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Homelessness in Seattle

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While unhoused and mentally ill populations both fit the qualifications for being among the most disadvantaged members of society, they are dissimilar in the way their struggle is systematically managed. While these populations often overlap, there is a far stronger “safety net” for mentally ill individuals, that actively seeks out “unstable” individuals. The same cannot be said for measures that are employed in the face of homelessness. Homelessness is seen as simply a growing issue, individuals experiencing homelessness are often dehumanized and simply seen as a drain on the community. Additionally, the perception and treatment of unhoused and homeless people have been historically more merged than it is today. Insane and unhoused citizens were considered the “deserving” poor, and subject to more support. To make the proper comparison, historical homelessness and insanity will be analyzed, followed by modern homelessness and insanity.

While in the modern era, peoples around the world are more than familiar with the issue of homelessness, in early settlements across the United States, the presence of “paupers” was much less ignored, as there was both less space to house people, and less resources. As such, having to support a person, or even having a person not contributing to the community was much more pressing. Additionally, due to the difficult life of the settlers, being mentally ill meant that you were unhoused. This creates a contrast with our current situation, in which the reverse stigma is assumed, that almost all homeless people are also mentally ill. However, today, most of our care for mentally ill individuals are for citizens who are previously housed before requiring care, those that acquired their illness after becoming unhoused. Historically, the divide between the unhoused and the insane (which were also unhoused) was better communicated. However,

this divide was mostly in order to criminalise and subjugate the sane homeless into labor. Indeed the “‘undeserving poor,’ a category that included any pauper, no matter their age, gender, or condition, deemed by the authorities as able to perform some type of work” (Ensign 18) are historically penalized and forced to do manual work at “poor farms”. However those considered to be part of the “deserving poor”, that is to say, those unable to work due to, namely, mental illness, were entitled to “board, nursing, and medical aid.” (Ensign 19)

The contrast between historical and modern responses to the sane homeless lies in the lack of current overt criminalization of poverty. In the era of the Poor Laws the “undeserving poor” were members of society that were seen as capable of labor and culpable for their poverty. In today’s day, where simply working isn’t necessarily enough to keep people off the streets, the approach to homelessness has changed. While, often, the homeless are blamed for their poverty, we’ve traded work camps for denial and criminalization. Moreover, historically, the mentally ill and sane were treated differently, with mentally ill “paupers” being subject to a “‘meticulously sane’ environment” (Ensign 21) with a “strict daily routine, employment of some type of outdoor exercise, and intellectual stimulation.” (Ensign 21) Much nicer than the classic amenities that are procured for the homeless today. Indeed, the distinction between mentally ill and sane homeless people has disappeared, and they are all essentially being treated as “undeserving poor” and ignored or subjected to “forced evictions or ‘sweeps’ of the encampments” (Tars 2) and citations that decrease their future economic mobility.

In conclusion, while today’s society has the advantage of not subjecting the “undeserving poor” to forced manual labor, we instead have generalized mental illness to all homeless while not offering even close to the same care that would’ve been given to the “deserving poor.”