The imperative of necessity and possible territorialities: the experience of homeless people attending a Brazilian Psychosocial Care Center

O imperativo da necessidade e as territorialidades possíveis: a experiência de usuários em situação de rua de um Centro de Atenção Psicossocial

El imperativo de la necesidad y las territorialidades posibles: La experiencia de personas habitantes de calle usuarias de un Centro de Atención Psicosocial.

L’impératif de la nécessité et les territorialités possibles: L’expérience des sans domicile fixe dans un centre de soins psychosociaux

This study aimed to explore the territoriality of homeless people who use the Psychosocial Care Center in São Paulo, Brazil. Semi-structured interviews were conducted with these individuals to investigate how they build their sense of territoriality in the city and what forms of citizenship are experienced in a homeless situation. The analysis of their narratives revealed the intricate nature of social exclusion and the lack of full citizenship realization. It highlighted the dialectical tension between public and private spheres, the constraining effect of class structure, and limited access to spatial mobility and mental health services. The findings demonstrated that territorialities were largely confined to the realm of basic needs and the struggle for survival.

KEYWORDS: territoriality; citizenship; mental health

ABSTRACT

This study aimed to explore the territoriality of homeless people who use the Psychosocial Care Center in São Paulo, Brazil. Semi-structured interviews were conducted with these individuals to investigate how they build their sense of territoriality in the city and what forms of citizenship are experienced in a homeless situation. The analysis of their narratives revealed the intricate nature of social exclusion and the lack of full citizenship realization. It highlighted the dialectical tension between public and private spheres, the constraining effect of class structure, and limited access to spatial mobility and mental health services. The findings demonstrated that territorialities were largely confined to the realm of basic needs and the struggle for survival.

KEYWORDS: territoriality; citizenship; mental health

RESUMEN

Esta investigación tuvo como objetivo comprender la territorialidad en situación de calle de usuarios de un Centro de Atención Psicosocial en São Paulo (SP). Para ello, se realizaron entrevistas semiestructuradas con estas personas con el objetivo de entender cómo se dan las territorialidades de los sujetos estudiados en la ciudad en que residen y las formas de ciudadanía existentes en el contexto de la población en situación de calle. La análisis de sus narrativas evidenció la compleja naturaleza de la exclusión social y la falta de realización de la ciudadanía plena, la tensión dialéctica entre el público y el privado, el efecto delimitador de las preguntas de clase y el acceso al consumo sobre la circulación espacial, y el estrechamiento del círculo de relaciones al propio servicio de salud mental. Los resultados demostraron que territorialidades sumamente limitadas a la esfera de la necesidad y la sobrevivencia ecológica.

PALAVRAS-CHAVE: territorialidade; cidadania; saúde mental.

RESUMEN

Esta investigación tuvo como objetivo comprender la territorialidad
de personas en situación de calle que hacen uso de un Centro de Atención Psicosocial en la ciudad de São Paulo (SP), Brasil. Para ello, se realizaron entrevistas semi-estructuradas, con el fin de comprender cómo se dan las territorialidades de los sujetos estudiados en la ciudad que habitan y cómo son las formas de ciudadanía existentes en el contexto de esta población en situación de calle. El análisis de sus narrativas mostró la complejidad de la exclusión social y la no realización de la ciudadanía plena, la tensión dialéctica entre lo público y lo privado, el efecto delimitador de los aspectos de clase y el acceso al consumo sobre la circulación espacial, así como la reducción en el círculo de las relaciones con el propio servicio de salud mental. Los resultados evidencian territorialidades extremadamente limitadas a la esfera de la necesidad y supervivencia de la vida biológica.

PALABRAS-CLAVE: territorialidad; ciudadanía; salud mental.

RÉSUMÉ
Cette recherche vise à comprendre la territorialité des usagers sans domicile fixe d’un centre de soins psychosociaux dans la municipalité de São Paulo (Brésil). Pour ce faire, des entretiens semi-directifs ont été menés afin de comprendre comment se manifestent les territorialités des personnes étudiées dans la ville où elles vivent et les formes de citoyenneté existant dans le contexte de cette population sans-abri. L’analyse de leurs récits a montré la complexité de l’exclusion sociale et de la non-réalisation de la pleine citoyenneté, la tension dialectique entre le public et le privé, l’effet délimitant des questions de classe et d’accès à la consommation sur la circulation spatiale, et le rétrécissement du cercle des relations au service de santé mentale lui-même. Les résultats montrent des territorialités extrêmement limitées à la sphère de la nécessité et de la survie de la vie biologique.

MOTS-CLÉS : territorialité ; citoyenneté ; santé mentale.
INTRODUCTION

Psychosocial Care Centers - CAPS (Centro de Atenção Psicossocial) are territorial services that have replaced psychiatric hospitals, aiming to overcome the asylum as a model in the field of mental health (BRASIL, 2004). Its origin dates back to the Brazilian Psychiatric Reform and the Anti-Asylum Movement, which emerged in the 1970s in Brazil (LUCHMANN; RODRIGUES, 2007). Such civil society movements began to problematize, among many other points, the dependence caused by asylum institutions on their inmates, manifested by their physical and subjective restriction to the place of treatment. However, for at least ten years questions have been asked as to whether CAPS, the apex of a significant transformation in the field of mental health, have been effective in making use of community care where they have been introduced, and have achieved an effective alternative to the institutional dependency relationship (PANDE; AMARANTE, 2011).

We know that it was in the context of public and collective health and the criticism of the hospital-centric and psychiatric model that the concept of territory also began to be emphasized in the legislation of mental health policies, in the logic of division and implementation of health services and in documents relating to psychiatric reform. Some of these documents point out, for example, that “the relationship between the production of care and the territory in which this care is practiced is also a central issue for psychosocial care [...]” (LIMA; YASUI, 2014, p. 594).

According to Serpa (2017), in general, the notion of territoriality is strictly linked to the concept of territory. But, in order to overcome this perspective, for this author, more than thinking about the territory from reflections on its understanding as a network, area, extension or zone, [...] one must be attentive to its manifestations (and qualities) in the ways in which we occupy and appropriate space, in different scales and space-time situations; one must be attentive, above all, to the different ways in which places and territorialities are articulated in the contemporary processes of production/creation of space (SERPA, 2017, p. 592).

The experiences of two of the authors in CAPS in the city of São Paulo, added to the spatial reflections on the part of the other author, led to concerns about the territoriality of users of this specific mental health service. The meeting of formations and practices of the authors raised questions especially about the apparent difficulty that users of this CAPS faced in circulating in spaces other than their place of treatment and taking ownership of them. In this sense, an expanded understanding of the experience of these users is considered important, their survival resources, their identity, and the symbolic, cultural and social character of the spatial dimension of their experience.
in the world. Thus, we aim to understand the territoriality of these CAPS users.

The interviewees were selected taking into account: a) the participation of one of the authors in a group, carried out with users of the chosen Psychosocial Care Center, whose objective was to explore intersectoral resources in the territory where the service was inserted; and b) a predominant characteristic of the public (homeless) assisted by the work team of which this same author was a part. Thus, interviews were carried out until a saturation of the discursive categories that appeared was reached, that is, their repetition without the emergence of new categories. Such saturation criterion used was based on the understanding that there are transversalities between the experiences of individuals, as they are part of social processes, in such a way that representations inserted in a specific context are, in some way, shared and, therefore, subject to repetition (GASKELL, 2003). It is worth noting that the field approach in the human sciences does not require quantitative validation, but is based on the understanding that fieldwork allows the establishment, albeit temporary, of a logic of understanding the investigated phenomenon and its interrelationships with other phenomena and scales (MINAYO, 2017). Thus, the research involved five semi-structured interviews, which took place in locations chosen by the participants themselves and which preferably did not take place in the service facility itself. By doing this we aimed to make the choice of location symbolic-affective, making respondents more comfortable to share their experiences.

The fieldwork guided the analyzes based on the following themes: social exclusion/verse inclusion; the relationship between homeless users and the CAPS; territoriality expressed as a necessity/survival; sociability related to consumption; segregation in the public space; and, the street as an expression of transgression and the impossibility of differentiating between the public and private dimensions for the interviewees, as they are living on the streets.

The article presents three sections. Firstly, the Psychiatric Reform in Brazil, the advent of CAPS and the Psychosocial Care Network (RAPS - Rede de Atenção Psicosocial), and the relationship of these policies in the care of homeless people are briefly discussed. Subsequently, there is a brief reflection on territory and territoriality in order to consider the territoriality of the interviewees with regard to the importance of CAPS for them and the relationship established between necessity and territoriality. Based on Sawaia (2001), we enter the idea of social exclusion and perverse inclusion and raise questions about the relationship between public and private space, as well as its appropriation by the homeless population. In the third section, we analyze the relations of territoriality and need.

2. The interviews were structured after the approval, in 2019, by the Ethics Council for Research with Human Beings of the São Paulo State Department of Health (project initially approved with the title “TERRITORIALITY AND SOCIAL REINSERTION: the experience of users of a Psychosocial Care Center”) and after the free and voluntary willingness of the participants to be interviewed, who signed a Free and Informed Consent Form, being assured both the confidentiality of their data and their personal information.
MENTAL HEALTH POLICY, THE CREATION OF CAPS AND THE HOMELESS POPULATION

Initially, it is important to explain that public policies in Brazil are actions, programs and activities developed by the State so that the population has access to “citizenship”, a term that has already been given different meanings over time. In the case of Health, it is understood that this is a social right to be ensured by the state, which must meet the needs and demands of the entire population (Freire; Santana, 2016, p. 90).

The first public policies in Mental Health in Brazil that led to the origin of the CAPS emerged with the Brazilian Psychiatric Reform (Luchmann; Rodrigues, 2007). Until then, insanity was treated in inhumane ways and among the psychiatric institutions that implemented such forms of treatment were the asylums, authentic representatives of “exclusion, control and violence” (ibid., p. 402). Within their walls, the violence generated was concealable and was justified under the claim of protection and care, and without questioning “the socio-historical processes of production and reproduction of insanity” (ibid.). The asylum practices of treatment led to hundreds of deaths and maltreatment within these institutions. To these places – under control, isolation and surveillance – people who were a “misfit” from the socially correct pattern were taken.

Psychiatric Reform in Brazil took place at the end of the 1970s, as a challenge to the asylum logic. One of the principles of this process was the deinstitutionalization of the person with psychological distress, so that they gained visibility for the authorities and society, and were not treated in an inhumane and exclusive way. This process was implemented with the Anti-Asylum movement in mid-1978, together with the Mental Health Workers Movement (Movimento de Trabalhadores em Saúde Mental - MTSM). According to Freire and Santana (2016), at the II National Congress of the MTSM, the motto “For a society without asylums” was adopted and this dialogue between health workers allowed changes in the organization of the Brazilian model of assistance to Mental Health and strengthened the anti-asylum struggle.

Later, in 1989, a bill was created by congressman Paulo Delgado, approved twelve years later, which became known as the “Paulo Delgado Law” or “Psychiatric Reform Law”, which “[p]rovides for the protection and rights of people with mental disorders and redirects the assistance model in Mental Health” (Brasil, 2001, p. 1). The delay in approving this law was due to the intense political struggle over the functioning of public policies for mental health care in Brazil.

Despite the atrocities committed in asylums, since 2001 the substitutive network of mental health care has been implemented...
in gradual replacement of psychiatric hospitals. The psychosocial model has brought new forms of reflection to meet the demands of the population with psychological distress. Currently, it is recommended that the treatment be carried out in the territory where the person lives, and hospitalization only in extreme cases, for the shortest possible time and in general hospitals. In addition, care is provided in a network, that is, care is community-based and regionalized (BRA-SIL, 2011). According to Freire and Santana (2016), the Mental Health Policy in Brazil proposes that care be provided by the Psychosocial Care Network (RAPS – Rede de Atenção Psicosocial), an integral part of the Health Care Network (RAS – Rede de Atenção à Saúde). As a basis for this model, the Psychosocial Care Centers, widely known by their acronym (CAPS), have emerged.

The CAPS are services open daily to assist people with severe and persistent psychological distress through clinical care and social reintegration. Based on Freire and Santana (2016, p. 107), “the proposal of these centers is that, with access to the rights of every citizen – such as work, leisure, strengthening of family and community ties –, the person with mental disorder will occupy a new space in society”. It should be noted that the CAPS have different modalities according to the population served, such as age group (Adult CAPS for people aged 18 years and over and Children’s CAPS for children and adolescents) and according to other specificities, as is the case of the CAPS AD for people with problems related to the use of alcohol and other drugs.

Among the public served by the CAPS is the homeless population and the professionals who attend them and recurrently are faced with the presence of significant psychiatric suffering, which may have occurred before, during or after the situation of extreme social vulnerability (FREIRE; SANTANA, 2016). In terms of general health, the homeless population is assisted by the Street Medicine teams, a Primary Health Care device responsible for the approach and care articulated with CAPS, Urgency and Emergency Services, etc. In addition to psychological distress, this specific population often uses alcohol and other drugs, as evidenced by Botti (2010) in a case study in Belo Horizonte (MG).

When it comes to the homeless population, we are referring to people who are often violated in their basic rights, beyond the right to health, which requires the involvement of other areas in their care, such as Social Assistance, Education, Housing, Culture, in addition to sectors such as those responsible for work and income. The National Policy for the Homeless Population was instituted in 2009, and recommended such intersectoral articulation (BRASIL, 2009), which presupposes a comprehensive understanding of the users of a service, including knowledge of its history, origin and destination, locations frequented and appropriation of space.
Saquet (2007) argues that there is a movement within the territory that is the result of social, economic and political contradictions, in addition to being a historical and multiscale movement. In this way, the territory is based on inequalities and differences, but it also means identity, producing territorialities and temporalities. The territory, therefore, “is a living space, objectively and subjectively [...] procedural and relational, (i)material” (SAQUET, 2007, p. 73). There are in everyday life, then, coincident, mutual and divergent territories, in movement and in unity.

Thus, according to the author, it is in the very course of life that territoriality is effective, and in everyday life it is the “economic, political and cultural forces, reciprocally related and in unity, [that] effect the territory” and the social processes they are performed “in and with everyday territoriality” (SAQUET, 2007, p. 57). For this author, the territory is socially constructed through a process of appropriating space in different ways, creating territorialities. Therefore, thinking about the territoriality of people living on the streets involves a comprehensive understanding of them, in order to highlight their social exclusion.

According to Serpa (2017) it is necessary to assume spatiality as inherent to humanity, a concept that refers to the experience-production of space. For this author, the concepts of place and territory refer to geographic experiences that are based on everyday life, and may be distinct or similar to each other. The geographer claims that it is important to understand that the relationships between people from different social classes or groups are marked by equality and difference at the same time, and that these relationships establish “geographical modes of existence” that go beyond conceptual limits (SERPA, 2017, p. 588). Thus, for broader geographic reflections, it is necessary to relate the daily experiences of individuals, when appropriating and producing space, with academic theories.

Serpa (2013) emphasizes the appropriation of public spaces, in which there are “invisible” barriers and limits between individuals and social classes. For him, there is often no interaction between territories, with “exclusivist practices of territorialization” (SERPA, 2013, p. 69) and segregation of the different. In this sense, the notion of public space linked to the space of political action as proposed by Arendt (1993) is called into question. In this perspective, Serpa (2013) points out that we are trapped everywhere, to a greater or lesser extent by neoliberal forces and globalization and, considering these processes, uses a dialectical approach between place and
territory – understanding them as a way of expression for human beings – where the singular and the universal are negotiated. Inspired by this approach, we sought to explain the territorialities/everyday experiences of the participants in this research, considering their life trajectory.

Regarding the conduction of the interviews, the importance of articulation between the field work and the theoretical perspective that guides the research is highlighted, since the way we understand them modifies how we behave and also the decisions we make throughout the investigation. (LACOSTE, 2006).

It is important to emphasize that the research was carried out within the scope of a multidisciplinary improvement program in mental health at the CAPS under study, so that two of the authors of the investigation were part of the monitoring of service users. The assistance provided by this CAPS was divided, at the time of the investigation, into several follow-up modalities: a) first assistance, reception and initial listening; b) daytime reception according to the opening hours of the service; c) individual assistance of medication, psychotherapeutic, guidance, among others; d) service in an operative group, including social support activities; e) other psychosocial activities, therapeutic workshops, cultural activities, income generation, family assistance, community activities focusing on community integration and family and social insertion.

The CAPS studied, at the time of the research, had assisted 4413 people per month over the previous 12 months, 20 of whom were homeless. The interviews in this study were carried out with 5 people from the homeless group, with the aim of presenting perspectives on this population and their territoriality in the city of São Paulo, since they make up a doubly marginalized group of society due to mental disorders and for being on the streets.

The choice of interviewees was made according to the established relationship of trust between the professionals who worked in CAPS and the users, either by the closer relationship established in the group, or by the daily contact in the same environment. It is important to emphasize that the different mental disorders of each interviewee were not obstacles to the establishment of dialogue for the interviews, because all presented adequate cognitive conditions to understand the questions, even if, at times, they talked about other topics.

About the origin of the interviewees, it should be noted that they came from different Brazilian states (Chart 1).

The interviews were carried out from September 8 to 13, 2018 in places where they felt more comfortable talking about their life in the city of São Paulo. Two of the participants chose to do the interview at the CAPS itself, while the other three chose different locations, respectively Parque Tenente Siqueira Campos - Trianon, and Praça Quatorze Bis - Bela Vista, where we went on foot.
Regarding their transit in the city, it was identified that the most frequented places, in addition to the CAPS, are close to it, as shown in figure 1.

Heidegger (2014) shows that distances should not be understood in a Cartesian way, since distance is configured as a concept that always has other entities as a reference. Therefore, the distance, thus understood, is existential, since the recognition of “me” and the “other”, of “here” and “there”, is only possible through the awareness of these differences. Thus, near and far are always constituted regarding a reference on which it is possible to distance oneself. It should be noted that distance also creates proximity, given that the primary objective of human spatiality is to create proximity. However, the creation of proximity implies a fundamental distance, given that the understanding of the “I” and the “other”, of the “here” and the “there”, starts from differentiation and, therefore, from an original distance that is impossible to suppress, as it allows the direction and orientation of our actions, creating spatiality and territoriality (HEIDEGGER, 2014; SARAMAGO, 2012; VAZ, 2016). In geographical terms, the smallest distance does not always mean greater proximity, since this is constituted by people’s experience and the possibility of accessing “the other” and “there”, which involves the temporal, spatial and social dimensions, and that can make places considered close distant and vice versa through transport technology, communication and the possibility of experience (SARAMAGO, 2012; VAZ, 2016).

Among the interviewees, those who mentioned the longest walks in the city were interviewees 2 and 4. The first traveled more than eleven kilometers to reach the CAPS for the first time. Among the places he chose to visit on a daily basis, Interviewee 2 mentioned Vale do Anhangabaú, Praça Franklin Roosevelt, Rua Augusta and Praça Quatorze Bis, which are around three kilometers from the mental health service. Interviewee 4 clarified that walking in the city was part of his daily life and he was the one who took routes furthest from the CAPS. Among the places mentioned by him were Cambuci and Brás districts, between 4 and 6 kilometers from the aforementioned service center.

Interviewees 3 and 5 were those who distanced themselves from the CAPS. The distances were measured using the approximate route on Google Maps (https://www.google.com/maps) which indicates one of the likely paths chosen by the interviewees and helps us to have an approximate understanding of their territoriality in the city, the places they seek to occupy through positive feeling they give you in everyday life (topophilia).

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**Chart 1. Data from research participants**

<table>
<thead>
<tr>
<th>Interview</th>
<th>Age</th>
<th>Gender</th>
<th>Race</th>
<th>Education</th>
<th>Naturalness</th>
</tr>
</thead>
<tbody>
<tr>
<td>I (26 min)</td>
<td>47</td>
<td>Male</td>
<td>Black</td>
<td>Elementary II</td>
<td>São Paulo - SP</td>
</tr>
<tr>
<td>II (17 min)</td>
<td>41</td>
<td>Male</td>
<td>Brown</td>
<td>High School</td>
<td>City unknown by the user-MG</td>
</tr>
<tr>
<td>III (24 min)</td>
<td>34/35</td>
<td>Male</td>
<td>Yellow</td>
<td>Elementary I</td>
<td>Marabá - PA</td>
</tr>
<tr>
<td>IV (24 min)</td>
<td>31</td>
<td>Male</td>
<td>White</td>
<td>Elementary II</td>
<td>Remanso - BA</td>
</tr>
<tr>
<td>V (17 min)</td>
<td>46</td>
<td>Female</td>
<td>White/Black</td>
<td>Elementary I</td>
<td>São Paulo - SP</td>
</tr>
</tbody>
</table>

Source: Elaborated by the authors. Field research, São Paulo, 2018.

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5. The ethnic-racial classifications used in this work correspond to the interviewed individuals’ own self-declarations. Therefore, they do not correspond to the standards used by census institutions, such as the Brazilian Institute of Geography and Statistics (IBGE), nor to categories developed in scientific studies.

6. The distances were measured using the approximate route on Google Maps (https://www.google.com/maps) which indicates one of the likely paths chosen by the interviewees and helps us to have an approximate understanding of their territoriality in the city, the places they seek to occupy through positive feeling they give you in everyday life (topophilia).
The imperative of necessity and possible territorialities: the experience of homeless people attending a Brazilian Psychosocial Care Center

Figure 1. Map with the places frequented by the survey respondents

least from the CAPS on a daily basis, traveling distances of less than two kilometers, mostly attending places close to the CAPS, such as the Refeitório Pena Norte and the Paróquia Nossa Senhora Achiropita in Bela Vista neighborhood. Interviewee 5 chose the CAPS itself as a place of safety and tranquility for the interview, while Interviewee 3, despite not having chosen the CAPS for the interview, chose a nearby location, Praça Quatorze Bis.

Interviewee 1, in turn, highlights the use of public transport to move around the city and is, among the research participants, the one who moves the most, building his territoriality and spatiality in a more comprehensive way than the others. Among the places visited, the following stand out: Avenida Paulista, Praça da Sé, Temporary Accommodation
This fact reiterates previous reflections, which point to the existentiality of distancing, since, in all cases, distancing is done in order to ensure the otherness and the possibility of building relationships with the city and with other people, even though it is the interpersonal relationships which are more difficult, as portrayed by the social isolation mentioned by the participants. In the public spaces they frequent, there are virtually no ties or interactions with other people, even considering the globalized world in which we live. Among the obstacles to frequenting these places more regularly is precisely the difficulty of establishing social bonds, as can be seen in the excerpts from the interviews selected and organized in Chart 2.

At the same time that this idea is spreading, poverty and unemployment are increasing, and these phenomena are seen as “natural” and intrinsic to the process. Being poor is not just earning less and not having access to material goods that others have, it is also having a place of inferiority in society. According to Santos (2000) “the poor, that is, those who are the object of the social debt, were included and, later, marginalized, and end up being what they are today, that is, excluded” (p. 35).

Brazil is permeated by class, race and gender inequalities that date back to the colonial period and the slave regime (LEÃO et al, 2017). Thus, what is seen is a contingent of poor people and homeless people, mostly non-white (SCHOR; VIEIRA, 2010), a profile reproduced in this research. Thus, it is necessary to emphasize the relationship between racial inequality and social exclusion, because according to the IBGE, among the poorest “three out of four are black people” (VIEIRA, 2016, p. 1).

In Brazil and in the whole world, doors were opened that allowed the economy to dictate the rules of a “progress” to which only a small portion of the popu-

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**Chart 2. Excerpts from interviews about social connections**

<table>
<thead>
<tr>
<th>Interview</th>
<th>Excerpts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview I</td>
<td>M.: “Now here at MASP (São Paulo Art Museum) I am more used to it (...). So... but like this... I don’t have many friends to hang out with, a buddy, a friend, right? To hang out with friends&quot; (verbal information).</td>
</tr>
<tr>
<td>Interview II</td>
<td>L.: “What are the difficulties for you?” P.: “Ah, to have contact with people, right?” (informação verbal).</td>
</tr>
</tbody>
</table>
| Interview V | L.: “Do you usually look at what’s happening on the street?”
A.: “No, I stand at the bus stop, I take the bus (...), I look at others, the others at me. But I never pay attention to the others, no. I just stand on the street, like this, looking”.
L.: “And why don’t you observe the street?”
A.: “Ah, the others pass by, chatting to each other, then I take the bus (...), look, but I don’t care.” (verbal information ). |

Source: Field research, São Paulo, 2018. Author’s elaboration.

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7. All quotes from interviews conducted in September 2018 are included in the Bibliographic References.
lation has access. As a result of this “progress”, there is the presence of thousands of poor people and the production of miseries. Santos (2013) highlights the Brazilian case citing some processes such as deruralization, forced migrations, urbanization, the increase in mass consumption, the installation of a repressive regime, the suppression of rights and individualism as a form of social ascension, and shows that these factors contributed to the formation of “a consumer, who accepts being called a user” 8 (SANTOS, 2013, p. 88).

Brazil, therefore, is a country where rights are seen as privileges of specific classes and not as an obligation of the state, given the link between access to public policies and the realization of rights and the power of consumption. Therefore, there is a deformation of the notion of citizenship, and part of the population stops seeking rights in favor of consuming, understanding consumption as a guideline for their role and position in Brazilian society.

In this sense, in the case of the homeless population, the extreme lack of access to consumption and the prevalence of the need are what define their social condition and the places they frequent. This relationship can be seen in the selected interview excerpts below (Chart 3).

In these passages, an orientation towards consumption as a potential realization of citizenship is identified, corroborating what Santos (2013) says, for whom “the power of consumption is contagious, and its capacity for alienation is so strong that its exclusion attributes to people the status of alienated. Hence its strength and its perversely driving role in today’s society” (p. 110).

Serpa (2013), in turn, identifies in his research on segregation in the public space in Paris and Salvador, that power relations refer to the absence of political action by the groups present and interaction between them, even if they are occupying the same spaces. The author talks about the existence of barriers related to the difference in economic and cultural capital, which create processes of segregation in the city’s public space, revealing different ways of spatialization by different social classes.

Although there is no explicit demarcation that determines which spaces can be frequented by which people, this separation is implicit. With regard to the homeless population, it is noted that they are “[i]creasingly present in contemporary urbanism, the physical-material devices of containment or dispersion spread throughout cities, and many of them are applied specifically to the homeless population” (ROBAINA, 2018, p. 125). On Avenida Paulista (São Paulo/SP), for example, very close to the CAPS studied, the differences and limits between CAPS users and other people who frequent this area of the city are noticeable. In the midst of the huge and luxurious buildings and towers, people in a hurry with their suits, as well as tourists and demons-

8. The citation itself has nothing to do with the choice made in Mental Health to refer to patients as “service users”. This choice aims to avoid the term “patient” and its connotation of passivity in treatment (SAITO et al, 2013).

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trators, circulate in different conditions and with different possibilities of access to services and commerce, when compared to street vendors and homeless people (BACHILLER, 2009; MENDES, 2010; ROBAINA, 2018).

For Miranda (2016), when it comes to the homeless population, the urban space is composed of inequalities, contradictions, violations, but also survival and resistance. She highlights both the production of inequality and the day-to-day struggle and resistance in urban space, so that the homeless population, by appropriating these spaces with their individualities, produce territorialities. In addition, the street becomes the home of these people, it is there that their lives unfold, and it becomes, at the same time, the public and the private.

Reflecting on housing, Robaina (2018) points out the centrality of the housing problem, considering that it is one of the most visible aspects and, therefore, the most questioned, since people sleep on the streets, a problem that can be intensified by different factors, such as increased rent, unemployment, eviction or even family conflicts that make living in the house unfeasible, because, after all, “not every house is constituted as a home” (ROBAINA, 2018, p. 120). Many people who are on the street could have a home, but they have broken ties with their family, so that in many situations there is not a lack of a home, but rather “the absence of a home to structure life” (ibid.).

Thus, the street for the homeless population is the center of life and socialization and is the main basis for the construction of territorialities (MENDES, 2010). Given this finding, the excerpts in Chart 5 show the importance and meanings of the street for the interviewees.

As can be seen, references to violence and danger are repeated in the above fragments and territoriality appears as survival. On the street, there is no privacy, as private life is constantly exposed. According to Robaina (2018), the socio-spatial practices of the homeless population are diverse. Perhaps the most symbolic is sleeping in public spaces, as unlike an elderly person who occasionally naps on a bench in the park, it is performed daily and “understood as private under the public eye” (ibid., p. 122). The homeless population, therefore, changes the purpose of objects and areas.

**Chart 3. Excerpts from interviews about non-access to consumption**

<table>
<thead>
<tr>
<th>Interview</th>
<th>Excerpt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview I</td>
<td>M.: “I don’t have that much access, do I? You see that I don’t have that much access (...) I don’t have the internet, I don’t have much access, I don’t have a cell phone, I don’t have a fixed address, I don’t have a car, so it’s difficult to access (...). My family is a bit far away, the neighbors, the godmother, they are so far away from home because of material assets…” (verbal information).</td>
</tr>
<tr>
<td>Interview IV</td>
<td>L.: “Do you feel like going to other places?” L.: “Sometimes I think of going to other places. There are other places out there. There are other CAPS, there are other houses (...) that serve food, right? Also free. There are other houses out there, there are other social homes” (verbal information).</td>
</tr>
</tbody>
</table>

Source: Field research, São Paulo, 2018. Elaborated by the authors.
The imperative of necessity and possible territorialities: the experience of homeless people attending a Brazilian Psychosocial Care Center

of the city, giving them domestic functionality (sleeping, eating, personal hygiene and objects and for the fulfillment of physiological needs) causing impacts in the city and social discomforts that expose the perversity of the current social structure (MENDES, 2010).

However, in addition to these issues, Miranda (2016) verifies that the lack of a formal job and homelessness for the homeless population are factors that guide their territorialities, based on appropriation and, concomitantly, on a confrontation with the established order. Following this perspective, there is a dialectic relationship between appropriation and property within the scope of experience: the street is the “home” of these people and it is where they relate to the world (MIRANDA, 2016). Therefore, as Miranda states, based on the work of Gomes (2002), the public space is where social issues conform, are publicized, become political and are resolved, either democratically or in an authoritarian way.

In the meantime, it is noteworthy, along with Bachiller (2009), Mendes (2010), Miranda (2016), Robaina (2018), that the visibility of homeless people selectively disturbs public power, depending on where in the city they are. There is no argument about the phenomenon itself or of its possible causes, but there are discomforts due to the presence and practices of this population in privileged areas of the city. Thus, public policies are generally aimed at intervening in these “annoyances” and not at guaranteeing fundamental rights and protection for this population segment.

THE RELATIONSHIP BETWEEN NEED AND TERRITORIALITY

Hannah Arendt (2007) ponders over the conditions of humanity and the meaning of life, in which the “excluded” are restricted to survival, ceasing to be part of humanity, thus dealing with a disposability associated with non-recognition of the human condition of these people (ARENDT, 2007; AGUIAR, 2012).

This disposability is directly associated with the world of

<table>
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<th>Chart 4. Excerpts from interviews about social reinsertion</th>
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<tbody>
<tr>
<td><strong>Interview I</strong></td>
</tr>
<tr>
<td>M.: “I could be at my house right now, in my room, listening to music. Sorry to say - I really do. Listening to my music, listening to my television [which I don’t have] or what I want to watch, listening to my music, listening to my radio [which I don’t have]. . .” (verbal information).</td>
</tr>
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</table>

| **Interview II**                              |
| L.: “So it’s more like the old town area over there?” |
| P.: “Yes, more like the old town.” |
| L.: “Do you feel comfortable when you go to such places?” |
| P.: “Yeah... I feel more comfortable.” |
| L.: “Why?” |
| P.: “Ah, that... you see people, yeah? You see the stores, things like that (...). There is a store, so you can have a look.” |
| L.: “What makes you go to these places?” |
| P.: “Curiosity, type of clothing, things like that, do you know what I mean? Like, clothes... things like that.” |
| L.: “So, you go there and look at the stores?” |
| P.: “Yes, I look at the stores” (verbal information). |

Source: Field research, São Paulo, 2018. Elaborated by the authors.
work, which, in current terms, is exclusionary. It is through work and consumption that people assume a social position, in order to “gain” or “lose” recognition (ibid.). And, in many cases, the absence or loss of ties with some type of work implies the loss of ties with family, community, friends, culture, etc.

These processes do not necessarily happen in this order, but the point is that “the laborization of bonds generated the massification and disposability of the individual as human, that is, beings who produce a world mediated by the meaning derived from discourse and action. The laborization of society produced the consumer society, in which the facilities produced by technology are linked to loneliness, to fear of the others and generalized violence” (ibid., p. 47).

According to Arendt (2007), human beings develop “three fundamental human activities: labor, work and action” (p. 15).

For the author, labor “has to do with vital needs” (ibid.) and for the development of this activity “the presence of others is not required” and “if the individual does it in complete solitude, this individual would no longer be a human being, but an animal laborans” (ibid., p. 31).

The author points out that when conviviality is denied, so is politics, highlighting that “plurality is the condition of human action” (ARENDT, 2007, p. 16). However “this plurality is specifically the condition – not just the conditio sine qua non, but the conditio per quam – of all political life” (ibid., p. 15). When there is no action and interaction between humans, the politics of life is not produced. Thus, in solitude and need, territorialities are based and limited to survival, because when we are in the sphere of need, supplying them is what is most important, and

<table>
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<tr>
<th>Chart 5. What does the street mean to you?</th>
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<tbody>
<tr>
<td><strong>Interview I</strong></td>
<td>M.: “Street man, (...). Street is just a hobby... when you don’t have a place to live, it’s just a hobby. If I was in my house, at my residence, I’d be at home watching a movie... it’s just a hobby. It’s the same thing when you’re with your girl in a square, I don’t know, discussing your private day-to-day problems, sorting out some family things. We’re here talking... it’s the same thing, the same moment” (verbal information).</td>
</tr>
<tr>
<td><strong>Interview II</strong></td>
<td>P.: “Ah, the street is practically a kind of strange coexistence, isn’t it? That you live with some people and others you don’t. There’s the world of drugs, right? (...) Then you go, you don’t go. There are different people like that, right? There is the danger, right? At the same time you’re safe, at the same time you’re in danger. Like, street... you might not have a document, then the police might stop you and want to arrest you, and you didn’t do anything. And on the street, you can either have friends and you can also fall for the same system, the system I just talked about (...). Then the police arrest you and you stay. This is what I think” (verbal information).</td>
</tr>
<tr>
<td><strong>Interview III</strong></td>
<td>“Street is the movement where we sleep and live (...). Movement in which you stay, you are helpless by society. The value of the street is a bit violent (...). Because it welcomes a lot of people” (verbal information).</td>
</tr>
<tr>
<td><strong>Interview IV</strong></td>
<td>L.: “Yeah, the street, right? The street is a little dangerous, the street is a little dangerous too, right? Yeah (...) yeah, a little dangerous, right? (...) I got to pick up recycling, right? But it’s a little dangerous, isn’t it? You have to be careful, right? You have to be careful, right? And you have to try to find better spaces, right?” (verbal information).</td>
</tr>
<tr>
<td><strong>Interview V</strong></td>
<td>A.: “The street is like that, messy, you always have to face it, right? (...) The street is the same (...). The others on the street, the others usually work, they are all the same” (verbal information).</td>
</tr>
</tbody>
</table>

Source: Field research, São Paulo, 2018. Elaborated by the authors.
doing politics does not become significant and most of the time, not even imagined.

Based on Arendt’s reflections mentioned above, Aguiar (2012) states that a society that creates workers is not concerned with protecting them, with empowering them beyond the support of the life cycle and the biological dimension of development.

Therefore, the matter of survival is at the core of the interviewees’ daily experience in the city and also mediates the relationship they establish with the CAPS, as shown in the interview excerpts (Chart 6).

The relationship established between these people and the service, the CAPS, is based on relationships that support the life cycle, the biological conception of life and care for basic needs. According to Arendt (1993), in addition to the lack of political action in the sphere of need, there are also no reflections on situations of violation, exclusion and alienation.

Corroborating Aguiar’s (2012) analysis of Arendt’s (1993) work, we understand that modern society has ceased to relate politics to freedom - to the human capacity to transcend, through talk and actions, within the scope of collective action - to relate it to need, with politics reduced to the care of life and the social issue. The philosopher is concerned with the meaning given to life when it is reduced to the sphere of necessity, understanding that lives whose meaning is strictly dictated by survival are in a situation of disrespect and heading towards ruin.

The logic of necessity does not presuppose freedom, public spaces in which there is interaction and relationship between citizens, nor does it attribute full power and citizenship to them. In this sense, Santos (2013) relates space, citizenship and the importance of the spatial component, pointing out that in the third world there are “non-citizen” forms of life and that in the logic of commodification there is the presence of a mutilated citizenship.

As shown in the previous chart, the CAPS and the services that the participants attend and with which they have links appear as places that meet their basic survival demands, such as bathing, eating, watching TV, protecting themselves from the cold, brushing teeth, among others. Territorialities appear to support these demands of biological life and allow reflection on biased citizenship in Brazil, which is not linked to access to rights and political action and freedom by the entire population.

FINAL CONSIDERATIONS

The research about the territoriality of the studied CAPS users was configured in a qualitative case study, which investigated the spatiality and territoriality of some users of the service in the city of São Paulo. The work was limited to pointing out paths of reflection to understand how these people relate to the city through reflections on the places they frequent and their motivations for doing so.
It was beyond the scope of this work to propose generalizations about the territorialities, habits and understandings of the city of people living on the streets and with mental disorders, since it would be necessary to carry out a more comprehensive investigation, not only considering the universe of users of the chosen CAPS®, but also in other Psycho-social Care Centers throughout the city of São Paulo, and throughout the country.

**Quadro 6. Qual a importância do CAPS para você?**

<table>
<thead>
<tr>
<th>Interview</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>M.: “Assistance from the CAPS, we can have coffee, lunch, shower, brush teeth, hair cut” (verbal information).</td>
</tr>
<tr>
<td>IV</td>
<td>L.: “It is, like, for example: there are days... there are days that it’s cold outside, right? It’s cold. And then it’s cold on the street... so if you stay on the street in this cold weather, the cold is bad, right? There’s nowhere to sleep. It gets very cold on the street. So, there’s no other place for you to sleep, for you to stay, right? And then, we come here” (verbal information).</td>
</tr>
<tr>
<td>V</td>
<td>A.: “It helps me a lot. I have lunch, watch TV, take a shower, talk to the others. It helps me a lot here (...). I just do the same things, watch TV, take a shower, talk to the others, I don’t do anything else” (verbal information).</td>
</tr>
</tbody>
</table>

Source: Field research, São Paulo, 2018. Elaborated by the authors.

Starting from the context of Mental Health, and with the intention of bringing reflections on the importance of debating and covering the theme of territoriality in this area, the complexity of the phenomenon of social exclusion and the non-realization of full citizenship by the homeless population in psychological distress was verified.

The territoriality for the interviewees, according to the data found, was limited to the sphere of need and survival of biological life, pointing to the centrality of the services that attend them, mainly the CAPS®, in providing their basic needs. The street becomes the home of these individuals and is configured in the dialectic tension between the public and the private. Class issues and access to consumption delimit the places that this homeless population frequents. In these places, the relationship with other people and/or groups is practically nil. It should be noted, however, that the locomotion of these people involves the recognition of themselves and the other through an existential distancing guided by inhabiting the streets of the city.

In the complex political and social context in which we live, the possibility of reflection on the CAPS opens up potentializers for the construction of other forms of territoriality that are not based on the need for survival and that go beyond the already pre-established circuit of perverse inclusion/social exclusion. Furthermore, the potential and need for greater articulation and interdisciplinarity between researchers in the humanities and health sciences around a better understanding of the spatiality, habits and forms of territorialization of this population in the city is clear. This is because several areas of study are interested in the debate on public policies in Social Assistance and Mental Health aimed at the homeless population, which often do not have dialogue with each other,
making the understanding of phenomena limited to the perspectives of health or humanities, when, in fact, the phenomenon under investigation is of interest to several areas of knowledge. Thus, investigations about the territoriality of people suffering from psychological distress and living on the streets deserves to be better investigated to enrich the policies of assistance for this population, considering the way in which people access it and the meaning they give to this process.
REFERENCES


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**INTERVIEWS**


APPENDIX: semi-structured interview script

1. How old are you?

2. What race/color do you identify with?

3. Until what grade did you study?

4. Do you have contact with anyone in your family?
   a. How is your relationship with them (if the answer is yes)?
   b. Why don’t you keep in touch with them? (if the answer is no)
   c. And before, how was your relationship with your family?

5. What city were you born in?
   a. How did you end up in São Paulo? (if not from SP)

6. Have you ever lived in another city?
   a. Which city?
   b. Why did you go to these cities?

7. How did you end up on the street?
   a. Do you remember when this happened?

8. If you had the opportunity to leave homelessness, would you?
   a. What would be the positive aspects that would make you make this decision?
   b. What aspects would be negative when making this decision?

9. Do you know about social housing programs?
   a. What do you think of them? (If they know of them)
   b. What do you think of the care centers?

10. How did you get to CAPS?

11. How important is CAPS for you?
    a. How does CAPS help you on a daily basis?

12. What’s your routine?
    a. What do you usually do day to day?

13. If you had the opportunity to leave the street to live close to the CAPS and in this neighborhood, would you live there?
    a. Why?

14. Do you go to places closer or farther from the CAPS?
    a. Why?
    b. What are these places?
15. Do you feel comfortable when you go to such places?
   a. Why? (if yes)
      i. What makes you go to these places?
      ii. What would make you go more?
   b. Why not? (If negative answer)
      i. What would make you feel comfortable going to these places?
16. Do you feel like going to other places that you don’t go?
   a. Why?
   b. What are the obstacles for you to go to these places?
17. What is the street for you?
18. What are the meanings of the street for you?
19. Which streets are important to you?
20. What makes them important?
21. Are there streets that you don’t like? Why?
22. Would any change make you like these streets? Which?
23. Do you watch (observe) the street? (Here observing has the meaning of contemplating, of seeing movement, etc.) Why?
   a. If not, why not?
24. Why did you choose this place to do the interview? How important is it to you?
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