

Known only in death

An exploration into the treatment of the remains of the poor in Halifax

—

“Death is the problem of the living. Dead people have no problems.” — Norbert Elias (Elias 1985, 3)

“There was a relationship between man’s attitude toward death and his awareness of self, of his degree of existence, or simply of his individuality.” - Philippe Ariès (Ariès 1981, 602)

Ashes to ashes, dust to dust

Death is our collective destination. Everyone will die, and every body returns to the earth. But the lives we live between our time spent as ashes and dust separate us from each other in countless ways. Even after we draw our last breath, how we have lived our lives shapes how we are treated in death. Our posthumous treatment, specifically how our remains are handled and how we are remembered, is shaped by our access to wealth and experiences of poverty. Socioeconomic inequalities not only determine how well we live and die, but they determine our social afterlife. Socioeconomic inequality extends even beyond life into death.

If we’re gone, and if we don’t believe in ghosts, what happens to our bodies and legacies after we die might seem trivial, since we don’t personally have much control over it (aside from various branches of legal systems). I know that I have said many times, as a type of punctuation on a conversation about death that got me just slightly too close to crying, “Just throw me in the woods when I’m gone.” But I know that this is a shield against the anxiety that comes crawling up my spine if I really deeply consider what it means to shuffle off this mortal coil and be unmoored, or enter nonexistence, when we die. Our bodies are our homes. They determine how much and of what quality we experience the world around is. We care for them in life, and we desire for them to be taken care of in death. Beyond preservation of our physical forms, it is a natural extension to consider our legacy, or how our social presence will live on in our community’s consciousness. Most of us don’t want to be remembered as a nasty, unpleasant person, and some of us have desires to leave our worldly belongings in the care of others, such that we can continue to provide safety, comfort, and care after we are gone. Because of these desires, the matter of ensuring that we are treated with dignity after we die is not so trivial after all.

Yet despite our shared consideration of how we are treated after we die—physically and socially—we get “to the end,” as it were, with different means of accomplishing these desires. As much as socioeconomic inequality is a blight on living society, so should it be a concern for the afterlives of people living in poverty.

In this piece, I will consider how possibilities for posthumous dignity—a term I use to refer to the respect someone is afforded after they die—are shaped by socioeconomic inequality. I’m interested in exploring this in the Nova Scotian context, where pauper’s cemeteries sit underneath parking lots less than 100 metres from a cemetery with its own advocacy foundation and where funeral homes take a financial loss to provide full services for people who died while on social assistance and for people who lived in

such poverty that they are unknown and unclaimed in death. These two expressions of socioeconomic inequality are related, yet reflective of era-specific societal and governmental practices of poor assistance. Nonetheless I will explore how both pauper's cemeteries and partially-paid-for funerals for the poor tell us more about the inconsistent nature of our approach to the dead rather than consistently express an era-defining norm around death.

Dignity for the dead

I draw on Immanuel Kant's definition of dignity to ground my understanding of what is afforded to those who have died. Kant differentiated humans from other beings through our capacity to be moral and rational, and thus have a value beyond what is describable or monetary. Humans have free will and can enact changes in their life to accomplish a goal or as a means to an end; because we have the ability to enact changes and are not simply responsive to stimuli (this is often referred to as being responsive to causality) we must use our free will to do good in the world. Kant's moral framework requires that we see other humans as having the same ability to enact goodness, which then affords them (and us) dignity. Because humans have free will and have the ability to do good in the world, we have inherent dignity.

Michael Rosen extended Kant's idea of dignity for living humans to corpses. After we die, our corpse is left as a representative of who and "where" we were, but the corpse itself has no free will or ability to enact changes. Yet we do not treat corpses as objects—at least, when we treat human remains *with dignity*, they are not treated as objects. Rosen argues that in showing dignity to the dead reaffirms the dignity of the living. Here Elias' quote at the beginning is key: death is the problem of the living. How we treat each other in death determines how we treat each other in life. The social contract that ensures our corpses are not desecrated, even if we no longer "need" them, keeps society intact.

A poor person's life and death in Nova Scotia

Early versions of assistance for the poor in Nova Scotia was modeled after the Poor Laws in England, which set standards for who could access assistance and of what type. Two laws were implemented in 1763:

These were an Act to enable the Several Townships within this Province, to Maintain their Poor, and an Act to enable the Inhabitants of Townships to assess themselves for the relief of the Poor, both of which received assent on 26 November 1763. The latter act transferred the burden of supporting the poor from the provincial government to the township officer. (Thomas 1938, 5)

The "maintenance" of a township's poor classified those facing financial difficulties as a specific group of people who were defined through their neediness. Upon meeting the criteria, the poor would face limited social mobility and would likely remain in the care of the township. When the responsibility for providing financial support, shelter, or work became that of the township, people who sought this assistance became dependent on a particular, and sometimes quite small, community in order to survive. The "devolution" of services to municipalities occurs today, with the outcome being limited services for the poor, and larger governments shielded from the difficulties of providing for individuals with complex, varied needs (Bruch et al. 2018; Banting and McEwen 2018). In these early years of social assistance, when a township was not able to afford the care of "their" poor, impoverished people were often sent outside of the community or were auctioned off as labourers (Katz 1984, 111). Neglect and abuse was common in

these relationships (Simpson 2011, 14). Over time, poor houses became established as a form of centralized institutional support offered by larger municipalities. Such was the case for the development of the first poor house in Halifax on Spring Garden Road in the 1750s.

There are no remaining photographs or architectural drawings of the Spring Garden poorhouse. What we know about it comes from descriptions of the conditions written by visiting physicians, politicians, and clergy[1]. Poverty affected those who did not fit the mold of a productive, hale citizen; single mothers with young children, people facing alcohol addictions, people with intellectual disabilities, people without the physical capabilities to work, and the impoverished elderly were all housed under a single roof and without individual services. The circumstances that brought these people together were determined by social relationships. Because education, work, and family structures were shaped by gender, women would have had less access to education, fewer opportunities for work, and would have been expected to raise children as their primary activity in life; thus single mothers with children would have experienced poverty almost immediately if the father or husband died or abandoned them. People with intellectual disabilities were not understood to have the mental faculties to be regarded as fully human or capable of work as it was structured at the time; poverty was all but a guarantee if their family did not provide support. The elderly, who found themselves unable to continue working but without any means of social safety net to provide for them after their “productive years,” were impoverished by dint of the way individuals were expected to pay their way through life. Spring Garden was host to a wide cross-section of society; there were many paths that led to the poorhouse. Nonetheless, the poorhouse was seen to represent such an insignificant part of Halifax’s history that, to learn its history, we have to piece together peripheral archival records.

What linked these inhabitants was their status of being what Cameroonian historian Achille Mbembe calls “the living dead” (Mbembe 2019, 92) wherein political systems “manufacture an entire crowd of people who specifically live at the edge of life [...] people for whom living means continually standing up to death” (Mbembe 2019, 38). Mbembe’s theory of necropolitics focused on how colonial empires inflicted these definitions and life focuses on colonial subjects, but it is relevant here to consider how the lives—and deaths—of the Nova Scotian poor were determined by their treatment by the state in similarly oppressive ways. The social structures that the poorhouse residents navigated, including the shift in provincial support to township support, the dire setting of the poorhouse, and the inescapability of poverty, associated poverty directly with death. To be poor was to live on the edge of death. The death of a pauper did not a rupture social life in the ways that the deaths of heads of households could.

Residents of the Spring Garden poorhouse were buried in a communal grave on the poorhouse property, likely coming face to face with their final resting place as they stepped out the institutions’ front door. Coffin manufacturing was a common form of work offered in poor houses[2], including the Spring Garden poorhouse; in fact, “coffins were built in anticipation of an inmate’s death in times of epidemics” (Simpson 2011, 90). The socioeconomic disadvantage of the poorhouse residents put them closer to death. By being buried next to the poorhouse amongst others who sought assistance, their afterlife was limited to that of a pauper[3].

Giorgio Agamben’s concept of “bare life” is applicable here. “Bare life” refers to the subjugation of each individual to the state so that their only pathway towards living a meaningful life is through acceptance by the state. Without the possibility of a state-granted “good” life, we have “bare life,” which is devoid of meaning and places us as uniquely vulnerable to violence that others may inflict with impunity. Agamben’s work is

used to make sense of the “cruddy” and dehumanizing settings of long term care homes; the overrepresentation of Black and Brown people in COVID exposure; the lives of Indigenous people living in communities with limited access to clean water, appropriate housing, and economic opportunities. Considering the experiences of those living in Halifax’s pre-20th century poorhouses through Agamben’s work allows us to see the “bare death” that comes from a “bare life.”

The sole circumstance that levelled the field between the poor and the rich in terms of their experience of death was an epidemic. Waves of typhus, cholera, and tuberculosis swept over the province and took thousands of residents to mass graves in Fort Massey Cemetery and underneath the Little Dutch Church and St Paul’s Church. As a cart circled the town each morning during the cholera outbreak of 1834, the victims of the epidemic, both rich and poor, were buried together with haste in order to prevent the spread of disease (Fingard et al. 1999, 122). During times of uncertainty and emergencies, there was not time to differentiate based on class. Given time, however, those class relations bubble to the surface. Victims of epidemics are memorialized in cemeteries around Halifax; victims of poverty receive no such memorialization.

After it was closed, sold to a private citizen, and torn down in 1869, the Spring Garden Poor House ceased to exist, but all the dead who had been buried in its century-long operation remained in the ground. A number of proposals for what should be built in its place were put forward; eventually, the Spring Garden Road Memorial Public Library was built in 1951. It was the first public library in Halifax as well as the first post-War public structure built in the city. The library has since closed, and there are now new proposals for what should be done with the structure and the property. Alongside a statue of Winston Churchill walking headlong into a stiff breeze, large trees, a paved pathway, and grassy areas provide a somewhat calm ambiance to the lot, under which nearly 4,500 people are buried.

What is most striking is that if one arrives at the former poorhouse and library lot walking east along Spring Garden, and continues another 30 seconds this way until they arrive at Barrington Street, they will be in front of one of Halifax’s most well-known cemeteries: the Old Burying Ground. Almost 12,000 people are buried here, their tombstones protected from winter weather by handmade miniature tents. The Old Burying Ground Foundation states that the graves hold information that is useful for understanding the Halifax’s past, information that might help us understand our modern Halifax (The Old Burying Ground Foundation, n.d.). What would tombstones and records of those who passed through the Poor House, just up the hill, have revealed? Not only are substantial details of the lives of the people who depended on the shelter and work provided by the poorhouse lost to history, but so are their names and their relations. This is the impact of socioeconomic inequality: the history of poor people is not counted as a history at all. There is no plaque on the green expanse on the grounds of the former Poor House or in front of the former library. Unrecorded, unnamed, and if it remains uncovered, the history of people other than those who could afford tombstones—and thus the details of their lives—become all that is worth mentioning.

We die twice

Perhaps the earliest recorded version of the idea that we die twice—once physically and a second time when we are forgotten—is attributed to the philosopher Boethius in AD 523.

Fondly do ye deem life’s little hour

Lengthened by fame's mortal breath;

There but waits you—when this, too, is taken

—At the last a second death.

– translated by H.R. James, 1897

Our life's "little hour" may be lengthened by the power of fame, but fame, too, is mortal. When it runs its course—when we are forgotten—we die our second death. Prolonging our life with fame may provide some sort of comfort—that even as we face something so unknowable as death, we may still continue to exist in the known realm of life. The wealthy of our time, although their influence may wane with generations, can postpone their second death, the social death, through their access to wealth. The ability to extend one's social afterlife is a socioeconomic privilege available only to certain classes. In the case of the pauper's cemetery, this results in the history of a city being defined by what remains of those who are named and deemed important to record. This in turn determines our guiding principles that affect policy now; if we are not able to reflect on the ill treatment and destitute lives of the previous poor, how will we know when we make meaningful progress?

There are good indications that social assistance has changed for the better. The province once again administers social assistance; there are tax credits and programs to support single mothers; non-profits and governmental departments provide support networks for people with intellectual disabilities. Nonetheless, Nova Scotia has the highest poverty rate in the country, which rose by 52% between 2021 and 2022 (from 8.6% to 13.1%; (Government of Canada 2024)). The cuts proposed by the Houston administration included a 20% (\$1.4 million) reduction in the poverty reduction credit programs which aims to address the poorest of the poor (Henderson 2026). Anti-poverty advocates have called attention to increasing food prices as having a compounding effect on poverty, where those who can afford the least are forced to make choices between paying rent and paying groceries (Alternatives 2024). Victorian-era "paupers" are now "the unhoused population"; those forced to make the choice between shelter and food are those most likely to die without anyone knowing their name.

Living and dying in obscurity remains associated with poverty today. People have died in Nova Scotia who the Medical Examiner is unable to properly identify; almost always, these people were living in poverty (Saul, personal communication, 2026; more with Saul in the next section). Here, the world of the nameless paupers buried under Spring Garden Road and our modern age of social assistance collide in the anonymous, impoverished death. The poor die a second death almost immediately following their first.

What does identification offer us?

Why does it matter that we know the names of the deceased? Historical research is made of little recorded moments of time that become foundational for our understanding of that era. Social history argues in favour of studying common folk, but how can we do that if no records exist? Studying the sins and glories of past societies can help us orient ourselves towards the future we desire. It is the fact that the poorhouse dead lie, unknown and unacknowledged, underneath my feet as I walk downtown that made me consider how the poor are treated today.

I originally approached this project assuming that the remains of those who were unidentified or accessed social assistance were more likely to be cremated, because it is the least expensive service. In truth, this may still be the case for many—but it is more complicated than this.

From an governmental administrative perspective, identification is paramount. Identifying who has died is important for preventing misuse of the Social Insurance Number and government benefits. In Nova Scotia, the Public Trustee is responsible for identifying the unknown deceased. An extensive process is undertaken, including genealogical searches, placing ads in papers and online, and tracking down any relation found through government documentation[4]. If, at the end of this process, the Public Trustee is still not able to identify the person, the municipality engages a local funeral home to take over the process of burial and interment.

I spoke with Simon Greene[5], General Manager of [anonymized; funeral home in Halifax], about the process of offering funerals for the unknown deceased and for people who were on social assistance. These two groups were of interest to me because of the likelihood that they shared similar experiences of having the possibility of choice—and dignity—in death being shaped by their poverty. The estate of those who are on social assistance is given \$3,800 for funeral and burial expenses; this is the same amount offered to the funeral home and cemetery who bury people who die without being identified.

After being engaged by the municipality for unknown remains or by the province for people on social assistance, Mr. Greene prepares to receive the body and contacts a member of the clergy to conduct the service. Mr. Greene owns two cemeteries near Halifax, and so is able to find a plot for the person. Individuals whose identities are not known are not, in fact cremated; those who are on social assistance have their choice of burial method. The \$3,800 covers less than half the typical costs of a funeral and a cemetery plot, meaning that his business takes a loss for the funerals and burials of impoverished people. People's final wishes are respected regardless of if they can afford them; this is because of the empathetic approach that Mr. Greene takes towards his work.

When I asked how he felt about this work, Mr. Greene said it “was the right thing to do.” He reflected that there exists a social contract that keeps Canadian society together, and that includes trusting each other to take care of our bodies in a respectful manner when we pass. This empathetic approach expands into other circumstances. Originally, he did not charge for infant funerals. A colleague suggested that charging a very minimal amount had, in their experience, been helpful to grieving parents who wanted to show that they “could do something to provide for their child, even though the child's life was lost.” Mr. Greene also does not charge for burials if a family has had multiple losses in short succession. He was honest when stating that these empathetic approaches to his work helped him grow his business, because he became thought of as a caring and compassionate provider. Whether he was motivated by business acumen or through honest compassion, the poor in his care are treated with respect.

I also spoke with a clergy member, Rev. Dr. Saul Tyne[6], a United Church minister who has conducted these funerals in the past and is Mr. Greene's primary clergy for these matters. Rev. Dr. Tyne was similarly morally-inclined in his participation in these ceremonies; he described the act of performing a funeral for someone who died in obscurity—almost always someone who also lived and died in poverty—as an act of “levelling the capitalist playing field.” Rev. Dr. Tyne sees the disparities in life as having the chance to be remedied in death, through a respectful, dignified, and reflective

service. I have read an example of a funeral service written by Rev. Dr. Tyne for someone who was known and living on social assistance—in which case the province pays the same amount to the funeral home and cemetery—and it is clear that the same care goes into reflecting on the life of someone who lived in poverty as it would for someone who lived with wealth. The Homily describes the role of death in life—“death punctuates life...it reveals what is worthwhile and what is not...death promotes relationships...it helps us to understand the true nature of our lives by raising the question of eternal life” (Tyne, personal communication, 2026). If the same questions can be raised by the death of someone who was beloved and who lived in poverty as they are by the death of someone well-known and wealthy, human life is equally valuable.

The care that the impoverished and unknown people receive from Mr. Greene and Rev. Dr. Tyne is provided because they see it as personally impactful. Even though the state does not provide enough money for the service to be fully covered, Mr. Greene sees it as his public duty to provide nonetheless. Deep reflection on the importance of the deceased's life is offered by Rev. Dr. Tyne, and through this he extends a type of humanity denied by the insufficient and always at-risk social assistance program. Just as the “maintenance” of the poor was offloaded to early townships in pre-20th century Nova Scotia, so too is the financial burden of a “full-service funeral” and the recognition of the value of human life reassigned to private services who decide to have strong moral compasses.

Analysis of similarly death-centred work has been explored by Lisa Stevenson in her ethnography entitled *Life Beside Itself*. This anthropological study explores the impact and role of suicide crisis hotlines in Nunavut, and Stevenson's analysis of the work of the hotline volunteers provides a theoretical framework that can help us better understand the work of Rev. Dr. Tyne and Mr. Greene. It can also help us recontextualize the impact of a loss of records from the Spring Garden Poor House has on our ability to understand the history of socioeconomic inequality in Nova Scotia.

Dissolution of self

Lisa Stevenson argues that those who volunteer for Nunavut's suicide hotlines provide “anonymous care.” Both the caller on the other end of the line and the worker know each other only through their settings: a person experiencing suicidal ideation, and a person volunteering at a hotline center. The anonymity afforded by this system is designed to encourage honesty and limit judgment. Although someone's voice or circumstances may be recognized and their identity could be assumed, the nature of the hotline is to treat each caller as though they could be anyone and everyone. Stevenson argues that these hotlines represent Canada's more general approach to mental health care in the very remote Northern reaches, where suicide is characterized as an epidemic. Canada provides only the care that is necessary to keep people alive, not to help address or undo the intergenerational traumas that are so often linked to poor mental health. The anonymous care offered through suicide hotlines creates no firm links and strengthens no bonds, because the individuals do not know each other. Instead, Stevenson argues that anonymous care creates an “abstract sense of community” (p. 86), where the two individuals using and operating the hotline relate to each other through having a shared humanity. Through recognizing a shared humanity, both individuals experience a dissolution of the self—that is, a melting of boundaries that define individual.

The dissolution of self that Stevenson talks about occurs because the volunteer hotline operator engages with callers not as a person but as a representative of a system that

wants to keep the caller alive. Hearing suicidal ideations and plans of ending one's life is a traumatic and difficult task. Stevenson draws on earlier work on sublimity and horror to argue that hotline operators experience a type of horrified fascination at hearing suicidal ideations over and over. This complex combination of horror at the idea of someone killing themselves and repeated engagement with that feeling becomes a sublime experience, almost mesmerizing. She states,

“the caregiver is witness to someone else's desire for the dissolution of the self but also experiences the dissolution of one's own self into the category of humanity... Stripped of all attributes, the person on the receiving end of the call experiences him- or herself as a member of humanity, relating, above all, to another human being. The concept of humanity involves a certain kind of sublime dissolution of self.” (Stevenson 2014, 87)

Mr. Greene and Rev. Dr. Tyne share this experience in common with Stevenson's hotline operators. Through facing the death of another, they reflect on the link between all of humanity, which is death. In caring for a stranger, the caretaker also becomes anonymous, no longer a particular person with a business or a collar, but a representative of the community witnessing the end of a life. That “we could be them” clarifies what is important in life as it is in death: respect and dignity of others. Without this, we live only “bare lives,” and die unknown. When those who are unidentified are committed to the grave, a final act of recognition of their “assured relationships and human connections” (personal communication, Saul, March 2026) affirms their humanity and that of the committer. Perhaps it is through this dissolution of self that makes things like receiving full payment for a service less important.

While these men were exceedingly pleasant to speak with, I must also read their actions as being made possible through the “social architecture” that they work within. This term is used by Allison Pugh in her book *The Last Human Job: The Work of Connecting in a Disconnected World* to describe the physical, emotional, professional, and societal structures that shape how carework is done. She states that empathy made not be simply an individual trait but something that is cued by the setting in which a careworker acts. She describes how social architecture influences the ways that a wide array of professionals such as doctors, teachers, psychiatrists, and optometrists view their work and interact with their client or students. Of relevance for this piece is the “mission-driven social architecture” which “operat[es] with inadequate support from state or local sources...[and] relies on individual heroes who endure in unsustainable jobs as long as they still find their services to the truly needy sustaining” (Pugh 2024, 136). Pugh argues that this work exists because “basic needs are often framed not as public rights but instead as private goods” (Pugh 2024, 136).

The generosity that is shown by Mr. Greene and Rev. Dr. Tyne is possible because of the social architecture in which they work. Mr. Greene is able to provide services for people who are not able to afford burials because of the Nova Scotia social assistance program. He is able to lay the remains of the unidentified to rest because of the work of the Public Trustee, which ensures that all paths were taken to try to identify the individual. Further, he stands to benefit from providing funerals for those who are impoverished, because, by his own admission, being a generous funeral director is good for business. He is able to maintain a contract with a good client like the province; he maintains good client relationships by being responsive to their needs, whether it be by not charging for services for multiple family members or considering the parents' needs in burying their child; and he is able to fill plots in his cemeteries that may not have sold otherwise. The mission-driven social architecture that shapes the opportunities he has to show his empathy position him as a hero, but also place a

burden on him and his practice. The “basic need” of having a funeral and burial in a dignified manner is turned into a “private good” when it is beyond the financial scope of the poor; private funeral homes take on potentially unsustainable burdens to fill the gap left by the government.

Similarly, Rev. Dr. Tyne designs services to reflect on the humanity of the deceased in a way that social assistance is unable, or unwilling, to. The dignity that should be afforded to citizens by the government becomes dependent on how individuals, such as Rev. Dr. Tyne, treat people in their death. He secures the dignity of those who died in poverty by reflecting on their shared humanity, but he is unable to secure this for the poor in life. He reflected on the fact that the church cannot take on the specialized supports that help people live easier; it is not in the church’s capacity to do so. Thus the work of the minister who attends funerals for the poor is limited to extending them dignity after they have died. The social architecture that shapes these limitations are the same that provide meagre social assistance income in life and death.

Rev. Dr. Tyne’s work with people outside of his congregation seems to allow for a rejuvenation of his ministerial calling. He described his work outside of his congregation as being particularly fulfilling, because it allowed him to engage with people who he was otherwise not serving. But his engagement with the funerals of the poor extends beyond his personal interest; he is a representative of a religious organization that has had a long-standing role in funerals. Through the societal tradition of a funeral being presided over by a minister, Rev. Dr. Tyne is afforded an outlet for the assurance of the dignity of the dead. Similarly, Mr. Greene expressed his love for his work and that he was proud to be able to extend the courtesy of covering the remaining costs for a poor person’s funeral.

Through a lens of social architecture, we can see that the answer to why the poor must happen upon generous and giving people to be given dignity in death lies in the design of the system in which they die.

Witnessing death

Why does the province of Nova Scotia pay \$3,800 towards the funeral and burials expense of someone on social assistance? Is it a final send-off, the state signaling the dignity of those on social assistance? If we’re cynical, we might point to the fact that people have to be buried as a matter of public sanitation. To not provide assistance would be to shirk governmental responsibility to care for the health and safety of its citizens. But if this is the case, why not require the cheapest possible option for burial?

Canada’s approach to social assistance has changed since the era of the poorhouse. Communal graves are seen as a tragedy, a clear indication that those buried were not deserving of individual recognition. This is, I think, one of the reasons that the mass graves of Indigenous children being exhumed are so horrifying; not only were these children taken far away from their parents, who could not protect them from death, but that the children who died were not treated with dignity even in death. They were buried *en masse* as if it wasn’t worth the effort to record their lives, names, and existence. Maybe this was out of shame, or a morally-bankrupt cover up of ineptitude, as has been argued. But in trying to cover up or disregard the individuality of those who had “assured connections,” we deny each other the dignity of having lived and been known.

Nova Scotia’s assistance for funerals is income-tested against the deceased’s estate, meaning that only the poorest of the poor are able to access funds. The remaining amount due after the burial is, at least for Mr. Greene, covered by private businesses.

The poor are, in fact, *not* cremated, unless they choose to be; those whose remains are unidentified are buried in a casket. Despite this being an extra expense and requiring a full cemetery plot, a full burial ensures that any personal preferences or spiritual views of the deceased are respected. It also ensures that the body could be exhumed if someone claimed they were related. By keeping the door open to the idea that the unknown deceased *had* personal preferences that should be respected or that they *may have* as-yet unknown relationships, Mr. Greene treats the deceased with dignity beyond the what is the most affordable. Our social afterlives, part of which is determined by our assets, are shaped by the presence *and absence* of the state in our lives. Private industry picks up where the state stops to ensure that the poorest among us are treated with dignity.

Those who depended upon the poorhouse for shelter lived and died in obscurity. Through dogged effort of researchers and historians, some of their history has been revived, but we will never know their names or stories, not even to the extent that is afforded by the tombstones of those buried just a few steps away. The site of the Spring Garden poorhouse is once again the focus of new proposals; the library was closed in 2014 and still sits empty. Just as the provincial and municipal governments banded together in the post-War era to build a public-use building, they have the power and opportunity to recognize those buried underfoot as having been an important part of early Halifax society.

What could it mean to recognize the poor?

What do we risk in venerating those who have for so long been excised from the historical record through disinterest and neglect?

What would we stand to gain?

References:

Alternatives, Canadian Centre for Policy. 2024. "Press Release: Nova Scotia Saw Alarming Increase in Poverty and Food Insecurity—Some of the Highest in the Country." CCPA, April 29. <https://www.policyalternatives.ca/news-research/press-release-nova-scotia-saw-alarming-increase-in-poverty-and-food-insecurity-some-of-the-highest-in-the-country/>.

Ariès, Philippe. 1981. *The Hour of Our Death*. 1st American ed. Knopf.

Banting, Keith, and Nicola McEwen. 2018. "Inequality, Redistribution and Decentralization in Canada and the United Kingdom." In *Constitutional Politics and the Territorial Question in Canada and the United Kingdom: Federalism and Devolution Compared*, edited by Michael Keating and Guy Laforest. Springer International Publishing. https://doi.org/10.1007/978-3-319-58074-6_5.

Bruch, Sarah K., Marcia K. Meyers, and Janet C. Gornick. 2018. "The Consequences of Decentralization: Inequality in Safety Net Provision in the Post-Welfare Reform Era." *Social Service Review* 92 (1): 3–35. <https://doi.org/10.1086/696132>.

Elias, Norbert. 1985. *The Loneliness of the Dying*. Continuum.

Fingard, Judith, Janet Vey Guildford, and David Sutherland. 1999. *Halifax: The First 250 Years*. Formac Pub. Co.

Government of Canada, Statistics Canada. 2024. "The Daily — Canadian Income Survey, 2022." April 26. <https://www150.statcan.gc.ca/n1/daily-quotidien/240426/dq240426a-eng.htm>.

Henderson, Jennifer. 2026. "Province Silent on Fate of N.S. Poverty Reduction Credit in 2026-27 Budget." Halifax Examiner, March 23. <https://www.halifaxexaminer.ca/province-house-2/province-silent-on-fate-of-n-s-poverty-reduction-credit-in-2026-27-budget/>.

Katz, Michael B. 1984. "Poorhouses and the Origins of the Public Old Age Home." *The Milbank Memorial Fund Quarterly. Health and Society* 62 (1): 110–40. <https://doi.org/10.2307/3349894>.

Mbembe, Achille. 2019. *Necropolitics*. Translated by Steve Corcoran. Theory in Forms. Duke University Press.

Pugh, Allison J. 2024. *The Last Human Job: The Work of Connecting in a Disconnected World*. 1st ed. University Press. <https://doi.org/10.1515/9780691240824>.

Schönecker, D., & Wood, A. W. (2015). *Immanuel Kant's Groundwork for the metaphysics of morals: A commentary* (1st ed.). Harvard University Press. <https://doi.org/10.4159/harvard.9780674736214>

Simpson, Cynthia. 2011. "The Treatment of Halifax's Poor House Dead During the Nineteenth and Twentieth Centuries." Master's thesis, Saint Mary's University. <https://www.smu.ca/webfiles/Simpsonburials.pdf>.

Stevenson, Lisa. 2014. *Life Beside Itself: Imagining Care in the Canadian Arctic*. University of California Press.

Rosen, M. (2012). *Dignity: Its history and meaning*. Harvard University Press.

The Old Burying Ground Foundation. n.d. "Foundation." Accessed April 17, 2026. <https://oldburyingground.ca/foundation/>.

Thomas, C. H. 1938. "The Administration of the Poor Law in Nova Scotia, 1749-1937." Master's thesis, Dalhousie University.

[1] See: Allan Marble's *Physicians, Pestilence, and the Poor: A History of Medicine and Social Conditions in Nova Scotia, in 1800-1867*, 2006; Marguerite H. L. Grant's "Historical Sketches of Hospitals and Alms Houses in Halifax, Nova Scotia, 1749 to 1859" published in Volume 17, Issues 4, 5, and 8 in *The Nova Scotia Medical Bulletin*, published in 1938; and Cynthia Simpson's Masters thesis on the poorhouse dead in Nova Scotia, to whom a great debt is owed for the historical research on poorhouses referenced here.

[2] As per Simpson, who dug through the archives to find evidence of this work: "The inmates of the poor house manufactured coffins for the use of the town, the Cholera Hospital, the Richmond and Melville Island Hospitals, Dartmouth Hospital, Waterloo Hospital (NSARM RG25, series C, vol. 5,"Record Book, 1829-1860"), the Bank Head Hospital (NSARM MG100, vol. 156, #30-30a., reel #15198), as well as the City Home (HRM Archives 102-96.1, "Charities, 1895-1912.")" (Simpson 2011, 47).

[3] A haunting aspect that accompanied the heavy presence of death for poorhouse inhabitants was that remains were sometimes not buried at all but rather used to teach

medical students at Dalhousie University. Inquests conducted in 1875 into Dr. Lindsay, house surgeon at the Spring Garden Poor House, centred on rumours of removal of bodies from the institution for the purposes of medical education. While the reason for the inquest is unclear, Simpson notes that “in an age where the opportunity to enhance medical knowledge was paramount, poor house inmates of the mid-nineteenth century and onward may have simply served as prime teaching instruments to physicians” (Simpson 2011, 88).

[4] I will be speaking with the Public Trustee of Halifax in the coming weeks about the details of this process but was unable to interview them before this was due to be posted. I am planning to write a follow-up piece that explores how the process of trying to identify someone reflects our views of social networks and relations.

[5] A pseudonym to provide anonymity.

[6] Also a pseudonym.