

Violence in the lives of homeless women in the city of São Paulo, Brazil

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This survey aimed to bring out reflections regarding situations of violence in the lives of women who were living on the streets in the city of São Paulo, Brazil. During the fieldwork, the researcher interacted with about 100 homeless women and recorded perceptions in a field diary. Subsequently, 22 women were interviewed in a shelter. We gathered from the results that these women's homeless condition was related to violence suffered within the domestic and family context, insufficient income to ensure their own and their children's needs and breakdown of social ties. On the streets, they experienced violence in territorial disputes, gender oppression, lack of privacy, drug trafficking and hygienist practices. This study deconstructed the stereotypes of fragility and dependence among homeless women. In the relational process, they too were instigators of disputes over space and power.

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Introduction

Within Brazil, a specific approach to the peculiarities of women who live in the streets is still incipient, including in academic circles, in which we find few publications on the issue. There are fewer of them on the streets than men, with homeless women accounting for some 18% of homeless people at national level¹ and for 13% in the city of São Paulo, with 1,885 women out of a total of 14,478 adults or elderly on the streets².

In New York, a survey involving 141 homeless women revealed a high level of physical violence and rape; 21 women reported that they had been raped; 42 had been raped and attacked and 62 had been attacked but never suffered sexual abuse. Most of their health care needs resulted from this reality, whether for care for physical trauma or for the associated mental health problems³.

A study conducted in Los Angeles with 974 homeless women revealed that 13% reported a rape incident during the previous year. Women who experienced this type of violence presented a worse general state of health, with an increase in gynecological symptoms, an increase in the use and abuse of alcohol and other drugs and a marked increase in cases of depression⁴. In the city of

Toronto in Canada, Ambrosio et al.⁵ confirmed that 43.3% of the women of the sample had been victims of rape in the previous year, against 14.1% of men.

Cohort studies conducted in Toronto in Canada on the risk of death among homeless women analyzed the data compared with other similar publications from the cities of Montreal, Copenhagen, Boston, New York and Brighton. The data revealed that these women, aged between 18 and 44, had a chance of dying between 8–30 times greater than women in the same age group among the general population. For women aged over 44, this index fell to an average of a chance of dying 1.5 times greater. These deaths are related to mental illness, drug addiction and overdoses, infection with HIV, tuberculosis and traumas and greater difficulty in accessing quality health care and treatment⁶.

On the basis of reports by homeless women in Canada, Daisk⁷ described that for them, health and their health requirements had a holistic sense. They reported concerns with physical illnesses, mental health, addictions and stress. Life in hostels encouraged the propagation of illnesses and lack of privacy. Violence was pressing in shelters and on the streets, leading to constant fear. They suffered emotionally due to social exclusion and depersonalization. They wanted to work and enjoy safe housing but felt themselves to be trapped in a dehumanizing system.

Within Brazil, official information on the violence suffered by women in general is underreported. They are afraid to denounce the aggressor, since they do not trust the security which the State should offer them. The same is true of homeless women, albeit to a more serious degree, but we still do not know the real dimension of this problem. We may observe empirically that for women, living on the streets is permeated by the need to build relationships which guarantee the viability of their daily life, since when alone, they are more vulnerable to the violence present on the streets. We do not intend to place women in a fragile and dependent condition or as victims, since they are on the streets. Life on the streets does not permit clichés; it is multiple, complex and is the locus of conflict and social contradiction; indeed, living on and from the streets is violence in itself and highlights the inequality of rights within a society.

This article is a thematic extract from the doctoral thesis “Homeless women in the city of São Paulo: a look at life trajectories”, defended in the Postgraduate Nursing Program of the Federal University of São Paulo⁸. It was constructed with the objective of reflecting on situations of violence in the lives of women living on the streets, perhaps to support criticism on this question which covers three major themes which, when they occur together, highlight social equality: women, homelessness, violence.

Methodological process

The research study was carried out through a cartographic method which aimed to accompany a process, more than representing an object. The cartographer seeks to study life in movement, i.e. to analyze the process of constitution of new realities, since social landscapes are mappable. In the sphere of micro-politics, he/she values the unforeseeable and uncontrollable developments, which imperceptibly transfigure the current landscape⁹.

For the cartographer, fieldwork requires the inhabiting of a territory which in principle, he/she does not inhabit. To this extent, cartography comes close to ethnographic research. The researcher/cartographer participates in the lives of the people which he/she studies, modifying and being modified by the experience¹⁰.

Cartography uses the Foucaultian analysis of discourse, in which we must maintain the commitment to consider two manifestations of discourse: the enunciable and the visible. The enunciable consists of the word, of language and of writing. The visible consists of social practices and of the objects created to direct the behavior of the subject¹¹. As such, in this study, we consider not only the discourses of the women with whom we interact, but above all, the production of meanings and developments, which the territory of the street itself produces by being inhabited by people.

The study was constructed with two scenarios. The first was developed in the central region of the city of São Paulo during the period from May 2010 to March 2011. Three districts with the largest number of people living on the streets, República, Sé and Santa Cecília, were chosen, all located in the central region of the city. The second, at a Reception Centre which shelters homeless men and women, between April and July 2011. This is located close to the center of the city and is termed *Centro de Acolhida tipo II* [Type II Reception Centre] by the Municipal Authority of São Paulo, since it operates 24 hours a day. The service has capacity to shelter 172 men and 50 women, divided into eight male dormitories and one female dormitory.

According to the notes in the field diary, during the first phase of the study, there were observations and/or interaction with around 100 women. In the social center, we interviewed 22 women, out of the universe of 49 housed during that period. The choice of recording only the interviews with women who were at the hostel was made due to the difficulty of carrying out this action at locations around the city. The noise, lack of privacy, interference from passers-by and shyness of the subjects were factors which we regarded as compromising the quality of data collection. The only criteria for inclusion for carrying out the studies were being a woman, being aged over 18 and living on the streets.

It must be highlighted that the recorded narratives did not diverge from the recordings in the field diary. The ability to carry on a dialogue with these women, seeking immersion in our object of study, was developed gradually. Without the systematic observation of their lives in the streets, we certainly would not have had the sensitivity to grasp the developments present in their discourses.

With regard to the ethical procedures relating to scientific research in the field of health, as well as vigorous vigilance regarding conditions of use of techniques and their adaptation to the question posed, we point out that these were present at every stage of the study. The research project was submitted to the Research Ethics Committee (CEP) of the Federal University of São Paulo and approved with opinion 0027/11.

Results

We observed that the life histories prior to taking to the streets maintained their individuality, despite having strong points of convergence. These were lives permeated by poverty, experiences of violence, mental disturbances, addiction to alcohol and other drugs, lack of love and the breaking of family and social ties. Each woman whom we met had experienced at least two of these situations.

Violence appeared in the discourses as a cross-cutting theme with major impact on the deterioration of social relations, which led to them taking to the streets. Many were accounts of violence perpetrated by their own partners.

These women had acquired a certain tolerance to non-physical forms of violence. When questioned with regard to the violence that they suffered, on the streets or off them, they almost always described situations of physical and/or sexual aggression. However, as they spoke, many other situations of psychological and verbal violence and negligence were reported as facts of lesser importance, even if they caused major suffering.

“What happened was that he stabbed me with a knife below the breast and I went to hospital. After they treated me, when I was at the hospital with all the stitches, the social worker came to talk to me and asked how this had happened. And then I talked to her and all the time she said, but this is your choice, after you recover are you going home? And every time that you come back, you come back with a problem. You’re doing fine then you come back because he hit you or because he threw you out or because he stabbed you. And then I said that I wasn’t going back again and I really didn’t go. I didn’t go, I spoke with my normal family by phone, but I didn’t go and I’m on the streets” . **(Paula, 41, on the streets for the last 10 years)**

Understanding the subjection, at times extended, of a marital relationship characterized by violence, requires a careful analysis of the living conditions acting on the respective family. Despite the violence and suffering, the majority of the women experienced difficulties in confronting and turning around their own life situation. They highlighted their lack of financial independence for supporting themselves and their children and the lack of family and/or institutional support for confronting the situation. Many found it difficult to work, due to the prohibition of the partner or due to the need to care for their children. They lived under threats of violence or even death, which paralyzed them and perpetuated their sufferings beside the aggressor. They also reported that the love which they felt or had felt for their partner had kept alive the hope that the violence was a temporary fact would be overcome by the couple. For some of these women, life on the streets was the solution found for escaping from domestic violence.

For other women, the use of drugs was highlighted as the principal factor responsible for their condition of living on the streets. Their family links gradually deteriorated and their commitment to work, study and childcare was compromised; they were left more exposed to violence and crime; in addition to being more vulnerable to sexually transmitted diseases, unwanted pregnancy and prostitution. Drug addiction created a self-feeding cycle and progressively degraded the living conditions of the woman. The outcome of consuming illegal

drugs was almost always loss of custody of their children, which caused suffering and sadness and which increased consumption of drugs and the social vulnerability of the woman.

“So they killed him [her partner]. The guy doing the assault was drugged, he tried to calm him down and took lots of bullets. And after that I started to go to the shelters. Well I’m summarizing because the story is very long and sad and I don’t even like to remember it” .

(Vanessa, 34, pregnant, on the streets for 2 years, 3 children)

The women described the principal forms of physical violence experienced on the nights that they spent on the streets. The first was the violence practiced by individuals or groups intolerant of the situation of poverty experienced by people living on the streets, they recounted stories of cruel aggression and death, of violence for its own sake. The second was the violence perpetrated by the individuals living on the streets themselves, with principal motivations debts with drug traffickers, disputes for territory, petty thefts, marital infidelity and personal disagreements. The third, a type of planned violence of “hygienist” type, practiced by the police, individuals hired by traders or residents, who felt themselves to be disadvantaged by the presence of the people living on the streets in the vicinity of homes, businesses, monuments and scenic spots of the city. Lastly, sexual violence, frequently reported by the women who took part in the study, almost always perpetrated by men, whether on the streets or not, with the potential to cause irreparable physical and mental harm to the woman.

“At night, I slept on the streets, at times I didn’t even sleep. At times I stayed awake the whole night out of fear. As happened several times on the television, people, beggars who were sleeping on the pavement and people went past and set fire to them, everything. Apart from other things which they can do, there are also men and women who can abuse you or kill you for nothing” . **(Vitória, 25, on the streets for the last 8 years)**

“I’ve already stayed on the streets. The night that I slept on the streets, I felt like a cockroach. I couldn’t sleep, I saw a guy lie down in the square and I was completely terrified” . **(Paula, 41, on the streets for the last 10 years)**

The universe of female crack users has its own particular characteristics. The women report that they are concentrated in specific regions of the center of the city, where access to the drug was guaranteed. In general, all of the money which they collected, whether through work, social benefit, donation and/or theft was consumed as drugs. Over time, they ceased to be concerned with hygiene, eating and resting. This caused situations of violence to proliferate, since this occurred between the users of the drugs themselves, between users and traffickers and between users and the police.

“I wasn’t even supposed to be here today at this table recounting my life, I was supposed to have died because for people living on the streets, I was weaker than cardboard, and when we

get *nóia*^c [to the paranoid stage] it becomes even worse. There's something in us that when you smoke makes you want more and more and more and then you don't eat, you don't sleep, you don't stop, you go back and forth in the breeze" . **(Madalena, 24, on the streets for the last 2 years)**

The limitations imposed by the rules of each service and the difficulties of coexistence caused dissatisfaction in some women. They were obliged to adapt their habits and bodily care, hygiene, eating habits, etc. to the conditions offered by the services and to the rules which they had.

"It's sad, it's cruel, because you have to share your space with the other women. They don't respect you. If the light is supposed to stay switched on, they want to turn it off. At bedtime, they start shouting, swearing, fighting, and arguing. They start throwing things out of the window. We need privacy and you don't get it here. For them, everything is pulling a knife. You can't say anything without them cursing and swearing." . **(Beatriz, 42, on the streets for the last 6 years)**

"I have this conviction that I'm in a semi-open prison regime. That's what I feel, that I'm imprisoned. Imprisoned for hours, Imprisoned for saying no, imprisoned for asking, asking can I please" . **(Daniela, 33, on the streets for the last 9 months)**

We also heard stories of physical violence and threats made by their own partners in relationships which began on the streets. Out of fear and because they liked the aggressor, these women subjected themselves to maintaining this type of relationship.

"He hit me there close to the luggage rack, there close to the table, there close to the television room, everyone saw it. And the others told me, go and talk to the monitor and I became afraid of him doing something to me. So I kept silent" . **(Juliana, 49, on the streets for more than 10 years)**

Contrary to what we expected to find, the women did not report that they started a relationship with the aim of finding someone who would protect them, for this they only cultivated friendships. They had sexual relationships when they felt attracted, when they conquered or were conquered, when they felt desire.

Discussion

On the basis of the results found and the theoretical-conceptual route taken by us, we have proposed here a possibility, among so many others, of understanding situations of violence,

^c Term derived from the word *paranóia*, commonly used on the streets to designate individuals at an advanced stage of drug addiction, principally to crack.

feelings, difficulties and developments which we shared with the women who formed part of the study.

We know that all knowledge produced is the result of a game of compromises, stances and ideas. It appears as the effect of the collision and confrontation with heterogeneous experiences, like “a spark between two swords” which, on casting bundles of light on horizons, eliminates certain outlines and at the same time, shades certain landscapes. And in this case, all knowledge is always lack of knowledge¹².

This study reinforced the challenge of overcoming the conception regarding life on the streets as a direct consequence of lack of housing and income. In accordance with Snow and Anderson¹³, the analysis of the trajectories, routes and reported life histories increases the complexity and at the same time, confirms that there is a set of actions and facts, structural and biographical components which, when combined, have the result of leading a woman to a life on the streets.

In the life trajectories of homeless women, we highlight the clashes of forces and powers in a family context. Relatives and partners of both sexes attempted to exercise disciplinary functions over their lives, restricting their choices or even hindering them from achieving autonomy. Placing women in a condition of dependency reiterated and reinforce the power exercised. We speak of power struggles in the symbolic, but also in the physical sense. Many of the women whom we met bore the scars of violence suffered in their minds and on their bodies. For Foucault¹⁴, marital relationships presented vestiges of agonistic games between the involved parties. Movements of power disputes in forms of reciprocity or equality against the desire to express superiority over the other.

In the relationship process, women also played a part in the dispute for space and power, going so far as to base themselves on stereotypes of fragility in order to subvert situations in their favor. However, insofar as they exposed their adversities and resisted domination, they raped and were raped. These life dynamics, permeated by disparate expressions of force, were saturated by the exhaustion of bodies and minds. In this sense, some of the women whom we heard had reached the limits of the violence that they were able to tolerate in a domestic and/or family context. Due to a lack of other options, they chose to abandon their homes and try life on the streets, pointing to the fragility of execution of the *Maria da Penha Law* [Law against domestic violence].

These data resemble those found in other studies¹⁵⁻¹⁶, in which life on the streets for a woman was frequently the result of aggression and violence, including sexual violence, practiced within the domestic and family context. The breaking of the social ties and the absence of others sufficiently strong to support the reorganization of their lives, added to the shortage of financial resources and absence of institutions which guaranteed them safety and protection, molded their path, to the condition of living on the streets. In this way, we consider that it is necessary to transcend the discussion on the condition of being on the streets for women, through the prism of income and housing vulnerabilities.

Like Frangella¹⁷, we heard life stories recounted with an irregular chronology, but which denoted mechanisms of intelligibility created by the narrators to signify their trajectories. Over the

course of the conversation, the times of discourses began to be superimposed, making it possible to delineate the events and feelings present in the life stories.

In some cases, principally for the women who had spent more time on the streets, we noted a tendency to construct an adaptive, resilient story, which prized the capacity to find solutions to extreme situations¹⁸. And with this, they appreciated women's knowledge of the streets.

Their presence on the streets was almost always narrated as the consequence of specific events. There was an appreciation of the most notable facts preceding the loss or abandonment of their homes, to the detriment of a progressive sequence of weakening and social ruptures. Some had lacked family references, care and love since childhood. They almost always attributed more relevance to subjective and sentimental deficiencies than to material privations, even if these had excessively permeated their living conditions. From this perspective, Ralston¹⁹ reinforces the importance of listening to homeless women about their own needs and understanding the marks that their life trajectories have left in the process.

As a point of convergence in their life trajectories, the women shared the inadequacy of income generating capacity for maintaining their domestic spaces and houses²⁰. Even though abandoning their homes had been an option, they had not found solutions for rebuilding another one. Achieving the freedom and autonomy of which they had proven more difficult than expected.

Starting from the gender angle, we surmised that men and women presented substantial differences in the ways in which they lived and internalized the situation of being on the streets^{8,21}. Among these, we highlight that for men, the street was the solution to a terminal condition of rupture and social degradation; with them keeping alive the desire to regain their lost living conditions²¹. For some women, however, it represented an initial solution for situations of violence and dissatisfaction with their domestic space. They did not cherish the desire of returning to the lost or abandoned home, but of constructing a new one. Lastly, the experience of having been victimized allowed them to confer meanings on their experience and to construct themselves²².

As in Frangella¹⁷, we found that violence was one of the intrinsic elements of the world of the homeless, whether implicitly or explicitly. Violence may be focused on territorial conflicts, on sexual practices or gender oppression among the homeless themselves, in aggressive material and symbolic interventions, materialized by urbanization agents, or in discourse, in terms of the recurrent offence directed against this segment, feeding the stigmatizing cycle of their image.

Despite the violence experienced by women on the streets, we find in this study that a majority chose to guarantee their own safety. This goes against the findings of Tiene²³, who highlighted a certain necessary link to one or more homeless men for their protection. They certainly subverted stereotypes of being fragile and dependent, highlighting another conception of conjugal relationships in the streets. They chose their partners on the basis of physical attraction, sexual desire and affection, affinity of life objectives or similarities in street lifestyles. They reinforced the idea of being able to choose and even change partner easily, due to the higher number of men living on the streets. In this scenario, they were less tolerant of the aggression practiced by their companions. They were no longer afraid of losing their domestic space as had

previously been true. At the same time, they reported fears and difficulties in breaking with a violent relationship, when threatened.

Among the lifestyles adopted by homeless women, we highlight female crack users and inhabitants of *Cracolândia* [An area of central São Paulo in which crack users are concentrated] as those most exposed and vulnerable to violence, since using crack on the streets was more than a chemical dependence, representing the incorporation of specific lifestyles²⁴. They found themselves inserted into complex contexts of drug trafficking, territorial disputes, legal or illegal strategies for securing money and maintaining dependents, prostitution and neglect of their bodies and health.

This was the only group of women who were substantially associated with one or more men in order to guarantee their safety and protection. In the relationship, they shared money with their partner(s) or people with whom they coexisted to consume crack. In general, they had a little affinity with associating with other women. Each woman maintained a certain range of strategies and social ties, which guaranteed the maintenance of her addiction and her safety.

The vulnerability of this group of women lay not only in the intrinsic dynamics of crack lifestyles, but they were above all the targets of discrimination and social intolerance regarding the use of drugs and the fact that they lived at specific points of the city.

To coercion by the State must be added the actions of intolerant groups or private security agents who frequently assassinate people living on the streets. This is the extreme moment in which representations and practices lead to the exclusion of the other, claimed as and having been the incarnation of danger and hence subject to elimination²⁵.

In this way, understanding the situation in the streets of women is subject to the need of highlighting the dynamics of power and violence in which they are inserted, since, as Foucault²⁶ stresses, powers are not located in any specific point of the social structure. These function as a network of devices or mechanisms which nothing or nobody escapes, for which no possible exterior exists, or limits or boundaries, since power does not exist in isolation and is always established through a practice or power relationship.

Considerations and path to be followed

As professionals catering to this population, we must be alert to the impact which lifestyles on the street have on the health–sickness–care process for these individuals. This study has reinforced our beliefs regarding the practice of ethical and ontological care, with the plasticity of respecting wills and adapting to the realities of each individual. The complexity of the situation on the streets for women requires the expansion of the very concept of care, incorporating interdisciplinarity and intersectoriality into its essence.

The coexistence with these women living on the streets expanded our vision with regard to the problem of violence in an urban space. It reported that despite the peculiarities of the female universe related to their needs, desires and capacities, there is no consistent inclusion of these differences in the policies and programs for attending homeless populations living on the streets. We argue for a greater understanding of the phenomenon in order to expand the discussion with

the various actors involved in the process of formulating policies, assistant strategies and social empowerment.

The Maria da Penha Law represented an advance in attempting to curb family and domestic violence against women, but it must still be enforced with greater rigor. Women who are victims of violence require effective protection in order to feel encouraged to denounce the aggressor in the middle of threats and risks of being raped again and even killed. In order to achieve this, the reply of the State and of the Courts must be more agile in punishing aggressors and women must have alternatives for escaping domestic violence, in the absence of family support and autonomous income, without life on the streets presenting itself to them as the only possibility.

For people living on the streets, we need to include within care possibilities for escaping this condition of life, whenever they so desire. This situation requires synergies, as a minimum, between the policies and actions of the areas of social assistance and health, as well as the incorporation of formal and informal assistance networks offered by other sectors of civil and state society, which also include circuits linked to religion, art, culture, education, labor, sport and social and political movements, among many others. The sum of these convergent actions may increase the chances of alternatives to the streets for this population.

With regard to the area of health, in particular Basic Health Care, We argue for the extension of the special *Estratégia da Saúde da Família* [Family Health Strategy] (ESF) to serve the homeless population on the streets. In its few years of action in the city of São Paulo, the advances are notable, principally in guaranteeing access to health services and the incorporation of street lifestyles into care practices. We highlight the need to make the service hours of teams more flexible. Nighttime actions, principally in hostels, would expand the coverage of the population and the impact of actions for promoting health. In our view, the recently launched a national model of street clinics, while representing an advance in the cities which are beginning a specific approach to street populations, could represent a setback for São Paulo if it does not incorporate longitudinal care into its strategies.

Associated with work on basic health care, it is necessary to extend the health care network specific to mental health, directing actions towards the most frequent social problems and contexts on the streets. In this area, the greatest challenge is the treatment of addiction to alcohol and other drugs, since this disease is related to the onset and chronicity of the condition on the streets of many people.

We believe that the infrastructure intended for people living on the streets, should contribute with local practices of a community character. Being smaller, aimed at a small number of individuals with the aim of favoring coexistence, sharing of experiences and the sum of potentialities. Large institutions run the risk of mass application of their actions, tending towards outsourcing and impersonality. This work demonstrated substantial differences between the causes of the phenomenon of “homelessness on the streets”, lifestyles, sources of suffering and bodily care between men and women. In this way, such differences must be considered in the creation and/or adaptation of spaces and actions aimed at homeless women.

Collaborators

The authors worked together on all stages of production of this manuscript.

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