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A Matter of Life and Death: Exploring the Necropolitical Limbo of Kingston's Housing Crisis in the Era of the COVID-19 Pandemic

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Abstract

For decades, Kingston, Ontario, the "prison capital of Canada," has experienced a steadily worsening housing crisis shaped significantly by the city's carceral practices-not just in its prisons, but in other surveilled parts of the city. Since the arrival of the COVID-19 pandemic, Kingston's housing crisis and the carceral practices that shape it have become more visible; in response to these practices, unhoused people have formed tent encampments throughout the city. In this paper, thinking through one encampment at Belle Park, we consider how public health and municipal authorities' surveilling attempts to protect unhoused people from the novel coronavirus may, paradoxically, entrench unhoused people's marginalization and exacerbate their risk of death. We draw on necropolitical theory and, specifically, the state of exception, to demonstrate the ways in which unhoused people in Kingston have been newly perceived as threats to the survival of the city during the COVID-19 pandemic and have, as a result, endured new forms of violence. Based on our theoretical analysis, we argue that the actions of municipal and public health authorities to contain COVID-19 subject unhoused people to a necropolitical limbo, an in-between-life-and-death-world that arises not exclusively as the consequence of war, slavery, incarceration, or other exceptional circumstances, but as the product of public health governance.

Introduction

On March 26, 2020, in response to the onset of the COVID-19 pandemic, the City of Kingston declared a state of emergency. According to Mayor Bryan Paterson, this declaration was "about making sure we're taking every step possible to support our community during this challenging time"—including providing the City with "more flexibility to take local action" (City of Kingston, 2020a). Since then, the City of Kingston has utilized that flexibility, working closely with local public health officials to mitigate the spread of COVID-19. While this collaboration between municipal and public health forces has been celebrated (Picard, 2020), it has also led to the continued surveillance and repeated forced displacement of some of the city's most vulnerable residents: unhoused people.

In this paper, we explore how local responses to COVID-19 have led to particular death politics in the lives of unhoused people in Kingston, Ontario, Canada. We argue that despite low case numbers and zero COVID-19 deaths in Kingston as of November 2020, efforts to mitigate the spread of COVID-19 have positioned unhoused people in what Stefan Timmermans and Jonathan Gabe (2002) call the "medico-legal borderlands" (p. 506), that expansive space between medicine and law, health and justice, care and carcerality, and safety and danger. Specifically, we argue that local authorities' attempts to mitigate the spread of COVID-19 in Kingston, though pursued in an effort to save lives, have positioned unhoused people closer to death. Drawing on necropolitical theory via one tent encampment located in Kingston's Belle Park, we consider this inbetween position-where people's lives are not fostered (but are sustained), and where their deaths are not assured (but are advanced)—and theorize it as a necropolitical limbo.

In doing so, we follow Jin Haritaworn, Adi Kuntsman, and Silvia Posocco (2014), who seek to expand understandings of "death-making [that] directly connects to the everyday experience of those perhaps unremarkable, but not less pernicious forms of 'slow death'" implicit in the structures and systems of modern governance (p. 7).

We are concerned that municipal and public health authorities' collaborative attempts to protect unhoused people from COVID-19 may, paradoxically, entrench unhoused people's marginalization and exacerbate their risk of death.

Kingston's Housing Crisis and COVID-19

Kingston, a mid-sized city of 161,000 people in Ontario (Statistics Canada, 2017), has long endured a continually worsening housing crisis. The city is also known as the "prison capital of Canada," hosting seven federal prisons and two decommissioned prisons turned museums: the Kingston Penitentiary (KP) and the Prison for Women (Correctional Service of Canada, 2014; Gillis, 2012; Piché et al., 2019). That there are seven federal prisons in Kingston matters. In 2018, 16% of unhoused people indicated that they had been incarcerated in the last year and 8% stated that their criminal record was a barrier to securing stable housing (United Way KFL&A, 2018). While these statistics are themselves troubling, recent research (Lachapelle, 2020) points to a larger trend of homelessness following prison and patterns of homelessness and/or re-incarceration.

It is not only previously incarcerated people who struggle to secure housing in Kingston. In 2018, 78% of unhoused people in the city listed welfare as their main source of income, which is insufficient for the local rental housing market. For example, the maximum housing allowance for a couple enrolled in the Ontario Disability Support Program in 2017 was \$769, over \$200 less than the average monthly rent of a one-bedroom apartment in Kingston (\$975) (United Way KFL&A, 2018). While the City has recognized the need for affordable housing since at least the 1990s (Rural Urban Liaison Advisory Committee, 2012), little has been done to increase Kingston's affordable housing stock. In March of 2020, the Mayor's Task Force on Housing indicated-at their own admission, by conservative estimates-a city-wide shortage of 3,900 affordable housing units, with an additional 7,000 households in core housing need (i.e., spending more than 30% of their annual income on rent) (Mayor's Task Force on Housing Report, 2020). Further, despite high rent rates, many people live in dilapidated conditions, enduring mould and bedbugs-and even these options are dwindling (see

Balogh, 2020a). The problem is not only a lack of housing, nor even a lack of habitable, permanent, and affordable housing *per se*, but rather an absence of political will to build the habitable, permanent, and affordable housing necessary to ameliorate the ongoing housing crisis.

What has become particularly clear during the COVID-19 pandemic is a political will to support *select* housing services, central among them shelters and other surveillance-based "care" spaces. By the end of March 2020, the only shelter available for adults in Kingston was unable to accommodate COVID-19 public health restrictions and physical distancing requirements. In response, working in partnership with a local non-profit organization, the City opened a physical distancing shelter (City of Kingston, 2020b) and a Social Isolation Centre, the latter designed to shelter people who were awaiting COVID-19 test results or who had tested positive for COVID-19 but did not have access to housing (Johnson, 2020). To an extent, these responses demonstrate the City's interest in protecting unhoused people from COVID-19. However, they also obscure its failure to build safe, permanent, and affordable housing. In the absence of this housing, and given the inadequacy of shelters, unhoused people in Kingston adapted by forming tent encampments throughout the city since the beginning of the pandemic.

Local authorities continually sought to (re)move these encampments, though not according to any clear logic. If authorities cited a cause for removal, they cited concerns over public health (Ferguson, 2020a); yet even these concerns were inconsistent. For example, on April 1, 2020, in response to a small encampment in front of City Hall, the City insisted that moving campers was "a Kingston Police matter" (Stafford, 2020a). But on April 10, it was City officials who visited the encampment to advise campers that they needed to vacate the area (Vilela, 2020). Those who declined to attend the physical distancing shelter (Stafford, 2020a) were instructed to move to Belle Park, north of Kingston's downtown core.

But campers at Belle Park, too, faced successive eviction notices from the City, instructing them to vacate the park to which they were told to move. On May 22, 2020, the City announced that campers would need to leave Belle Park by June 5. On June 2, that date was extended until July 7. Yet on July 7, the City announced that "July 7, 2020 is not an eviction date" (Stafford, 2020b), and on July 8, campers received yet another eviction date of July 31, 2020 (Krause, 2020).

Throughout August, City staff and other social service workers arrived at the park and compelled campers to "begin transitioning from the parking lot [the encampment at Belle Park] . . . to more suitable conditions" (City of Kingston, 2020c). These conditions included the physical distancing shelter and an Integrated Care Hub downtown, which had opened in mid-July. But the physical distancing shelter was located across the causeway, over 6 kilometres east of Belle Park (an approximately 1.5-hour-long walk), and the Care Hub was designed to provide food, conversation, and supportnot to function as housing. Further, campers who had moved to Artillery Park for the Care Hub were evicted once again on November 1, 2020, and sent to the Care Hub's new location at 661 Montreal Street. As the former location of Burton's Sanitation, the site at 661 Montreal was contaminated with chemical pollutants and required an "environmental remediation process" before residents could safely access services (Butler-Hassan, 2020a). The site is also located 400 metres from Belle Park. As Nathan Rosevear, one of the residents of the Belle Park encampment asserted, "the city hasn't gone about this in a straightforward way" (Balogh, 2020c).

As scholars, activists, and neighbours committed to working for and beyond justice (Tuck & Yang, 2016), we argue that we must take very seriously the task of examining what exactly the political and cultural phenomenon of COVID-19 has done and continues to do to prevailing logics of health. In Kingston, of particular importance is how these shifting logics may be reshaping the carceral space(s) of the city and the lives of unhoused people within it.

Literature Review

Carceral Space

Following Foucault's (1975/1977) explanation of modern society's "subtle, but graduated carceral net" (p. 297), scholars have tracked carceral logics beyond prisons (Gill et al., 2016). Examining policed urban communities, some have theorized the "hyper-carceral" (Brown, 2014; Harding et al., 2013). Others have explored "transcarceral" spaces of parole, probation, (Allspach, 2010; Moran et al., 2018; Turnbull & Hannah-Moffat, 2009; Welsh, 2019), and urban tent cities (Speer, 2018). Still others have looked to "quasi-carceral" spaces such as prison visiting rooms (Moran, 2013). For Brett Story (2019), these kinds of carceral spaces "signa[1] the function of spatial restructuring as a mechanism of crisis abatement and neoliberal experimentation" (p. 17). In other words, capitalism is limited, and its limitations impel governments to organize space in carceral ways (Wilson-Gilmore, 2007).

However, municipal and community investments in Kingston make these spatial "fixes" and their effects more evident in some places than others. Easily detectable are the prisons themselves and their administration. However, other investments supporting (and divestments) create less obvious carceral spaces, such as spaces of provision non-profit service (Evans, gentrifying 2011), neighbourhoods north of the downtown core, and the hyper-policed areas in the city's communities of Swamp Ward, Kingstown, and Rideau Heights.

Governing "Marginal" Space in the City

That many of Kingston's carceral spaces are hyper-policed areas of the city is not a coincidence. Municipal governments across the globe have continually sought to remove unhoused and other "unruly" people from city centres, relegating them instead to carceral spaces: not just "Skid Row" neighbourhoods, tent encampments, and slums, but shelters, squatted buildings, Single Room Occupancy (SRO) hotels, dilapidated rooming houses, and run-down buildings—put simply, "the margins" (Stuart, 2014). Considered by governments to be dangerous places inhabited by disordered people, the margins are historically and remain today hyper-policed areas of the city. In the 1980s–1990s, when the age of austerity took hold and the margins emerged as distinct features of the urban landscape, these spaces were understood in overt opposition to the police "through the lens of political protest and symbolic occupation, as coping mechanisms, or as survival strategies for existing in an increasingly hostile urban environment" (Sparks, 2017, p. 87). In this way, the margins were not merely places to which "undesirable" people were relegated, but sites from which disenfranchised, racialized, and other subaltern city-dwellers formed community and exerted their resistance.

Around the turn of the century, however, municipal governments began to include "marginal" spaces into the city's central geographical, cultural, and socio-political terrain, effectively assembling (Baker & Evans, 2016) marginal space in new carceral forms. By including the margins in contemporary understandings of the city—through, for example, poorly funded but still abundant social service programs—municipal governments might undercut the subversive nature of marginal space. This dynamic constellation of uneven yet remedial conditions has led scholars to theorize different understandings of marginal urban space: "peripheries, urban informality, zones of exception, and gray spaces" (Roy, 2011, p. 235). One such "newly marginal" space, we argue, is the encampment at Kingston's Belle Park, where the carceral contours of "poverty management" and the administration of "care" are particularly evident (Sparks, 2017, p. 88).

Public Health and the Policing of Unhoused People

Public health frequently plays a central role in governing marginal spaces. Because public health as an institution seeks to care for the health of the public (including, presumably, unhoused people) and because the very notion of public health is touted as a universal good, such institutions and officials wield a unique authority in the management of marginal space. Unlike police, whose efforts to govern marginal spaces are more obviously forceful, public health can pursue management strategies through administering care (Sparks, 2017; Speer, 2018).

Under the purview of public health, unhoused people are often discussed as difficult to monitor because they move around (Hwang, 2001; Nyamathi et al., 2016), even as this movement is enforced by other officials (e.g., by municipal by-laws, police). As Alison Bashford (2004) articulates, unhoused people's "indigence meant invisibility in a public health system which relied on spatial tracking, [and] their lack of place was understood as dangerous 'roaming', spreading . . . disease in unknown ways as they moved uncontrolled and unmonitored through the city" (p. 67). In response, non-profit organizations, social service programs, and charities, at which many marginalized and unhoused people seek institutional support, essentially enforce public health "education" initiatives, dedicated to responsibilizing supposedly "uncivilized," "unruly," or "unclean" people in ways designed to produce "healthy citizens" (Ayo, 2012; Evans, 2011). Yet, as Alan Petersen and Deborah Lupton (1996) observe, in the age of austerity, these kinds of "government programs and regulatory technologies have diversified . . . to construct an autonomous subject whose choices and desires are aligned with the objectives of the state and other social authorities and institutions" (p. 63-64).

Such analyses have led many critical scholars to theorize health through biopolitics. Of shelters in particular, Joshua Evans (2011) notes that "a very specific form of sovereign power, delegated from the state, operates through these voluntary spaces and manifests in the practice of banishing the noncompliant, disruptive or unruly" (p. 29). For Evans (2011), this is a distinctly biopolitical phenomenon: "the practice of 'banning' clients regularly churns out an abandoned population of 'difficult to serve,' 'shelter resistant' homeless individuals in cities across North America, hence the biopolitical significance of 'low-barrier' shelters" (p. 29). While we recognize the importance of biopolitics to critical studies of health, we worry that biopolitics is insufficient for perceiving the pervasiveness of death in the management of COVID-19 and unhoused people in Kingston.

Necropolitics

Achille Mbembe (2003, 2019), who theorizes necropolitics, himself outlines the limitations of biopolitics. While he recognizes the enormity of the concept, he asks:

Under what practical conditions is the right to kill, to allow to live, or to expose to death exercised? [...] Is the notion of biopower sufficient to account for the contemporary ways in which the political, under the guise of war, of resistance, or of the fight against terror, makes the murder of the enemy its primary and absolute objective? (Mbembe, 2003, p. 12)

In other words, Mbembe (2003) asks: if power has taken control over such an enormous domain of life, then how might it have taken control, too, over death? He answers:

The notion[s] of necropolitics and necro-power . . . account for the various ways in which, in our contemporary world, weapons are deployed in the interest of maximum destruction of persons and the creation of *death-worlds*, new and unique forms of social existence in which vast populations are subjected to conditions of life conferring upon them the status of *living dead*. (Mbembe, 2003, p. 40, emphasis original)

Herein lies the critical contribution of necropolitical thought to the biopolitical paradigm: whereas Foucault (1976/2003) suggests that some people's deaths are the by-products of others' survival, in one syntactical turn, Mbembe (2003) posits a semantically loaded variation, arguing that certain people are deliberately marked for death so that others may live.

Critical to Mbembe's (2003) formulation of necropolitics is the *state of exception*. Broadly defined, the state of exception is similar to a state of emergency: if the well-being or survival of a Sovereign (e.g., a nation, a government) is threatened, the Sovereign can wield its power however it deems necessary to exterminate the threat (Agamben, 2005). In practice, the state of exception is often thought

to be achieved when, in response to a perceived threat, the law is suspended (as has happened, to a significant extent, during the COVID-19 pandemic). Indeed, what Foucault (1976/2003) and Agamben (2005) observe is that threats to the Sovereign are not always external. Particular members of a given population (e.g., racialized and/or unhoused people) may be seen as threats to the Sovereign such that a state of exception is pursued, into which people who are perceived as threats can then be placed, where they might be legally (e.g., inside the exceptional law) exterminated or otherwise violated. In this sense, people who are perceived to be threats to the Sovereign and who are resultantly placed in a state of exception are rendered productive to the Sovereign through their exclusion (and, in the extreme, death).

To illustrate the state of exception, Mbembe (2003) draws on three examples: Nazi death camps, the Israeli occupation of Palestine, and slave plantations in the American South. However, as we will show, the violence thus far endured by unhoused people in Kingston is more mundane than the violence typically associated with war, occupation, or enslavement. For this reason, we sought to reconfigure and invent an everyday death-politics, necropolitical in its roots but less traditionally so in its appearance.

Everyday Death Politics

From the Exceptional to the Ordinary

Scholars have critiqued Mbembe's (2003) theorization of necropolitics. For these scholars, a state of exception is not necessary in order for the Sovereign "to legitimize exceptional politics" (Gressgard, 2019, p. 12). Among these scholars is Randi Gressgard (2019), who articulates:

The concept of necropolitics, in Mbembe's definition, is most suitable for describing vectors of expulsion and exclusion that are obviously extra-legal, while it risks overlooking the more normalized and subtle forms of exceptional deathpolitics. The latter entails exposure to premature death that does not unleash shock and elicit an urgent response, since the terror is hardly discernible. (p. 15)

Gressgard (2019) asks us to consider what is at stake if we limit our necropolitical analyses to cases of formally ratified states of exception (e.g., war, occupation, states of emergency). As many scholars have demonstrated, and indeed, as we have seen in our own research (Kruger, 2019; Lachapelle, 2020), "exceptional" states, in which particular people endure prolonged violence and/or untimely death, commonly arise in the absence of a formally declared state of emergency. For many people, the exceptional is the everyday.

In fact, a growing number of scholars have suggested that in modern governance, a *state of emergency* is not exceptional at all, but rather *the* political trope defining many state operations (Berlant, 2007; Massumi, 2010; Roitman, 2013). Speaking of emergency as an affective state, Brian Massumi (2010) suggests that "[w]e live in times when what is yet to occur not only climbs to the top of the news but periodically takes blaring precedence over what has actually happened... The future of threat is forever" (p. 52–53). Put another way, when emergency succeeds the state of exception, we are always already preparing for the next emergency. In this sense, no one is exceptional to the rule that we must avoid risk and prepare, constantly, for emergency.

Still, rarely is risk evenly distributed. Noting this uneven distribution, Alexander Weheliye (2014) overturns Agamben's (2005), Foucault's (1976/2003) and Mbembe's (2003) renderings of the state of exception, explaining that:

The normal order is differentially and hierarchically structured and does not necessitate a legal state of exception in order to fabricate the mere life of those subjects already marked for violent exclusion; in fact, we might even say that this is its end goal. (p. 86)

In other words, some people, namely racialized, sexualized, marginalized, and Indigenous peoples, have always already been made susceptible to "premature death within the scope of the normal order" (Weheliye, 2014, p. 87). The Sovereign creates the law with their exclusion (and, again, in many cases, death) already at its core.

From the Ordinary to the In-Between

The exclusion of some people from the law—not that they may live above it, but that they may be killed "outside" of it—then, is ordinary. To endure these conditions is to die what Lauren Berlant (2007) calls *slow death*, or "the physical wearing out of a population and the deterioration of people in that population that is very nearly a defining condition of their experience and historical existence" (p. 754). Importantly, slow death is an ordinary feature of modern governance. It "prospers not in traumatic events . . . like military encounters and genocides . . . but in temporal environments whose qualities and whose contours in time and space are often identified with the presentness of ordinariness itself" (Berlant, 2007, p. 759).

At stake in these "zones of ordinariness" (Berlant, 2007, p. 754) is not simply differential loss of life, but our capacity to identify the necropolitical regimes which, even in the act of taking life, threaten to slip past us. For example, thinking through surveillance technologies deployed against Turkish immigrants in Germany, Çağatay Topal (2011) explains how surveillance "subtly creates death categories" (Topal, 2011, p. 255), categories that reflect the state's "ultimate authority to define death and 'deadly' conditions" of its "atrisk" populations (Topal, 2011, p. 245). Topal (2011) emphasizes:

This paradigmatic shift means that death is defined within a much wider context than it had been previously. Death has truly become continuous. The society as a whole is reconstructed as the field of death. Death does not exist only in enclosures; it exists in and through networks. It is now open, uncertain, and incomplete. (p. 255)

That is, death becomes such an ordinary feature of life that tracing the mechanisms by which killing takes place devolves into nonsense: to trace state violence, to trace slow death, is to trace life itself, for life is marked so thoroughly, so ordinarily, by death.

Surveillance, then, which has become a commonplace feature of modern life, produces entire living communities who—according to the state's purview—are nevertheless considered to be more proximal to death, and therefore require intervention. Thus, everyday death politics are implicit in modern governance. This is particularly true of public health, a mode of governance overwhelmingly concerned with intervention. Yet, as Gressgard (2019) points out, "the expansion of the purview of emergency management... means breaching boundaries and legal distinctions between previously separate policy arenas" (p. 21). For example, frequently, public health and criminal justice merge: "the life to be cared for [by public health] is equivalent to the life that must be acted over [by criminal justice]" (Gressgard, 2019, p. 18). Breaching these boundaries has serious implications, central among them the ways in which institutions, states, and other governing structures blur the lines between dealings in life and death.

Bordering on Death

Timmermans and Gabe (2002) take seriously this "joint legacy of social control" (p. 501) via the *medico-legal borderlands*. They define the medico-legal borderlands as spaces that are

[p]opulated and guarded by a number of professionals engaging in processes that contain both the criminalization of contested medical interventions and the medicalization of criminal danger. The medico-legal borderland has clinics, prisons, medical boards, courts, occupational and public health offices, regulatory government agencies, crisis intervention centres and street policing... What is typical of all these sites is that alliances are created that link medical knowledge with knowledge about criminal deviance for the purpose of social control. (Timmermans & Gabe, 2002, p. 501, 507)

Not unlike Gressgard (2019), Berlant (2007), and Topal (2011), Timmermans and Gabe (2002) are concerned about the impossibility of perceiving what is at work when the medico-legal borderlands appear in the world as ordinary places. Specifically, they worry that [i]nhabiting the borderland might involve ... morphing into new kinds of social control that cannot be traced back to traditional concerns [of medicalization and criminality]... The resulting social control contains elements from the healthcare field and the criminal-legal realm but cannot be reduced to either one... Such third-way solutions might occur more or less spontaneously or be orchestrated from afar, but they remain notoriously precarious. The possibility that the alternative ends up reverting back to the interests of one side of the border remains distinct. (Timmermans & Gabe, 2002, p. 508)

In this sense, they define the medico-legal borderlands as places where public health and criminal justice policies intertwine to produce a unique carceral space, one that is marked by penality *and* care, but which might slip between the interest of either at any moment.

The potential for these kinds of slips is especially apparent in recent anti-homelessness measures implemented across the United States and Canada, where "incarceration becomes enmeshed with the provision of care and shelter" (Speer, 2018, p. 160). Homeless encampments, or, as Jessie Speer (2018) calls them, "tent wards," are often appropriated by municipal, public health, or policing authorities for their potential to survey unhoused and other "risky" populations (p. 160). As Speer (2018) notes, "tent wards are a relatively affordable and flexible means for local governments to provide emergency services in the ongoing crisis of homelessness, while also surveilling homeless people and relocating them away from prime urban areas" 168). However, while unhoused people's (p. characterized by their carcerality, are encampments such encampments are necessary for survival and powerful for resisting oppression, building community, and grassroots organizing. In other words, "the carceral approach to homelessness itself is never allencompassing" (Speer, 2018, p. 168).

Nevertheless, we share Timmermans and Gabe's (2002) concern about the medico-legal borderlands. The entanglement between public health and criminal justice policy that they identify not only produces carceral spaces, but these carceral spaces render visible how certain people are stuck in a kind of necropolitical limbo, relegated to a precarious liminality that makes their attempts to live life more and more wearisome. That is to say, the entanglement of public health and criminal justice policy arenas can lead to an *in-between-life-and-death-world*. Such a world is not predicated on "mak[ing] live and . . . lett[ing] die" (Foucault, 1976/2003, p. 241) or making die to let live (Mbembe, 2003) *per se*, but on enforcing ways of being that are shaped by the constant possibility of either.

Living in Limbo

It is our contention that the actions of municipal and public health authorities to contain the biological threat of COVID-19 subjects unhoused people to a necropolitical limbo. If the state of exception is a mode of governance that legally enables the outright killing of certain "undesirable" people, a *non-exceptional emergency* is a mode of governance that culturally (even epistemologically and ontologically) enforces certain people's abeyance. While seemingly less violent, such a state of abeyance is in fact imbricated with violence: at its core, it is a stasis that relegates people to an incomprehensible zone in which it is not yet decided how their lives or deaths will be rendered more or less possible. In a non-exceptional emergency, one must wait and wonder if it is through life, death, or death-in-life, that they are made valuable to the state.

Because the encampment at Kingston's Belle Park arose in the context of municipal and public health authorities' coordinated response to COVID-19, the operative logics of criminalization and care were uniquely evident. As we described earlier, when it became obvious that physical distancing was not possible in Kingston's (one) shelter, the City collaborated with a local non-profit organization to open a shelter that was large enough to accommodate (legally enforced) physical distancing measures. Yet, when some unhoused people opted to camp (initially at City Hall) rather than attend the physical distancing shelter, by-law officers, police officers, public health officials, and support workers arrived to remove them with what Sgt. Steve Koopman called "a consistent approach" (Stafford, 2020a). Koopman emphasized that

Kingston Police do not have the authority to quarantine or apprehend the individuals [campers], as they currently do not pose a public health risk to the general population (which would require an order from KFL&A Public Health) or a mental health risk to themselves. (Stafford, 2020a)

At the same time, the City of Kingston insisted that "the setup behind City Hall is a Kingston Police matter" (Stafford, 2020a). Meanwhile, public health messaging throughout Kingston was evident. One journalist reports the atmosphere in the city when people were camping at City Hall:

It's Saturday night at 8 p.m. in downtown Kingston. The air is chilled — the temperature will dip below zero overnight.

The city is quiet. In the midst of a pandemic, night life is non-existent. Most downtown businesses are closed. "Stay home" is the message that reverberates from the signs on storefronts, the glowing billboards on the sides of city streets, and the appeals of public health officials — "Help stop the spread of COVID-19." (Balogh, 2020b)

Thus, the "consistent approach" to which Koopman referred reflects the simultaneous response from the police, by-law officers, and public health officials, but belies the inconsistent messaging about *who is responsible* for evicting campers from City Hall.

Once the encampment at Belle Park (which housed upwards of 40 people) was established, coordination between municipal and public health authorities continued, still without any clear messaging, at campers' expense. On May 22, 2020, once campers had moved to Belle Park, the City announced that campers would have to vacate it by June 5 (Ferguson, 2020b)—but without actually sharing this information with campers, who learned of their eviction date through news media (Crosier, 2020). Three days later, Derek Ochej, Clerk for the City's Homelessness and Housing Advisory Committee (HHAC), explained that although the HHAC had been scheduled to meet on June 11, the meeting was cancelled due to "a lack of time-sensitive business" (Butler-Hassan, 2020b)—a striking announcement,

considering that the date of HHAC's then-cancelled meeting was, at the time, three days after the impending eviction date for the Belle Park campers. The irony seemed obvious to Melodie Ballard, who sits on the HHAC: "There are tent cities in Kingston under threat of eviction by the City, with no clear plan on where they'll go. . . Seems like exactly the kind of thing we should be reviewing and discussing" (Butler-Hassan, 2020b).

Lastly, the City has by turns encouraged, permitted, and condemned the encampment at Belle Park. As of July 31, 2020, the City began removing essential services from Belle Park, such as washrooms, running water, garbage collection, and electricity, in order to force those living in the encampment to move. Still, people remained in Belle Park, and, still, the City insisted that "there would be no forced evictions" (Davis, 2020). But on September 1, 2020, Belle Park campers were forcibly evicted by City officials and a swath of police officers. While these (in)actions do not constitute the outright killing of unhoused people in Kingston, they nevertheless leave them in a necropolitical limbo, exposed to the threat of death associated with both COVID-19 and homelessness. Nathan Rosevear, a resident of the Belle Park tent community and the camp's unofficial caretaker, puts it succinctly: "I was hoping [the City would] have some more specific propositions for solutions, and they didn't really" (Crosier, 2020).

We want to be clear: our argument is not that the encampment at Belle Park is itself an example of a necropolitical limbo; rather, we argue that this encampment is a response to one. The encampment at Belle Park reflects unhoused people's innovative and practical response to the impossible situation with which they are faced in this era of housing insecurity and COVID-19. As Speer (2018) notes, "such encampments enabl[e] homeless people to establish a modicum of autonomy from the disciplinary aspects of homelessness management systems" (p. 162). Before their eviction, several campers emphasized that unlike other options, the encampment at Belle Park provided a sense of community and safety (Balogh, 2020c; Crosier, 2020). Peter Hern, who moved to Belle Park in May, called the encampment "the most stable place we've had in the last six months or a year . . . because I've had the experience of being

bounced around the system" (Raymond, 2020). Our concern, then, is not with the encampment, which was, in our view, a testament to the agency, innovation, resilience, and neighbourliness of unhoused people. Instead, we are concerned with the contradictory and ambiguous practices of municipal and public health authorities that prompted the encampment's formation in the first place.

Conclusion: Death Worlds in the Medico-Legal Borderlands

The arrival of the COVID-19 pandemic has prompted us to expand our ideas of what constitutes fostering life or marking for death and the relationship between the two. While Foucault (1976/2003) theorizes biopolitics as an attempt to foster life that results in the inadvertent death of others, Mbembe (2003) builds upon biopolitics to argue that these others are deliberately marked for death so that some people can live. By way of contrast, we argue that, as a result of the slips and overlaps between public health and carceral policies, attempts to foster life can, paradoxically, increase proximity to death. While many scholars have articulated the violent consequences of neoliberal governance, wherein people become entrenched in cycles of poverty (Wacquant, 2010), stuck in the "capture and release in the 'revolving door' of imprisonment'' (Lamble, 2013, p. 244), "fall through the cracks" of the welfare state (Balfour, 2008; Milaney et al., 2018), or are relegated to "peripheries, urban informality, zones of exception, and gray spaces" (Roy, 2011, p. 235), few have identified this violence as a distinctly necropolitical phenomenon. We argue that it is.

When a person is living in a place where they are constantly exposed to death because of the material and structural conditions created by neoliberal violence (regardless of a pandemic or other extraordinary circumstances) such as a homeless encampment in Kingston's Belle Park, the very fact that they are *made* more proximal to death than others is, we argue, indicative of a necropolitical death-world. A death-world (Mbembe, 2003) can exist without people being killed by a deadly virus, without being brutalized in a war, physically wounded, incarcerated, or put to death by police (Gressgard, 2019). A death-world can result from well-intentioned attempts at care for marginalized people, where the blur between care and carcerality becomes almost impossible to detect (Gressgard, 2019; Timmermans & Gabe, 2002). A death-world can be created in the subjection to the liminality between life and death, to the limbo of the weary and anxious wondering of whether you will be rendered more valuable to the state through your life or death. To signal this ambivalence, we have termed such spaces *in-between-life-and-death-worlds*.

As scholars, residents, and politically active members of the local community, we worry about the future for unhoused people in Kingston, about how the everyday death politics in the city will continue to evolve, about how lives will continue to be subjugated "to the power of death" (Mbembe, 2003, p. 39). But while we watch for, wait for, and plan to resist the next iteration of necropolitical violence in our community, we suspect that other cities and spatialities are beset by these everyday death politics. It is our hope that, in response to the editors' call for an exploration of pandemic justice, this example from Kingston can offer other scholars a conceptual frame for thinking through their own unique contexts and circumstances in COVID-19 and beyond.

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