Struggling to belong: social movements and the fight for feeling at home

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1 Introduction

In this chapter, we pay attention to social movements explicitly aiming at new ‘homes’. A first example is the movement fighting against ‘total institutions’ for people with psychiatric and intellectual disabilities. The people involved in this movement favour community care: patients should come to live in so-called ‘normal’ neighbourhoods and find their place, their home, among ‘normal’ people instead of being tucked away in huge institutions “in the woods”. Societal discrimination – resulting at the micro-level in people being outcasts, living isolated lives – should be countered by caring communities.

A parallel story can be told about gays and lesbians: since their family homes were often quite hellish for them – with family members rejecting their sexual preferences and often even pushing them out of their homes – they often had to look for new places that could become their home. In their search to create new homes, they often ended up in the big cities, where their anonymity helped to maintain invisibility if necessary. At the same time, metropolitan conditions favoured the flocking together of the like-minded, providing space and place for very public gay communities. In the development of gay neighborhoods like the Castro in San Francisco, self-organization of gays and lesbians has played a decisive role.

Social movements make claims for both groups of people who previously experienced home as some kind of “hell”: political and social discrimination either forced their invisibility at home (gays had to remain in the closet) or made them invisible for society by locking them out and up (in separate institutions). In both cases, the groups involved wanted to move out of these nightmare scenarios to find new places where they could really and literally call home. In this
chapter, we will look into the fight of these two social movements for new practices of home making.

Notwithstanding these similarities, we chose to research these two movements for their differences. As we will see, the role these social movements played in home making was not identical at all and, consequently, the outcomes in terms of ‘home’ diverge enormously as well. The new home making practices at the community level were far less successful for people with handicaps than for gays. In practice, the former moved from their big institutions (‘hell’) to small, independent housing (‘havens’ at best) – which is quite an improvement in itself – but with no integration in the community, no public home. What they got were new ‘havenly’ places that felt as ‘home’; secure, safe, comfortable, and very private, even somewhat isolated places – not exactly the type of new ‘home’ that the caring community movement was originally aspiring for. The fact that the movement in favour of community care was not so much a movement of people with disabilities themselves but of their – often self-proclaimed- spokespersons, that it demobilized in an early stage and that the actual implementation of reform was directed by professionals within a bureaucratic state, might well explain this outcome. The home making practices of gays, on the other hand, were intimately linked to social movements and collective action, resulting into public places for themselves, characterized by all elements of what we could call a ‘heaven’, providing space for identity and visibility. In this sense, the gay movement was critical in creating a home that was directly linked to the construction of a socially, ideologically, and politically cohesive community.

2 Conceptualizing feeling at home: hell, haven and heaven

Before we present the empirical data that corroborate these claims, we first have to better understand the possible meaning of home in relation to collective action. Though the study of ‘home’ seems to address micro-phenomena, it should incorporate wider structural forces that influence feelings of home. One cannot separate questions of how people inscribe space with meaning from social struggles involving class, race, gender and sexuality. Contrary to many psychological and culturalist studies, our analysis of home therefore explicitly focuses on power relations.
But what do we mean with ‘home’? “In contemporary social theory, images abound of exile, diaspora, time-space compression, migrancy and ‘nomadology’. However, the concept of home – the obverse of all this hyper-mobility – often remains un-interrogated”, Morley claims (Morley, 2001: 427-428). Though Morley is surely right when he states that ‘home’ is often under-theorized, his quote overstates the case if we read it as a general indictment of the research on ‘home’. Over the past decades, many books, special issues and articles have appeared on ‘home’, ‘feeling at home’ and ‘belonging’ that provide excellent overviews of the research to date (Blunt & Dowling, 2006, p. 67; Bozkurt, 2009; Després, 1991; Gieryn, 2000; hooks, 2009; Mack, 1993; Massey & Jess, 2003; Moore, 2000; Porteous & Smith, 2001; Rybczynski, 1986; Saunders, 1989; Saunders & Williams, 1988; Somerville, 1997).

Morley is right, however, that not all social scientists, let alone members of the public, make use of ‘home’ in a very reflective way. One problem with home is its very familiarity; people speak in terms of ‘belonging’ and ‘feeling at home’ all the time. For sociological understanding, this familiarity is both an advantage and a disadvantage. On the one hand, everybody can participate in the debate on ‘home’; on the other, many already claim to know what ‘home’ is and how it feels. Curiosity becomes rare. Paradoxically, this familiarity does not necessarily produce articulate ideas about what ‘feeling at home’ is, related to a peculiar aspect of ‘home’ and ‘feeling at home’: while everyone initially agrees that we know what it is to feel at home, the moment we have to describe what it means to us, we begin to stutter. Feeling at home, then, is one of those rare emotions that elude words. People may reveal, when urged to do so, that they feel ‘at ease’ when they feel at home, that they feel ‘safe’, ‘secure’ and ‘comfortable’, at ‘one with their surroundings’. If one feels at home, one is at peace – a rather passive state where things are self-evident because they are so familiar.

In other words, feeling at home is not only a familiar sentiment to us all; familiarity itself is one of its key defining aspects. Particularly environmental psychologists, who have carried out much of this research, stress the importance of ‘familiarity’ in their definition of home. From their phenomenological point of view, home is perceived as a safe and familiar space, be it a haven or shelter, where people can relax, retreat and care. Following the Indo-European notion of kei, meaning ‘something precious’ – from which the German word for home (Heim) is derived (Hollander, 1991; cited in Mallet, 2004, p. 65) – attachment to a home place is seen as a
primordial sentiment (Fried, 2000) created by familiar daily routines and regular settings for activities and interactions.

Sociologist Pierre Bourdieu acknowledges the importance of familiarity in ‘feeling at home’ as well. Whereas the unfamiliar is ‘out of place’, home is the place ‘to be’ – a place so familiar that it feels almost like a ‘natural’ place. Bourdieu writes: “The agent engaged in practice knows the world (...) He knows it, in a sense, too well (...), takes it for granted, precisely because he is caught up in it, bound up with it; he inhabits it like a garment or a familiar habitat” (Bourdieu, 1999, pp. 142-143). For Bourdieu, however, this ‘naturalness’ of feeling at home is not natural at all: it is culturally created. Bourdieu wants to understand why people experience places as natural – as ‘home’ – and criticizes scholars who fail to reflect on this ‘naturalizing’ effect of the familiar. Indeed, many environmental psychologists employ natural metaphors, in particular botanical ones: one is home where one is ‘rooted’. “Such commonplace ideas of soils, roots, and territory are built into everyday language and often also into scholarly work, but their very obviousness makes them elusive as objects of study” (Malkki, 1992, p. 26). In a wonderful article, Malkki points out that many ‘spatial’ metaphors carry this air of naturalness as well: “Metaphors of kinship (motherland, fatherland, Vaterland, patria, ...) and of home (homeland, Heimat, ...) are also territorializing in this same sense; for these metaphors are thought to denote something to which one is naturally tied” (Malkki, 1992, pp. 27-28).

‘Familiarity’ is a necessary but often insufficient condition for feeling at home. Other factors that may play a role resemble those aspects Rybczynski lists in Home: A Short History of an Idea (1986) that make a house feel like home: intimacy and privacy, domesticity, commodity and delight, ease, light and air, efficiency, style and substance, austerity, and comfort and well-being. If we leave out the material, house-bound elements, we have a list that resembles those of many other authors as well. In their intriguing Domicide: The Global Destruction of Home (2001), Porteous and Smith discuss the classifications of scholars who have been struggling with the many possible meanings of home. Summarizing their findings as well as the meanings we came across in hundreds of articles and books, we come to the following basic classification of the ‘elements of home’:

I. **Familiarity**: ‘Knowing the place’
II. **Haven**: secure, safe, comfortable, private and exclusive:
Physical/ material safety; mentally safe/ predictable

Place for retreat, relaxation, intimacy and domesticity

III.  *Heaven: public identity and exclusivity*

A public place where one can be, express and realize oneself; where one feels free and independent. Home here embodies shared histories; a material and/ or symbolic place with my own people and activities

This, to be sure, is a rudimentary typology (in a similar vein, Setha Low, 2004 distinguishes between a 'fort' and a 'castle'), but it suffice in our quest to understand the struggle of the two social movements we discuss in the chapter. ‘Haven’ covers aspects of home that pertain to feelings of safety, security and privacy, which most often relate to the micro-level of the house. Those aspects of home that come under the heading of ‘heaven’ (Porteous & Smith, 2001, p. 44) are more outward-oriented and/ or symbolic: they help individuals to ‘be’, develop and express themselves, and to connect with others, often through the creation of intentional communities and as a result of collective action. In that sense, as we will show, the ‘quality’ of collective action determines the type of ‘home’ that is experienced. But as we will see, whether experienced as haven or heaven, feeling at home is a highly selective emotion: we don’t feel at home everywhere, or with everybody. Sentiments of feeling at home, as produced by and within collectivities such as social movements, seem to entail including some and excluding many.

3 From hell to haven: home making by people with psychiatric or intellectual disabilities

In many Western countries, movements have mobilized in the past 25 years for policies of deinstitutionalization for psychiatric patients and people with learning disabilities. These people should no longer be banished to institutions in the countryside; it would be better for them to once again be a part of society, to live in ordinary neighbourhoods in towns and villages. While there would be additional support for these individuals, the idea was that they would live in their
own houses (instead of institutions) as independently and autonomously as possible. Since the late 1990s, this policy has broadly been referred to as *community care* (Means & Smith, 1998).

Prior to the 1970s, psychiatric patients and people with learning disabilities were viewed as patients in need of continuous nursing and tucked away in countryside institutions. At the time, the therapeutic ideal prescribed that the best place to care for these people was in large institutions far from their former daily environment. Patients could be cared for and supervised 24 hours a day; they would find peace and quiet, ample space and a well-regulated life. In the 1970s, patient organizations as well as professionals and academics began to criticize this ‘medical regime’, asserting that remote institutions only served to isolate people from ‘normal’ communities. These institutions were not only deemed discriminatory; they failed to make people less ill or disturbed. *Asylums: Essays on the social situation of mental patients and other inmates* (1961), the iconic work by the American sociologist Erving Goffman, was a source of inspiration for the critics of institutionalization. Goffman compared psychiatric hospitals to other ‘total institutions’ such as prisons, barracks, convicts and even concentration camps. Their ‘total’ nature was embodied in barriers such as locked doors, high walls, electric fences, water and woodland that precluded contact with the outside world. The worst feature of the asylum was that the inmate’s ‘self is systematically, if often unintentionally, mortified’ (Goffman, 1961, p. 15). Goffman and other influential critics, including the psychiatrists Laing and Szasz, stated that it was not so much institutionalized inmates who were ill or mad, as society itself.

In the 1970s, social movements postulated a new ideal that not only tolerated deviant behaviour, but even stated it was a healthy reaction to a sick society (Duyvendak, 1999). It was therefore also in the interests of society that psychiatric patients or people with learning disabilities were part of it.

*The era of deinstitutionalization*

The reaction of policy-makers to this criticism by social movements and social scientists was surprisingly responsive: they introduced a policy of deinstitutionalization, offering extramural support and treatment for patients who needed long-term care but who no longer lived in residential institutions (Kwekkeboom, 2004). Several western countries (the USA, the UK, Italy and the Scandinavian countries) closed down many psychiatric hospitals and institutions for people with learning disabilities, replacing them with small facilities in ordinary communities.
providing local extramural care. Norway and Sweden introduced legislation that entitled anyone with any kind of disability to live in a house in an ordinary neighbourhood; in fact patients had no choice as these countries no longer maintained residential institutions. In the Netherlands, policy-makers interpreted the criticism of institutions mainly as one of scale and type of housing: the size and impersonal nature of the institutions became a thing of the past as ‘small’ became the maxim of the 1980s and 1990s. Small-scale sheltered living units were established, first in the grounds of institutions, and later, beyond the institutions’ confines in residential neighbourhoods in towns and villages (Means & Smith, 1998; Overkamp, 2000; Welshman, 2006).

*Having your own home*

We interviewed about 70 people with psychiatric or learning disabilities living on their own in ‘normal’ neighbourhoods in the Netherlands. Most of the interviewed psychiatric patients had spent considerable periods of their lives in psychiatric hospitals. Of the respondents with learning disabilities, half had previously lived in institutions run by professionals; the others had lived with their parents. Most received a house in the town where they had grown up. Respondents had no explicit expectations about how it would be to live in their own place, nor any definite expectations about the atmosphere of their new neighbourhoods, e.g. whether they would feel welcome or if their neighbours would help them settle in.

What do we know about the ‘landing’ of these groups? First of all, respondents unanimously appreciated having their own houses where they could do what they wanted. They mentioned advantages such as not being constantly disturbed by others, being in control of what and when they eat, their bedtimes, pets in the house, having more autonomy, etc.: ‘Finally I am in control over the remote control’. No one wanted to return to their former living situation.

Once you are free in your own house, that’s really terrific. It’s just positive. Even when the weather is bad, it still seems as if the sun is shining. That’s my feeling here (man with learning disabilities, 30).

I decided that it was enough with all those non-stop intakes in hospital. I really wanted to have a life in a place of my own. And here I am now: I am really calmer now that I am
not continuously in and out of the institution and don’t have to live in a group anymore. I have the tendency to adjust myself always to other people around me and I’m happy now that it’s not necessary anymore (woman, 45, psychiatric patient).

For many years I lived in institutions with a lot of people constantly around me. But it is no good for me to be with so many people all the time, because my head becomes too busy then. Maybe I get mad one day. That’s why I have asked for a home of my own. And finally that worked out fine, because now I live here on my own and I like that very much (man with learning disabilities, 33).

Other research (e.g. Kwekkeboom, 2006; Kwekkeboom & Weert, 2008; Overkamp, 2000) has also concluded that most individuals with psychiatric problems or learning disabilities prefer to have their own accommodation, due to the privacy and autonomy this allows. In this respect, the quality of their lives has beyond any doubt substantially improved thanks to de-institutionalization policies.

*At home in the community?*

In general, the interviewees have very little, if any, contact with neighbours or other locals in their new neighbourhoods. Most did not introduce themselves to their neighbours after they moved in; nor did supporting professionals suggest they do so. Contact with neighbours was usually limited to saying hello, and, at best, to brief chats on the street. There was very little contact, such as occasionally drinking a cup of coffee together or helping each other with small tasks. Some interviewees mentioned unpleasant experiences with neighbours.

Interviewees’ indoor visitors are mainly relatives and personal caretakers, who are particularly crucial for people with few family contacts. Respondents looked forward to their daily or weekly visits when they could talk about what was going on in their lives and what was bothering them. In these cases the caretaker was often called ‘the most important person in my life’.
We asked all respondents where and to what extent they felt at home, and whether they felt a sense of belonging to their new neighbourhoods. Many immediately began to point around them, indicating they felt at home within their own houses. An important reason for this strong feeling of homeliness in one’s house has to do with the fact that most rediscovered a place for themselves, free of disturbances, after having lived in groups for many years in different types of institutions.

As for the neighbourhood, most interviewees did not mention definite feelings of attachment. The neighbourhood for most of them has no meaning whatsoever. They do not know their neighbours and do not participate in the life of the neighbourhood. Only in cases where they were born and raised in this (part of) the city do respondents mention an attachment to their environment that resembles a sense of belonging.

Clearly, the people that we have interviewed have a ‘haven’ – conception of home: they mainly associate this feeling with safety, security, comfort, domesticity and intimacy. Whereas the social movements and, later, policy-makers tend to privilege the ‘heaven’ interpretation – the community as a warm bath, where everybody can publicly be her- or himself – many psychiatric patients or people with intellectual disabilities mostly experience a feeling of belonging when they feel safe and secure, when they are with people like themselves, and when they are in familiar surroundings. It is this last aspect they have difficulty achieving, as they do not manage to establish meaningful contacts with neighbours and other locals.

Where was the movement?
The majority of the psychiatric patients and people with intellectual disabilities we interviewed tend to live as solitary individuals in their communities (or on little islands in the case of clustered accommodation). They are happy with their autonomy. They feel at home in their houses. Where their houses are located has limited relevance for them because they tend not to have contact with other locals. The outside world penetrates their houses almost exclusively via television, for here they can control the remote control – the outside world at a distance.

In retrospect it is rather surprising that in the planning of deinstitutionalization so little attention was given to the social context these people would end up living in. In the 1970s, the idealistic critics of total institutions perhaps naively assumed that society as a whole would benefit from the arrival in local communities of psychiatric patients and people with learning
disabilities. Moreover, though the home making process was triggered by social movements, these movements disappeared in the late 1980s, early 1990s, and therefore the actual implementation of reform was directed by professionals within a rather bureaucratic context. Whereas these movements – often composed of spokespersons of people with disabilities – paid attention to the social needs of the latter, this contextual aspect got lost afterwards. People with disabilities were not really able to collectively stand up for their wishes, let alone to proudly demand for special treatment (as the gay movement was, see next paragraph). While movements originally pushed for reform, professionals had the power over the realization of the reform, within a financially constrained context (one of the reasons for governments’ responsive reaction to social movements’ demands of deinstitutionalization was the idea that extramural housing would be cheaper…). Moreover, whereas the social movements’ idea of autonomy and self-realization was explicitly a social and contextual one – it was about living autonomously in the community – these ideas became part of neoliberal framing in the 1980s: living an independent life in the community became an indisputable principle because this ideal for people with psychiatric and learning problems fitted into the dominant ideal applicable to all citizens: living as independently and autonomously as possible. As a result, a rather individualized vision of home was used to guide strategies of how to create residential units for patients. In this instance, the emphasis of professionals was not on creating connections to the community but on helping individual patients to live their life as autonomous as possible. The strong presence of professionals and the absence of social movements meant that the construction of home reflected an individualized vision of home.

4 From hell to heaven: moving to the Castro, a gay neighbourhood in the making

In homophobic countries many adolescents who develop a same-sex preference want to leave their ‘hometowns’, in order to escape from fights with their families who refuse to accept their sexual orientation. In particular, when they develop same-sex relationships young gay people quite often are literally pushed away from the house and community of origin and drawn to inner-city areas (Rosenfeld & Byung-Soo, 2005, p. 559). As they leave their domiciles of origin,
the places of their past where they were born and bred, and look for a new home in their domiciles of destination, gay people experience a strong sense of up-rootedness. In the United States, where negative opinions regarding homosexuality were predominant till the late 1990s, gay men and lesbians born in the mid-West often flew to cities considered to be safe havens, such as New York and San Francisco. Their move to these cities clearly had a non-voluntary character. Homosexuals felt forced to leave the places where they grew up in order to feel free, ‘find’ their true selves and meet others with the same sexual preference. ‘Coming out’ stories are not coincidentally often framed in terms of ‘coming home’. Travelling to a new place finally provided the opportunity to act out their sexual selves.

Meanings of and attachments to gay neighbourhoods are the result of complex relations between social marginality and geographical (im)mobility. Below, after reconstructing how these places came into being, we analyze the shifting meanings gay men ascribe to the habitual space of the Castro, the extent to which they consider it to be a home place and how they collectively construct and visually display a public sense of home to the outside world.

**Mobility and marginality: where do they come from, where do they go?**

The process of gay men moving from traditional rural communities and smaller cities and townsto inner-city neighbourhoods is linked to push and pull factors. During the past decades gay men considered only two options for living a homosexual life. They could sublimate their sexual and erotic identities while staying in their hometown or they could opt for leaving and enmeshing themselves in the anonymity of urban life.

But where to go? Recently historians reconstructed how San Francisco developed into a gay capital, “a symbolic homeland of an identity and a city that was a haven for institutional support unknown in most American cities” (Meeker, 2006, p. 189). During the 1950s and 1960s especially, San Francisco’s reputation of a comfortable place for nonconformist sexual life extended to the image of a gay capital (Boyd, 1997, pp. 88-89). Obviously, the media played an important role in the creation of the city as a Mecca for gay men and lesbians, as they understated the notion of San Francisco as the centre of the gay world and thereby perpetuating gay life as a geographically fixed phenomenon (Meeker, 2006, pp. 190-191). Likewise, books played a similar role. Apart from assisting gays and lesbians in imagining communal identity,
writers also, by describing gay places, “pointed people toward what might imaginatively be thought of as a gay homeland” (Meeker, 2006, p. 67).

Although we cannot provide here a detailed history of the Castro (but see Armstrong, 2002; Leyland, 2002; Stryker & Buskirk, 1996), for our ambitions in this chapter it suffices to underline that as during the 1960s the Castro turned into a gay community, many gay men literally articulated a pronounced sense of neighbourhood pride and attachment. The neighbourhood was central to many activities, such as the yearly Gay Parade in June, the Castro Fair, Halloween and other public events that showcased how gays (and some lesbians) love to live in the Castro. Furthermore, gay men’s identification with the Castro as a home place was reinforced by the naming of distinctive restaurants and cafes such as Home and Welcome home. Many gay men indeed considered the Castro as an ideal place to live – a heaven – as is expressed in the following excerpt.

“In San Francisco, we’re the world, as much as anybody is. And you can carry that with you, (...) to … anywhere. There’s a reference point, an actual place you can go and see. You get up in the morning and go out and live in it. Stores, papers, billboards, people on the street, everywhere you fucking look. (...) Bite down: It’s there. (...) Hey: It’s home” (Tate, 1991, p. 276).

Many gay men experienced moving and settling into the Castro as an escape from hell. They felt they could stop dreaming about a better place, since it was right in front of them. Though they often felt they had no other option than moving to the Castro, many gay men did not experience the Castro as a ghettoized place but rather as a place to be finally free, to expose one’s true self and openly display their gay and lesbian sexual preferences. This public visibility of homosexual life marked the quintessence of the Castro as a non-conformist place to live and work. Since hiding one’s sexuality was what almost all gay men had done before coming to the Castro, to ‘come out’ and to be able to expose themselves in public – both to each other and to the homophobic outside world – became the corner stone of a newly acquired identity. ‘Being oneself’ was not something to be lived individually or to be confined to the private and intimate sphere of the house: not a ‘haven’ but a ‘heaven’. Gay men were able, most of them for the first
time in their lives, to make home amidst a public of likeminded people (Elwood, 2000; Johnston & Valentine, 1995, p. 100).

**The Castro**

In a sense, the Castro became a new home because it embodied the exact opposite of the hometowns people had escaped from. The Castro was consciously constructed as opposite to the repressive and unwelcoming outside world. By proudly affirming their identity, gays challenged the norms and family values of the ‘other’ America. Whatever reminded them of mainstream America was considered as non-Castro-like. The social mobilization of gay men in the Castro thus centered round a severe wish to feel, be and act differently and to be respected for that. Gay men considered the Castro to be a special place, to be defended against invasions of the generic. For example, in October 1999 an initiative called ‘Save the Castro’ mobilized against the arrival of a Starbucks chain shop and the extension of the cable car F-line to the neighbourhood. Protests against these developments were cast in a distinctive line of argumentation, such as in the following statement headed ‘A kind of War’.

“There is a war going on in our neighbourhood. It is a war for your dollars and businesses. Every time you shop at one of the new Chains stores, you take away business from local merchant owned shops and restaurants. Starbucks is symbolic of the kind of mega-corporation that buys up other chains and squeezes out competition. They are the McDonalds of coffee and are a part of anyplace USA. The Castro is unique in the world” (Wiggin, 1991).

The consequences of the cable car extension are depicted in the same way:

“It is possible that millions of people will be coming to this district very shortly, on these ‘historic cars’, designed we think to lure tourists onto them. (...) The problem is that this is the only neighbourhood like it in the world. The Castro has a kind of ‘mythic regard’ overseas, and we are the ‘guardians’ of this place for future generations” (Wiggin, 1991, emphasis in original).
This statement makes clear that the outside world has to remain exactly that: outside. The writer pronounces a strong sense of fear of losing a particular, exclusive home environment at the very moment outsiders ‘invade’ the neighbourhood. Interestingly though, the author appeals to an ethos of solidarity of gay men in San Francisco, not by emphasizing the local and rooted character of the Castro but by putting their struggle in a universal perspective. Only in case the Castro remains theirs, gay men in the rest of the world are able to consider the Castro as their home. Ron Wiggin, organizer of the ‘Save the Castro’ project, warns in a letter responding to his criticizers that this homely sentiment runs the risk to disappear:

“And if the Castro fades under the throngs of tourists from the not needed historic trolley car (…), and the rents go up more and the condemning attitudes of the out-of-towners coming walking down our streets, and the stores change to sell to them, and we don’t want to go there anymore because we don’t feel comfortable” (Wiggin, 1991).

The Castro had to remain special, not just for the inhabitants but for gays all over the world who looked at the Castro as their ‘own’ place (Chabot & Duyvendak, 2002). The Castro example shows how home-making practices at a very particular place facilitate the world-wide diffusion of an imaginary gay home (Adam, Duyvendak, & Krouwel, 1999). The Castro becomes a symbolic place, a symbolic home to gays and lesbians all over the world. As sub-cultural codes start to travel around the world, the local sense of familiarity becomes detached from its geographically vicinity. Processes of cultural diffusion accommodate feeling at home with others far away instead of with those randomly available next door.

The political context
Local policy makers in San Francisco did not do much to hinder the development of a gay neighbourhood, not only out of respect for the housing market (in which the government is not expected to intervene) but also because the idea of a place-bound community fits in the self-understanding of the San Francisco government as “A city of many neighbourhoods” (Godfroy, 1988; Pamuk, 2004).

Although the city government for a long time did not protect homosexuals against harassment and persecution (Beemyn, 1997, p. 87), since the 1960s, gays and lesbians in San
Francisco have become one among many ‘ethnic minorities’ (Gamson, 1995) and thereby fit into the ideology of the city as a mosaic of geographically separated social worlds. During election periods territoriality plays an important role, as city council members who are elected by districts and neighbourhoods favour those communities that live relatively concentrated. As during the 1970s the Castro neighbourhood also gained ‘its’ first homosexual representative, the famous late Harvey Milk, gays and lesbians were able to fully participate in regular political organization in order to further proceed a process of social integration and emancipation. The gay community seized an existing opening in the political system – voting per district – to promote its interests and to protect the fragile position of its members.

*The movement was there*

The gay movement has been successful to create a place that was accommodating to their ‘own’ people, a place characterized by amenities, contact points, and networking opportunities that made group socialization a central aspect of this new home. The centrality of the social movement helped create a particular identity for those in the place, reinforcing the willingness of individuals to defend their collective home against all real and perceived threats. In this sense, collective action was critical in creating a cohesive community. Such high levels of connectedness have in turn contributed to giving home-dwellers much more power – when compared to the individualized psychiatric patients and people with mental disabilities – in defining their ‘extended’ homes and reproducing their ‘public’ homes over time.

*5 Conclusion: contested communities*

In both cases, social movement activists had high hopes of the role the community could play in the ‘coming out’ of their respective constituencies: people with a handicap had to come out of their institutions and to live ‘normal’ lives among ‘normal’ people in welcoming communities; gays and lesbians had to come out and live according to their sexual preference – as everybody else does – at places of their own choice.

What happened was actually something quite different. Though people with mental and intellectual disabilities indeed left their ‘total institutions’ (and sometimes at an alarming rate!),
for many the place of arrival was not a warm, welcoming community. Depending on national and local policies, some ended on the street – this particularly occurred in many cities in the US – whereas elsewhere people got their own places but did not integrate into the community or society at large (this was often the case in welfare states like the Netherlands). In all instances it shows that ‘normal’ communities are not necessarily very receptive to newcomers in the neighbourhood. Since social movements campaigning for community care seriously weakened during the 1990s, there was no pressure anymore to open up communities to be more welcoming to various groups of people with handicaps. Moreover, professionals implementing de-institutionalization policies framed the former movement ideals of autonomy more and more in neoliberal terms of self-reliance. In spatial terms this implied that the ambition to construct public ‘homes’ for ‘deviant’ people got lost, or better, was transformed in an individualized conception of private homes. The lack of social movement pressure to fundamentally change the public space in order to facilitate newcomers to ‘mix’ with longer-term residents, caused this narrowing down of ideals from community care to individual independent living. Since people with psychiatric problems and those with mental disabilities are not exactly easy ‘mixers’ themselves, the absence of a welcoming context implied their social isolation and their experience of home as a safe ‘haven’ at best – not as a ‘heaven’.

The Castro in San Francisco shows, on the other hand, that ongoing collective action can materialize in a public ‘home’, a ‘heaven’, in this case for gay men. Gays (and some lesbians) were successful in establishing their ‘own’ home in the 1970s and 1980s. Moreover, as our analysis has shown, real and perceived threats were countered by permanent mobilization: the success of the Castro – its transformation from a rather run-down neighbourhood into a very fashionable and popular one – attracted goods and people (Starbucks, the cable car and heterosexuals) that were perceived as ‘alien’ to their ‘home’, as undermining their home feelings. In the perception of those involved, collective action was the only guarantee to preserve a home for those who actually live in the Castro, but also for gays and lesbians worldwide for whom this particular San Francisco neighbourhood has become a universal symbol for the right to have your own public place, the right to belong, to a ‘heavenly’ home.


