







## Vulnerabilities of homeless women: social markers of gender and race/color\*

Vulnerabilidades de mulheres em situação de rua: marcadores sociais de gênero e raça/cor

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### ABSTRACT

**Objective:** to unveil the vulnerabilities of homeless women linked to the social markers of gender and race/color. **Methods:** qualitative study, developed with ten homeless women through participant observation, field diary, and sociodemographic questionnaire, systematized based on content analysis. **Results:** it was found that gender identity and race/color act as potentiators of the situation of vulnerability of women. It is believed that structural racism and machismo feed back into the streets and perpetuate themselves in a perverse cycle of denial of women's rights, which is potentiated by the omission of the State and extensive social and economic inequality. **Conclusion:** gender and race/color potentiate the vulnerabilities of homeless women that intersect precarious social conditions, denial of rights, and favor illness. **Contributions to practice:** to present information that enables reflections and creation of care strategies for homeless women, understood in their singularities. **Descriptors:** Homeless Persons; Social Vulnerability; Gender Studies; Racial Groups; Women.

### RESUMO

**Objetivo:** desvelar as vulnerabilidades de mulheres em situação de rua vinculadas aos marcadores sociais de gênero e raça/cor. **Métodos:** estudo qualitativo, desenvolvido com dez mulheres em situação de rua por meio de observação participante, diário de campo e aplicação de questionário sociodemográfico, sistematizados com base na análise de conteúdo. **Resultados:** verificou-se que a identidade de gênero e a raça/cor atuam como potencializadores da situação de vulnerabilidade das mulheres. Acredita-se que o racismo estrutural e o machismo se retroalimentam nas ruas e se perpetuam em um ciclo perverso de negação de direitos às mulheres, que se potencializa pela omissão do Estado e extensa desigualdade social e econômica. **Conclusão:** o gênero e a raça/cor potencializam as vulnerabilidades de mulheres em situação de rua que interseccionam as condições sociais precárias, a negação de direitos e favorecem o adoecimento. **Contribuições para a prática:** apresentar informações que possibilitem reflexões e criação de estratégias de cuidado dispensado às mulheres em situação de rua, compreendidas em suas singularidades. **Descritores:** Pessoas em Situação de Rua; Vulnerabilidade Social; Estudos de Gênero; Grupos Raciais; Mulheres.

## Introduction

The homeless population is composed of a heterogeneous public, which uses public spaces and degraded areas as forms of housing. Moreover, the group has many common characteristics, such as extreme poverty, the break or fragility of the family tie and the absence of conventional housing<sup>(1)</sup>. In this context, it is noted that being homeless is a complex task, since it is a locus of conflict and social contradictions, especially for the inequality of rights in relation to others who live in society<sup>(2)</sup>.

The characterization data of the Homeless Population from the 1<sup>st</sup> National Research Census on Homeless Population conducted in 2007/2008 in 71 Brazilian cities, identified a total of 31,922 people who are homeless. The prevalent profile of this group is composed by men (82%), black (67%), with low education (63.5%), being homeless for more than two years (48.4%)<sup>(3)</sup>. It is noteworthy that, despite being a numerical minority, homeless women are configured in a group that has potentialized vulnerability by inherent issues both in relation to gender identity and race/color, since women are exposed to various forms of violence and violations, such as racism, rape, physical, psychological, and emotional abuse<sup>(4-6)</sup>.

Thus, vulnerability, a term that will mediate the analyses of this study, is configured as an indicator of inequity and social inequality that, in a multidisciplinary concept, includes not only the detection of frailties of groups and individuals, but also the ability to cope with problems and/or diseases, including health problems<sup>(7)</sup>.

The issues raised in this study emerge based on theoretical assumptions that meet these issues as they strengthen the issues raised in this study emerge based on theoretical assumptions that meet these issues as they strengthen the necropolitical related to the homeless population, this population hegemonically black. Peripheral people and/or people in so-

cial vulnerability are those who suffer most from the omission of the State, and women in this context face numerous social and health issues, arising from issues of gender and race/color, aspects that make this work relevant by promoting these markers that directly impact the daily lives of women living on the streets<sup>(8)</sup>.

Besides the social issue, the study fills an important gap in the literature. In research conducted with the descriptors "homeless" and "women" and their respective correspondents in English in the Scientific Electronic Library Online (SciELO) and Medical Literature Analysis and Retrieval System Online (MEDLINE) were found 142 studies with related themes, however, none of them covered the content of the researchers' field diary, which reflects the uniqueness of the study. In this sense, this study aimed to unveil the vulnerabilities of homeless women linked to the social markers of gender and race/color.

## Methods

This is qualitative research developed with homeless women in the city of Feira de Santana, considered the second largest city in the state of Bahia, Brazil, with an estimated population of 556,642 inhabitants<sup>(9)</sup>.

The approach with the research participants occurred through the social project entitled "Cuidando da Maloca", which has proposed, since 2017, to develop voluntary and itinerant Nursing care for this population in the municipality studied, being awarded in 2021 by the Federal Council of Nursing of Brazil, becoming part of the set of Nursing Now Brazil Initiatives. The approach also occurred through the National Movement of the Street Population in Feira de Santana, of which one of the researchers is a member. This civil society collective has as a hallmark the living in the streets, the participation in social control, integrating people who are homeless with the public administration, to seek solutions to social problems

of the communities living on the streets, building the occupation of rights spaces - such as assemblies and councils. It values the scientific production, to expand the knowledge and research on the theme and carries out monitoring of the effectiveness of the rights assisted to these people.

Data production occurred between the months of March and May 2019 through participant observation with records in a field diary and a socio-demographic questionnaire. The collection was carried out by two researchers, being a PhD in nursing, with extensive experience in women's health and a nurse, master's student, with important production of research and extension with homeless people.

The field diary is configured as a personal record of observations that can be used in research to record all findings inherent to social and environmental interactions, behaviors, reactions, and feelings<sup>(10)</sup>. Thus, it was a fundamental instrument for observation and systematic notes about the daily lives of homeless women. The sociodemographic questionnaire had as its primary purpose the characterization of the group studied with respect to the following variables: race/color, marital status, education, number of children and time being homeless.

The research locus had 237 homeless people. At the time of recruitment there was approach with 13 homeless women, who were invited to participate in the research, and, of these, 10 women voluntarily accepted and signed the Informed Consent Form. The non-acceptance by three women to participate in the research was due to the dynamics of the street context that they lived now, making it impossible for them to participate. We included women 18 years of age or older who were homeless. Women that appeared to show signs of psychological and/or emotional alterations that made it impossible for them to interact with the researcher were excluded.

The sociodemographic data were tabulated in Microsoft Excel spreadsheet, model 2020, and the

field diary notes were transformed into texts "generating uniform and standardized information"<sup>(10:558)</sup>. Data systematization occurred according to the proposal of thematic analysis during the stages of pre-analysis, analytical description, and inferential interpretation<sup>(11)</sup>. The analysis of the empirical material was guided by the theoretical contribution of vulnerability related to the social markers of gender and race/color. Thus, the discriminatory processes are not understood dichotomously and do not propose mere addition of discriminations, but rather, encompass the complexities of the crossing of these discriminations, enabling the understanding of the specific conditions that result from them<sup>(12)</sup>.

In order to maintain anonymity, the participants were given the right to choose a codename, which included names of squares in the city of Feira de Santana-BA, Brazil, with which they could identify themselves due to the coexistence, singularities, relationships, and affections they built in these spaces. To differentiate between those who chose the same codename, numbers were used in increasing order.

The study complied with resolutions 466/12 and 510/2016 of the National Health Council and the Declaration of Helsinki, which deal with the involvement of human beings in research. Thus, the project was approved by the Research Ethics Committee of the State University of Feira de Santana, under opinion 2,686,905/2018 and Certificate of Ethical Appreciation Presentation N°. 9615815.0.0000.0053.

## Results

Most of the participants were self-described as: black; single; between 24 and 46 years old; economically active; with elementary school education; having more than one child; born and living in Feira de Santana-BA; and being homeless for more than nine years. The sociodemographic characteristics of the participants are presented in Figure 1.

Participants	Race/Color	Marital Status	Education	Number of kids	Time being homeless (years)
Kalilândia 1	Black	Other	Elementary school to 9th grade	1	≥ 9
Kalilândia 2	Black	Other	Elementary school to 9th grade	3	≥ 9
Kalilândia 3	Black	Single	Elementary school to 5th grade	1	≥ 9
Bandeira 1	White	Other	Elementary school to 5th grade	7	≥ 5 e ≤ 8
Bandeira 2	Black	Single	Elementary school to 9th grade	2	≥ 9
Bandeira 3	White	Single	Elementary school to 9th grade	4	≥ 9
Matriz 1	Black	Single	Incomplete high school	2	≥ 9
Matriz 2	Brown	Single	Incomplete high school	1	≥ 9
Matriz 3	Black	Single	Elementary school to 9th grade	5	≥ 5 e ≤ 8
Matriz 4	White	Single	Elementary school to 5th grade	5	≥ 9

**Figure 1** – Sociodemographic aspects of homeless women (n=10). Feira de Santana, BA, Brazil, 2019

The field notes and the application of the questionnaire allowed the apprehension of socio-demographic characteristics, being possible to cross data and launch a qualitative look regarding the existence of these women. Thus, three categories for analysis emerged: Women who are homeless: challenges faced; and Race/color as a potentiator of vulnerability of women who are homeless.

### Women who are homeless: challenges faced

Based on the notes in the field diary, one can notice that, for the participants, being homeless implies facing challenges, especially to reach basic rights such as finding safe places to sleep, dress, and eat and exposure to alcohol and other drugs: *Kalilândia 1, 36 years old, born in Salvador-BA, reports that she has already been in several states. Today she settled in Feira de Santana, because of a companion. But she says that living on the street has always been very bad, difficult, and unpleasant. One of the biggest problems is sleeping. He said that once he was sleeping hidden inside a broken car, in a garage, but the owner discovered it and put him to run and started sleeping on the street. After a few days, she found another broken car and used it as a place to sleep and was again kicked out. After that she started sleeping in a church (Field notes 20/04/2019). Kalilândia 3, 43 years old, crying, says that she went to be homeless due to unemployment, and so she started living in abandoned houses, but due to debts with drug dealers, she had to leave this house, losing all her things, inclu-*

*ding her documentation. He reports that living in this life is horrible, because he needs to depend on people to eat and dress himself, and for this reason he started to drink uncontrollably. Today he informs that he uses alcohol in a controlled manner (Field notes 10/05/2019).*

The notes in the field diary pointed out that being female imposes vulnerabilities to health problems and damages, which are even more evident in the context of the street, often-becoming situations of violence of various forms: *I found Matriz 4, woman, 36 years old, on the street of one of the neighborhoods in the city of Feira de Santana. Apparently depressed, looking older, her face reflects sadness. Her left arm is in a cast. When asked if she needed help with the situation of her arm, she said no, and started to report that her ex-partner, who is also homeless, broke her arm for not accepting the separation, that he does not respect her for being a woman, and that she frequently suffers aggressions from him. She questions the justice system's role in protecting women from discrimination by men who think they own women, and that she is forced to stay with her partner even if she doesn't want to. She also informs that she is spending her nights at the Rodoviária (Bus Station) and is very afraid of meeting her ex-partner and suffering new situations of violence. She is also afraid of the violence present on the streets (marital and social violence). That sleeping with both eyes closed for those living on the street is not an option (Field notes 10/04/2019). Matriz 3 is a 27-year-old woman with a history of substance abuse, mother of 5 children, who are under the custody of an aunt. Sad face. She began to report that women who are homeless face many difficulties, many times they need to prostitute themselves, they must make ends meet, which is*

very bad. She says that for men it is easier, for them to run after us, but not for women, that people always want something in exchange, they want to buy our bodies (Field notes 20/03/2019). On a rainy Tuesday, developing activities in the street context, Bandeira 2, a 33-year-old woman, calls me, informing that she would like to talk. She was injured, her eyes had red spots, and there was edema and redness. I often met her at social gatherings. She said she had had a fight with her partner because he thought she was cheating on him. She was tired of men only wanting to beat and humiliate women and started to cry (Field notes, 05/15/2019). In the activities of "Cuidando da Maloca" I observe Bandeira 3, a 41-year-old woman. She was wearing a turban, and as I approach and identify myself as a nurse, she reports that her partner assaulted her, hitting her on the head with a knife. He took off his turban, which had been used to hide the wound, which was infected. Outraged, she said: "This man (points to her companion) beats me, bites me, says that I have another man and keeps humiliating me, saying that he is going to kill me. We cleaned the wound and bandaged it and stayed there, me and the team, listening to her venting (Field notes 05/04/2019).

### **Race/color as a potentiator of vulnerability of women on the streets**

In this last category, it was possible to realize that, in the context of the street, women are mostly black and poor, therefore, are subject to unfolding of racism and poverty: discrimination, chronic diseases and lack of access to health services, according to the following records: *Kailand 2*, black woman, 28 years old, who has been homeless for more than nine years. She works on the streets selling candy and as a "flanelinha" (an activity of "looking", "guarding" the cars). She is a woman known by most of the people who are homeless in the city, for being fearless and facing everything and everyone. As she says: to be homeless you must have "blood in your eyes". In a previous meeting, she was angry, with her arm in a cast because of a public security action that verbally and physically assaulted her, calling her a "neguinha sacizeira" (black woman), a "neguinha vagabunda" (black truculent approach), which resulted in the fracture of her limb. (Field notes 05/05/2019). *Matriz 1*, black woman, 46 years old, considered the "mãe da maloca" (mother of the maloca). She is very respected by people homeless in the municipality. She is a woman of many stories due to her experiences on the streets.

She reports several pathologies, consequent of this life context: glaucoma, hypertension, diabetes, heart problems, she has already had tuberculosis and respiratory problems because of the cardboard dust. He reports difficulties in accessing health services because of prejudiced and discriminatory looks and attitudes, such as giving preference to white people in the services, treating them differently, with more respect (Field notes 22/03/2019).

## **Discussion**

Under the influence of the feminist movement, based on intersectionality, the sociodemographic characteristics revealed several individual vulnerabilities, such as the prevalence of black women; with little education; high number of children; and long-time living on the street. This is a complex context, historically fed by structural racism that determines the living conditions of black people, marked by physical and mental illness, substance abuse and chronic diseases when compared to the population that does not live on the streets<sup>(13)</sup>. It is also represented by a high number of single mothers, socially held exclusively responsible for raising their children<sup>(14)</sup>.

Intersectionality has built a theoretical model for understanding the conditions of subordination and oppression of women as well as pointed out the strategies for overcoming domination from the feminist struggle<sup>(12)</sup>. In this sense, thinking about intersectionality based on the experience of homeless women goes through the social markers of gender and race in an imbricated and simultaneous way, making it possible to analyze the multiple and concomitant systems of oppression.

In Brazil, the focus of the gender category linked to health emerged in the mid-1990s when the quality of women's health care was discussed as well as the elimination of inequalities of access to health services by women and excluded groups of society<sup>(12)</sup>. In this sense, when analyzing the vulnerabilities of homeless women facing the social markers of gender and race/color based on the data in the scenes observed and, in the field, diary records, the exposure to various types

of physical, psychological, and sexual violence is evident. The hegemony and male domination enhance the repertoire of aggressions when it comes to female social life on the streets<sup>(15)</sup>.

They emphasize that women go to the streets is related to progressive experiences lived since childhood, such as physical and emotional abuse, mistreatment, financial exploitation, sexual intimidation, environmental stress, exposure to crime and systemic subjugation<sup>(16)</sup>. It is noted, therefore, that regardless of the country where the woman is, the markers of race, class and gender are present, and the subjugation of her body is rooted hegemonically.

In the face of violence, vulnerability, and oppression many women prefer to inform that they are single, which is highlighted in the sociodemographic identification, even having a partner as observed in the living with these women and recorded in the field diary. This characteristic also stems from broken family ties, a very common situation among people who are homeless, which makes some women on the streets not consider their marital status as a stable union<sup>(2)</sup>. In this study, it was revealed the separation mother/son by action of the Guardianship Council. For women on the streets, this occurrence of children living in state institutions or with relatives is common<sup>(6)</sup>, causing the loss of the mother-child bond<sup>(17)</sup>.

The State, under the penumbra of "care", uses the prerogative of human rights and protection of minors and vulnerable people to acquire custody of the child. Implicitly, they interpret these women as a burden to society and redirect children to the institutional shelter system, inserting them in new families, distancing them from their biological mothers<sup>(16)</sup>. Thus, it is necessary to think of intersectoral public and health policies that can serve these women in a comprehensive way, which are able to ensure the right to motherhood on the streets with all the necessary and legitimate care by the Federal Constitution.

Gender relations establish insertions that interweave and intersect with other markers that mark

the conditions of oppression. Thus, another social marker that impacts, with relevance, women who are homeless is the race/color, since 89% of homeless people in Feira de Santana are black<sup>(2)</sup>. It was possible to verify that racism permeates the whole condition of being homeless. It is a tool of exclusion and violence that, along with gender issues, objectify the bodies and lives of black women who are homeless.

It is believed that racism evidenced has a structuring characteristic, since it reproduces a system of oppression whose action transcends the mere formatting of institutions, permeating from the aesthetic apprehension to any space in the public and private spheres<sup>(18)</sup>. The violence materialized in the truculent actions of the public security forces during the attempt to guarantee subsistence is an example to be cited.

The structuring racism is present in the configuration of society and is naturalized by it. Because it corresponds to a structure, it is relevant to highlight that racial discrimination is not only in the plane of consciousness, but also intrinsic to the unconscious. Thus, racism is socially imbricated, being appropriate to maintain, reproduce and recreate inequalities and privileges, revealing itself as a mechanism to perpetuate the current state of things<sup>(18)</sup>.

Moreover, racism, by creating barriers to access to goods and services, contributes to the strengthening of various other forms of inequalities. Thus, racism acts as a social determinant of health, exposing black women to situations of vulnerability that culminate in illness and death<sup>(18)</sup>. Regarding health issues, data collected by the National Policy for Integral Health of the Black Population point out that the black population has a higher prevalence of numerous chronic diseases such as hypertension (44.2%) and diabetes (12.7%), when compared to the white population (22.1% and 6.2% respectively). The same happens in relation to heart diseases, asthma, and neglected diseases, such as tuberculosis<sup>(19)</sup>. Thus, it can be inferred that being homeless constitutes another factor of harm to the life and health of women, especially black

women who, besides having chronic disease burden associated with their race/color, suffer from inequities in access to health services.

It should be added that these issues of race and gender are enhanced by the class variable. In Brazil, social indicators show that people of black race/color have the worst indicators of education, health, income, housing, and higher mortality rate from preventable causes, and reside in areas deprived of basic infrastructure<sup>(18)</sup>.

Regarding education, it was evidenced that homeless women have only elementary school education (incomplete or complete). It is believed that low education intensifies the poverty condition, since it hinders access to employment and income. Moreover, the school is also configured as a powerful space for coexistence and sociability, contributing to the empowerment of these individuals about their rights as citizens. It is also observed, as in the study conducted in Governador Valadares, State of Minas Gerais, with homeless people, that many of these people want to go back to school, which highlights the need for inclusion of these people in schools by the assistance and support networks of the city and state<sup>(20)</sup>.

Regarding the time being homeless, the identification of sociodemographic aspects shows that the participants have more than nine years of experience on the streets. The I National Census and Research on the Homeless Population<sup>(3)</sup> is in line with the results obtained in this research, pointing out the chronification of this phenomenon. This chronification that, in many cases, causes the deterioration of family ties, compromising the relations of formal work, study, as well as the care of children<sup>(1)</sup>.

The notes brought contextualize the precariousness in which these women are inserted, demonstrating a life unworthy of being lived. It is in this context that these women homeless are inserted, configuring a degrading life condition, rooted in a disadvantaged class of society. And, from the intersections of this social condition, crossed with gender and race issues, a

society is structured based on pillars of injustice and dominant relationships.

Thus, it becomes relevant to expand research with homeless people, especially with women, to minimize the vulnerabilities experienced by them. Furthermore, it is evident the need to implement and/or deploy care strategies, especially in relation to health practices, which contemplate the individual and collective specificities of people who are homeless.

It is hoped that this research can reach different health professionals, among them, nurses, and society in general, to enable reflections on the care, welcoming, and assistance to women who are homeless.

### Study limitations

This study was developed in a specific context, since data collection was restricted to women who are homeless in Feira de Santana, Bahia. Thus, the results are specific to this group of women, which precludes generalizations to other contexts. However, despite this limitation, the findings can serve as subsidies for more effective care strategies, drawing the attention of both the scientific community for the need to develop studies in other contexts and public managers to ensure the right to citizenship.

### Contributions to practice

Present information that enables reflection and creation of care strategies for women who are homeless, understood in their singularities. It is necessary to know to welcome. Undoubtedly, the information presented here can contribute to the formulation of actions that enable the care of homeless people, especially women.

It is believed that the findings can contribute to the apprehension of the crossings that permeate the lives of homeless women, identifying the processes of oppression, vulnerability, violence, and violation of rights that mark their experiences.

## Conclusion

It is concluded that for women who are homeless, gender and race/color potentiate their vulnerabilities, resulting in precarious social conditions and denial of rights. For these women, such vulnerabilities intersect in a context of systems of oppression that is potentiated by the omission of the State and that, in a scenario of wide social and economic inequality, promotes illnesses of various kinds.

## Authors' contribution

Conception and design or data analysis and interpretation, writing of the manuscript, relevant critical review of the intellectual content, final approval of the version to be published, and agreement to be responsible for all aspects of the work to ensure that questions regarding the accuracy or completeness of any part of the work are properly investigated and resolved: Barros KCC, Moreira RCR, Oliveira JF, Nascimento DFB, Jesus MEF, Ferreira RBS.

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