SOCIAL REPRESENTATIONS HELD BY HOMELESS INDIVIDUALS REGARDING HOMELESS INDIVIDUALS WHO CONSUME DRUGS

REPRESENTAÇÕES SOCIAIS DE PESSOAS EM SITUAÇÃO DE RUA SOBRE MORADOR DE RUA QUE USA DROGAS

Lorena Cardoso Mangabeira Campos
Jeane Freitas de Oliveira
Carle Porcino
Maria Júlia de Oliveira Uchôa Reale
Milena Vaz Sampaio Santos
Marília Emanuela Ferreira de Jesus

How to cite this article: Campos LCM, Oliveira JF, Porcino C, Reale MJOU, Santos MVS, Jesus MEF. Social representations held by homeless individuals regarding homeless individuals who consume drugs. Rev baiana enferm. 2019;33:e26778.

Objective: to identify the structure of social representations held by homeless people of homeless people who consume drugs. Method: qualitative study based on the Theory of Social Representations, addressing 158 homeless individuals in the historic downtown of Salvador, Bahia, Brazil. Data were collected from November 2017 to January 2018 through the free association of words using the inductor homeless people who use drugs. Data were analyzed using two software programs. Results: participants were mainly Afro-descendent young men who completed primary school. The terms: discriminated against, lives at risk, excluded, and needs help compose the central core. The evocation discriminated against was central in the maximum tree. Conclusion: the set of evoked terms reflect situations experienced by the group under study and reproduces preconceptions and social stigma regarding homeless people who use drugs.


Objetivo: conhecer a estrutura das representações sociais de pessoas em situação de rua acerca do morador de rua que usa drogas. Método: pesquisa qualitativa, alicerçada na Teoria das Representações Sociais, com 158 pessoas em situação de rua do centro histórico de Salvador, Bahia. As informações foram produzidas entre novembro de 2017 e janeiro de 2018, mediante técnica de associação livre de palavras, com o termo indutor morador de rua que usa drogas, e processadas em dois softwares de análise. Resultados: o grupo investigado foi composto majoritariamente por homens, jovens, de raça/cor negra, com nível de escolaridade fundamental. Os termos: discriminado, vive no risco, excluído, e precisa de ajuda compuseram o núcleo central. Na árvore máxima, a evocação discriminado against mostrou ser central.

1 RN. MS in Nursing. Salvador, Bahia, Brazil. lorenacmc@hotmail.com
2 RN. PhD in Collective Health. Professor at the Universidade Federal da Bahia, School of Nursing. Salvador, Bahia, Brazil. jeane.foliveira@outlook.com
3 Psychologist. MS in Interdisciplinary Studies on the University. Salvador, Bahia, Brazil. carle.porcino@outlook.com
4 Psychologist. MS in Psychology. Professor. Universidade Federal do Recôncavo da Bahia. Santo Antônio de Jesus, Bahia, Brazil. julia_uchoa@hotmail.com
5 RN. Salvador, Bahia, Brazil. marilia_emanuela@outlook.com
Introduction

Homelessness and drug consumption are a worldwide multifactorial phenomenon that accompanies the development of humanity. Being homeless and/or using drugs are behaviors permeated with stigma and prejudice that lead to social exclusion. Even though one behavior is not necessarily related to the other directly, living on the streets promotes or enhances the use of psychoactive substances, as their consumption may facilitate the participation of people in collective gatherings and give a sense of belonging (1).

The consumption of alcohol and other drugs often appears in the literature as one of the main causes leading people to live on the streets. Nonetheless, “ [...] the consumption of alcohol or other drugs is more a strategy of subsistence that enhances alienation from a homeless situation than a condition or characteristic that aids establishing a definition of this population contingent” (2:131). Even though the homeless population is a social group apparently confined to the same physical and cultural spaces, one cannot define it based on a stereotyped pattern (3), in which all people are seen as “drunk” and/or “drug addicted”.

Homelessness and drug consumption are complex social problems related to social, economic and gender inequalities established by the cultural and political order, with distinct characteristics for distinct societies. The heterogeneity of individuals who consume drugs, as well as those living on the streets, is not always perceived by society or health services, which results in social exclusion that negatively contributes to the physical and mental problems of these individuals.

The ways in which drugs are consumed and what that means differ among people, as well as differing among groups within the same culture, such that they are “[...] even more distinct when we consider contrasting cultures” (4:1). To address these phenomena, one needs to establish an interlocution between reified knowledge and common sense, as well as to complement these different types of knowledge, taking into account the cultural aspects of the community to which individuals belong.

Acknowledging that phenomena such as drug consumption and homelessness exist in contemporary societies requires one to reflect on those involved in these situations, overcoming discourses that annul these existences through actions and campaigns enveloped in moral discourses under the argument that these individuals are dangerous (5). Therefore, it is relevant to explore the meanings this population assigns to the consumption of drugs, because social representations can guide practical life and enable individuals to take a stand in
the face of a socially disseminated object\(^{6,7}\). Analysis of these representations contributes to the implementation of policies favoring the inclusion in/access to health and social services for homeless people, decreasing the varied forms of violence, prejudice and vulnerability to which these individuals are exposed.

Given the preceding discussion, the following guiding question was used: How do homeless individuals represent drug consumption? Working with social representations enables reflection upon personal ideas and values concerning a given object as a movement of turning the unfamiliar into the familiar and what is familiar into the unfamiliar \(^{8,9}\).

This study’s objective was to identify the structure of social representations held by homeless people regarding homeless people who use drugs.

**Method**

This is part of a larger qualitative study titled “Homeless people: Social Representations of Drugs,” in which data were collected from November 2017 to January 2018. A total of 158 homeless people participated in the study. They were linked to the activities/inpatient or outpatient care provided by an AD (Alcohol and other Drugs) Psychosocial Care Center and to the Public Defender’s Office located in the city of Salvador, Bahia, Brazil. Both provide care/services to a considerable number of homeless people. The first provides care to those consuming drugs and the second provides individual and collective legal services, intended to promote and ensure the human rights of this population. These two settings were chosen because they are strategic services provided to the public that is addressed in this study and also because we take into account a broadened conception of health, the perspective of territory coverage, the intersectoral nature of health policies and networking.

Provided they were linked to the services chosen, people of any gender, race, and educational level aged 18 years old or older were interviewed. People showing any signs of recent consumption of psychoactive substances at the time of data collection or showing physical or psychological imbalance with an altered level of consciousness were excluded.

The Theory of Social Representations, used to analyze data through a structural approach, is intended to study the influence of social factors in the cognitive processes of representations by identifying and characterizing relationship structures\(^{10}\).

The Free Word Association Test (FWAT) was used to collect data through the oral inductor: *homeless people who use drugs*. This instrument is widely used in the Social Psychology field and reveals evoked semantic universes in response to one or more inductor stimuli, causing unconscious and uncensored content to emerge\(^{11}\).

The instrument is composed of two parts. The first addressed information to identify/characterize the participants and the second part was the test *per se*. It included an inductor, in response to which each participant was asked to evoke five words or expressions that immediately came to mind. Afterwards, the participants indicated the evocations they considered to be more important and justified their choices. The researcher took notes for those with writing difficulties.

Evocations captured by the FWAT were processed by EVOC (*Ensemble de programmes Permettant l’ analyse des Evocations* [Set of programs allowing the analysis of evocations]), which is based on the hierarchy of frequencies and average order of evocations (AOE). It enables identifying the structure of social representations and the graphic display of words that belong to the potential central and peripheral cores. The analysis was based on a framework with four quadrants\(^{12}\). The maximal tree of likeness generated by IRAMUTEQ (*Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires* [Multidimensional Analysis Interface for Texts and Questionnaires]) shows the conformation of the general structure of the representational field based on the connections established between terms, evidenced by the thickness of the lines. That is, the thicker
Social representations held by homeless individuals regarding homeless individuals who consume drugs

(broader) the line linking one word to another, the stronger the connection between terms\(^{(13)}\).

This study was submitted to and approved by the Institutional Review Board at the Federal University of Bahia, Nursing School (CEP/EEUFBA) through the Brazil Platform, opinion report No. 2,399,045. In order to ensure confidentiality, excerpts are identified with the letter P followed by the number that corresponds to the order in which data were collected (e.g., P1, P2, etc.).

Results and Discussion

The 158 participants – homeless individuals – evoked 565 words in response to the inductor term *homeless people who use drugs*, which were grouped according to semantic content. The Average Order of Evocations (AOE), which was 2.9, and the intermediate frequency of evocation equal to 27, were considered when data were organized for processing by EVOC, and 94.3% of the corpus was used. A framework with four quadrants was developed based on these criteria (Chart 1).

**Chart 1** – Structure of social representation (central and peripheral system) of homeless people in response to the inductor term *homeless people who use drugs* generated by EVOC. Salvador, Bahia, Brazil – 2018 (N=158)

<table>
<thead>
<tr>
<th>Elements in the central core</th>
<th>Elements in the 1st periphery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency ≥ 27 – AOE &lt; 2.9</td>
<td>Frequency ≥ 27 – AOE ≥ 2.9</td>
</tr>
<tr>
<td><strong>Element</strong></td>
<td><strong>Frequency</strong></td>
</tr>
<tr>
<td>Discriminated against</td>
<td>40</td>
</tr>
<tr>
<td>Lives at risk</td>
<td>34</td>
</tr>
<tr>
<td>Excluded</td>
<td>33</td>
</tr>
<tr>
<td>Needs help</td>
<td>28</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Elements in the contrast area</th>
<th>Elements in the 2nd periphery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency &lt; 27 – AOE &lt; 2.9</td>
<td>Frequency &lt; 27 – AOE ≥ 2.9</td>
</tr>
<tr>
<td><strong>Element</strong></td>
<td><strong>Frequency</strong></td>
</tr>
<tr>
<td>Abandoned</td>
<td>26</td>
</tr>
<tr>
<td>Drugged</td>
<td>23</td>
</tr>
<tr>
<td>Destroyed</td>
<td>22</td>
</tr>
<tr>
<td>They are humans</td>
<td>18</td>
</tr>
<tr>
<td>Suffering</td>
<td>17</td>
</tr>
<tr>
<td>To forget problems</td>
<td>16</td>
</tr>
<tr>
<td>Troublesome [person]</td>
<td>14</td>
</tr>
<tr>
<td>Steals</td>
<td>14</td>
</tr>
<tr>
<td>Enjoyableness</td>
<td>12</td>
</tr>
<tr>
<td>Choice</td>
<td>12</td>
</tr>
</tbody>
</table>

Source: Created by the authors.

Presentation and discussion start with the left higher quadrant, the one with greater importance, considering the potential central core. In response to the inductor term *homeless people who use drugs*, the following composed the central core: *discriminated against* (f = 40; AOE = 2.550); *lives at risk* (f = 34; AOE = 2.353); *excluded* (f = 33; AOE = 2.182); *needs help* (f = 28; AOE = 2.536).
and excluded presented the highest mean of frequency and order of evocation.

The term discriminated against appears at the center of the maximal tree of likeness (Figure 1), establishing the highest number of connections. The connection with the term excluded stands out, as it is the mostly readily evoked term among the central elements presented in Table 1. Even though the terms lives at risk and needs help, which appear as potential central elements, stand out in the ramifications that emerge, they do not appear to be central in the likeness analysis. This means that, a priori, the group under study sees homeless people who use drugs as discriminated against and excluded.

The connections around the term discriminated against reveal situations experienced by the participants themselves, as they are deprived of rights that lead to or aggravate vulnerabilities, as shown in the following justifications:

First, I'm discriminated against because I use drugs. Second, because I'm homeless. Third, because I live in the streets. For them [society], we are nothing but dogs […] we are excluded from society, for them… we have no future. (P93).

You are no longer accepted by society, we are frowned upon […] people walk away, assuming we'll beg. (P94).

**Figure 1** – Likeness analysis generated by IRAMUTEQ, with the inductor term homeless people who use drugs. Salvador, Bahia, Brazil – 2018

The terms discriminated against and excluded reflect a historical process of exclusion associated with a civilizing process that began with the industrial revolution. Unproductiveness was
commonly correlated with the use of psychoactive substances and the social construction of drug consumption, which stigmatizes certain people and/or groups and goes beyond time and space\(^{(14)}\). The use of psychoactive substances is still linked to the poor, Afro-descendants and immigrants, ratifying the discriminatory and exclusionary process still present currently\(^{(15)}\). These considerations reinforce the statement that social representations are socially structured fields in the intercommunication of social contexts over the short and long terms\(^{(9)}\).

The term *lives at risk*, the second most frequently evoked term \((f=34)\) and also the second AOE \((2.353)\), and the term *needs help* \((f =28; AOE=2.536)\), compose the quadrant of central elements. The explanations provided for *lives at risk* is that drug consumption is one of the strategies most frequently used for people to withstand adversity on the streets:

*People become more vulnerable to disease, to the evildoing of other people using drugs, the police.* (P75).

*It is no good living on the streets, especially during winter. There is no place to rest your head, you get wet. People set fires, steal, you can't afford to be hostile with anyone. You have to sleep in different places, each day it's a different place.* (P71).

*I guess people use drugs to alleviate physical and psychological pain from living on the streets. I don't use drugs but I talk to many who do and have various examples. Once, someone asked a boy why he was sniffing glue and he said that it was because he was hungry. The guy asked him: “What if I buy all the meals you can eat right now, would you quit sniffing glue?” And the boy said: “Man, the food you'll give me now won’t ease my hunger”.* (P149).

These explanations show that the use of drugs when living on the streets is configured into a model of consumption, with sociocultural values anchored on the singularities of the circumstances in which these people live. Most \((99)\) participants referred to drug consumption as the main motivation for life on the streets. Fifty-three of the participants reported they started using one type of drug and/or multiple drugs after becoming homeless. Considering the number of people using drugs and their justifications for the consumption of drugs, we infer that the group under study considers drug use to have become a motive for living on the streets, and since they are living on the streets, this behavior emerged as a survival strategy. This may represent a possibility to exist in and relate to the world and perhaps it is a strategy to deal with the pain of a life marked by frustration, conflict and hardship\(^{(16)}\).

The evocation *needs help*, element of the central core, is connected with the term *discriminated against* in the tree of maximal likeness, revealing the needs of homeless people. These terms, somewhat reveal a feeling of abandonment and a need to be embraced and receive support, be it provided by their families, society, healthcare workers, religious institutions and/or from the government.

*A homeless person is someone who's abandoned. A homeless person needs someone to help, people who give encouragement.* (P22).

*If these people had other opportunities, they wouldn't be there [...] if someone welcomed them and put them in a recovery center [...] (P51).*

* [...] the government is ending social projects. The government does not help, does not provide the support necessary to end or decrease consumption.* (P72).

According to the participants' justifications, the evocation *needs help* expresses their knowledge of the consequences and harm arising from becoming involved with drugs, such as dependency and death:

*The person is dependent and, if not helped, things can worsen even more.* (P54).

*It may not work out, somebody may appear and shoot him.* (P55).

In the set of words that form the four quadrants, in the right upper quadrant, the so called first periphery, the evocation *pay attention* \((f=33; AOE=3.273)\) appears, which somewhat confronts the idea of homeless drug users being abandoned. The expression *pay attention* occurred more frequently than the term *needs help* in the central core, though it was evoked only later. It is a very common expression in the participants' language and means that the drug users themselves need to seek help, such as highlighted by the following excerpt:

* [...] there is recovery; it depends on the person wanting it.* (P158).
This desire, however, has to do with other issues of an affective, psychological, social, religious and familial nature and with the contexts in which individuals live.

The left lower quadrant, called the contrast area, reveals elements that reinforce notions, most of which are present in the central core (17). One set of words composes this quadrant: abandoned (f=26; AOE=2.669), drugged (f=23; AOE=2.348), destroyed (f=22; AOE=2.227), suffering (f=17; AOE=2.000), steals (f=14; AOE=2.143). These terms dialog with elements that appear in the central core quadrant, confirming discrimination, exclusion, and vulnerability experienced by homeless people who use drugs.

Additionally, the evocations enjoyableness (f=12; AOE=2.250), choice (f=12; AOE=2.417), they are humans (f=18; AOE=2.556), to forget problems (f=16; AOE=2.188), and troublesome [person] (f=14; AOE=2.143) reveal specificities of drug consumption linked to the participants and their contexts.

Keep in mind that all the terms in the peripheral system are organized around the central core, anchored on a given concrete reality due to its flexible and mobile nature, which is sensitive to the immediate context (17). These terms, however, show the opinions of individuals who belong to the group, revealing the individual and dynamic nature of social representations. Thus, by concatenating the elements of the central core with those of the peripheral system, we understand the meaning and see how the elements in the potential central core materialized in the daily actions of the group under study.

Therefore, the process, as proposed in Central Core Theory, to analyze the participants’ social representations enables us to infer that homeless individuals experience a variety of oppressive situations and become the target of constant discrimination and violence. Additionally, there was generalized indifference toward those in this condition, especially because there is a social construction that marginalizes them and relates them to drug consumption and drug trafficking. Various authors (14,16,18) consider this phenomenon to be naturalized and configured as a permanent and historical phenomenon, marginalizing those who live in this condition.

This study presents some limitations. One limitation is the number of participants. Even though the sample is not representative of the homeless population in the city of Salvador, Bahia, it does reveal elements of social representations held by the group under study. These elements were produced with a data collection method and analysis appropriate to the Theory of Social Representations, enabling the method to be replicated with other groups for later comparison of results. Another limitation is the lack of international studies due to the specificity of the object of investigation (social representations of homeless people) and the context of the group under study. The results, however, contribute to improving the knowledge of drug consumption and the homeless population, providing elements to reflect upon the practice of care delivery, especially the practice in the nursing field.

**Conclusion**

The method adopted here enabled the identification of elements of the structure of the social representations held by a group of homeless individuals in regard to homeless individuals who consume drugs. This study shows this group to be discriminated against and excluded; that is, the use of drugs intensifies the deprivation of rights and aggravates the vulnerabilities of homeless persons.

These results show that not all homeless people use drugs and that the use of drugs may be the very cause of some people being homeless, as well as showing drug use to be a possible strategy to socialize and survive in the streets.

The findings presented here are anchored on ideas and social preconceptions that are culturally disseminated and objectified in situations experienced by homeless individuals, and for this reason, cannot be generalized. The group under study sees drugs as an element of destruction and a bad thing, but also as something to enjoy. The personification of drugs leads drug users to experience discrimination. Additionally,
the use of drugs intensifies deprivation of rights and aggravates vulnerabilities to which homeless individuals are already exposed.

Collaborations:

1. conception, design, analysis and interpretation of data: Lorena Cardoso Mangabeira Campos and Carle Porcino;
2. writing of the article and relevant critical review of the intellectual content: Lorena Cardoso Mangabeira Campos, Jeane Freitas de Oliveira, Carle Porcino, Maria Júlia de Oliveira Uchôa Reale and Milena Vaz Sampaio Santos;
3. final approval of the version to be published: Lorena Cardoso Mangabeira Campos, Jeane Freitas de Oliveira and Marília Emanuela Ferreira de Jesus.

References

Received: June 6, 2018
Approved: February 5, 2019
Published: April 26, 2019

The Revista Baiana de Enfermagem use the Creative Commons license – Attribution -NonComercial 4.0 International. https://creativecommons.org/licenses/by-nc/4.0/

This article is an Open Access distributed under the terms of the Creative Commons (CC BY-NC). This license lets others remix, adapt and create upon your work to non-commercial use, and although new works must give its due credit and cannot be for commercial purposes, the users do not have to license such derivative works under the same terms.