

BURSTING BUBBLES OF INTERIORITY

Exploring space in experiences of distress and
rough sleeping for newly homeless people

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Homelessness, space and mental distress

Homelessness is an increasing problem in the UK, which intersects in multiple ways with experiences of mental distress. Within the term ‘homeless’ are contained people in a variety of living situations, including those living in temporary accommodation (hostels, couch surfing, B&Bs) as well those sleeping rough. The latter category is the least common, but on the rise. Between 2010 and 2016, rough sleeping more than doubled in England and Wales, with just under a quarter of total rough sleepers concentrated in London (DLGC, 2017). Loopstra et al. (2016) argue that the combination of recession and austerity has pushed homelessness upwards, with cuts in welfare spending on social care, housing services and income support for older people most clearly associated with this rise. Of new rough sleepers, around 70 per cent have a mental health diagnosis (NHS Confederation, 2012). This is not just a UK

phenomenon; a 2009 population based study in the United States similarly found mental health diagnoses to be three to four times more prevalent in the homeless population (Shelton, Taylor, Bonner, & van den Bree, 2009). This relationship is multifaceted. Both mental health problems and homelessness are argued to be inter-related outcomes of lives characterised by adversity, trauma and abuse (Kim, Ford, Howard, & Bradford, 2010). The relationship is also bidirectional; distress and mental health crisis can lead people to leave their homes, while homelessness, with its accompanying insecurity and potential for trauma, can also precipitate, deepen or trigger further mental health problems.

In this climate of rising numbers of homeless people, it is noticeable that several researchers have also pointed to the inherent hostility of the urban spaces that many rough sleepers negotiate. Hodgetts, Radley, Chamberlain, and Hodgetts (2007), for instance, discuss the ways in which public space is increasingly designed to subtly exclude homeless people through: “the design of park benches that people cannot sleep on and the hiring of security guards to remove vagrants from train stations or shopping districts” (2007, p. 722). Knowles (2005), in her study with people with mental health problems living in homeless hostels, found that her participants had to spend their days in public spaces defined by consumption and capitalism, from which they were both implicitly and explicitly excluded. She found her participants were often able to remain in certain low-status consumer spaces, generally food courts and fast food restaurants, for long periods of time on the condition that they did not trouble other customers; in other words: “remaining *invisible* is the price of using public space” (p. 224). This echoes the argument that our public spaces are ‘purified’ of difference, including visible distress (Parr, 1997), homeless people (Hodgetts et al., 2007; Hodgetts et al., 2008) and street drinkers (Dixon, Levine, & McAuley, 2006). The visibility of difference in

mainstream space is hence widely argued to be “a matter of public concern”, with difference seen to “infect, spoil or taint” (Hodgetts et al., 2007, p. 722) public space, and hence become a focus of control and risk management practices.

Such practices of public space can in turn be seen as part of a wider public/private “grand dichotomy” (Weintraub, 1997, p. xi) differentiating between forms of a wide range of phenomena, including: ‘internal’ experiences of the self versus ‘external’ social behaviour; family life versus political and workplace life; and even ‘publicly’ funded versus ‘privately’ owned organisations. More ‘public’ forms of socio-spatial practice (Lefebvre, 1991; Massey, 1994) hence might entail the presentation of a productive, rational self, capable of work (Foucault, 1965; Walker & Fincham, 2011) while more ‘private’ forms might include the expression of intimacy, emotion and sexuality (Mallet, 2004). Dislocating behaviour or activities that are usually ‘private’, such as intimate activities of sleeping and homemaking, into public space can be seen as “transgressing the moral geography of everyday behaviour” (Dixon et al., 2006, p. 197). Furthermore, a key ‘hidden’, or privatised experience in Western society, has been argued to be mental distress (McGrath & Reavey, 2013; Parr, 1997, 2008). Those people who are both homeless and experiencing mental distress can hence be seen to potentially doubly violate the normative practices of public space.

For those inhabiting space as a homeless person therefore, there is a difficult line to walk in retaining an acceptable invisible presence within public space. Hodgetts et al. (2010) describes homeless people as adopting a ‘chameleon-like’ functioning, adapting behaviour and physical appearance to the subtle shifts in the expectations and allowances of the public spaces that they inhabit. Dangers are also contained in homeless life, whether from violence or threats to health, so remaining safe is also a

key concern for homeless people, particularly women (Radley, Hodgetts, & Cullen, 2006) Considering the precarities of living in public space, it is perhaps surprising that Hodgetts et al. (xxx) consider the relative community and agency as embodied in the practices and communities of street homeless people compared to the isolated, low-quality and insecure housing that may be offered as an alternative.

Less explored, arguably, are the experiences of people who are newly homeless, and so have not established the patterns of homeless living described by Hodgetts and colleagues (2006, 2007, 2010). It is these experiences that we will discuss in this chapter, exploring how people who are newly homeless, without the strategies in place that help to maintain an acceptable invisible presence in public space. The question remains of what kinds of spaces people with no history on the streets, but living with experiences of distress, might seek, form and negotiate within the landscape outlined here. Considering the importance of questions of public and private, interior and exterior, and the creation of micro spaces of safety, we will draw here on Sloterdijk's (2011, 2014, 2016) theory of spheres, as a route to understanding some of the complexities in new rough sleepers' experiences. It is worth explaining some of the key features of this theory before moving on to describing the study and findings.

Sloterdijk's (2011, 2014, 2016) epic *Spheres* trilogy outlines his theory of space and subjectivity. He argues that human experience is fundamentally located and constituted through relationships. Whether on intimate, social or cultural scales, he argues that people together build shared spaces, or spheres, which define the boundaries of their world. On the most intimate scale, Sloterdijk talks about how through intimate relationships we create 'bubbles' of shared space, meaning, affect and habit. He argues:

The sphere is the interior, disclosed, shared realm inhabited by humans [...] Because living always means building spheres, both on a small and a large scale [...] Living in spheres means creating the dimension in which humans can be contained.

(Sloterdijk, 2011, p. 28)

The image of the bubble here is twofold. First, it captures the spatial nature of Sloterdijk's conception of subjective experience. Second, it captures the primary proposed function of building spheres, that of providing a layer of protection or separation from the rest of the world. Sloterdijk argues that through building bubbles and spheres, from the smallest scale of two friends sharing a coffee in the corner of a cafe, to a shared world religion that frames the world in a particular way, people protect and immunise themselves against the coldness and vastness of the world:

For humans being-in-spheres constitutes the basic relationship – admittedly one that is infringed upon from the start by the non-interior world, and must perpetually assert itself against the provocation of the outside, restore itself and increase. In this sense, spheres are by definition also morpho-immunological constructs. Only in immune structures that form interiors can humans continue their generational processes and advance their individuations.

(Sloterdijk, 2011, pp. 45–46)

The metaphor of 'immunology' is here used to describe how a shared space necessarily includes some element of exclusion; how the creation of interiority contains and necessitates an exterior. Elsewhere, Sloterdijk refers to the shared space as a 'climate'. Our climate on earth contains the conditions for living, but also has a protective

element; our atmosphere shields us from the ravages of outer space: intense cold, the heat of the sun and potentially deadly asteroids. In creating shared spaces of meaning, habit, affect and culture, therefore, Sloterdijk argues that humans work together to keep at bay the vast emptiness of existence. In this chapter we will explore how newly homeless people negotiate the hostile climate of public space, to seek out protective immunological bubbles in which they can exist in relative safety.

The study

This study aimed to explore the role of space in experiences of new rough sleepers who also had experiences of mental distress. The study was designed adopting a multimodal approach combining both visual and narrative data; an approach successfully employed in previous psychological explorations into both experiences of homelessness (Hodgetts et al., 2006, 2010; Knowles, 2005; Wang, Cash, & Powers, 2000) and experiences of distress (McGrath & Reavey, 2013, 2015, 2016). Photo-production was used as a tool to engage participants in the research, and to offer an alternative means of expression to complement the narrative (Reavey & Prosser, 2012). In order to empower an otherwise marginalised group, it was important during this research for participants to be collaborators rather than just respondents (Wang et al., 2000). As suggested by Reavey (2012), visual methods such as photo production can encourage participants to reflect on their emotions and experiences in particular settings. This was certainly found to be true in this research, where this method was successful in facilitating participants' reflections on both the spaces captured, and also spaces and places they were not able, or did not want to, visit. For example, some participants were reluctant to photograph anything at all, however the request to do so stimulated reflection as to the reasons, prompting interesting and meaningful dialogue.

Participants were recruited from three assessment hubs for new rough sleepers. To be included in the study, participants needed to also self-report as having experienced, or be currently experiencing, mental distress. The ages of the participants ranged from 24 to 51 years of age. There were 20 participants altogether, 13 men and 7 women. Ethical approval was gained from the host university before commencing the study, and the agreement of the services was also secured. The first author was also a member of staff in the service at the time.

Once participants had been recruited, they were given a disposable camera. Participants were asked to take photographs over the following 48 hours that captured spaces and places that were meaningful to them or within which they spent time. Ideas and examples were discussed and instructions regarding the usage of the camera, including ethical considerations such as ensuring anonymity of other service users. The cameras were collected, photos printed, and follow-up interviews were then conducted in the assessment hubs the following day. This truncated timetable was necessary due to the quick turnover of clients in the hubs; the service aims to have clients move on within 48–72 hours. Photo production proved to be a valuable tool in creating a relationship and rapport between the researcher and participant in advance of the interview. That the researcher had met participants on two occasions prior to the interview (once during recruitment and again when collecting the camera) allowed for a sense of familiarity, encouraging a more relaxed interview and perhaps deeper engagement from the participant.

Analytical approach

The interviews were transcribed verbatim. The photographs were primarily understood as prompts that helped to elicit accounts of the various places in which difficulties were

experienced, and hence given meaning by the participant in the context of the interview, rather than treated as data to be analysed independently (Reavey & Prosser, 2012). The photographic material was organised by each participant, who then responded to interview questions, in the light of discussing each photograph in turn. Our reading of the audio material was guided by the overall research question of how the participants experienced and lived in the spaces and places described. The concern with space was generated directly by our ongoing theoretical position, which directly connects distress with spaces and settings, shaping and mediating them and creating the possibilities for action (see Brown & Reavey, 2014, 2015; McGrath, 2012; McGrath & Reavey, 2013, 2015, 2016; Reavey, 2010).

After notating and coding the material with these questions in mind, the data were re-organised into themes, as well as considered in the light of literature that could help to contextualise the analysis. A process-oriented thematic decomposition (Stenner, 1993) approach was used to analyse the data. This thematic decomposition was achieved by following the stages of analysis that are commonly found in many forms of qualitative analysis (Willig, 2008). We familiarised ourselves with the data via repeated readings of the transcripts, generating initial codes by paying close attention to the meaning of the talk, followed by matching the initial codes together to form candidate themes and sub-themes. Each of the authors was involved in discussions around whether the theme titles and definitions adequately captured the meaning of the data. Our analysis can be seen as ‘theoretical’, as the data were read and notated from the beginning of the process of analysis in terms of how the space was constructed and accounted for by participants, using the theoretical position outlined above. Nevertheless, the interpretation produced was also ‘inductive’, in the sense that the final reading produced was based on a close reading of the material, and not on previously

fixed ideas about what the final themes would be. An interpretation also involved exploring the implicit meaning of the material, rather than a more descriptive, 'semantic' reading. The validity of the findings was ensured, using conventional qualitative procedures, including group analysis by key researchers and peer review, to ensure the analysis is sufficiently grounded in the data (Creswell & Miller, 2000).

Bursting bubbles: escaping the confines of isolated

interiority

The reasons described by participants for becoming homeless were multiple. Several described problems or breakdowns in intimate and family relationships as key, as is commonly found in the literature (Shelton et al., 2009). Several participants were also homeless following release from institutions – both prison and psychiatric wards. A number of participants also described their homelessness as stemming from their mental distress. This section will focus on some of those participants, who described a crisis of containment, a need to escape or overflow. One participant, for instance, commented on what drove her to leave home:

It was just like, I don't know what came over and I said right, I've got to leave. I can't cope, I can't cope. Right I just can't cope, I'm gonna leave, I'm gonna leave. All I did was to just grab my little bits and bobs that I needed, phone the landlord, handed my keys back and everything. All the goodness of mind was in there. I said I don't wanna know ... Because I just, for me it's like, almost like choking. I just needed to get out. I just couldn't cope. I just could not cope.

Here, the participant locates her drive to be homeless with an overwhelming feeling of being 'choked' in the space of her home. Her distress here becomes overwhelming,

seemingly over-spilling the contours of her living space to such an extent that she can no longer remain within the space of home and also 'cope' with her distress. This experience of internal spaces as confining, and an intensifier of distress can be a feature of mental health crisis, as we have explored previously (McGrath & Reavey, 2015).

Another participant described a similar experience:

Well I can't work, so therefore you can't put yourself into it, because you find while you're working your brain's occupied, but being stuck in a room while you've got all these other things going on, it just makes, I think it's just a point of it all ganging up on you, you just can't deal with it, while when you're working you normally have these problems and you deal with it in your head. I'd explain it like a solitaire, you know, with four aces. You prioritise and you put them there and once you've dealt with it you swipe it away, so that's how I've always dealt with it, but I can't seem to deal with it. With everything else going on I just can't seem to think straight.

This participant describes his distress here becoming overwhelming, dominating his experiences rather than being able to 'swipe away' or minimise these aspects of his experience through distraction in work and other activities. This highlights an important point about the living conditions of many of the people we interviewed. Before becoming homeless, many had already experienced a crisis of some kind, whether a family breakdown or job loss. This meant that they had often been forced into more confined, isolated living arrangements. Exacerbating the distress here is a reduction in the different spheres of his life; his distress has nowhere to go while he is 'stuck in a room' rather than being active in the world. Another participant described a similar experience:

I suppose I'm just used to only going to my bedroom for sleep but obviously everything else you do in the other rooms. But when you're stuck in a room and you're eating in that room because it's a family house, so you're eating in your room, you're doing everything in that same room, you become isolated. It's like a prison cell, and when you're losing your physical ability to go out and things, it becomes, it does become a prison cell where you feel like you're limited and all you've got is these four walls to look at.

While another similarly commented:

It's been like this for the last four years, I've been in a room, TV, bed, that's it. Sitting there, staring at four walls, errr, feeling, errr, useless. There's nothing I can do about it, I just, there's so much inside myself, just not going out ... sometimes just sitting there and not even eating sometimes. Just sleep.

These experiences together point to a particular issue with the isolated 'prison-like' living conditions common among those on the lowest rungs of the housing ladder. Supported housing, hostels, lodging and multiple occupancy housing all tend to reduce people's living spaces to a single room. All aspects of people's lives are folded together into this single space, with the 'four walls' described as encapsulating their confinement. As Latour (2005) argues, material objects can 'afford, allow, forbid, prevent' actions, interactions and experiences. Here, the 'four walls' of their small living spaces seem to both reflect back the participants' isolation upon them, reducing their capacity to make connections with the world. These experiences are described as compounded by the intensity of their distressing experiences. As we have previously argued (McGrath & Reavey, 2015) some intense experiences of distress can be

exacerbated in confined spaces, leading people to seek to distribute the intensity of their experiences through movement, social interaction and open spaces.

What these participants can be seen as describing is a crisis of interiority, intimacy and home. Described here are incidents of uncontainable intensity being experienced within a space of compacted, cut-off isolation. Sloterdijk (2011) argued that all bubbles that we create as spaces of intimacy and interiority ‘work towards bursting’. The experiences of distress, of “not being able to cope” or of having “too much inside myself” to be confined in such small, isolated spaces are here described as being implicated in leaving these spaces and becoming homeless.

A skinless existence: exposure, shame and visibility in rough sleeping

Once homeless, participants described in many ways the opposite experience: one of being over-exposed, vulnerable, almost “skinless” (Sloterdijk, 2011, p. 36) to the world. Compounding a physical sense (and reality) of danger, participants described deep senses of shame, and craving invisibility in public space:

Participant: I felt so low. I felt, I felt like nothing to be honest with you, I felt, sometimes I just felt to myself that I used to be a good person like most people, an average person, a working-class person, and now I’ve got nothing. Sometimes I just used to think is it worth me living?

Interviewer: How did it feel if people just walked past you? Do you prefer people to walk past or do you want people to stop?

Participant: Well I don't want anybody to see me most of the time, I just cover my head with my sleeping bag until somebody taps me on my shoulder or my leg and says are you alright? Most of the times I just cover my face.

Interviewer: You say you cover your face? Is that because you're embarrassed?

Participant: Ashamed.

An intense level of shame is here described as being felt through being visibly homeless in public space. Evidence of the emotions felt in response to their new social status manifested throughout the interviews with recurrent language such as "humiliation", "worthlessness", feeling "so low ... like nothing", "embarrassment", "failure", "shame", and feeling "victimised". Shame and humiliation are felt violations of moral or social standards (Tracey, Robins, & Tangey, 2007); these feelings can be seen as embedded in the rough sleeper's position in space. The inherent hostility of public space to those experiencing homelessness and distress (Hodgetts et al., 2007; Knowles, 2000; McGrath & Reavey, 2016) can be seen to be felt here by our participants, who experience their dislocation in space as a violation of a moral standard.

These general feelings of being out of space, were described as being compounded by occupying familiar spaces, now in changed circumstances:

I was sleeping on a little bench, and then the mosquitos were biting me, there was a sense of shame because when I was younger I was popular in that area. So, you know I felt like every time I saw a car with music playing, maybe there are people ... like even now I feel a bit ashamed, but sometimes you have to go through hardship before you can appreciate good things.

Here the participant described the particular shame of potentially being seen or spotted by people who they know, and who have known them in other periods of their life. Another participant, for instance, described sleeping rough in the area where he had grown up, meaning “My Dad saw me once, that was, that weren’t very nice.” In this context, it was noticeable that many of those sleeping rough for the first time moved a considerable distance from their homes. Contrary to research on ‘entrenched’ rough sleepers, who often congregate in communities or central sites, our participants described seeking invisible and distant sites when leaving their homes. As we will explore more thoroughly in the next section, several participants, for instance, described moving into the woods at the edge of London. Another participant, meanwhile, described sleeping in a stairwell, up on the ninth floor to avoid detection, as so high up, people are less likely to use the stairs:

This first picture is in a tower block. This is on the ninth floor. Over here is a stairway as you can see, a bit of the stairway, and over here is the landing. So what I tend to do is put my sleeping right on the bottom of that landing bit and just sleep there [...] where its on the eighth floor people tend to use the lift a lot. [...] it’s warm, you don’t get cold as much as you would out on the park bench or in the bushes.

Another participant described taking pains to make himself invisible even within public space:

Participant: It was umm ...a bush which is facing like a floating Chinese or a Japanese restaurant [...] I was right across the road from there so I could actually see the restaurant all the time. [...] It’s like really dark there and I’m a black person so [laughing] sorry ... so they really can’t see me if you know what I mean. You get the gesture of it.

Interviewer: Is that the main thing that you're thinking about when you're rough sleeping; where can I go so that people can't see me?

Participant: Yeah. It's always gotta be a dark corner, that's where I feel safer.

The participant here describes finding the darkest corners where due to his skin colour, he describes becoming invisible within the public space of the park. This, as well as hiding in the woods or under stairwells, can be seen as a strategy to combat the “skinless” (Sloterdijk, p. xxx), exposed experience of sleeping rough. Other participants described finding places to sleep within industrial estates, locked at night, while another spent some time sleeping in a car locked in a garage. Within the urban environment opportunities to disappear in this way are limited, and involve considerable creativity and skill. This experience of living without a bubble, in Sloterdijk's terms, is here described to be deeply felt and provide a further impetus for newly homeless people to hide.

Bubbles of interiority: creating home and security in exposed spaces

Caught between homes that stifle and public spaces that reject, our participants described multiple strategies for re-creating bubbles of interiority within such hostile spaces. As touched upon above, one of the key spaces described by participants for engaging in this process was the forest, and other hidden, green spaces. As well as being used to hide in, green, particularly wooded, spaces were discussed as important healing and comforting spaces for some participants. One female participant, in particular, described her camp in the forest, a tent in the middle of a bush, as a place of relative freedom:

Participant: God I miss my fox and my tent you know. I need peace.

Interviewer: Sometimes you think it would be better to go back?

Participant: Go back to the tent and just go in and see my fox again and feed it in the middle of the night you know, just have the birds tweeting and the deers in the morning and just, yeah I do miss the privacy and the kind of freedom.

This account is striking in comparison to the paucity of the living spaces described in the first section. Central to Sloterdijk's (2011, 2014, 2016) analysis is that our most intimate experiences and bubbles of space are fundamentally relational; in common with much developmental psychology, he saw the foundational relationship not as the individual, but as the dyad. Rather than a world closed in on itself, the forest here provides connection, with foxes, deer, birds; an experience of dyadic interiority facilitated by relationships with nature.

In common with several participants in this study, Sharon had found a temporary home here in Epping Forest, on the edge of London. Ashon (2017) describes this space as 'enantiodromic', as a space that contains opposites; it is both urban and rural, both an escape and an enclosure. As Ashon writes, the forest is an outside space that turns you in upon yourself; in contrast to the expansion of the mountain or meadow, forests constrain your view, hide you and discombobulate your sense of space and time. In much of literature and myth, from *A Midsummer Night's Dream*, through *Red Riding Hood* to *The Hunger Games*, forests occupy such a contradictory position; a place of both possibility and danger, where rules are suspended, senses heightened, relationships reformed and alternatives explored (Ashon, 2017; Harrison, 2009).

For our participants, seeking spaces of safety within the ‘skinless’ existence of being newly homeless, the dual nature of the forest as being both outside and enclosed seem to provide tools to create bubbles of interiority within outside spaces:

Participant: it was like a neat little base, you have to go like right in.

Interviewer: So they couldn’t see you there?

Participant: No. I was hidden [...] I was literally surrounded so I know nothing could get to me. I did it for safety, so if anyone would move I would hear the cracking and there would be no access to me. Nobody found me. You have to walk too deep in. Nobody would have seen me, nobody would have gone that far in because there are thorn bushes.

The enclosure of the forest is here described as being used to the participant’s advantage, as creating a natural barrier between her and the more exposed urban environment. In creating interiority within outside space, these participants can be seen to be finding ways to settle both their need to escape the confines of oppressive interiority seen in the first section, while also be safe within the ‘skinless’, exposed and shaming urban outside spaces.

A second strategy for settling this dilemma was that some participants described utilising familiar or safe institutional spaces in a similar way to Claire and Sharon describe using forest spaces. One participant, for instance, described bedding down in the doorway of his mental health service:

I was so like tired and I just wanted to sleep and I was shattered and like, I was looking over my shoulders, you know, but when I got to the Spires then I just slept outside their building. [...] I think it was early Monday morning because

Spires opened, this guy come up to me and I was fast asleep. ‘You alright?’ I thought yeah, he went, “I’ve just come out from prison” ... and it was very very early in the morning, you know, even the street lights were still on, and I thought ok, and then he just went, sat next to me, put his arm round me and I went umm ... take your arm off me please, he went “sure, no problem, do you want me to go home, I can bring you a cup of tea or something?”

Another described her favoured location for rough sleeping as being in the doorway of a church:

I always slept outside the church because I felt safe. It was quiet up there, I mean it’s basically, it was my safest option because I didn’t want to go down the West End because, don’t get me wrong, I had a little bit of hassle. I can handle myself to an extent but I must admit, I don’t go down the West End or down Camden because I’m anti drugs, [...] It was down the road from where I used to live. It was down the same road, just on the opposite side. It was quiet, umm, I knew, I knew people that lived in the area. Even, I mean, they even tried, I mean when I was there, they even tried to come either with cups of tea, like proper cups, that’s where I got this one from (points to cup), and I’ve kept it.

Both participants here can be seen to be using the familiarity of either the mental health service or the church as a way to create a bubble of interiority within outside space. The glimmers of domesticity described in both of these quotes are encapsulated in the ‘cup of tea’ brought from acquaintances in the area or the service. For these two participants, continued connection with past relationships are used to create the same feelings of (relative) safety, security and connection that other participants describe in the forest. These bubbles of safety are created through drawing on past relationships and

institutions, but can be seen as performing the same function, of creating interiority within the skinless world of homeless living; they here immunise their personal microclimates against the hostility of public space.

Conclusions

In this chapter we have outlined some of the key ways in which newly homeless people in London describe negotiating the relationship between space and mental health, and the strategies that they use to navigate the hostile spaces available to rough sleepers. These experiences highlight the multiple paucities of urban space; the inadequacies of many home spaces and also the harshness of urban public space. Participants described seeking a balance between stifling interiority and exposing exteriority.

For several participants, experiences of stifling interiority were described as playing a role in precipitating homelessness, in line with previous research on seeking movement and fluidity in mental health crisis (McGrath & Reavey, 2015). These intensive, claustrophobic bubbles of interior space can be seen as ‘bursting’ (Sloterdijk, 2011) dramatically with the rupture experience of homelessness. While arguably seeking freedom, what many participants described as encountering in public space was a ‘skinless’ hostility, danger and shame (Dixon et al. 2006; Hodgetts et al., 2010; Knowles, 2000). Responding to these experiences of exposure, participants described various strategies to re-create bubbles of interiority in exterior space: whether through creative use of urban space; utilising the interior/exterior duality of wooded spaces (Ashon, 2017); or connecting with institutions and past relationships.

It is worth noting that these different strategies had variant outcomes for the participants. The person who lay down outside their mental health service, spent only one night sleeping rough. Sharon, buried deep in Epping Forest, on the other hand, spent

12 weeks sleeping rough before encountering services once she had moved closer to the edge of the forest. Of course, this is partly through choice; Sharon explicitly compares her experience in the forest positively to being in the homeless service, and it is claustrophobia in home spaces that has pushed several of these participants into homelessness in the first place. It is certainly questionable whether a hostile environment would provide the same experience of simultaneous containment and expansion that Sharon describes in the forest. Nevertheless, it is worth considering that remaining invisible is such a driver in these newly homeless people with mental health problems, that this includes remaining invisible from any services attempting to help them.

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