



## PUBLIC HOUSING: RELATIONSHIP BETWEEN PSYCHOLOGICAL ASPECTS AND QUALITY OF LIFE

<sup>1,6</sup>Maysa Alves de Sousa, <sup>2,6</sup>Agamenon Rodrigues Sena Neto, <sup>3,6</sup>Thamyres da Silva Martins, <sup>1,6</sup>Aline Santana Figueiredo, <sup>4,6</sup>Wherveson de Araújo Ramos and <sup>5,6</sup>Adriana Crispim de Freitas

<sup>1</sup>Department of Nursing, Federal University of Maranhão, Brazil

<sup>2</sup>Department of Medicine, Federal University of Maranhão, Brazil

<sup>3</sup>Center of Biological Sciences and Health, State University of Pará, Brazil

<sup>4</sup>UNISULMA, Maranhão, Brazil

<sup>5</sup>Department of Food Engineering, Federal University of Maranhão, Brazil

<sup>6</sup>Tutorial Education Program, Imperatriz, Maranhão

### ARTICLE INFO

#### Article History:

Received 09<sup>th</sup> September, 2018  
Received in revised form  
27<sup>th</sup> October, 2018  
Accepted 06<sup>th</sup> November, 2018  
Published online 31<sup>st</sup> December, 2018

#### Key Words:

Social. WHOQOL-Bref.  
Psychological Domain.  
Subsidized. Health.

### ABSTRACT

**Introduction:** Quality of life reflects individuals' perceptions that their needs are being met, or that opportunities are being denied for happiness and self-realization. Regardless of your state of physical health or social and economic conditions. **Objective:** to analyze the influence of the psychological aspects on the quality of life of a residents living in public housing, contemplated by the *Minha Casa, Minha Vida* program. **Method:** Characterized as a cross-sectional, exploratory and descriptive study, with a quantitative data approach, performed in a housing complex in the city of Imperatriz. Data collection was performed from the WHOQOL-Bref application and analyzed in the Microsoft spreadsheet editor, Excel 2010, and using the Statistical Package for Social Science (SPSS) version 18 software. **Results:** Of the 283 interviewees when questioned about the use of life, 120 said that they enjoy life a lot, and when asked about as life makes sense, 43.1% of respondents scored 4 (quite), while 108 (38.2%) scored as a score. Regarding the level of concentration, 29.1% are concentrated. Regarding the level of satisfaction with himself, 46.3% answered that they are satisfied and 22.3% very satisfied. **Conclusion:** The *Minha Casa Minha Vida* program promotes improvement of life for each resident, as it heals problems related to the dwelling, promoting an improvement of comfort and well-being, observing that the perception of the psychological domain improved, with excellent answers on the part of each beneficiary.

Copyright © 2018, Maysa Alves de Sousa et al. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

**Citation:** Maysa Alves de Sousa, Agamenon Rodrigues Sena Neto, Thamyres da Silva Martins, Aline Santana Figueiredo, Wherveson de Araújo Ramos and Adriana Crispim de Freitas. 2018. "Public housing: relationship between psychological aspects and quality of life", *International Journal of Development Research*, 8, (12), 24827-24830.

### INTRODUCTION

According to the World Health Organization (WHO), the definition of health depends on some legal, social and economic implications of states of health and disease and can be expressed as "a state of complete physical, mental and social well-being, not just consisting of in the absence of disease (OMS, 2014). Menezes (2002) also affirms that health can be considered as the balance of the relations between the biological, ecological, cultural and socioeconomic processes

that take place in the society and that originate the conditions of life of the population. Thus, Quality of Life was defined by the World Health Organization Quality of Life Group (WHOQOL Group) as "the individual's perception of their position in life in the context of the culture and value system in which they live and in relation to their goals, expectations, standards and concerns" (FLECK *et al*, 2000). Based on this principle, housing is not only composed of the property itself, but also through the physical context of its insertion into the urban fabric, where the scene and the reproduction of social relations are located. The dwelling is understood as a complex of spaces, integrated activities housing, configuring a full urban life. For housing to be considered housing, it must add

\*Corresponding author: Maysa Alves de Sousa,  
Department of Nursing, Federal University of Maranhão, Brazil

benefits in favor of the quality of life of its inhabitant. It should gather in its environment, the provision of social instruments, such as school, basic health unit, trades and services equipped with infrastructure. In this way, housing is more than a shelter, it should provide a full relation to the 'dwelling', this verb is understood as synonymous with dwelling, being rooted in a safe place and belong to that place (PALERMO, PEIXER, 2013). The Minha Casa Minha Vida Program, regulated by Brazilian Federal Law No. (11,977) of 2009, was also designed and constructed to minimize or remedy the historical and robust deficit in the housing area. Despite being well-intentioned, in order to alleviate the population deficit, there has been a series of criticisms that call into question the lack of integration between the housing policy of the program and other public policies for urban development. In this sense, quality of life reflects individuals' perception that their needs are being met, or that they are being denied opportunities to achieve happiness and self-fulfillment, regardless of their state of physical health or social and economic conditions (PEREIRA *et al*, 2006). In this context, the present study aims to analyze the influence of the psychological domain on the quality of life of residents living in a public housing, contemplated by the Minha Casa Minha Vida Program.

## MATERIALS AND METHODS

The present research was characterized as being a cross-sectional study, seeking instant results, given a certain time and space in relation to the object studied, besides obtaining important personal and historical characteristics of a given population or community. Regarding the ends, it was an exploratory and descriptive study. Data collection was carried out in a public housing complex, located in the Imperatriz Town, in the State of Maranhão, Brazil. According to the Brazilian Institute of Geography and Statistics (IBGE), the municipality has a population of 247,505 inhabitants and a territorial area 1,368,987 km and the Human Development Index (HDI) of the municipality is 0.731 (Brazilian Institute of Geography and Statistics, 2009). The group has about 500 families benefited by the Federal Government Program Minha Casa Minha Vida. Regarding the ethical aspects, the research was submitted to the Ethics and Research Committee of the Federal University of Maranhão, having received the favorable opinion and approved under No. 2,421,898. The participants were informed about the purpose of the study and gave their consent by signing the Term of Free and Informed Commitment, as recommended by Resolution 466/2012 of the National Health Council.

### Sample

A total of 283 residents of the housing complex of the city of Imperatriz, Maranhão, Brazil, participated in the study. Residents who participated in the research were selected by sample of the non-probabilistic type and for convenience. The following inclusion criteria were used for the recruitment of the subjects: age (18 years), cognitive response to questions, answering the whole interview and being a resident of the housing complex.

### Data collection and analysis

The data collection was performed using a WHOQOL-Bref questionnaire. The WHOQOL-BREF module consists of 26

questions (being question 1 and 2 about quality of life), the answers follow a Likert scale (from 1 to 5, the higher the score the better the quality of life). In addition, the instrument has 24 facets which comprise 4 domains that are: physical, psychological, social relations and environment. For the present research was taken into consideration the psychological domain. This domain addresses issues related to positive feelings, thinking, learning, memory and concentration, self-esteem, body image and appearance, negative feelings and spirituality (religion and personal beliefs). Being questioned about this, participants responded by means of a score ranging from 1 to 5, where the number one means "nothing" and the number five "extremely". The data were analyzed based on the information collected by the questionnaires applied in the housing set and considering the bibliographic reference as a theoretical basis for the discussions that will be raised. For the treatment of the data, using the Microsoft Office EXCEL®2010 spreadsheet and the Statistical Package for Social Science (SPSS) version 18 software.

## RESULTS AND DISCUSSION

The 283 interviewees, 42.4% rated the number 4 (quite), 23.7% placed the score 3 (more or less) and 15.9% the score 2 (very little). When questioned about the extent to which life has meaning, 43.1% of respondents scored as number 4 (quite), while 38.2% answered number 5 (extremely) and 13.1% number 3 (more or less) (Table I).

**Table I. Satisfaction with the life of residents of a housing complex, Imperatriz, Maranhão, Brazil**

How much do you enjoy life?				
VARIABLE	F	%	PV	PA
Anything (1)	15	5,3	5,3	5,3
Very little(2)	45	15,9	15,9	21,2
More or less(3)	67	23,7	23,7	44,9
Enough (4)	120	42,4	42,4	87,3
Extremely (5)	36	12,7	12,7	100,0
Sum	283	100,0	100,0	100,0
To what extent do you think life makes sense?				
VARIABLE	F	%	PV	PA
Anything (1)	2	0,7	0,7	0,7
Very little(2)	14	4,9	4,9	5,7
More or less(3)	37	13,1	13,1	18,7
Enough (4)	122	43,1	43,1	61,8
Extremely (5)	108	38,2	38,2	100,0
Sum	283	100,0	100,0	100,0

F= Frequency; PV= ValidPercent; PA= CumulativePercentage

The concept of quality of life is as broad as that of health, since it is influenced by several factors, such as physical activity, psychological well-being, level of independence and social relationship (SIMÕES *et al*, 2016). Thus, housing is not composed as an isolated environment, it is part of a context in which and with which it maintains relationships, a list of basic elements such as education, health, leisure, income, among other fundamental subsidies for satisfaction of human life. In this way the level of use of life can be correlated with the physical structure of the housing complex, which often do not have leisure options. According to Kowaltowski *et al*. (2004), except for the most recent projects, no landscaping was included in the set up and no leisure area was provided. It is important to consider the expectations and the satisfaction of the users of a housing complex, because it is through these feelings that the realization of the resident as a user is configured. The introduction of improvements in housing

developments also depends on the contribution and active engagement of the residents in the control and management of the condominium and the diagnosis of positive and negative aspects. Physical and psychological safety aspects should be considered closely related to the feelings of well-being of residents. The psychological approach seeks indicators that address the subjective reactions of an individual to their experiences, thus depending first on the direct experience of the person whose quality of life is being evaluated and indicates how people perceive their own lives, happiness, satisfaction. The fact that psychological approaches consider quality of life, only as a subjective aspect to the person, disregarding the environmental context in which it is inserted, is the main limitation of this line of thought (PEREIRA; TEIXEIRA; SANTOS, 2012). The psychological aspects are related to physical factors, such as distances between constructive volumes and the relation of neighboring dwellings. Territoriality has to do with the community spirit and the feeling of belonging to the place. The aesthetic character and the extension of a housing complex are factors that influence these feelings. The conditions of socio-cultural interaction with the neighborhood also contribute to creating the community spirit. Engagement in environmental issues has been of great importance for the creation of these interactions (KOWALTOWSKI *et al*, 2005). Table II refers to the degree of concentration of individuals, where 29.1% had scores 4 (quite), 31.4% score 3 (more or less), 19.4% score 2 little), 5.3% the score 1 (nothing) and 14.5% the score 5 (extremely).

**Table II. How much can you focus on?**

VARIABLE	F	%	PV	PA
Anything (1)	15	5,3	5,3	5,3
Very little(2)	55	19,4	19,4	24,7
More or less(3)	89	31,4	31,4	56,2
Enough (4)	83	29,3	29,3	95,5
Extremely(5)	41	14,5	14,5	100,0
Sum	283	100,0	100,0	100,0

F= Frequency; PV= ValidPercent; PA= CumulativePercentage

Monteiro *et al.*, (2010) and Renner *et al.*, (2014) affirm that the analysis of quality of life encompasses the perception of the main human, spiritual and material needs and is related to the elements most necessary for human life, which are the housing, the right to clean water, work, food, leisure, education, health. These items are linked to well-being, the collective and individual relationship and comfort. Initially, the term quality of life began to be associated with improvements in the standard of living, especially related to acquired material assets. Subsequently, quality of life began to incorporate a sense of well-being, personal fulfillment, quality of relationships, education, lifestyle, health and leisure, psychological, physical and social aspects, as well as economic ones (SEIDL; ZANNON, 2004). Studies show that adults relate better quality of life due to the possibility of developing work activities, generate income and maintain the balance of finances that allow them to meet their personal and family expectations (SONAT *et al*, 2014). When questioned about the physical appearance, regarding the level of acceptance, 3.2% answered the number 1 (nothing), 6.0% the number 2 (very little), 26.9% the score 3 (more or less), 25.1% the number 4 (quite), and 38.95% the score 5 (extremely). Participants were also questioned about their level of self-satisfaction, with 46.3% responding as a score to number 4 (satisfied), 22.3% to number 5 (very satisfied), 18.0% to number 3 (neither satisfied

nor dissatisfied), 8.1% the number 2 (dissatisfied), and 15 (5.3%) the number 1 (very dissatisfied) (Table III).

**Table III. Level of participants' acceptance regarding physical appearance and satisfaction with themselves, Imperatriz, MA, Brazil**

Are you able to accept your physical appearance?				
VARIABLE	F	%	PV	PA
Anything (1)	9	3,2	3,2	3,2
Very little(2)	17	6,0	6,0	9,2
More or less(3)	76	26,9	26,9	36,0
Enough (4)	71	25,1	25,1	61,1
Extremely (5)	110	38,9	38,9	100,0
Sum	283	100,0	100,0	100,0
How satisfied are you with yourself?				
VARIABLE	F	%	PV	PA
Very unsatisfied(1)	15	5,3	5,3	5,3
Dissatisfied (2)	23	8,1	8,1	13,4
Neither satisfied nor dissatisfied(3)	51	18,0	18,0	31,4
Pleased (4)	131	46,3	46,3	77,7
Very satisfied(5)	63	22,3	22,3	100,0
Sum	283	100,0	100,0	100,0

F= Frequency; PV= ValidPercent; PA= CumulativePercentage

In the study by Menezes (2015), which addresses the question of the beneficiaries' perceptions about the affectivity of the Minha Casa Minha Vida program, he emphasizes that the survey questioned the interviewees about the perception of well-being at the time of post-occupation, from the general satisfaction with the new housing, the improvement of life (increase of well-being) and the intention to remain in the housing unit. The three topics presented very high scores, with averages of 8.77 for general satisfaction with the new dwelling; 8,62 for the perception of increase of well-being, related to the improvement of the living conditions; and an average of 9.44, pointing to the negative response of the beneficiaries to the desire to move out of the housing unit. Such satisfaction can be perceived since housing represents an achievement of private property and is for many the realization of a dream, in addition to being considered the apex of the material realization that brings out the principle of human dignity by providing the survival of the human being in the face of natural challenges such as rain, cold, wind, among others. Therefore, many individuals do not consider other factors that support an effective quality of life (SILVA, 2015). Still questioned about how often they have negative feelings, 56.9% put the number 2 (sometimes) as a response, while 14.8% answered the number 3 (often), 13.4% the number 1 (never), 7.8% the number 4 (very often and only 7.1% answered the number 5 (always) (Table IV).

**Table IV. How often do you have negative feelings, such as moodiness, despair, anxiety, depression?**

VARIABLE	F	%	PV	PA
Anything (1)	38	13,4	13,4	13,4
Sometimes(2)	161	56,9	56,9	70,3
Commonly (3)	42	14,8	14,8	85,2
Very often(4)	22	7,8	7,8	92,9
Always (5)	20	7,1	7,1	100,0
Sum	283	100,0	100,0	100,0

F= Frequency; PV= ValidPercent; PA= CumulativePercentage

In the study by Silva and Gomes (2016), the degree of dissatisfaction and dissatisfaction reached 79.69% of the population surveyed. Even those who say that they are satisfied, report that there is a possibility of surviving normally

in the place, but that living conditions would be much better if there were adequate paving and organization, that is, they strongly complain about the condominium's urban structure. It was also noticed that 73.44% of the residents said they had a desire to move. The coordinator of housing programs believes that the objectives of the housing project in the city are being achieved, ensuring greater comfort, safety and well-being for the inhabitants, but the index of residents who wish to move from the place demonstrates that the residents do not interpret such action in the same way.

## Conclusion

Looking at the facts it is understood that health should be seen in a holistic way, so a contribution of several factors must be made so that individuals reach the closest to complete well-being, which is often not remedied by lack quality of housing. Knowing this, it is seen that the Minha Casa Minha Vida project promotes the improvement of the quality of life but must be linked to several aspects such as health, leisure and entertainment. Thus, the psychological aspects can be influenced by the housing situation that the individual is in and the concerns surrounding the idea of the environment and problems related to housing, and it can be understood that the residents can correlate the housing achieved through the project, with the realization of the desire to achieve autonomy of the home, reduction of expenses as rent, and the probability of adding leisure and wellbeing before not provided. Therefore, it is concluded that the Minha Casa Minha Vida project promotes improvement of life for each resident, since it heals problems related to the dwelling, promoting an improvement of comfort and well-being, observing that the perception of the psychological domain improved, with optimal answers on the part of each beneficiary, showing how important is the continuity of such project and also the improvement and improvement thereof.

**Thanks:** The Tutorial Education Program - PET for funding the scholarships to carry out the work.

## REFERENCES

- ARAÚJO, Débora Cristina; VILLA, Simone Barbosa. Avaliação da Qualidade de Vida no Conjunto Habitacional Cidade Verde. II Congresso Internacional de Habitação Coletiva Sustentável, 2015 Seção do congresso: 3. Avaliação dos Critérios de Sustentabilidade.
- ARAÚJO, Denise Sardinha Mendes Soares de; ARAÚJO, Claudio Gil Soares de. Aptidão física, saúde e qualidade de vida relacionada à saúde em adultos. *Rev Bras Med Esporte*. V 6, n 5, 2000.
- COHEN, Simone Cynamon; KLIGERMAN, Débora Cynamon; MONTEIRO, Sandra Conceição Ferreira; CARDOSO, Telma Abdalla de Oliveira; BARCELOS, Mara Rejane Barroso. Habitação saudável como determinante social da saúde: experiências internacional e nacional. *RBPS, Fortaleza*, 24(2): 169-179, 2011.

- FLECK MP. O instrumento de avaliação de qualidade de vida da Organização Mundial da Saúde (WHOQOL-100): características e perspectivas. *CiencSaúdeColetiva*. 2000;5(1):33-8.
- KOWALTOWSKI, Doris C.C.K. Análise de parâmetros de implantação de conjuntos habitacionais de interesse social: ênfase nos aspectos de sustentabilidade ambiental e da qualidade de vida. Relatório final de projeto de pesquisa FINEP Processo: 2412/00 Programa de Tecnologia de Habitação/HABITARE, referente ao período de 19/04/04 – 19/11/04.
- KOWALTOWSKI, Doris C.C.K.; PINA, Silvia Mikami; LABAKI, Lucila C.; SILVA, Vanessa G, BERTOLI, Stelamaris R.; RUSCHEL, Regina C.; FÁVERO, Edison; MOREIRA, Daniel C. e RUIZ, Joyce A. Parâmetros de sustentabilidade e qualidade de vida na implantação de conjuntos habitacionais sociais. *ENCAC-ELACAC 2005*, Maceió, Alagoas, Brasil, 5 a 7 de outubro de 2005.
- MENEZES, Vitor Matheus Oliveira de. Percepções de beneficiários sobre a efetividade do Programa Minha Casa Minha Vida. *Revista de Ciências HUMANAS*, Florianópolis, v. 49, n. 1, p. 145-164, 2015.
- OMS. Relatório mundial de saúde, 2014. Financiamento dos sistemas de saúde: O caminho para a cobertura universal. Brasília, DF: Ministério da Saúde, OMS, 2014. Disponível em < [http://www.who.int/whr/2010/whr10\\_pt.pdf](http://www.who.int/whr/2010/whr10_pt.pdf)>. Acesso em: 22 de maio de 2018.
- PEREIRA, Érico Felden; TEIXEIRA, Clarissa Stefani; SANTOS, Anderlei dos. Qualidade de vida: abordagens, conceitos e avaliação. *Rev. bras. Educ. Fís. Esporte*, São Paulo, v.26, n.2, p.241-50, 2012.
- PORTUGAL, Flávia Batista I; CAMPOS, Mônica Rodrigues; GONÇALVES, Daniel Almeida; MARI, Jair de Jesus; FORTES, Sandra Lúcia Correia Lima. Qualidade de vida em pacientes da atenção primária do Rio de Janeiro e São Paulo, Brasil: associações com eventos de vida produtores de estresse e saúde mental. *Ciência & Saúde Coletiva*, 21(2):497-508, 2016.
- MONTEIRO, R. *et al.* Qualidade de vida em foco. *Rev Brasileira CirCardiovasc*, v. 25, nº 4, p. 568-574, 2010.
- SEIDL EMF, ZANNON CMLC. Qualidade de vida e saúde: aspectos conceituais e metodológicos. *Cad Saúde Pública*. 2004;20(2):580-8.
- SILVA, Luana Lima Bittencourt; GOMES, Almiralva Ferraz. Política pública de habitação e Desenvolvimento socioeconômico: Contribuição dos programas Implantados em Belo Campo (BA). *Ver BrasAdmPol*, 9(1):133-155.
- SILVA, Jacira Aparecida. A dignidade do ser humano e o direito social à moradia. *Revista Rumos da Pesquisa em Ciências Empresariais, Ciências do Estado e Tecnologia Cadernos de Direito*.
- SIMÕES, Siliana; CASTRO, Sybelle S.; SCATENA, Lucia M; CASTRO, Rafael O.; LAU, Fernanda A. Qualidade de vida dos portadores de hanseníase num município de médio porte. *Medicina (Ribeirão Preto)*. Online. 2016;49(1):60-7.

\*\*\*\*\*