is known beyond this. To get an accurate picture of self-harm in immigration detention beyond it being of noted concern, future research needs to incorporate questions about why detainees self-harm and which circumstances provoke an increase in self-harm. By doing this, self-harm research can abandon its hitherto exclusively pathological lens and understand through the lived experiences of those within immigration detention why self-harm is a recurring theme.

1.1 Outlining research into effects of immigration detention

Clinical research into the impact of detention on individuals is relatively recent, with the majority appearing from late 1980's onwards.³⁵ In particular these studies suggest an increased risk of depression and post-traumatic stress disorder (PTSD) as well as self-harming and suicidal behaviours for those in immigration detention.³⁶ Although the specifics of pre-migration experiences may differ, one finds striking parallels regardless of country of origin and other variants. Thus the experience of being a refugee or asylum seeker usually entails a likelihood of having experienced potentially

Seekers.

³⁵ Procter, By Nicholas, Penny Williamson, Andrea Gordon, and Deborah McDonough. 2011. "Refugee and Asylum Seeker Self Harm with Implications for Transition to Employment Participation – A Review." *Suicidologi* 16 (3): 30–38.

³⁶ For further please see Joshi and Warfa 2015, Cohen 2008, Keller et al 2003, Robjant, Hassan and Katona 2009, Thompson et al. 1998, Steel et al. 2006.

traumatic events prior to migration.³⁷ While pre-migration factors lay the foundations for increased psychological ill-health in refugee and asylum seeker populations³⁸, it is the post-migration factors, such as the uncertainty of extrapolated asylum processes and detention, which have been strongly linked to major increase in psychological ill-health.³⁹ This is in contrast to psychosocial adaptation that is noted in research on refugees who have been permanently resettled upon arrival into a host country.⁴⁰ For example Thompson et al. compared three groups: detained asylum seekers, non-detained asylum seekers, and permanently resettled refugees, all from the same background in Australia with analogous pre-migration experiences.⁴¹ Their study found higher levels of psychosocial distress, in particular depression, suicidal ideation, anxiety, panic and post-traumatic stress in detained asylum seekers compared with the other surveyed groups.⁴²

The negative impacts of detention have also been documented in studies by Steel et al. and Keller et al.⁴³ These studies not only outline the negative effects of detention but also suggest that the impacts continue well beyond the period of incarceration. In Steel et al., severe stress was still noted at three years after release.⁴⁴ In Keller et al., it was found that whilst some participants experienced a marked decrease in symptoms after release, many still reported high levels of mental health concerns beyond their period of incarceration.⁴⁵

³⁷ Montgomery, E., 2010. Trauma and resilience in young refugees: a 9-year follow-up study. *Development and psychopathology*, 22(2), pp.477–489.

³⁸ Montgomery. 2010.

³⁹ for more see Steel et al. 2006.

⁴⁰ Silove, Austin and Steel 2007 and Montgomery. 2010.

⁴¹ M. Thompson et al., “Maribyrnong detention centre Tamil survey” in Silove and Steel (eds.), *The Mental Health and Well-Being of On-Shore Asylum Seekers in Australia*, Sydney, Psychiatry Research and Teaching Unit, 1998, 23–6.

⁴² Thomson et al. 1998 also supported by Newman, Dudley and Steel 2008.

⁴³ Keller, Allen S., Barry Rosenfeld, Chau Trinh-Shevrin, Chris Meserve, Emily Sachs, Jonathan A. Leviss, Elizabeth Singer, et al. 2003. “Mental Health of Detained Asylum Seekers.” *Lancet* 362 (9397): 1721–23

⁴⁴ Steel et al. 2006.

⁴⁵ Keller, Allen S., Barry Rosenfeld, Chau Trinh-Shevrin, Chris Meserve, Emily Sachs, Jonathan A. Leviss, Elizabeth Singer, et al. 2003. “Mental Health of Detained Asylum Seekers.” *Lancet* 362 (9397): 1721–23.

Research has also linked the length of time spent in detention to severity of mental health concerns. Steel et al. 2006 found that after an average of two years in detention, adults were three times more likely to suffer from a psychiatric disorder and children, ten times more than those detained for shorter periods of time or not detained at all.⁴⁶ After six months in detention participants reported increased fear and anxiety.⁴⁷ The study reported a twofold increase in the likelihood of PTSD diagnosis of those detained for over six months compared with short term detainees.⁴⁸ Similar findings were reported for depression and mental disability.⁴⁹

Another study conducted by Sultan and O'Sullivan in Australia in 2001 recorded the experiences of long term detainees.⁵⁰ Uniquely, in this study Sultan, an Iraqi doctor, was himself also a detainee. Sultan worked in conjunction with O'Sullivan, a psychologist at the facility, to interview thirty-three long term detainees (89% of all detainees meeting inclusion criteria). The study found that 85% of participants reported chronic depression symptoms, 65% reported suicidal ideation, 39% paranoid delusions, 21% psychotic features and 57% were on psychotropic medications.⁵¹ This study also hypothesised a series of stages experienced by detainees linked to the stages of their visa determination process. The research was done primarily through the observations of Sultan and O'Sullivan's experience as well as the information gained through the study. In the early months of detention, the authors concluded, detainees were in shock and disbelief at being detained, and hoped and believed that their situation would be short lived. Detainees progressed through three more stages which saw a worsening in mental health, behaviours manifested in revolt and protest, hopelessness and in some

⁴⁶ Steel et al. 2006.

⁴⁷ Steel et al. 2006 found that after six months in detention the fear of being sent home increased from 59% to 96%; worries about family back home increased from 59% to 87% and concern about the progression of asylum claims increased from 32% to 85%

⁴⁸ Steel et al. 2006.

⁴⁹ Steel et al. 2006.

⁵⁰ Sultan, A and O'Sullivan, K. 2001. "Psychological disturbances in asylum seekers held in long term detention: a participant-observer account" in *Medical Journal of Australia*, Dec 3-17; 175 (11-12): 592-6

⁵¹ Sultan, A and O'Sullivan, K. 2001.

instances continuous rocking, aimless wandering and repeated acts of self-harm leading to acute hospitalisation.⁵²

Whilst detention has been linked to negative outcomes generally, the impact of detention on children has been documented as of particular concern.⁵³ Mares and Jureidini, surveying families in immigration detention in Australia, found that all surveyed children under five displayed cognitive delay with 30% showing significant delay.⁵⁴ Children aged 7-17 all fulfilled the criteria for PTSD and major depressive disorder and over half had engaged in suicide attempts and acts of self-harm.⁵⁵ An inquiry into the impact of immigration detention on children in Australia supports these clinical findings. The report found that almost all children and parents interviewed reported constant anxiety and difficulties eating and sleeping in detention,⁵⁶ 34% of children had mental health disorders comparable to children referred to hospital-based child psychiatric services in the community and over half had engaged in acts of self-harm.⁵⁷ Research has also indicated the negative impact detention has on parenting, with one inquiry finding key issues included disruptions to the family unit due to separation by authorities, illness of parents and role reversal when young children had to care for a sick parent.⁵⁸ These findings supported a report conducted ten years earlier which concluded “*the ability to meet the developmental need of children is greatly compromised in the artificial and restricted environment of a detention centre*”⁵⁹ with evidence of developmental regression over the period of detention.⁶⁰

⁵² Sultan and O’Sullivan 2001.

⁵³ Mares, S and Jureidini, “Psychiatric assessment of children and families in immigration detention: clinical, administrative and ethical issues”, *Australian & New Zealand Journal of Public Health*, Vol. 28, 520–6, Steel et al 2004 and Lorek, Ann et al. 2009. “The Mental and Physical Health Difficulties of Children Held within a British Immigration Detention Centre: A Pilot Study.” *Child Abuse and Neglect* 33 (9): 573–85.

⁵⁴ Mares and Jureidini 2004.

⁵⁵ Mares and Jureidini 2004.

⁵⁶ Australian Human Rights Commission 2014.

⁵⁷ Australian Human Rights Commission 2014.

⁵⁸ Silove, Austin and Steel 2007.

⁵⁹ Human Right and Equal Opportunity Commission. 2004. “A Last Resort: National Inquiry into Children in Immigration Detention”, p.397.

⁶⁰ Human Rights and Equal Opportunity Commission. 2004.

In Australia, commissions of inquiry conducted by parliamentary bodies and the national human rights body have contributed to a large amount of research on the experiences of detainees in immigration detention, with a particular focus on the impact on children.⁶¹ They support in particular the research findings documented above and are often one of the primary sources of evidence first hand from detainees describing their lived experiences.

In Europe several reports have also been conducted in this manner. The most extensive survey of immigration detention in 23 European Union states and was conducted by Jesuit Refugee Services and DEVAS, entitled “*Becoming Vulnerable in Detention*”.⁶² This study completed 685 one-to-one interviews with immigration detainees across Europe. The report concluded that despite the diversity of personal circumstances of individuals, detention has an across-the-board negative effect on all persons experiencing it. The report concluded that the very setting of detention renders all within it vulnerable. This study is possibly the most comprehensive cross-country analysis conducted regarding the experience of immigration detention in Europe and indeed the world. In particular the study highlights vast inconsistencies in the level of care provided for immigration detainees across Europe, documenting in particular highly uneven standards of mental health care between immigration facilities and countries.⁶³ For example in the European Union some member states offer psychological care and access to interpreters whilst others operate like a correctional facility.⁶⁴ The study also found a high incidence of physical abuse and assault reported in most detention facilities.⁶⁵

Several studies have also attempted to document in a qualitative sense the experience of those within immigration detention.⁶⁶ Coffey et al. surveyed 17 adult

⁶¹ Australian Human Rights Commission. 2014.

⁶² Jesuit Refugee Services. 2010.

⁶³ Jesuit Refugee Services. 2010.

⁶⁴ Jesuit Refugee Services. 2010. p.19

⁶⁵ Jesuit Refugee Services. 2010. p.52

⁶⁶ Coffey, Guy J., Ida Kaplan, Robyn C. Sampson, and Maria Montagna Tucci. 2010. “The Meaning and Mental Health Consequences of Long-Term Immigration Detention for People Seeking Asylum.” *Social Science and Medicine* 70 (12). Elsevier Ltd: 2070–79 and Dudley, Michael. 2003. “Contradictory

refugees held in Australian immigration detention for an average of three years and two months, through semi-structured interviews.⁶⁷ Participants in this study reported recurring themes of injustice and inhumanity, isolation and fractured relationships, with feelings of hopelessness and demoralisation.⁶⁸ All participants referred to loss of liberty and the harshness of their surrounding, referring to the prison-like atmosphere, the inflexible institutional routines, extensive surveillance and regular body and room searches.⁶⁹ All participants in the study spoke of the sense of powerlessness and hopelessness about their situation – “*living in detention, it’s like looking at oneself in the mirror...when I saw someone try to commit suicide: it’s exactly like I’m doing that to myself*”.⁷⁰

1.1.1 Research specifically into self-harm within immigration detention

Research into the mental health impact of detention has suggested high levels of self-harm. While research from a general community setting finds rates of self-harm in the region of 1 – 4%,⁷¹ within detention figures as high as 17.7%⁷² have been conservatively estimated for particular groups. As part of a study conducted by Steel, Momartin and Bateman surveying ten families held in long term immigration detention, a third of adults and a quarter of children had engaged in self-harm. In these families there had been no history of self-harm prior to detention.⁷³

In a study conducted by Cohen in the UK, information on suicide and self-harm among detainees was analysed from coroners’ reports and incident logs. She estimates

Australian National policies in Australia.” *Australian Psychiatry* 11 (supplement): s102–8. and Sultan and O’Sullivan, 2001.

⁶⁷ Coffey et al. 2010.

⁶⁸ Coffey et al. 2010.

⁶⁹ Coffey et al 2010.

⁷⁰ Coffey et al. 2010, p. 2074.

⁷¹ Green, Janette P., and Kathy Eagar. 2010. “The Health of People in Australian Immigration Detention Centres.” *Medical Journal of Australia* 192 (2): 65–70.

⁷² Green and Eagar. 2010.

⁷³ Steel, Zachary, Shakeh Momartin, Derrick Silove, Marianio Coello, Jorge Aroche, and Kuo Wei Tay. 2011. “Two Year Psychosocial and Mental Health Outcomes for Refugees Subjected to Restrictive or Supportive Immigration Policies.” *Social Science and Medicine* 72 (7). Elsevier Ltd: 1149–56.

a self-harm rate of 12.79%, which is nearly double that of the wider population.⁷⁴ Steel et al. found that the likelihood of participants engaging in self-harm increased threefold and the chance of witnessing a suicide attempt doubled after six months of detention.⁷⁵

As the correlation between length of detention and mental distress, research also links time spent in detention with the risk of self-harm.⁷⁶ Comorbidity has also been found to be a risk factor for self-harm – Momartin and Coello, for example, found that detainees with PTSD and depression have a higher incidence of suicide attempts and self-harm behaviours than those with no comorbidity.⁷⁷ Green and Eagar analysed the medical records in immigration detention facilities in Australia.⁷⁸ They found that asylum seekers, as opposed to other cohorts, had a higher risk of self-harm, with rates as follows: asylum seeker populations within detention 17.7% unauthorised boat arrivals, 14.4% unauthorised air arrivals; illegal foreign fishers 2.1% and those who overstayed their visa 3.6%. An overall self-harm rate of 6.2% was proposed.⁷⁹

The uncertainty of the asylum procedure and the indeterminate period of detention have also been suggested as factors increasing psychological ill-health amongst detainees. Cohen's study links uncertainty to higher rates of self-harm through a comparison of self-harm in detention to that in general prison populations.⁸⁰ She found self-harm to be higher in immigration detention. Whilst clearly pre-migration trauma experienced by immigration detainees could considerably increase rates of self-harm compared with the general prison population, further research by Cohen suggested uncertainty post-arrival may also be an important factor.⁸¹ On her breakdown of

⁷⁴ Cohen, Juliet. 2008. "Safe in Our Hands?: A Study of Suicide and Self-Harm in Asylum Seekers." *Journal of Forensic and Legal Medicine* 15 (4): 235–44.

⁷⁵ Steel et al. 2006.

⁷⁶ Steel et al. 2006, Sultan and O'Sullivan. 2001, Steel et al. 2011.

⁷⁷ 56% of refugees diagnosed with PTSD were also diagnosed with depression. See Kramer TL, Lindy JD, Green BL, Grace MC. 1994. "The comorbidity of post-traumatic stress disorder and suicidality in Vietnam veterans. Suicide Life Threat Behaviour" 24:58-67 and Momartin, S. & Coello, M., 2006. Self-harming behaviour and dissociation in complex PTSD. *Torture : quarterly journal on rehabilitation of torture victims and prevention of torture*, 16(1), pp.20–29.

⁷⁸ Green and Eagar. 2010.

⁷⁹ Green and Eagar. 2010.

⁸⁰ Cohen. 2008.

⁸¹ Cohen 2008

general prison data Cohen found that self-harm rates in remand populations in general prisons were higher than in other more stabilised prison populations.⁸² Typically those on remand face higher levels of uncertainty as they await sentencing and conviction in a state of limbo. In fact Cohen's research found the rates of self-harm in remand populations were at similar levels to those in immigration detention. Whilst detainees are in an extremely different context, the similarities in the experience of uncertainty warrant much further clinical research and strongly suggest compelling links generally between uncertainty and increased rates of self-harm. The report conducted by Jesuit Refugee Services in Europe found that asylum seekers, more than any other group within detention face the largest amount of uncertainty. In general their surveys found that as a group they are less informed about the reasons for their detention compared with other cohorts. Almost 40% of asylum seekers detained for more than three months did not know why they were detained and were uninformed about the asylum process, while 79% did not know when they were going to be released from detention. Clinical research from Australia conducted by Edgar and Green determined that asylum seekers within Australian immigration detention were at higher risk of self-harming behaviour compared with non-asylum seeker immigration detainees. Whilst these higher rates can be potentially associated with the experience of pre-migration trauma and PTSD, the specific uncertainty associated with the experience of asylum seekers also warrants closer attention.

Several reports within Australia have documented widespread reports of self-harm involving children.⁸³ After rigorous interviews, observations and testing, Professor Elliot in conjunction with the Australian Human Rights Commission reported concerns for child welfare in Wickham Point detention centre. Specifically they report voiced concern over the number of young children either expressing self-harm ideation or committing acts of self-harm, as well as those who spoke openly about suicide.⁸⁴ During these interviews one mother spoke of her seven year old daughter "*She has no*

⁸² Cohen. 2008.

⁸³ Human Rights and Equal Opportunity Commission. 2004.

friend. She cries all the time and says I want to go from here. She has cut herself with a razor on her chin, face, chest. She eats poorly, has daily headache and tummy pain and poor weight gain. Every night she wakes up and screams that someone (eight officers) is coming to take her back to Nauru. She has seen a counsellor in Darwin”.⁸⁵

1.2 Limitations of existing research

Several key limitations challenge research into the mental health impact of detention. Perhaps the most significant limitation is that of the lack of access to immigration facilities faced by most researchers. In many instances they, along with others such as reporters, advocates and the general population are bluntly prevented from accessing the politicised environments of detention centres.⁸⁶ To conduct research, some practitioners have resorted to interviewing detained asylum seekers over the phone where face-to-face visitation has been denied.⁸⁷ Other studies have overcome access issues by conducting studies of detained asylum seekers retrospectively after release⁸⁸, however from a clinical perspective, concerns regarding recall bias have been raised in these instances.⁸⁹

Ethical dilemmas have been discussed at length amongst clinicians and it has been accepted that overt deception to gain access to immigration detention facilities may undermine the research’s credibility, even if it could be argued reasons were permissible on moral grounds.⁹⁰ Thus, research methods are limited and the research itself sparse. This has led to a heavy emphasis on descriptive rather than other forms of analysis.⁹¹

⁸⁴ Elliot, Elizabeth and Gunasekera, Hasanthan. 2016. “The health and well-being of children in immigration detention”, Report to the Australian Human Rights Commission Monitoring Visit to Wickham Point Detention Centre, Darwin, NT p. 3

⁸⁵ Mother of a 7 year old girl, Elliot and Gunasekera. 2016.

⁸⁶ Silove, Austin and Steel 2007.

⁸⁷ Steel, Zachary, Shakeh Momartin, Catherine Bateman, Atena Hafshejani, Derrick M. Silove, Naleya Everson, Konya Roy, et al. 2004. “Psychiatric Status of Asylum Seeker Families Held for a Protracted Period in a Remote Detention Centre in Australia.” *Australian and New Zealand Journal of Public Health* 28 (6): 527–36.

⁸⁸ Steel et al 2004.

⁸⁹ Robjant, Katy, Hassan, Rita, and Cornelius Katona. 2009. “Mental Health Implications of Detaining Asylum Seekers: Systematic Review.” *British Journal of Psychiatry* 194 (4): 306–12.

⁹⁰ Silove, Austin and Steel 2007.

⁹¹ Robjant, Hassan and Katona 2009.

In the few quantitative studies conducted, small sampling sizes mean findings are limited to the surveyed groups and wider statistical comparisons are inappropriate. This was the experience of the authors of the Jesuit Refugee Services report in which, despite the extensive number of interview completed, the findings of the report unfortunately are not considered to be truly representative of the entire population of immigration detainees in Europe because of the fact that researchers were not granted access to all detention centres.⁹²

Given the high rates of self-harm within immigration detention, researching on the mental health impact of detention should also always include a focus on self-harm. Whilst most research, clinical or otherwise, refers to self-harm, no single study looks exclusively at self-harm nor provides an in-depth study into self-harm in immigration detention. In clinical research, Goosen et al. and Cohen examine self-harm and suicide in asylum seeker populations specifically, although only Cohen investigates self-harm as an independent phenomenon distinct from suicidal behaviours.⁹³ Cohen herself comments that her findings are limited because of a lack of information surrounding self-harm incidents due to poor recording by facilities and access to data. While she is able to determine the number of incidents of self-harm from centre logs she is unable, with the information available, to determine how many (if any) incidents are repeated by individuals and thus propose a precise numerical rate of self-harm incidents in the setting of the UK. Her calculation of a self-harm rate of 12.79% in UK immigration detention is only a rough guide and cannot be used as a comparative tool when looking at other immigration detention settings.⁹⁴

Furthermore no study asks the question of participants why they self-harm and under what conditions within detention self-harm increases. Research strongly links detention to increased risk of self-harm, but researchers have to date only a limited understanding of the survival techniques of detainees and how these adaptations in

⁹² Jesuit Refugee Services. 2010.

⁹³ Goosen et al 2011.

⁹⁴ Cohen. 2008.

behaviour may affect their wellbeing both during detention and upon release.⁹⁵ This includes how self-harm intersects with survival techniques and how self-harm may affect wellbeing. For pragmatic reasons existing clinical research is focused on the causal relationship between immigration detention and psychological issues, rather than trying to understand from detainees the lived experience of detention and what impact these experiences have on their short and long-term wellbeing.⁹⁶ This is because a primary concern is advocacy to extricate people from detention quickly, so that a focus on the high rates of mental ill-health as a result of detention is strategic. However, this reality results in defining self-harm as pathological behaviour. It does not seek to understand the reasons why someone in detention self-harms, how this may relate to their coping mechanisms and under which circumstances they are most likely to self-harm.

1.3 The limitations of self-harm data

As with Cohen's research, one of the main ways to determine the rates of self-harm in detention, apart from conducting a widespread clinical analysis, is via assessing incident report logs. This works only in settings where self-harm is recorded either by medical or centre staff. If kept, these logs are records of reported incidents in detention centres, which in many cases include incidents of self-harm. In both Australia and Austria these logs are mostly unavailable to the public.⁹⁷ Even when access to centres is granted by monitoring bodies, such as in the case of Optional Protocol on the Convention Against Torture visits in Austria, specific cases and structural issues are investigated but an overview of every incident is not given and full access to incident logs is not granted.⁹⁸ In Australia, incident report logs have been gathered through commissions of inquiry⁹⁹ and freedom of information proceedings. Whilst these logs are useful in gleaning a snapshot of self-harm incidents in detention, various factors

⁹⁵ Coffey et al. 2010.

⁹⁶ Coffey et al. 2010.

⁹⁷ No data available outside the centre about self-harm, rates or specific kinds of self-harm – Interview Nora Ramirez Castillo, 2016

⁹⁸ Interview Nora Ramirez Castillo, 2016

⁹⁹ see Human Rights and Equal Opportunity Commission. 2004. and Australian Human Rights Commission. 2014.

including the quality of reporting, the training of staff, the definition of what constitutes an incident and reporting thresholds affect how comprehensive a picture they paint. Thus, analysis of the recording methods is needed before figures can be representative and useful for making cross centre and country comparisons.

Generally speaking, self-harm reporting is complicated by the fact that it may go unnoticed because it is often covert.¹⁰⁰ This is an issue both in the community and in detention. In the detention setting however, it may be further exacerbated by hostile relationships between detainees and guards, issues with access to health services within detention and anxieties about the possible punitive responses to self-harm acts. All these can create barriers to reporting.¹⁰¹ As a result, researches in Australia have posited that self-harm rates are much higher than those which are reported.¹⁰² For example, from interviews conducted with frontline workers, Dudley concluded that rates of self-harm in Australian detention facilities were significantly underestimated. He proposed an incidence anywhere from 10-100 times higher than what was reported through incident report logs in 2001.¹⁰³

In instances where self-harm is disclosed or discovered, confusion by front-line staff about what type of incident it is (and potentially then whether to record it) may be complicated by the blurred lines between categories of self-harm, non-fatal suicidal actions¹⁰⁴ and acts of self-harming protest, including hunger strikes.¹⁰⁵ In Australia for example, data from incident logs do not specify the type of self-harm conducted with the only distinguisher being that of hunger-strikes.¹⁰⁶ As sub-categories of type of self-harm are generally not distinguished between in incident logs it is unclear whether statistics include self-harm acts, as distinct from non-fatal suicide injuries or acts of

¹⁰⁰ see Cohen. 2008.

¹⁰¹ in Dudley. 2003. Dudley reports that a 27- year-old Palestinian man on a hunger strike was allegedly placed in solitary confinement for 3 months in Woomera IDC, and then because of repetitive self- harm, spent 5 months in isolation at Maribyrnong detention centre. Other reports of punitive responses to self-harm can be found in the palmer report.

¹⁰² see Dudley. 2003.

¹⁰³ Dudley. 2003.

¹⁰⁴ see Goosen et al. 2011.

¹⁰⁵ see Coffey et al. 2011.

protest involving harm to self. This may be an issue as confusion of how and when to record incidents complicates a comparative analysis of data from different contexts.

Incidents also have to meet a certain threshold in order to warrant a report. Within immigration detention in Australia all acts of self-harm as well as “threats” of self-harm are required to be logged¹⁰⁷. Thus, incident numbers may be higher compared to other contexts where thresholds for reporting self-harm are different. Conversely, in Austrian immigration detention centres an incident report only needs to be written if someone is isolated due to extreme self-harm or a suicide attempt. If self-harm is detected detainees are asked to attend a doctor, where a medical report may be written, but no incident report is necessary unless police have had to use force to ensure someone receives medical treatment.¹⁰⁸ Thus to get a clear understanding of self-harm within the Austrian system medical records would have to be accessed as well as incident report logs. These differences in context make statistical comparisons of the rate of self-harm outside of an individual centre hard to formulate.

Whilst compelling and important research exists documenting the negative impact of immigration detention on detainees, more research is needed in more contexts in order to have a widespread and in-depth understanding of the negative effects of detention. In particular, greater emphasis on self-harm is needed with specific focus on questions concerning why self-harm in this situation is so widespread, how these acts of self-harm intersect with detainees’ coping mechanisms and under which circumstances self-harm increases. Issues of access to detained populations is at the forefront of research limitations, however issues of how research is conducted are also in part at fault, with more emphasis needed on understanding the phenomena of self-harm from detainees themselves.

¹⁰⁶ Dudley. 2003.

¹⁰⁷ Interview with Nauru worker A. 2016.

¹⁰⁸ Interview with Nora Ramirez Castillo. 2016

2. Psychoanalytic understandings of self-harm

*“In self-harm both destructive and life preservative drives are powerful and in conflict”.*¹⁰⁹

As stated in Chapter One, more research into self-harm in immigration detention is needed in order to understand why self-harm is of such widespread concern. The following discussion will outline psychoanalytic theories which examine what acts of self-harm mean to the people engaging in them and what the acts themselves may represent. Two psychoanalysts will be referenced, Anna Motz and Gillian Straker. Both propose an understanding of self-harm that defines self-harm as a form of communication, a sign of hope in the face of inadequate responses to pain as well as a means of reclaiming personal identity in the face of fragility. Their conceptualisation of self-harm is informed by their clinical practice outside the setting of detention, although their theories provide a basis for discussion in chapter four about the meaning of self-harm in immigration detention.

Both inside and outside detention the major goal of treatment of self-harmers is the elimination of such behaviour. Particularly in the community, the exclusive focus on the elimination of self-harming behaviour has helped avoid discussion and engagement about the underlying causes of self-harm and what this behaviour says both about the individual and also the society and context in which they live. Much of the underlying philosophy of medical based psychiatry involves preventing the behaviour of self-harm by removing the power of the individual self-harmer to complete the action. As a result, there has been an inadvertent denial of the feelings associated with the action¹¹⁰ and a failure to recognise that these tendencies have often been a catalyst for self-harm behaviours in the first instance.¹¹¹ The traditional cognitive-behavioural approach on its

¹⁰⁹ Motz, Anna “if you prick us we do not bleed” in *Managing self-harm, psychological perspectives* Anna Motz (eds), Routledge, 2009 p.215.

¹¹⁰ Hoffman. 2008. p.159.

¹¹¹ Hoffman. 2008. p.159.

own does not explore why the behaviour may be occurring – “*it denies the complexity of the problem and ignored the complex personal meanings that self-injury carries*”.¹¹²

Psychoanalysis can allow us to step aside from this viewpoint and understand the complexities of self-harming behaviours. A multitude of paradoxes exist – one harms in order to create healing, one inflicts suffering in order to soothe and one endangers life in order to increase the ability to survive.¹¹³ Hypotheses of self-harm can be found in a number of different psychological disciplines, however psychoanalytic theories dominate the search for deeper meaning behind such behaviours. Theories about causes of self-harm include a manifestation of attention-seeking behaviours relating to loss, self-punishment, self-soothing or self-healing behaviour; attacks on a persecutory object enacted on the body;¹¹⁴ and the notion that self-harm is a means of communicating the verbally uncommunicable and an action through which the unseen psyche can become visible on the skin¹¹⁵.

Straker and Motz are two psychoanalytic theorists specialising in self-harm. They both search for meaning behind self-harm through analysing transcripts of self-cutters collected both personally and borrowed from other practitioners’ research. Straker presents a picture of self-cutting as a form of self-creation – a signature drawn on the body to claim identity. The action of self-harm is a disruption in relation to language and an action conducted in order to rebuild an otherwise tenuous sense of self.¹¹⁶ Moving away from a hypothesis that self-cutting is primarily a self-soothing function, she argues that “...*self-cutting is an attempt to put into place the elements involved in building a self structure*”.¹¹⁷ Building on Straker’s analysis Motz argues that self-

¹¹² Hoffman. 2008. pg.60.

¹¹³ Straker, Gillian. 2006. Signing with a Scar : Understanding Self-Harm. *Psychoanalytic Dialogues*, 16:1(March), pp.93–112.

¹¹⁴ Straker. 2006.

¹¹⁵ Straker. 2006.

¹¹⁶ Straker. 2006.

¹¹⁷ Straker. 2006.

cutting is the “*creation of an embodied identity, rather than consigning it simply to the realm of pathology*”.¹¹⁸

These two psychologists look into how self-harm brings to the surface, in a controlled manner, that which is inside. Through self-harm, distinctions and boundaries between the inside and outside world are made, reaffirming a sense of self-identity and differentiation between self and surroundings. Straker furthers this idea and concludes that self-harm actions can be conceived as a reassurance of physicality and of life felt through the body.¹¹⁹ At the core of a sense of self is the ability to self-regulate affect and thus self-harm becomes a form of affect regulation, which Straker terms “mirroring”. As one participant in her research explains “[I self-harm]...*when I’m in a dream world and not here and that’s the only way of reassuring myself that I am physical*”.¹²⁰ This concrete reassurance of existence represents a triumph of survival and centres the mind as a place of control and agency.¹²¹

Alongside the formation of identity Straker and Motz also see self-cutting as a vehicle of communication displayed on the body in order to tell someone something¹²² – “*self-harm is not necessarily a suicide attempt or attention-seeking behaviour: it is a communication that contains within it the hope that there will be a response*”.¹²³ This leads Motz to the conclusion that self-harm is a sign of hope revealing with it an attempt to find an adequate and helpful response to pain.¹²⁴ Through Straker’s transcripts she documents the difficulty self-harmers face when talking through their emotions, especially when compared to their ease showing or explaining physical self-harm injuries¹²⁵ to a practitioner. Verbal communication in many cases was perceived as a coerced medium conducted for the benefit of the practitioner rather than the individual.

¹¹⁸ Motz, Anna. 2010. “Self-Harm as a Sign of Hope Self-Harm as a Sign of Hope.” *Psychoanalytic Psychotherapy* 24 (2): 81–92.

¹¹⁹ Straker. 2006. p.102

¹²⁰ Straker. 2006.

¹²¹ Motz. 2016.

¹²² Straker. 2006.

¹²³ Motz. 2016. p.81.

¹²⁴ Motz.2016.

¹²⁵ Straker. 2006.

Straker further concludes that therapies targeting self-harm are often built upon the false assumption that words create a sense of intimacy which soothes and prevent further self-harm.¹²⁶

For most of the participants whom Straker surveys, verbal communication is certainly an option available to them. Indeed she notes they are all articulate people. This leads her to conclude that access to verbal communication channels does not necessarily prevent or decrease self-harm. Self-harm is more than just communication in the absence of verbal channels.¹²⁷ She argues that emphasis should be placed on how verbal communication is (or is not) responded to initially and prior to self-harm. Focus should be placed on whether verbal communications were *felt* to be successful or unsuccessful by the self-harmer. In this sense verbal communication or articulation of need should be analysed in order to understand self-harm rather than assuming that it occurs simply because of absence of desire or ability to verbally communicate. As one participant articulates just this, stating “*speaking is very threatening, very uncomfortable. It’s as though even if I did speak it wouldn’t be relevant*”.¹²⁸ This is a relatively new area and more research is needed into why self-harm might be felt to be more successful than other forms of communication, particularly communication involving words.¹²⁹

Whilst Motz and Straker’s understanding of self-harm is not applied directly by them to the context of immigration detention, their theories are an extremely useful starting point in exploring questions of what self-harm within immigration detention means. Of particular use are their ideas about self-harm as identity formation in the face of fragility and as hopeful communication in response to the inadequate meeting of needs. In Chapter Five, these theories will be applied directly to the context of immigration detention, particularly applicable when discussing self-harm as a form of communication, and act of self-sovereignty. Prior to this, however, a systemic analysis

¹²⁶ Straker. 2006.

¹²⁷ Straker. 2006 and Motz. 2016.

¹²⁸ Straker. 2006. p.96.

¹²⁹ Straker. 2006. p.95.

of power, biopolitics and bare life will occur in the following chapter in order to set up a framework through which to understand the actions of those within detention, including their potential for agency and resistance.

3. A structural analysis: sovereign power and immigration detention

The way in which power, and more specifically sovereign power, is understood has implications for how the acts of detainees (including acts of self-harm) are viewed, understood and responded to. In turn this influences whether self-harm can be viewed solely as a desperate and unreasoned response to a violent situation, or whether it can be viewed as anything beyond this – a form of communication or resistance and a political engagement with the power relations of detention. Determining a framework through which to define power is thus extremely important when looking at what acts of self-harm in detention mean. By defining power, the detainee's ability to act against that power is also defined.

This chapter considers the ways in which theories of power illuminate the actions of detainees and their acts of self-harm. This involves an exploration of political science and philosophical theories of sovereignty and power and relies heavily on the theories of Foucault and Agamben. Sovereign power is introduced through the work of Foucault. Following on from this, Agamben's highly influential theory of bare life is discussed.¹³⁰ In the context of immigration detention, the implications of bare life are then critiqued. While Agamben offers great insight into how sovereign power creates and defines who does and does not have access to political rights, his concept of bare life is however, not comprehensive enough to adequately define the detainee's potential for agency. It is thus unhelpful in looking at self-harm as anything other than a desperate or pathological act.

¹³⁰ Agamben, Giorgio. 1998. *Homo Sacer: Sovereign Power and Bare Life*, Stanford University Press.

3.1 Sovereignty and the creation of the non-citizen

Following emergence of post-structuralism and post-modernism sovereign power became an important focus of study for political scientists. Especially after the events of World War 2 there came a shift towards emphasis on the category of “refugee” as central to analysis of sovereignty. This may be attributed in large part to the work of Hannah Arendt and others. It heralded a departure from more traditional and realist notions of sovereign power¹³¹ and lay the groundwork for theorists such as Foucault, Agamben, and Butler which will be discussed at length further on.

While the second half of the 20th Century brought to the forefront a new emphasis on the universality of human rights, many, including Arendt, argued that without citizenship these rights could never be fully realised. Article 1 of the Universal Declaration of Human Rights enshrined the universality of human rights boldly stating that “all humans are born free and equal”. The reality however, has been that most are unable to fully assert their rights, leaving many critical of the practical expression of Article 1. Arendt in particular, rejects the notion that human rights are vested in all humans as a result of the mere fact of being born, as proponents of universalism would argue. She argues that rights are instead prescribed by the state and may only be meaningful if the bearer of those rights is a citizen of the state, with access to such rights. Those rendered stateless, including asylum seekers and other non-citizens within immigration detention, are precluded from the very ‘right to have rights’ as they exist without the recognition that comes from being a citizen of a country. Without citizenship there is no access to rights as the existence of rights is only available in practice. Through the distinction between citizen and non-citizen sovereign power determines who is and is not able to claim rights, thus creating the category of refugee.

¹³¹ Owens, Patricia. 2009. “Reclaiming ‘Bare Life’?: Against Agamben on Refugees.” *International Relations* 23 (4): 567–82.

In post-modern terms the sovereign or rather sovereign power is defined not simply by ownership of territory, but by the capabilities and potential of the sovereign.¹³² A lot has been written about sovereign power and two of the most notable theorists include Michel Foucault and Giorgio Agamben whose work will be discussed below. Sovereign power has been used as a framework for scholars to describe immigration politics, detention centres and experiences of citizenship. Particularly within the context of immigration detention, an understanding of sovereign power is important in order to understand the dynamics existing within detention. Hot debates exist, as to how power is conceived in this instance, power which directly impacts on how action, protest, communication and resistance within immigration detention (and indeed more broadly) are understood.

3.2 Bio-power and states of exception

Foucault's conceptualisation of power, and hence his understanding of sovereign power, underpins much post-modern thought. For Foucault, "*power is neither given, nor exchanged, nor recovered, but rather exercised*".¹³³ Power is therefore non-static. It exists in action. It is omnipresent. Within power there must be the potential for freedom and resistance as these concepts are formed in opposition with one another, relying on each other to define what they are not. They therefore have a symbiotic relationship. Power would not exist without a notion of freedom, and vice a versa.¹³⁴ For Foucault, sovereign power is based in the ability to determine who has the right to live and who has the right to die.¹³⁵ It is through examination of the ways in which modern states manage their subjects that Foucault developed the notion of bio-power. Bio-power is a product of sovereign power. It describes a sovereign state's regulation of their citizens through the "*...explosion of numbers and diverse techniques for*

¹³² Zevnik, Andreja. 2009. "Sovereign-Less Subject and the Possibility of Resistance." *Millennium – Journal of International Studies* 38 (1): 83–106. pg. 84.

¹³³ Foucault, Michel. 1980. *Power/knowledge: selected interviews and other writings, 1972-1977*, Brighton, Sussex: Harvester Press. p.89

¹³⁴ Edkins, Jenny; Veronique Pin-Fat. 2005. "Through the Razor Wire" 34 (1). p.3

¹³⁵ Zevnik. 2009.

achieving the subjugation of bodies and the control of populations”.¹³⁶ In other words a state’s assertion of power over its subjects and their *bodies*. Sovereign power distinguishes who is a human in the eyes of the law. It creates life via law. Through this it is able to exclude natural (and non-human) life. Life is thus prescribed and is defined by sovereignty.

Italian philosopher Agamben builds on Foucault’s classic distinction between sovereign and subject and defines the sovereign as one who decides the exception.¹³⁷ From this viewpoint only the sovereign can decide when the law can be suspended and within the framework of human rights, who is and who *is not* a rights bearer. For Agamben, sovereign power draws lines of distinction between forms of life defining what exists inside and what outside the rule of law in this ‘state of exception’. For Agamben ‘states of exception’ are exemplified by the concept of ‘the camp’ pertaining to refugee camps, immigration detention, black rendition sites and the concentration camps of Nazi Germany. States of exception come into being when a “*space in which normal order is de facto suspended and in which whether or not atrocities are committed depends not on law but on the civility and ethical sense of the police who temporarily act as sovereign*”.¹³⁸ The camp thus reveals “*the fundamental structure of the rule of law and the real character of the judicial and political order*”.¹³⁹ In the camp the state of exception is what becomes the rule of law.¹⁴⁰

3.3 Agamben, bare life and immigration detention

As stated above, for Agamben the sovereign’s ability to draw lines of distinction between various forms of life is key to the exercise of power.¹⁴¹ As Arendt has said, a fundamental element of this exercise of power is the creation of the category of “refugee” or non-citizen. The category of refugee or non-citizen is central to

¹³⁶ Foucault, Michel. 1976. *The History of Sexuality* Volume 1: An Introduction. London: Allen Lane. p.140

¹³⁷ Owens. 2009. p.571.

¹³⁸ Agamben. 1998.

¹³⁹ Owens. 2009. p.571

¹⁴⁰ Edkins, Jenny. 2012. “Zones of Sovereign and the Camp.” *Alternatives: Global, Local, Political* 25 (1): 3–25.

Agamben's work, symbolising for him the ultimate bio-political subject¹⁴² – a form of life he terms 'bare life'.¹⁴³ Agamben's notion of bare life is rooted in Aristotle's understanding of distinctions between the forms of life *zoe* and *bios*. *Zoe* refers to the bio-political (non) human body, a body without rights, in contrast to *bios* the political body as understood as the 'good life' lived by the citizen.¹⁴⁴

Sovereign power excludes bare life from the political and the realm of law and thus it can never be part of *bios*. Using Agamben's definition, bare life renders detainees without possession of political power and devoid of legal and political protection.¹⁴⁵ Their life, in this instance, is reduced to the natural and the animal, existing without political freedom. Bare life in 'the camp' no longer relies on power relations in the sense of Foucault where interactions are relational and freedom has potential. Instead Agamben's camp sees relations of violence existing in the absence of the freedom/power nexus. Bare life is hence a life in absence of power relations and thus is a life that cannot and does not wield political power.¹⁴⁶ According to Agamben, immigration detention exemplifies a state of exception and within its structures detainees embody bare life. When applying Agamben's theories, detainees due to their apolitical nature, are unable to redefine power relations and thus impact upon (or change) sovereign power. Therefore for those entrapped in the camps violence, including acts of self-harm and protest, cannot be political nor seen as resistance as there is no potential of freedom.

On the surface, numerous accounts of detention reinforce these notions of bare life scenarios with descriptions of people oppressed to such an extent that they appear completely worn down, vacant and de-politicised. Self-harm can and often is viewed as example of this – a purely desperate act, conducted in a heightened state without rational or logical thought. In an interview conducted with an ex-detainee by lawyer

¹⁴¹ Edkins and Pin-Fat. 2005. p.7.

¹⁴² Owens. 2008. p.567.

¹⁴³ Agamben. 1998.

¹⁴⁴ Zevnik. 2009.

¹⁴⁵ Zevnik. 2009. p.88

¹⁴⁶ Edkins and Pin-Fat, pg.9.

Richard Bailey in Australia, one ex-detainee commented on other detainees. He observed that “...it was just like fading...you could see people walk during the evening, just their head down and their shoulders drop. It was just dead sort of walk. You couldn’t see the reality in their face. They were somewhere out there without feeling that they exist”.¹⁴⁷ These states are also recorded by Sultan and O’Sullivan’s research¹⁴⁸, as mentioned in Chapter One. They describe the diminution of people into states of passive acceptance, constantly rocking and engaged in repeated compulsive actions including self-harm. These images conjure up pictures strongly associated with Agamben’s descriptions of bare life.

Through its exclusion from the political, bare life is *included* within sovereign power as its by-product via a process of “*inclusive exclusion, where the exception remains included in relation to the rule through its very suspension*”.¹⁴⁹ In other words bare life is excluded from politics because of its apolitical status, but it is also simultaneously included as it belongs to the order of sovereign power through its creation. As the drawing of lines between different forms of life and the creation of bare life is complicated, distinctions are not always clear cut. States of exception see eroded “*the possibility of differentiating between our biological body and our political body – between what is incommunicable and mute and what is communicable and sayable*”.¹⁵⁰ And so exists what Agamben terms a “zone of indistinction” – a grey zone suspended between clearly defined states, a space which operates within the exception. It is within this murky zone of indistinction that some theorists have argued that there remains a sliver of space for political agency within an Agamben reading of immigration detention.¹⁵¹

Two such theorists, Edkins and Pin-Fat argue that this sliver of potential for political power is exemplified by self-harm protest acts and lip-sewing by detainees. They argue that these zones of indistinction leave room for detainees themselves to take on

¹⁴⁷ Bailey. 2009. p.119

¹⁴⁸ Sultan and O’Sullivan. 2001.

¹⁴⁹ Zevnek. 2009. p.87.

¹⁵⁰ Agamben. 1998. p.188.

the embodiment of bare life and that this gives scope for resistance and political action. For Edkins and Pin-fat lip-sewing is a ‘re-enactment’ of bare life and thus a subversion of sovereign relations. For them lip sewing “*viscerally reveals and draws attention to the refugees’ own person as the bare life produced by sovereign power: it is a re-enactment of sovereign power’s production of bare life on the body of the refugee*”. The embodiment of bare life is *the only* means through which potentially to challenge or subvert sovereign power - “*the refugees sewn muteness, deafness and blindness shows that our bare life is, indeed, all we have left under sovereign power*”.¹⁵²

Despite the seeming relevance of the term bare life in regard to detainees’ lives, several analysts have highlighted the dangers of assuming the total embodiment of bare life within the contexts of immigration detention. Even with the sliver of potential for politics as argued by Edkins and Pin-Fat, the agency and potential for resistance of those within detention feels largely ignored by bare life. Instead of focusing on bare life as the primary or sole means of existence within detention, Bailey for example argues that detainees occupy a state which can be read sometimes as bare life and sometimes as political life.¹⁵³ In other words the situation of detention seems to share similarities with descriptions of bare life, however it is not limited to bare lives of survival. For Bailey, action within detention, including explicit acts of bodily protest, are simultaneously both desperate and hopeful - “*they are not simply acts of desperation resorted to once politics have become impossible*”.¹⁵⁴ To illustrate, Bailey cites the example of a 14 year old boy, Almadar Bakhitiyari, who self-harmed with a razor blade in Australian immigration detention in the early 2000’s. On one arm he cut himself and on the other he wrote the word ‘Freedom’ on his skin. Bailey argues this act, taking place within the context of a sustained period of hunger strikes, is both a desperate act of self-harm as well as an act of protest actively claiming Almadar’s right to freedom. Bailey argues that through this action, the constant struggle detainees are engaged with

¹⁵¹ see Edkins and Pin-Fat. 2005.

¹⁵² Edkins and Pin-Fat. 2005. p.21.

¹⁵³ Bailey. 2009.

¹⁵⁴ Bailey. 2009. p.112.

to retain their own relation to politics is exposed.¹⁵⁵ Actions within detention, including self-harm acts may be desperate, but not without political meaning.

Through bare life, Agamben provides us with a useful analysis of sovereign power and in particular defines the potential of the sovereign to define who has access to political rights and who sits dangerously outside the realm of state protection. As illustrated above, bare life in some instances fits descriptions of immigration detention neatly, particularly in terms of the desperation experienced by many. When trying to understand the potential for agency within detention however, Agamben's definition of bare life leaves little room for acknowledging the resistance and struggle of those classified as bare life. While Edkins and Pin-Fat, maintaining Agamben's conceptual apparatus, purport to find space for detainee agency, that space is only a sliver. It is not enough to fully capture the political potential of detainees and too easily falls into a depiction of people as unthinking victims, reduced to bare life and captive of deteriorating mental ill-health.¹⁵⁶ Even with Edkins and Pin-Fat's sliver of resistance, Agamben's reading of immigration detention risks the further disempowerment and depoliticisation of those whom we are seeking to support. It also contradicts accounts exposing highly developed resistance movements existing within detention,¹⁵⁷ with organised and individual protests, including lip-sewing and hunger strikes.¹⁵⁸ Furthermore, it is also unhelpful when exploring general acts of self-harm in a nuanced and complex way or as anything beyond a desperate act and a symptom of mental ill-health. By focusing solely on lives of bare life "*...not only does politics collapse into this ontological exercise, but the concrete struggles waged by these figures are overlooked*".¹⁵⁹

¹⁵⁵ Bailey. 2009. p.130.

¹⁵⁶ Bailey. 2009. p.119.

¹⁵⁷ Fiske. 2012.

¹⁵⁸ Fiske. 2012. and Bailey. 2009.

¹⁵⁹ Bailey. 2009. p.118.

4. Redefining vulnerability and resistance

If not via Agamben, then through which framework of power are we able, in a nuanced way, to conceptualise the actions of detainees? How can we honour their agency and potential for resistance? How can this be done in a way that also gives justice to the struggles and oppression they feel and does not overstate or romanticise their agency or their potential to resist seemingly overwhelming power?

In answering these questions the next section will revisit Foucault's ideas of power in order to propose a theoretical framework through which action, including acts of self-harm, can be understood within the power relations of immigration detention. From queer theorist Judith Butler's understanding of vulnerability, the narrative therapy notion of everyday resistance will be utilised to provide a mechanism by which to move beyond dichotomies of oppressed/oppressor, thus allowing space to view self-harm as an act of agency and resistance in the face of oppression and violation of rights.

4.1 *The complexity of vulnerability – moving away from dichotomies*

Through Foucault's understanding of power, detainees can be seen to be as *engaged* in power struggles with sovereign power. Life in this context has more potential than just that of rudimentary survival, as Agamben would argue through his depiction of bare life. While violent power structures exist within the context of detention, in a Foucaultian understanding of power, detainees' lives are able to be politically charged and there is space for them to be seen as agents in their own struggles. That is not to say that detainees therefore necessarily have the power to necessarily change their situations fully or to overthrow the existing power structures. However, theirs is more than just a depoliticised passive acceptance of the injustices of their incarceration. Queer theorist Judith Butler, heavily influenced by Foucault, argues that to be outside political structures is still to be saturated in power relations.¹⁶⁰ Therefore within a 'state of exception' such as in immigration detention, detainees are engaged in a political

¹⁶⁰ Butler, Judith. 2012. "Bodies in Alliance and the Politics of the Street" In eds. McLagan, Meg and McKee, Yates. *Sensible Politics: The Visual Culture of NonGovernmental Activism*. p.123.

power struggle with sovereign power, rather than in a situation where they are outside of politics or apolitical. Butler's writing on the vulnerability of bodies is of particular relevance to exploring further the actions of those within immigration detention.¹⁶¹

Butler writes about performativity and gender and her theories have been highly influential in rethinking the social construction of gender, biology and the body. Of particular relevance is her work on gender, vulnerability and power. Butler warns of the dangers of understanding women's bodies as only vulnerable, despite the fact they are engaged in an unequal and oppressive power relation with patriarchal structures.¹⁶² For Butler, bodies facing oppression are not defined in their entirety by oppression and they are not defined as inherently vulnerable or weak. If they were, she argues, false dichotomies of powerful/vulnerable, similar to other dichotomies critiqued in feminist/queer theories of active/passive, man/woman, masculine/feminine, oppressor/oppressed, would be perpetuated. Instead, Butler argues that bodies must simultaneously be conceptualised as vulnerable and also engaged in a complex power relation with the state.¹⁶³ Speaking of women, Butler states "... *vulnerability, and resistance can, and do, and even must happen at the same time...*"¹⁶⁴ In this sense it is not strength that overcomes vulnerability through resistance and mobilisation, rather vulnerability itself that becomes mobilised. Whilst totalising oppressive power structures may exist, the body, in its vulnerability, is not rendered powerless. This understanding of vulnerability is both complex and powerful. As a result, Butler steers us away from paternalism, still recognising vulnerability, but at the same time *not* reinstating or naturalising it. Seen through the lens of Butler, if detainees are to be viewed as bare life and apolitical, then implicit is an acceptance of the dominant power paradigm and even a reinforcement of it.¹⁶⁵ Taking Butler's approach helps us shift focus away from totalising detainees as exclusively powerless and depart from a

¹⁶¹ Butler, Judith. 2014. "Bodily Vulnerability, Coalitions and Street Politics." *Critical Studies* 37 (1): 99–119.

¹⁶² Butler, Judith. 2012.

¹⁶³ Butler, Judith. 2012.

¹⁶⁴ Butler, Judith. 2014. "Bodily Vulnerability, Coalitions and Street Politics." *Critical Studies* 37 (1): 99–119. p.110.

¹⁶⁵ Butler. 2012. pp.121-122.

situation whereby people become defined by their vulnerability and only by their vulnerability.

4.2 “Everyday resistance” – redefining resistance

Butler’s understanding of vulnerability incorporates the ability to resist within it. This is an essential ingredient for recognising the potential agency of detainees in immigration detention. How resistance is defined crucially influences whether we can think of self-harm as an act of resistance, and also exposes how we view detainees – as either active or passive.¹⁶⁶ Fitting neatly alongside Butler’s notion of vulnerability is the narrative therapy term “everyday resistance”¹⁶⁷. Family therapist Allan Wade coined the term through his work with sexual abuse survivors. He proposed that in any situation where someone is ill-treated they resist. Thus experiences of violence and oppression can run parallel to creative and determined resistance.¹⁶⁸ In the same way that Foucault sees power and resistance as inseparable and Butler argues that vulnerability and resistance co-exist, Wade asserts that resistance is ever-present in the face of oppression and injustice. Everyday resistance is a useful concept for an analysis of self-harm in immigration detention. In particular it brings to light two important notions – first, acts of resistance within violent contexts may take on traditionally unrecognisable modalities and second to be considered as resistance these acts do not have to change the status quo.

Within a context of violence such as immigration detention, resistance may not initially be recognised because it may not take on traditional forms of open and declared dissent.¹⁶⁹ Indeed, resistance may be a part of survival and it may blend into everyday

¹⁶⁶ Puggioni, 2014, p.949.

¹⁶⁷ Narrative therapy is a form of therapy which places individuals as experts in their own lives. It relies on the premise that people already have with them skills able to deal with issues. This form of therapeutic practice places the problem outside of the person, rather than viewing problems as inherent to people. Narrative is concerned with deepening the stories of people’s lives and developing alternative narratives parallel to dominant stories. Dulwich Centre, “What is Narrative Therapy”, accessed June 20th.

¹⁶⁸ Wade, A. 1997. “Small Acts of Living: Everyday Resistance to Violence and Other Forms of Oppression.” *Contemporary Family Therapy* 19 (1): 23–39. p.23.

¹⁶⁹ Puggioni, 2014. and Butler, 2014.

life. It may be indistinguishable from coping mechanisms, acceptance and even compliance.¹⁷⁰ As Foucault states “...there is a plurality of resistances, each of them a special case: resistances that are possible, necessary, improbable; others that are spontaneous, savage, solitary, concerted, rampant or violent; still others that are quick to compromise, interested, or sacrificial; by definition, they can only exist in the field of power relations”.¹⁷¹ Furthermore, within a violent context, resistance may not take on democratic forms.¹⁷²

Discussing the violence of Italian holding centres, Puggioni argues that “even if the politico-juridical dictates the way in which excluded bodies are produced by the sovereign authority, such a production does encounter reactions, even violent reactions, which should be accounted for”.¹⁷³ Thus our understanding of resistance needs to be expanded to ensure that non-conventional modalities are included. In particular, people who are subjected to extreme violence face the real threat of retaliation and oppressors act to eradicate any perceived threats. Acts may not outwardly be recognised as resistance, however they may still seek to subvert and manipulate state power in often subtle or creative ways.¹⁷⁴ A gender analysis of how resistance is traditionally defined is an essential part of moving beyond being trapped in a masculine model of combat which presumes physically fighting back as the ideal or legitimate form of resistance.¹⁷⁵ In documenting resistance movements within immigration detention in Australia, philosopher and social worker Lucy Fiske argues that resistance appears in a variety of untraditional forms from choosing what not to eat, creating disturbances, forcing responses from authorities via acts of self-harm or the destruction of property. She writes “The aim of the protest was less about achieving a change to their environment and more about experiencing the self”.¹⁷⁶

¹⁷⁰ Puggioni. 2014. 952.

¹⁷¹ Foucault, Michel. 1976. *The History of Sexuality (Vol.1)*. London: Penguin Books. pp.95-96.

¹⁷² Puggioni. 2014. p.563.

¹⁷³ Puggioni, Raffaella. 2014. “Against Camps’ Violence: Some Voices on Italian Holding Centers”. *Political Studies* 62 (4): 945-60. p.949.

¹⁷⁴ Fiske. 2012. p.121.

¹⁷⁵ Wade. 1997. p.25.

¹⁷⁶ Fiske. 2012. pp.123-124.

Traditional and largely Western understandings of resistance have measured and defined resistance in terms of its ability to stop oppression.¹⁷⁷ Through his definition of everyday resistance, Wade argues that in recognising resistance there should be no expectation of immediate success and no evidence of a changing situation in order for it to be classified as resistance. Resistance can occur and exist without change to the status quo. As another narrative therapist Vicki Reynolds states *“We witness resistance, not because it stops the abuses of power, but because attending to resistance amplifies the person’s sense of autonomy and their attempts to keep a grasp on their dignity”*.¹⁷⁸ Alternatively, Wade proposes a new interpretation of resistance whereby *“...any mental or behavioural act through which a person attempts to expose, withstand, repel, stop, prevent, abstain from, strive against, impede, refuse to comply with, or oppose any form of violence or oppression (including any type of disrespect), or the conditions that make such acts possible, may be understood as a form of resistance”*.¹⁷⁹ This also includes de facto forms of resistance which encompass any attempt to imagine a life of respect and equality. The focus here is on the response to violence as opposed to the effects of the violence. In this way a plethora of actions can be viewed as resistance to oppression. Survival and coping skills along with acts of self-harm can be viewed as acts of everyday resistance and resistance to the injustices and human rights abuses of detention.

While radically altering our perceptions of resistance it is extremely important in the process not to fetishise people’s ability to act and resist. Narrative therapist Vicky Reynolds warns about just this. As a self-declared committed activist she recognises her eagerness to recognise resistance. However she also states the importance not to romanticise or fetishise – *“It is important not to fetishise resistance or to get taken up with romantic ideas of resistance, as our collective purport is to promote possible lives of justice, not to have rich practices of resistance”*.¹⁸⁰ Further, it is important not to conflate the honouring of resistance with the delivery of justice as to do so would be

¹⁷⁷ Wade. 1997.

¹⁷⁸ Reynolds et al. 2014. p.6.

¹⁷⁹ Wade. 1997. p.25.

¹⁸⁰ Reynolds et al. 2014. p.6.

dangerous.¹⁸¹ Acts of self-harm can at once be desperate and symptomatic of ill-health as well as powerful, self-actualising acts of resistance. In the particular context of detention, narrative ideas can help enrich appreciation of actions such as self-harm otherwise understood as violent or pathologised actions.

5. Self-harm and the body

*“All the power that you have. That’s all the power, not just a little of it. That’s all you have”.*¹⁸²

As has been discussed, narrative notions of everyday resistance recognise that in the face of oppression resistance often takes on non-traditional and sometimes violent modalities. In the context of immigration detention, where traditional forms of communication and advocacy are cut off or limited, the body becomes an important tool through which to communicate, protest and resist. Starting with Butler’s concept of the body as a resource, this next chapter will explore the works of political scientist Puggioni and social worker Fiske. Using quotes from detainees and interviews with front line workers it will be argued that self-harm can be understood as a form of communication enacted on the body and a reclamation of self-sovereignty in the face of extreme deprivation of liberty.

Through her work Butler focuses explicitly on the body, departing from traditional social theories which have largely neglected the body as a site of politics.¹⁸³ Informing Butler’s work are queer and feminist theories which have critiqued and dismantled Western mind-body dualism, a dualism which has traditionally separated human life into distinct and opposing realms of the rational masculine mind and the emotional

¹⁸¹ Reynolds et al. 2014. p.3.

¹⁸² Fiske. 2012. pp.197-198.

¹⁸³ Sasson-Levy, Orna, and Tamar Rapoport. 2003. “Body, Gender, and Knowledge in Protest Movements: The Israeli Case.” *Gender & Society* 17 (3): 379–403. p.381.

feminine body.¹⁸⁴ Informed by social construction theories, queer and feminist theorists have questioned assumptions of the body as biologically given, instead seeing the body as constituted at the intersection of discourse.¹⁸⁵ The result of this is a re-conceptualisation of the body as a subject which performs and creates meaning and social action.¹⁸⁶ Butler argues that the body, when confronted with oppression, becomes a valuable resource.¹⁸⁷ Thus “*demands made in the name of the body (its protection, shelter, nourishment, mobility, expression) sometimes take place with and through the body*”.¹⁸⁸ This is poignant in the context of immigration detention, where the body becomes a vehicle through which to communicate, resist and strategize. Self-harm is the embodiment of this. The next section will explore self-harm as a form of communication and an act of self-sovereignty.

5.1 The speaking body – self-harm as a form of communication

In the context of immigration detention the body becomes a valuable and creative resource. Indeed, it may be the only tool with which to communicate. More than just flesh and blood, it becomes both a site of politics and political itself.¹⁸⁹ In this way the body is not voiceless – as Butler states “*if we appear, we must be seen, which means that our bodies must be viewed and their vocalised sounds must be heard: the body must enter the visual and audible field*”¹⁹⁰. Speaking on sign language Hannah Arendt argues that it has potential to be even more powerful than verbal speech¹⁹¹ as it is a visual depiction of what is being communicated. As Butler argues “*the demand that is made is also enacted, which means that a bodily performativity brings together acting and speaking in a particular way, be-speaking what is acted, and acting what is spoken*”.¹⁹² Thus, even without words the body speaks as it continuously confronts power. These understandings of bodily and non-verbal communication relate to Motz

¹⁸⁴ Sasson-Levy and Rapoport. p.381.

¹⁸⁵ Sasson-Levy and Rapoport. p.381.

¹⁸⁶ Sasson-Levy and Rapoport. p.381.

¹⁸⁷ Butler. 2014. p.117.

¹⁸⁸ Butler. 2014. p.102.

¹⁸⁹ Puggioni. 2014. p.562.

¹⁹⁰ Butler. 2012. p.125.

¹⁹¹ Arendt, Hannah. 1959. *The Human Condition*. *American Sociological Review*. Vol. 24. p.179.

¹⁹² Butler. 2014. p.102.

and Straker's theories in which self-harm is a signature of self-identity written on the skin, bringing what is underneath to the surface in a visual display.

In situations of extreme deprivation of liberty and human rights violations, such as in immigration detention, detainees are painfully aware they have very limited voices. Their words are not heard and basic needs not met. Thus, their bodies become sites of challenge to their situations.¹⁹³ For immigration detainees, official avenues of dissent and communication have often been rendered unavailable or at very least unsuccessful. Within detention, self-advocacy through official channels is often fruitless. People may be speaking, questioning or protesting, but remain unheard. Inadequate responses to their needs are commonplace. Highlighting this during an interview with the author, paediatrician Professor Elizabeth Elliot spoke of fifteen women in an immigration detention facility in the Northern Territory of Australia.¹⁹⁴ These fifteen women had verbally protested to immigration officials about the situation of their children and concerns about the effects of long-term detention on their development. They had asked for improvement in their physical surroundings and the facilities available for their children and had also voiced objection to their transfer to Australian offshore camps because of concerns for the welfare of their children. These women reported to Professor Elliot that they did not have their concerns adequately addressed by immigration or centre staff. Instead, they were simply told by immigration officials that they would not be resettled in Australia and their transfer to Australia's offshore processing centre on Nauru would continue as planned.

Professor Elliot noted that subsequent to this rejection, self-harm and suicide attempts greatly increased as the women became more frustrated and desperate at not being listened to. Studying immigration holding centres in Italy, political scientist Puggioni argues that once "official" mechanisms of communication cease, migrants use their bodies as tools for communication. More than this however, Puggioni argues that the politically charged environment of immigration detention renders the unfree bodies

¹⁹³ Fiske. 2012. p.197.

¹⁹⁴ Elliot and Gunasekera. 2016.

within as a highly political tools. The sovereign's attempts to silence and ignore official means of communication, complaints and verbal protests does not make detainees powerless "*but has indeed rendered them politically active through their own bodies*".¹⁹⁵ Puggioni argues for a radical re-thinking of the unfree body, enabling those within states of exception not to always be configured as voiceless and lacking agency.¹⁹⁶ This is reminiscent of psychoanalyst Motz description of self-harm as "*...a communication that contains within it the hope that there will be a response*".¹⁹⁷ Self-harm can be viewed as hopeful, and a necessary and last resort communication method for people whose voices have not been heard or adequately responded to.

5.2 Sovereignty of the self – self-harm as regaining control and calling into question the legitimacy of the state

*"...blood always has a very powerful message and when people see they can get over their fear to do something, certain thing, harsh thing, they come back to that colour of existence...I have power..."*¹⁹⁸

Reports from within immigration detention centres frequently document the dehumanisation that comes from being incarcerated within such violent structures. In Australia, reports of detainees being addressed by identification number, rather than name, are frequent¹⁹⁹ and the conditions of the camps are such that detainees often report they feel like they are being treated like animals.²⁰⁰ Speaking of general prisons, criminologist Scraton observes that the most terrible realisation for prisoners is the deprivation of their sense of value as human beings, coupled with the illusion of institutional control over their personal destiny.²⁰¹

¹⁹⁵ Puggioni. 2014. p.563.

¹⁹⁶ Puggioni. 2014. p.572.

¹⁹⁷ Motz. 2016. p.81.

¹⁹⁸ Fiske. 2012. pp.197-198.

¹⁹⁹ Australian Human Rights Commission. 2014.

²⁰⁰ Burnside, Jullian and Reynolds, Daniel. 2014. "In Australia, animals have better rights than Asylum Seekers" in *The Conversation* accessed July 3rd.

²⁰¹ Scraton, Phil. 2009. "Protests and 'Riots' in the Violent Institution" in *The Violence of Incarceration* edited by Phil Scraton and Jude McCulloch, New York Routledge 2009.

In Australian immigration detention facilities the physical environment and the punitive attitudes of some immigration officials and guards foster a situation of criminalisation, dehumanisation and disempowerment for detainees. There are widespread reports of restrictive administrative procedures, including frequent room and body searches. Headcounts and use of force by armed and uniformed guards are widespread.²⁰² In 2015 a report from Wickham Point detention centre in Australia found twice daily head counts occurring at 5am and 10pm caused considerable distress amongst detainees and frequent disruption to sleep, particularly for families with young children.²⁰³ Frequent complaints by detainees feeling that they felt like they were being treated as criminals have emerged through reports.²⁰⁴ One detainee remarked “*two weeks ago I was going to Melaleuca [psychology service] but they wanted to put me in handcuffs. I refused because ‘what would people think? I am not a criminal’*”.²⁰⁵ In another report from Australia, detainees described punitive responses to acts of protest, including self-harm. They spoke of being held in isolation and solitary confinement within the detention centre, in rooms or under constant video surveillance. One participant reported “*the officers they put us too easily into isolation for many months, because no-one knew. For two years we did not have any visitors, nothing. They did anything they wanted to us. Anything*”.²⁰⁶

One worker from the Australian-run immigration detention centre on Nauru reported in an interview with this author “*the people in the place of authority had so much power over the decision of these people’s lives. But they didn’t know what they were doing and often gave conflicting and differing information.*”²⁰⁷ Working with unaccompanied minors, this worker spoke of the extensive surveillance and security constraints the children faced. He spoke of how they could not go more than ten metres to the laundry without being accompanied by a security guard. “*They are told what they*

p.61.

²⁰² Dudley. 2003.

²⁰³ Elliot and Gunasekera. 2016. p.4.

²⁰⁴ Australian Human Rights Commission. 2014. and Jesuit Refugee Service. 2010.

²⁰⁵ 18 year old. as reported in Elliot and Gunasekera. 2016. p.11.

²⁰⁶ Coffey et al. 2010. 2074

²⁰⁷ Interview with Nauru worker A. 2016.

can do, but mostly they are told what they cannot do...literally the only power they have is over their own body".²⁰⁸ Their power was reduced to such an extent that the only decision-making influence they had was over their own bodies. This worker considered that self-harm was an exercise to regain self-control and agency. In his opinion he saw there was a direct correlation between high levels of surveillance and a lack of autonomy with incidents of self-harm. Another worker reported *"there appears to be an absence of independence, ability/avenues to advocate and achieve results, and sense of control over one's life which greatly impacts on an individual's sense of purpose and ability to future plan. This coupled with a grossly inadequate health service appears to be a recipe for self-harm... [acts of self-harm] can be viewed as the physical enactment of this hopelessness, or an attempt to regain a sense of control"*.²⁰⁹

Returning once more to Motz and Straker's notion of self-harm as identity reclamation, the powerlessness and dehumanisation of immigration detention are very likely to cause high rates of self-harm. Further self-harm in this context can be viewed as resistance against the dehumanisation and powerlessness of incarceration. The act of self-harm is one through which power and control is enacted onto the body. Self-harm must be viewed as a political statement reinforcing *"I am human and I matter"*.²¹⁰

Exploring resistance in Australian immigration detention centres, philosopher and social worker Lucy Fiske writes about bodies being quite literally sites where the exercise of state sovereignty is played out – detainees' bodies become a site of reclamation of the *"sovereignty of the self"*.²¹¹ Through this process Fiske argues, the legitimacy of the state is called into question. The mere fact that bodies act in conditions of totalising power forms the basis of this delegitimisation. As Butler states *"...political claims are made by bodies as they appear and act, as they refuse and as they persist under conditions in which that fact alone is taken to be an act of*

²⁰⁸ Interview with Nauru worker A. 2016.

²⁰⁹ Interview with Nauru worker B. 2016.

²¹⁰ conversation with Professor Manfred Nowak, Venice Italy. January 2016.

²¹¹ Fiske. 2012. p.199.

deligitimization of the state”.²¹² In her ground-breaking research Fiske interviews ex-detainees from Woomera detention centre in Australia and focuses on building a narrative from the detainees themselves about the protest and solidarity movements within detention. This is a simple, yet radical premise which confronts and calls into question the public discourse on refugees which is controlled by largely anti-immigration politicians and media outlets. Fiske’s aims are to enrich and enliven discourses surrounding immigration detainees and to demonstrate, through the voices of detainees themselves, that networks of resistance exist, along with high levels of both solidarity and despair. The result of such a process is that detainees are re-humanised and not just depicted as passive victims accepting their situations of injustice. Fiske explores violent and self-harm protests, although in her interviews with ex-detainees general acts of self-harm are also a prominent feature.

Fiske interviewed an ex-detainee called Sam²¹³ who spoke about self-harm. His words describe what he calls the self-actualising effect of self-harm:

“People’s situation in detention was that you were the lost person, the forgotten person, you don’t exist, you cannot change anything and you have no power over anything. So, self-harm in most cases wasn’t a planned thing. It was in most cases out of frustration and it was good in a way that people feel they are real again, they exist, they have power over something – their body. So blood always has a very powerful message and when people see they can get over their fear to do something, certain thing, harsh thing, they come back to that colour of existence...I have power. I can do things. So I was calling that self-actualisation”.²¹⁴

These powerful words highlight the identity-forming power of self-harm in a context where life has been so dehumanised. They strongly echo the view of psychoanalysts Motz and Straker that self-harm is a reassurance of existence in the face

²¹² Butler. 2012. p.124.

²¹³ Sam is not this detainees ‘real name. He chose this name when being interviewed by Lucy Fiske in order to retain his anonymity please see Fiske. 2012.

²¹⁴ Fiske. 2012. p.123

of a fragile sense of self. It is paradoxically a triumph of survival in the face an environment which seeks to dehumanise and delegitimise life “...when I’m in a dream world and not here and that’s the only way of reassuring myself that I am physical”.²¹⁵ This concrete reassurance of existence represents a triumph of survival and centres the mind as a place of control and agency.

Another interview conducted by Fiske with an ex-detainee named Issaq²¹⁶ reveals the personal power self-harm provided for him:

“I wanted to have something to look forward, then slash my wrists and see what’s going to happen. You know what I mean? Just something out of ordinary. I mean I know that I’m sitting here and watching that tree, nothing going to happen. I won’t get a visa. I won’t get out of here and everyday going to be the same. But I want to change it. The only power I have to just slash my wrists and see what’s going to happen after it. Will it cause attention or not? Will it, you know? You’ll hope for change. To use all what you have to change – I mean, not to get out of detention, but change what’s happening now. I mean, I’m sitting here, by doing nothing, nothing would change. But by slashing my wrists there are going to be some action at least. At least five officers are going to come out of the door, nurse is going to come and all these things. Something going to happen out of ordinary and in terms of self harm that was the thing I was looking for. All the power that you have. That’s all the power, not just a little of it. That’s all you have.”²¹⁷

Issaq describes self-harm as an important act of agency and a reclamation of power in a situation where he had no other means to exercise control over his detention and an uncertain visa situation. Self-harm provided an existential function, a way to exercise agency within a restrictive environment where other methods of control were not

²¹⁵ Straker. 2006.

²¹⁶ Isaac is not this detainees’ real name. He chose this name when being interviewed by Lucy Fiske in order to retain his anonymity please see Fiske. 2012.

²¹⁷ Fiske. 2012. pp.197-198.

available.²¹⁸ In this sense self-harm can be seen, Motz and Straker argue, as “*an attempt to put into place the elements involved in building a self-structure*”.²¹⁹ Issaq knew his power as a detainee was limited. He knew that by self-harming he was not going to get a visa or get out of detention. His future was uncertain and very much out of his own control.

As one worker from Nauru, interviewed for this thesis observed, “*the hardest thing about detention is the uncertainty. There is a massive void about any information, with people left waiting for undetermined amounts of time before asylum outcomes are given.*” This worker described a situation in which immigration officials told the unaccompanied minors with whom he was working that they were going to receive an asylum outcome in a month’s time. The worker stated how anxious the boys had been about their visa process and how at points the uncertainty of not knowing their futures seemed to reach unbearable levels, manifesting in increased tensions, conflict and self-harm. After being told about the probable outcome date this worker noted that the atmosphere in the camp visibly changed, self-harm incidents immediately decreased and the energy of the camp was lighter. He stated that just having a date when *any* outcome would be given, either positive or negative, was a relief. Just to know one way or another the outcome of their claims and thus their potential release from immigration detention was a comfort. A week later the unaccompanied minors were told that they were not to be told on the promised date and as a result “*things went back to the way they were*”.²²⁰

In immigration detention, detainees have lost most means through which to communicate and act autonomously. As illustrated in this chapter, dehumanisation, criminalisation and frustration are common experiences of detainees. When official and traditional forms of communication are shut off, the body becomes a valuable resource with which to communicate. The work of Motz and Straker illustrate that self-harm is an example of this. The body has become the site where quite literally sovereign power

²¹⁸ Fiske. 2012. p.122.

²¹⁹ Straker. 2006.

is fought. Through acts of self-harm self-sovereignty is enacted as detainees fight to retain some authority and control.

Conclusion

Within immigration detention, self-harm should be viewed in the context of systemic violence and human rights violations. To fully understand its complexity it must be approached via analysis of sovereign power, resistance and agency. When this multi-disciplinary approach is taken, it becomes apparent that self-harm is more than just a symptom of mental-ill health. It is a form of communication, an act of resistance and a protest at the injustice of incarceration.

This thesis has considered the growing body of clinical and other research outlining the negative impact of immigration detention on detainees. This research is valuable. It has strategically and necessarily focused on the causal links between immigration detention and mental ill-health, but there are limitations to this research. Isolation and politics continue to prevent widespread access to detained populations. Therefore there are simply not enough data focusing specifically on self-harm in its own right. Research which does exist does not explore the roles self-harm fulfils within immigration detention and how the behaviour is viewed by its enactor. The voices of Sam and Issaq documented in Chapter Five demonstrate this point. They highlight the complexity of self-harm and how easily it can be misunderstood without first-hand accounts from detainees themselves.

Throughout this thesis empirical data from interviews, research and quotes from detainees have been considered in the light of psychoanalytic theories of self-harm and political science, philosophical and queer theories of power, resistance and agency. Alongside empirical data, psychoanalytic theories have allowed a deeper understanding of the place and function of self-harm within immigration detention. Self-harm is a

²²⁰ Interview with Nauru worker A. 2016.

legitimate form of constructive communication and identity formation in the face of seemingly hopeless fragility. These insights have been examined in parallel with an analysis of sovereign power, resistance and agency.

By applying theoretical frameworks of sovereign power this thesis has sought to question how the actions of immigration detainees, including acts of self-harm, can be understood. Agamben provides useful insight into how sovereign power creates and draws lines between different forms of life, ultimately deciding who has, and has not, access to human rights. His theory of 'bare life' existing within a 'state of exception' provides explanation of how sovereign power interacts and creates the concept of non-citizens. For all his contributions however, implicit in Agamben's work is the denial of political agency to those living bare lives of survival. As a result his theory does not provide adequate explanations for the complexity of action within immigration detention, because detainees are not given the ability to resist and protest their situations.

Whilst Edkins and Pin-Fat may argue that there is space for resistance in bare life through subversively 'taking on' bare life, the space is but a sliver and pertains only to acts of lip-sewing, excluding general acts of self-harm.

Foucault and Butler, on the other hand, provide a framework through which one may simultaneously recognise the structural violence experienced by detainees and also their ability to resist and protest it. Foucault's deep understanding of power provides space to see detainees as engaged with power rather than just passive acceptors of the sovereign's control over them. While not necessarily able to change their situations through their actions, they can still be recognised as political agents.

Building on Foucault's understanding of power, Butler's definition of vulnerability enables movement away from unhelpful dichotomies of powerful/powerless. Vulnerability exists beyond weakness and resistance is inextricable from it. Complementing Butler's theories are narrative ideas of 'everyday resistance' which

assume that, when gross and violent acts of injustice exist, resistance is always present. Through this process resistance is redefined. In the context of immigration detention, acts of resistance can be recognised even when they do not change the status quo. Furthermore in contexts of violence, resistance takes on non-conventional modalities, self-harm being but one example.

A key element of this thesis is the re-politicisation of the body. Within immigration detention the body can be seen as a valuable resource and a tool of last resort. Here the work of Puggioni is highly influential. When official mechanisms of communication have been cut off, the body becomes a way to communicate that which is otherwise not heard. Instead of being silenced, detainees' are able to 'speak' through their bodies. In this regard, detainees' bodies are literal sites where sovereign power is fought. The work of Fiske helps conceive of self-harm as an act of self-sovereignty in the context of the dehumanisation and disempowerment experienced by detainees in detention.

It takes a multi-disciplinary lens to understand self-harm in immigration detention. This research has sought to provoke a more nuanced and structural understanding of self-harm, one which also challenges the complicit reinforcement of dominant power structures arising from traditional readings of self-harm. How we understand self-harm in immigration detention is no minor point. It speaks volumes about how we perceive not only the actions of those in detention, but also the actors themselves. The risk of ignoring this complexity is significant with detainees too easily pathologised and power imbalances reinforced. From policy makers and politicians to medical practitioners and human rights advocates, this is too great a risk to take.

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