

Making Vulnerability Visible: An Experience Report of Nursing Students Working with Homeless People

Visibilizando a Vulnerabilidade: Um Relato de Experiência de Estudantes de Enfermagem em Ação com Pessoas em Situação de Rua
Visibilización de la Vulnerabilidad: Informe de la Experiencia de Estudiantes de Enfermería Trabajando con Personas Sin Hogar

RESUMO

A humanização na enfermagem envolve reconhecer o outro em sua totalidade, promovendo cuidado integral e acolhimento, especialmente em contextos de vulnerabilidade. Este relato descreve a experiência de estudantes de enfermagem na "1ª Feira de Saúde", ação social promovida pelo Projeto FASE, voltada à população em situação de rua na cidade de São Paulo. A ação contou com atendimentos multiprofissionais, como aferição de sinais vitais, orientações em saúde e distribuição de kits de higiene e alimentação. Foram atendidas cerca de 80 pessoas, majoritariamente homens negros, refletindo o perfil predominante dessa população. A vivência possibilitou a aplicação prática de conhecimentos técnicos e o desenvolvimento da escuta ativa e do acolhimento, pilares do cuidado humanizado. A ação reforçou o papel do enfermeiro como agente de transformação social, evidenciando a importância da empatia e do compromisso com a dignidade humana na formação profissional.

DESCRIPTORES: Enfermagem; Cuidado humanizado; População em situação de rua; Saúde pública; Estudantes de enfermagem.

ABSTRACT

Humanization in nursing involves recognizing the other in their entirety, promoting comprehensive care and acceptance, especially in vulnerable contexts. This report describes the experience of nursing students at the "1st Health Fair," a social initiative promoted by the FASE Project, aimed at the homeless population in the city of São Paulo. The initiative included multidisciplinary services, such as vital sign checks, health guidance, and the distribution of hygiene and food kits. Approximately 80 people were served, mostly Black men, reflecting the predominant profile of this population. The experience enabled the practical application of technical knowledge and the development of active listening and acceptance, pillars of humanized care. The initiative reinforced the role of nurses as agents of social transformation, highlighting the importance of empathy and a commitment to human dignity in professional training.

DESCRIPTORS: Nursing; Humanized Care; Homeless Population; Public Health; Nursing Students.

RESUMEN

La humanización en enfermería implica reconocer al otro en su totalidad, promoviendo la atención integral y la aceptación, especialmente en contextos vulnerables. Este informe describe la experiencia de estudiantes de enfermería en la "1.ª Feria de Salud", una iniciativa social impulsada por el Proyecto FASE, dirigida a la población en situación de calle de la ciudad de São Paulo. La iniciativa incluyó servicios multidisciplinarios, como la verificación de signos vitales, la orientación sanitaria y la distribución de kits de higiene y alimentación. Se atendió a aproximadamente 80 personas, la mayoría hombres negros, lo que refleja el perfil predominante de esta población. La experiencia facilitó la aplicación práctica de conocimientos técnicos y el desarrollo de la escucha activa y la aceptación, pilares de la atención humanizada. La iniciativa reforzó el papel de las enfermeras como agentes de transformación social, destacando la importancia de la empatía y el compromiso con la dignidad humana en la formación profesional.

DESCRIPTORES: Enfermería; Cuidado humanizado; Población en situación de calle; Salud pública; Estudiantes de enfermería.

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INTRODUCTION

Human vulnerability can be understood as an essential and universal condition, marked by exposure to social, economic, and health risks, which compromises access to rights and dignity^[1]. In this context, the vulnerable are characterized as the weakest, those at a disadvantage in terms of income distribution, services, quality of life, education, and health^[2]. All individuals are subject to situations of fragility throughout their lives, and structural factors such as social exclusion and inequality increase this vulnerability in specific groups, such as the homeless population^[1].

Currently, homelessness affects about 1.6 billion people worldwide^[3]. In 2018, Las2 Orillas magazine reported that approximately 70 million people in Latin America live in a state of indigence, characterized by the absence of minimum resources for survival, such as health, food,

and clothing, and may or may not be homeless^[4]. In Brazil, there has been an increase in the homeless population, concentrated in the Southeast region, especially in São Paulo, with a predominantly male, adult, and black profile, many with a history of formal employment but excluded from the labor market^[5].

This population has high morbidity and mortality rates, including infectious diseases (HIV, tuberculosis), worsening chronic diseases, mental disorders (anxiety, depression, schizophrenia), and a higher risk of respiratory infections due to exposure to cold, rain, and pollution^[6]. Individual factors, such as a history of neglect and psychiatric disorders, combined with social exclusion, unemployment, and lack of housing and education, reinforce their vulnerability.

According to the Institute of Applied Economic Research (IPEA), in 2022, approximately 281,400 people

were living on the streets in Brazil, representing a 38% increase compared to 2019, the period prior to the COVID-19 pandemic^[7]. These individuals face daily challenges such as homelessness, lack of adequate food, safety, and access to basic health services and dignity^[8]. One testimony reinforces the need for humane attention to this population:

"I don't just want people to stop and give me a coin or food. I want people to stop and listen to what I have to say"^[9].

Health promotion is a set of strategies and actions aimed at improving the quality of life of the population, acting before the onset of disease. It includes health education, encouraging healthy habits, social participation, and the creation of public policies that favor safe environments and healthy lifestyles^[10].

Humanized nursing care consists of recognizing the patient as a

Experience Report

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whole, going beyond clinical signs and symptoms, promoting acceptance, dignity, and bonding^[11]. This comprehensive practice encompasses physical, emotional, social, and spiritual dimensions, ensuring individualized care that is appropriate to the specific needs of each patient^[12].

Given this scenario, this experience report describes the participation of nursing students as volunteers in the FASE Project, promoted by the Habitar Church, in the Santa Cecília region of São Paulo. The "1st Health Fair" aimed to provide care to the homeless population by delivering hygiene and food kits and conducting an initial nursing assessment with vital sign measurements. The participation of the students sought to promote health in an integrative and humanized way, developing a holistic and empathetic vision. As Carl Jung points out:

"Know all the theories, master all the techniques, but when touching a human soul, be just another human soul."

METHOD

This is a descriptive study of the experience report type referring to the participation of undergraduate students in social action in health, where the target audience is homeless. Habitar Igreja Inclusiva Afirmativa LGBTQIAPN+ (LGBTQIAPN+ Affirmative Inclusive Church) has two congregations located in the state of São Paulo. At its headquarters in the Barra Funda region, it develops the Fase Project, whose objective is to develop actions focused on humanitarian aid, solidarity, and the value of life. In this context, the project developed an initiative called "I Feira de Saúde" (First Health Fair), the first edition of which took place in August 2025, in the Santa Cecília region of São Paulo.

The students participated in all stages, from the preparation of hygiene and food kits to direct involvement in technical activities. Multidisciplinary care was also provided, including nursing assessments, guidance on how to relieve foot pain given by the physical therapy team using easily found items such as PET bottles, and dental guidance on oral hygiene and how to correctly use the items in the distributed kit.

Approximately 80 homeless people who lived and slept in that square were involved in the action. In addition to them, there were also passersby. The majority of the group was composed of men, with some members of the LGBTQI+ community and a minority of women. The age group and level of education were diverse.

RESULTS

In June 2025, the professor invited students in their 5th and 6th semesters of nursing at Anhembi Morumbi University, who had previously taken the following courses: semiology, semiotics, urgency, and emergency. During the call for action, the "Fase" Project was presented by the Habitar church, which frequently carries out social actions in the Santa Cecília region, delivering food and hygiene kits to the vulnerable population in the region, and to date, there has been no action with a health team.

During the presentation, the students were fully committed to participating in this social action, as they realized that the "1st Health Fair," as it was called, would provide practical and theoretical experience of the content covered in previous classes, such as measuring vital signs. In addition to the humanitarian teamwork involved in making the items to be distributed to the socially vulnerable population.

At the beginning of the second se-

mester of 2025, the four students arrived at the church, located in Barra Funda, around 1:30 p.m. There, they were welcomed by the representative of Projeto Fase and Pastor Fernando Gonçalves, who immediately introduced them to the other volunteers who were contributing to the initiative. Among them were nursing technicians, nurses, dentists, and physical therapists. All of the supporters were members of the church itself. The location is a welcoming space, designed to create an atmosphere of peace and reflection. Upon entering, we are immediately enveloped by a sense of tranquility.

After getting to know the environment, the university students carried out the activities preceding the initiative. With the help of the other volunteers, they made approximately 100 hygiene kits, which consisted of a toothbrush, toothpaste, dental floss, and soap. In kits designed for homeless women, a pack of sanitary pads was added, so that the kits could meet the basic needs of the target audience.

Nutritional instability is faced daily by homeless people. With solidarity and appreciation for life, the Fase Project collected donations to provide snacks during the charity event. The students readily volunteered and set up an assembly line to prepare 84 hot dogs, accompanied by grape juice made by the students and volunteers present.

Figure 1 - Hot dog assembly line



Source: Personal archive

In addition to the nursing students, the event was attended by a dental team that gave a presentation on oral health, and a physical therapy team that provided instructions on how to relieve pain and improve mobility in the lower limbs, with an emphasis on the feet. In this way, the "I Health Fair" event took great care of its target audience, bringing health to the various aspects of the individuals present at the event.

All items for donation and food were organized in the cars and we proceeded to the team meeting, where each volunteer's role was explained clearly and objectively. The professor instructed the students to check vital signs, dress wounds, and correctly refer urgent or emergency cases. We preserved a humane approach, empathy, and sensitivity with this socially vulnerable population.

The volunteers divided into five cars and at 3:30 p.m. headed to the Santa Cecília neighborhood, a journey of approximately 10 minutes. The cars were parked at the location and organized for the best health care and distribution of hygiene and food kits. As the participants moved around, it was possible to see that the target audience approached to understand what the Fase Project was about and communicated with each

other to form lines for care.

The action was divided among sectors. The nursing, dentistry, and physical therapy teams donned PPE and began providing care, checking vital signs and covering wounds, while giving instructions and guidance related to their respective areas of expertise.

Just over 80 people were seen, with four students each seeing approximately 20 patients, always under the supervision of nursing professionals. Most of the consultations were with men, and it was observed that the majority of the public was black, which corroborates the data mentioned above, referring to the available records of the homeless population in São Paulo.

During the consultations, the students had the opportunity to experience, in practice, the procedures that were previously performed in controlled laboratory environments. Therefore, this experience provided greater exposure to reality, allowing them to encounter real-life situations, with external interference and unexpected situations. Through actions such as these, students become more familiar with their chosen profession, as nursing requires sensitivity towards patients and techniques that are improved through practice.

Blood pressure (BP) measurement

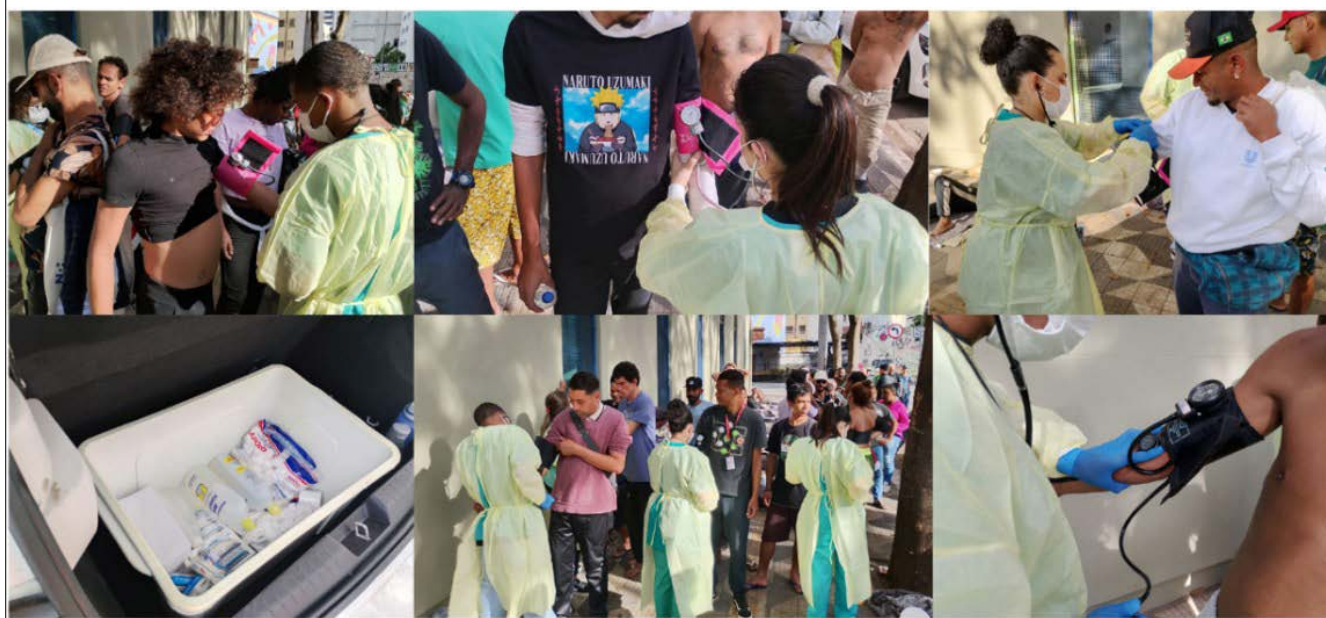
was the main vital sign requested during consultations, as it is a quick and easy-to-understand action for the target audience. This parameter is of great importance as it represents how much force the heart exerts to circulate blood throughout the body. The Ministry of Health^[15] states that values greater than 140/90 mmHg are considered high blood pressure, which affects about 27.9% of the Brazilian population and is associated with dietary determinants^[12].

Humanized and individualized care proved to be fundamental during the experience, contributing to reducing anxiety and stress during the situation and becoming the key to strengthening the bond between the team and the community. Care was not restricted to technique alone, but involved the biopsychosocial being in all its uniqueness, always respecting their physical, emotional, and social needs. Developing a professional and exemplary attitude, with empathy, clear communication, and active listening, brought the complete perception that patients were safe and comfortable with the care provided.

Experience Report

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Figure 2 - Students checking vital signs



Source: Personal archive

There were no emergencies, blood pressure readings remained within the normal range $<140/90$ mmHg, and only one of the approximately 80 patients reported facial edema due to toothache, but was using anti-inflammatory medication intermittently. Those who reported needing specialized care were informed that the basic health unit (UBS), the neighborhood referral center, is the gateway to the health care system. Thus, the requested care can be provided according to the flowchart established by the UBS.

It was commonly observed that some of those attended were only participating in the care in order to receive the items offered by the Fase Project. This eagerness to receive the items had a negative impact, due to the anxiety of individuals who were agitated to secure their kit. Despite being excited about the food, it was possible to appreciate the target audience's gratitude for the health initiative, with comments such as: "thank you for caring about us"; "It's been a long time since I had my blood pressure taken"; "Thank you for ask-

ing my name"; "So, am I okay?". These expressions made us reflect on how something as simple as checking blood pressure and listening humanely can be of great value to people in vulnerable situations.

After the products distributed ran out, the crowd dispersed and there were no more consultations, confirming the idea that the main factor that contributed to the large number of participants in the "I Health Fair" was the distribution of snacks and personal hygiene kits.

Once the action was completed, the objects used were disinfected and hands were sanitized to eliminate or inhibit the possibility of infection among the volunteers. We returned to the church at 5 pm and said goodbye to the members of the Fase Project with a sense of accomplishment.

CONCLUSION

The action proved to be a great ally for improving the technical skills of nursing students, based on public health demands and practice with people in external intervention scenarios, which

encourages adaptation to different environments and effective communication with the public served, bringing a sense of professional confidence to perform the procedures specific to the profession.

Nurses are care scientists, whose premise involves the quality of care and the well-being of patients. In the intervention with the vulnerable group, the evolution of the students' sensitivity during the consultations was noticeable. Thus, humanization is fundamental in the training of these future professionals, preparing them to work in the market with more consolidated knowledge and able to face adversity.

Being part of the "First Health Fair" and carrying out all the stages, from preparing snacks and hygiene kits to distribution and care, showed us the importance of actions focused on humanitarian aid, solidarity, and valuing life. "We brought bread, but we were the ones who were fed." Each participant who dedicated their time found emotional nourishment, human development, and a deeper understanding of solidarity during the experience.

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