Seminar 1: (Mis)trust, Loyalty, Scandal: Competing Notions of Legitimacy and Fairness in Homeless Social Assistance

Chair: Nóra Teller, HU

Simon Tawfic, UK: The Impossibility of Deservingness: Sincerity, Intersubjectivity and the Allocation of Homeless Assistance

Simon Tawfic is an ESRC-funded PhD candidate in the Department of Anthropology and a Leverhulme Programme participant in the International Inequalities Institute, both at the London School of Economics.

This paper examines how agents of the public good in Castlebury's homeless industry negotiate the fraught question of how to distribute scarce resources. In popular discourse as well as social scientific scholarship, commentators have long observed that there is a 'moral hierarchy of deservingness' which explains why certain subjects are deemed as worthy recipients of public assistance whilst others are excluded. I suggest that this conception of 'deservingness' - as an immutable either-or category that maps neatly onto a person's perceived subjectivity across time and space - fails to account for the divergent (even contradictory) evaluations of 'deservingness' which vary between a multiplex array of caregivers within fragmented institutional settings such as Castlebury. Rather than relying on a moral hierarchy of deservingness to elucidate the distribution of scarce aid, I argue that allocative decisions rely on evaluations of a subject's sincerity and trustworthiness. I suggest that this is due to organisations' own fragility and reliance on financial aid: the work of cultivating a public persona which is deserving of moral and financial support engenders dependence on their clients' 'stories' in such a way that these organisations can demonstrate the value of their philanthropic interventions. This analysis underscores the intractability of exclusion from public good provision that occurs in needs-based aid projects.

Stephanie Grohmann, UK: Where Have All the Homeless Gone?: Medical Citizenship, Precarity and the Construction of the ‘Health Uninsurant’ in Austria


The Covid-19 pandemic has radically shifted dominant views of homelessness from an individual problem to a public health issue. Western countries quickly realized that due to lack of opportunity for self-isolation, and the sharing of basic resources, homeless populations are at a heightened risk of acquiring and distributing infection. However, responses varied widely – while some countries were quick to provide individual accommodation in disused hotel rooms etc., others markedly lagged in providing any response at all. Perhaps most surprisingly, the nature and speed of responses did not overtly correlate with attitudes and practices in pre-pandemic times: countries like the UK, which ‘normally’ have comparatively low welfare provision, were quick to provide accommodation and vaccination. Conversely, Austria, which prides itself on a comprehensive welfare- and health insurance system, was much slower to respond. Particularly the city of Vienna, otherwise renowned for its tight-meshed net of ‘Wohnungslosenhilfe’, entirely lost track of large parts of its unhoused population over the winter months, as fear of infection in crowded shelters drove the homeless to seek shelter in the canals below Vienna and the vast forests surrounding the city.

This seeming paradox can be understood through the construction of medical citizenship and health care rights in countries with compulsory health insurance systems, which require wage labour and/or unemployment benefits as conditions of health care access. Designed around a ‘normal biography’ modeled on the relatively sedentary lifestyles of the mid-20th century, these systems are thus not prepared for the realities of 21st century European migration, nor of precarious labour and the emergence of the domestic
working poor. In addition, Austrian governments of the past few decades have painstakingly constructed a discourse that associates homelessness and lack of welfare access with migration, in order to maintain the impression that poverty is an Ausländerproblem (foreigner problem). This othering of what Čebron (2010) calls “the Uninsurant” thus serves to obscure domestic feedback loops between labour market deregulation, precarious work, and health care exclusions. The slow Austrian pandemic response – which only started vaccinating the homeless in May 2021, long after most of the settled population – is thus indicative of an institutionalised unwillingness to recognise poverty as a domestic problem, and to provide services that might ‘incentivise’ foreigners to seek access to the Austrian welfare system. The ‘disappearance’ of Vienna’s homeless during Covid-19 thus underscores that the manufactured complacency of constructing the ‘Uninsurant’ as foreigner ultimately costs lives – those of the urban poor, and in pandemic times, potentially anyone they come in contact with.


Luisa T. Schneider specialises in the anthropology of intimacy, violence and law (Sierra Leone, Germany). She is assistant professor the Vrije Universiteit Amsterdam and a research partner at the Max Planck Institute for Social Anthropology, holds a DPhil from Oxford University and was a fellow at the University of Copenhagen and Dignity, the Danish Institute against torture. Based on long-term participating observations with unhoused people in Leipzig and a legal and political analysis, she studies how tacitly conditioning basic rights and protections on tenancy-protected housing affects unhoused persons. She collaborates with academics, practitioners, and policy makers and, based on the empirically gained knowledge, develops measures and strategies for securing fundamental rights of unhoused people.

The corona virus measures have triggered intense negotiations over the balance between social welfare and public health. The hardship attached to these measures, to a situation where care has become entwined with social control and where restrictions on people’s private and working lives and a circumscription of basic rights causes severe hardship to many. However, some disadvantaged groups, such as the homeless, have also benefited from the present policy responses which led to an extension of services as well as a renegotiation of the homeless response altogether away from a right to housing towards a right to health. Based on over three years of ethnographic research with unhoused people and the institutions involved in the regulation of their lives in Leipzig Germany, this paper analyses how the public health measures during the pandemic affect social welfare for the homeless and queries what this means for the future of homelessness.