

Street Person: Contextualization of Social Conditions and Public Policies through a Descriptive Review

Angelo Aparecido Ninditi

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Abstract— Introduction: Living on the street is a global problem evidenced in both developed and developing nations, especially in medium and large urban centers. Descriptive Review: The presence of people who make the streets of contemporary metropolises their home is an undeniable reality. In the first half of the 20th century, this phenomenon was intensified in Brazil with the rural exodus and the migratory process, driven by industrial growth. Method: Discussion: Several health problems can be precipitated or worsened by being on the streets: tuberculosis, infestations, foot problems, sexually transmitted diseases, oral health problems, high-risk pregnancy. Results: The consumption of alcohol and other psychoactive drugs and the health and social consequences for both the community and users draw the attention of different segments of society, as it is often related to dependence on these substances and social vulnerability. Final Considerations: Teenage pregnancy has been the focus of health research. Current literature reveals much about the life contexts that lead adolescents to run away from home: victimization, domestic violence, sexual abuse, substance abuse, mental health problems, poverty, restricted social relationships and residential instability are often precursors to life on the streets. among teenagers.

I. INTRODUCTION

According to Biscotto, P.R; et al (2016), living on the street is a global problem evidenced in both developed and developing nations, especially in medium and large urban centers. However, it is a challenge to quantify this population and establish definitions about what it means to be homeless, considering the different realities of each country. In the European Union, the percentage of this population has shown an increase in the last decade, with only Finland and the Netherlands showing a reduction in this period.

Still according to Biscotto, P. R; et al (2016), in the United States of America (USA) it was shown that in January 2015 there were 564,708 homeless people. Of these, 389,649 were homeless, using programs of emergency shelter or temporary housing and 175,059 people lived in degraded places, such as under bridges and marquees, abandoned buildings, car bodies, among others.

However, in Brazil, the most recent survey on the homeless population was carried out in 2015, in the city of

São Paulo. This registered 15,905 people in this condition, a worrying number when compared to data from 2000, whose number was 8,706 people. The survey reaffirmed the predominance of males in this population, accounting for 82% of the total (Biscotto, P. R; et al, 2016).

II. DESCRIPTIVE REVIEW

The presence of people who make the streets of contemporary metropolises their home is an undeniable reality. In the first half of the 20th century, this phenomenon was intensified in Brazil with the rural exodus and the migratory process, driven by industrial growth. The current scenario indicates, however, that most homeless people come from urban areas, and the displacement from the countryside to the city is no longer a frequent reality (SICARI, A. A. & ZANELLA, A. V; 2018).

The existence of people who live on the streets has marked Brazilian society since the formation of its first cities. It is important to highlight, however, that, in recent

decades, there has been an exponential increase in the number of people living in these conditions, thus revealing how much the country's modernization process has been guided by the logic of residual production (DIAS, A.L.F; et al, 2019).

According to Dias, A.L.F; et al (2019), phenomena such as the homeless population occur not because of a failure of the capitalist system, but because of its own operating logic, which is based on the production of excesses, both material and human. With this, a huge population contingent becomes "human waste", which, at some point, is considered disposable in the capitalist mode of production and consumption, but which can also, at a time considered opportune by the system, participate again in it.

According to Sicari, A.A. & Zanella, A.V; (2018), the number of people living on the streets has intensified in recent years and is not restricted to large metropolises. In the National Survey of the Homeless Population, carried out between August 2007 and March 2008 by the Ministry of Social Development and Fight against Hunger in 71 cities in the country (23 capitals and 48 municipalities with more than 300 thousand inhabitants), 31,922 were identified. homeless people over 18 years of age. In this condition, both people who spend the night in institutions such as hostels and passing houses were considered, as well as those located on sidewalks, squares, highways, abandoned places, alleys and others.

According to Paiva, I.K.S; et al (2016), the development of capitalism, the internationalization of the economy, accelerated urbanization, neoliberal hegemony, among other terms that represent the new world order, have produced, among other effects, a considerable increase of social exclusion, which gives rise to possible social ruptures capable of jeopardizing the dream of a democratic and just society.

In this same context, there is an increasing number of people excluded from basic social rights, such as education, health, work, housing, leisure, security and others, and even from human rights, with some groups relegated to invisibility. It is in this categorization that we find the homeless (PAIVA, I. K. S; et al; 2016).

For Paiva, I.K.S; et al (2019), the street becomes a "fixed residence" for a long period of time for some people, staying for weeks, months and years in the same place, often depending on the tolerance of citizens domiciled in the surroundings. The problem of living on the street has several factors that favor staying on the streets. From a demographic point of view, they include people of all ages and sexes, some are even born and live their "whole" life on the street, without contact with their

family of origin and without stable work. Several factors further aggravate this situation, such as social inequality and social prejudice.

Also according to Paiva, I. K. S; et al (2019), homeless population is understood as a heterogeneous population group with characteristics related to extreme poverty, interrupted or weakened family ties, without regular conventional housing, using public places and/or degraded areas, temporarily or permanently, as housing and sustenance, and may or may not make use of shelter units for overnight stays or temporary housing.

Vale, A. R. & Vecchia, M. D. (2019) states that this group is constituted as the expression of excluding social and economic processes and social inequality, forming situations of extreme vulnerability. Precarious family and affective relationships stand out, as well as marginal relationships with the formal job market. Among the various exclusions experienced daily by this public, there is the difficulty of accessing health services.

III. METOD

This article is an integrative review based on bibliographic research formulated through published articles on the knowledge and performance of professionals in the area of "health" concentration on the subject homeless person: contextualization of social conditions and public policies through of a descriptive review. Articles from renowned platforms such as "Bireme, Lilacs, Scielo, Pubmed" were used.

Due to the growing amount and complexity of information in the health area, it has become essential to develop devices, in the context of scientifically based research, capable of delimiting more concise methodological steps and providing professionals with better use of evidence elucidated in numerous studies. In this scenario, the integrative review emerges as a methodology that provides the synthesis of knowledge and the incorporation of the applicability of results of significant studies in practice (SOUZA, M. T; SILVA, M. D. & CARVALHO, R; 2010).

IV. DISCUSSION

According to Vale, A. R. & Vecchia, M. D. (2019), several health problems can be precipitated or worsened by being on the streets: tuberculosis, infestations, foot problems, sexually transmitted diseases, oral health problems, high-risk pregnancy, chronic diseases and problematic use of alcohol and other drugs.

There are specificities that need to be taken into account regarding the meanings of health and illness for the homeless person. The concept of health is related to the possibility of maintaining the daily functionality necessary for the maintenance of life on the streets, through the “corres”, a term used to designate the strategies developed to guarantee food and money in this situation. On the other hand, the disease is seen as the impossibility of carrying out such activities – that is, it restricts them to situations of intense and emergency suffering (VALE, A. R. & VECHIA, M. D; 2019).

Ordinance no. 122, published in 2011 by the Ministry of Health, contributed to increasing the access of homeless people to health services and, thus, better meeting the health needs of this population. The aforementioned Ordinance was important because it defined the guidelines for the operation and organization of the Street Clinic teams, a structure that integrates the primary care of the Psychosocial Care Network and develops Primary Health Care actions according to the foundations and guidelines defined in the Policy. National Primary Care. According to this Ordinance, the Street Clinic teams must be multidisciplinary and deal with the different health problems and needs of the homeless population, including activities of active search and care for users of alcohol, crack and other drugs (HINO, P. ; SANTOS, J. O. & ROSA, A. S; 2018).

For Ferreira, C.P.S; Rozendo, C. A. & Melo, G. B. (2016), the specificities and complexity of the factors involved in the daily lives of homeless people challenge the various sectors and services of society, including the Unified Health System (SUS) . In this sense, the Ministry of Health has been presenting initiatives aimed at attention to this group, among them the Operational Plan for the Implementation of Health Actions for the Homeless Population 2012-2015, the Street Clinic and the Clinic in Road.

Based on the Street Clinic, the Homeless Family Health Program emerged, an experiment carried out in some cities such as Porto Alegre (Rio Grande do Sul), São Paulo and Belo Horizonte (Minas Gerais). In turn, the Consultório na Rua strategy emerged in 2012 from the convergence of different modalities and experiences, such as: Harm Reduction, Homeless Family Health Program (PSF) and Street Consultório. Linked to the National Primary Care Policy, the Consultório na Rua incorporates disease prevention and health promotion practices, seeks to improve access to health services and attempt to protect the quality of life, based on the principles of the SUS (FERREIRA, C. P. S; ROZENDO, C. A. & MELO, G. B; 2016)

According to Oliveira, R. G. (2018), the vulnerability of precarious lives, given the resurgence of extreme poverty in neoliberal contexts, imposes critical analyzes in the sense of opposing narratives that naturalize the issue. world-system geopolitics. The populations excluded from the process of generating wealth and distributing their products make use of precarious access to public mechanisms of inclusion, many of which are operated in terms of charity, domination and subordination. The precariousness of housing and work takes a prominent place in this plot of exclusion, in which the streets appear as an option and recurring scenario for the entire unfolding of human lives, “transforming the public space – the streets – into their universe of life and private survival”.

The vulnerability of human lives is debated, which is expressed in different shades of inequalities, locating it as historically anchored in the matrix of modern coloniality, fundamental in the conformation of societies and countries of the global South, which defines, delimits and forges differentiations and invisibilities. of territories, subjects and ways of being in the world (OLIVEIRA, R. G; 2018).

V. RESULTS

For the World Health Organization and for the main documents that guide public and social policies in Brazil, psychoactive drugs are defined as any substances that (smoked, inhaled, ingested or injected) alter the functioning of the organism, resulting in physiological changes, psychological and behavioral (TILIO, R; VIDOTTO, L. T. & GALEGO, P. S; 2015).

According to Tilio, R; Vidotto, L. T. & Galego, P. S. (2015), the consumption of alcohol and other psychoactive drugs and the health and social consequences for both the community and users draw the attention of different segments of society, as it is often related to dependence. of these substances and social vulnerability.

Some research claims that the increase in the consumption of these substances is a reflection of a society that encourages the immediate consumption of objects (including psychoactive drugs) as an alternative to alleviate suffering (Tondin, Neta, & Passos, 2013).

According to Spadoni, L; et al (2017), the growth of the homeless population is worrying, as it has characteristics that reveal extreme vulnerability, which goes beyond other conditions that classically define low socioeconomic conditions in the general population. Living on the street, and the insecurity caused by homelessness, are factors that lead to situations of greater exposure to diseases, violence and lack of access to services.

Also according to Spadoni, L; et al (2017), the use of alcohol and other drugs is part of the reality of the streets, either as a way to minimize hunger and cold, or as a form of socialization among the members of the groups. The use of these substances has long been considered one of the cultural dimensions that make up the lifestyle of the homeless population. It is rare to find a homeless person who is not a drug addict, however, it is difficult to say which situation was the beginning of this condition. That is, it is difficult to say whether it was drug addiction that led the individual to live on the streets, or whether it was the street condition that led the individual to drug addiction. At other times, however, drug addiction appears, simultaneously, as a condition and effect of "rualization". Drug use roots the person in the street situation, often reducing the chances of getting out of it.

The street environment can promote/maximize the use of psychoactive drugs, including because such consumption can mean a way of belonging to the street group, possibly composing survival strategies insofar as the effects of the use of these substances produce feelings of pleasure, euphoria and power against the painful external reality (TILIO, R; VIDOTTO, L. T. & GALEGO, P. S; 2015).

According to Costa, S.L; et al (2015), a growing process of weakening and rupture of the bonds that insert them into work and social relationships is identified. The speeches of people who live on the streets point to sex as good and pleasurable, and the fact that they are on the streets is not a reason to deprive themselves of sexual relations. However, affective manifestations are uncommon and treatments are generally harsh and even aggressive. Some women end up using sex as a means of obtaining protection or even financial support for survival. Because they are exposed to the streets, they have difficulties in sometimes saying yes and sometimes saying no to their sexual partners. Because they are fragile, they often cannot defend themselves when forced to have sex, and some end up using alcoholic beverages, which makes them even more vulnerable.

Affirms Costa, S.L; et al (2015), that pregnancy can be considered a social risk factor in the sphere of public health and a reinforcement of marginality and poverty, depending on the conditions in which it develops. Thus, in the case of homeless pregnancy, the possible precariousness of living conditions and the difficulty of accessing services can be identified as risk factors for mother and baby.

Also according to Costa, S. L; et al (2015), pregnancy brings with it a series of transformations in a woman's life, ranging from obvious physical changes to mood swings.

Daily activities are gradually being changed. Sleeping position, sexual intercourse, hunger control and urination activities can be uncomfortable changes. On the other hand, advanced pregnancy exposes motherhood and can socially mobilize other people, expanding the possibilities of producing support and assistance networks.

VI. FINAL CONSIDERATIONS

According to Scappaticci, A. L. S. S. & Blay, S. L. (2010), teenage pregnancy has been the focus of health research. Current literature reveals much about the life contexts that lead adolescents to run away from home: victimization, domestic violence, sexual abuse, substance abuse, mental health problems, poverty, restricted social relationships and residential instability are often precursors to life on the streets. among teenagers. On the other hand, although families of adolescents with children are one of the fastest growing homeless subpopulations, relatively few studies have focused on pregnancy or parenthood among homeless adolescents. In Brazil, families of teenagers with children are a major concern. However, based on the research carried out, there are no studies that summarize this literature on young women who experience motherhood or pregnancy in temporary shelters.

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