

Canadian Policy Research Networks Inc. (CPRN)

600 – 250 Albert Street Ottawa, Ontario K1P 6M1

Tel: (613) 567-7500 Fax: (613) 567-7640

Web Site: <http://www.cprn.org>

Backgrounder:

**Thinking about Marginalization:
What, Who and Why?**

Prepared by:

Jane Jenson

Director, Family Network, CPRN

Web Version – November 2000

“The faces of marginalized people are legion. They can be seen in homeless persons sleeping in the subways of Manhattan or under the bridges of the Seine. They are the faces of African children wasting away from diarrhea that could be prevented if only their desperate mothers knew how to put together a simple saline solution. They are the faces of struggling farmers in South Asia whose primitive agricultural methods have not changed for generations, of reindeer herders in the Russian Far East organising to fight for mineral rights to the land they occupy, of oppressed minority groups around the world still denied the right the vote.”¹

The UNESCO sponsored Educational For All (EFA) Forum opens its most recent *Status and Trends* report with this paragraph invoking the range of persons marginalized in their own society and the world. This wide-net characterization reminds us that “marginalization” is not simply one thing, not just one status. While an absence of economic resources may, to be sure, characterize a marginalized group, lack of knowledge, political rights and capacity, recognition and power are also factors of marginalization.

Seeing the problem this way leads to the following definition of the marginalized by political philosopher Iris Marion Young, in her study of justice: “Marginals are people the system of labor cannot or will not use.” As a result, they are excluded from one of society’s major integrating activities, thereby missing out on one of the basic factors leading to full inclusion.

¹ International Consultative Forum on Education for All (EFA Forum), UNESCO, *Status and Trends*, 2000. Its definition of marginalization is: “Marginalization occurs when people are systematically excluded from meaningful participation in economic, social, political, cultural and other forms of human activity in their communities and thus are denied the opportunity to fulfil themselves as human beings.”

While often treated as a Third World phenomenon, Young sees a growing problem in the First World, and observes that “marginalization is perhaps the most dangerous form of oppression. A whole category of people is expelled from useful participation in social life and thus potentially subjected to severe material deprivation.” Not being included is costly indeed.

Nor is marginalization randomly distributed in any population: “There is a growing underclass of people permanently confined to lives of social marginalization, most of whom are racially marked. ... Marginalization is by no means the fate only of racially marked groups, however.” On the list, she puts youth, the long-term unemployed, single mothers, people living with disabilities, Aboriginal people and, because she is writing about the United States, she includes the elderly.²

Again, we see the multidimensional character of marginalization. It goes beyond poverty, although the poor are often marginalized. Marginalization is a phenomenon of material resources, but it also includes, for both the EFA Forum and for Iris Marion Young, lack of capacity to participate politically and culturally, in markets and in other institutions. Lines of social difference and discrimination often overlay, indeed sometimes promote, patterns of marginalization.

Marginalization in Canada

Canada frequently achieves high-rankings on international measures of everything from human development to absence of corruption. The number one ranking on the UN’s Human Development Index has been a source of pride for several years. However, there is also a somewhat less publicized ranking of which we are much less satisfied. Canada is only in 11th position on the UN’s Poverty Index. This difference in the two rankings reflects the depth and duration of poverty in the country, despite the aggregate well-being generated by economic growth.

Certainly, as we examine the Canadian faces of poverty, we observe that the risk of being poor falls unequally on certain groups. Being Aboriginal increases the probability of being poor. Using pre-tax LICO measures, fully 43 percent of Aboriginal persons were poor in 1998. The situation of other categories appears in Table 1, using post-tax LICO measures.

Table 1. Poverty in Canada

Population Group	Post-tax Percent who are Poor (post-tax LICO measures)
Total population	14
Lone parents	38
Persons with a disability	27
Recent immigrants	24
Single persons, aged 45-64	38

² Iris Marion Young, *Justice and the Politics of Difference* (Princeton, NJ: Princeton University Press, 1990: 53).

These statistical trends are deeply disturbing, because they are on the increase. The four high-risk groups identified in Table 1 account for an increasing proportion of the poor. The share of poor persons aged 16-64 represented by these high-risk groups increased from 33 percent in 1985 to 46 percent in 1997. Nor is poverty always a short-term transitional condition from which one escapes with time and effort. Between 1993 and 1998, 11 percent of the poor lived in poverty for more than three years, while approximately one-quarter of low-income persons were poor during the entire six-year period.³

These statistics provide one of the basic indicators of marginalization, according to the definitions presented above. As noted, however, being marginalized means more than having low income. It includes the lack of capacity to participate or gain full respect in society. For example, the community of *persons with disabilities* fears exclusion, marginalization and devaluation in a context in which their physical difference (and not only their risk of poverty) is a stumbling block to full inclusion into society.⁴ *Visible minorities*, many of whom are new immigrants, point to racism and discrimination as factors leading to their marginalization in Canadian society. They too seek to overcome it, in order to achieve inclusion as equal citizens.

Those who *lack employment, especially over the long-term*, are at risk not only of being poor but also of lacking the respect of their neighbours and communities because, in our market societies, work even more than income is the sign of full participation. For young people who cannot find a job, or older workers laid off or forced into early retirement, their identity as full citizens is in question.

Another example of marginalization involving more than just individuals' income is provided by the increasing *concentration of poverty in urban areas*. As a result of such geographic patterns, whole communities are at risk of losing the neighbourhood institutions that can provide support and empowerment. Between 1980 and 1995, the number of high poverty census tracts rose sharply from 334 to 567, and the percentage of Canadian families living in such areas increased from just over one in 10 to almost one in five. Thus, polarization is occurring in community composition as well as in income.

A fourth example of the face of marginalization is provided by the existence of *homelessness* in Canadian cities. People are living without one of the basic markers of civilization, a roof over their heads. As a result, not only are they poor, but they – and their children – lack the stability necessary for school attendance, the home address needed for job-seeking and being on the voters' list,⁵ and the community ties which give sustenance and support.

³ For a detailed analysis see Stephane Gascon, *Revenu potentiel et pauvreté au Canada, 1986-1996*. (Ottawa: Human Resources Development Canada Applied Resource Branch, 2000).

⁴ See www.pcs.mb.ca/~ccd.

⁵ In the 2000 federal election the Chief Electoral Officer is providing for some last minute enumeration of homeless Canadians, so they will be able to vote.

Marginalization: Multiple Diagnoses, Multiple Prescriptions

To describe marginalization is not to explain it. Noting that poverty exists does not lead directly to a strategy for eliminating it. Nor does refining the definition and measures of marginalization lead to a reliable prescription for overcoming it.

The multi-dimensionality of marginalization – that is, its complexity – plagues policy-makers. There is little agreement in the academic literature or in policy networks about how to understand the “real problem.” A number of competing diagnoses are available to account for unequal, and even polarized, distributions of income, capacity and power, all of which prevent real inclusion.

Take, for example, homelessness. Homelessness and inadequate housing have emerged as central social issues. Lack of access to affordable, adequate housing and safe neighbourhoods means that a range of people – from single men to families with children – are living on the margins of society and calling the streets of our cities home. Many are also on the margins of the labour force, working but not earning enough to support themselves and their families. There is a risk of reproducing marginality from one generation to the next, as schooling is mortgaged due to the inability to attend, to concentrate, or to thrive because of inadequate housing, food or income in general.

Governments and the voluntary sector struggle to address the crisis, developing initiatives to deal with homelessness, to provide school lunches and breakfasts, and to enlarge food banks, as well as to redistribute income to seniors and families with young children and to promote training. Nonetheless, the underlying problems remain.

In large part, the difficulty of solving these problems, and the tenacity of the conditions that are indicators of marginalization, can be attributed to rapid changes associated with large trends such as globalization, new information technologies, restructured labour markets, and new ideologies. To say that they are “attributable” to such social, technological, economic and political changes, however, is not *to account for them* sufficiently to develop a coherent policy analysis. More is needed.

Seeking an identification of more proximate causes of marginalization forces us to recognize that a variety of sometimes competing theoretical explanations is available. Rather than skirting the issue of varying interpretations, this *Backgrounder* will embrace this diversity and work with three different diagnoses of marginalization, assessing the ways they construct the problem and the solutions proffered. Table 2 presents a preliminary classification of the three diagnoses.

Table 2. Diagnoses of Marginalization

Marginalization results from:	The problem is:
Being unemployed	Lack of jobs
Being poor	Lack of material resources
Being excluded	Lack of social ties

Such variety in analysis is not necessarily a problem, in and of itself. However, in this case, it does contribute to confusion because the *different diagnoses actually lead to different policy prescriptions*. Each diagnosis identifies the problem differently and puts the accent on different interventions. As a result, the implications for policy action are not the same.

Therefore, the goal of this *Backgrounder* is to begin the sorting process, seeking to identify any convergence in policy prescriptions and directions. To do so, it surveys the three different diagnostic angles for analyzing marginalization that are shown in Table 2, and asks:

- *What is marginalization? What forms does it take?*
- *Who is being marginalized?*
- *Why is marginalization occurring?*

These questions will be asked of the three main diagnoses. In identifying the answer to the questions, we quickly find an additional complicating element. Each diagnosis has spawned several theoretical versions or analytical packages. Therefore, each diagnosis and these packages must be “unpacked.” Only by doing so will it be possible in the last section to begin to point to potential convergence and agreements about policy direction.

The reader must note, of course, that in identifying these three diagnoses and their different versions, we are working with *ideal types*. They are analytical creations presented for purposes of discussion. Few individual authors or studies are likely to represent “pure examples” of the class to which they are assigned.

Diagnosis #1 – The Problem is Lack of Work and Jobs

Here the accent is on changes in jobs, workplaces and labour markets.⁶ The starting point for such analyses is often something like the following observation:

Many emerging dimensions of the workplace and labour market have important implications for standards of living and the quality of working life, employment creation, productivity growth, and social cohesion.⁷

Attention goes to employment because work and earned incomes are central to the economic and social well-being of individuals, being the primary means by which individuals participate in society socially and economically. Therefore, by considering work and its capacity to integrate individuals, we are considering the basic warp and woof of the social fabric.⁸

Under pressure from globalization, technological change and shifting power relations within the workplace and in society, the current situation is diagnosed as one in which changing labour markets and workplaces do not create sufficient jobs or the “right jobs” for the skills mix in the population and the amount of labour on offer.

⁶ Here we are adopting the characterization from Gordon Betcherman and Graham S. Lowe, *The Future of Work in Canada: A Synthesis Report* (Ottawa: CPRN, 1997).

⁷ Gordon Betcherman and Richard Chaykowski, *The Changing Workplace: Challenges for Public Policy* (HRDC-ARB, R-96-13E, 1996), abstract for Internet Edition, 1998, on www.hrdc-drhc.gc.ca/arb/publications/research. This is one of several studies sponsored by the ARB on *The Changing Nature of Work*.

⁸ See, for one example, the Preface to *The Future of Work*.

Asking our three questions about “what, who and why,” we find the following answers:

- *What is causing marginalization?* Changing demand for workers and skill requirements, and insufficient jobs for the currently available labour force.
- *Who is marginalized?* Those without the needed skills or access, especially to work in the information-based economy.
- *Why is there marginalization?* Because of new technology, the legacy of previous public policies for regulating work and working conditions, and a mismatch between societal “needs” and market-generated income.

Despite these generalizations, there are three different ways of describing the links between work and marginalization, as Table 3 shows.⁹

Table 3. Marginalization and Changing Work

Description of Change	Diagnosis of Marginalization/ Work Interface	Prescriptions for Dealing with Marginalization¹⁰
Technology → Less demand for workers	Small elite of employed; High unemployment for the rest	Work sharing; guaranteed income; job creation in the third sector
Technology → New kinds of work	Opportunities for those prepared to seize them; unemployment for those who lack initiative or do not prepare for knowledge-based employment	Investment in human capital; transition benefits (training, EI, mobility grants, etc.); guaranteed income
Almost business as usual	Persistent unemployment in certain social categories; need for flexibility	Adjusted labour contracts, including “regularization” of atypical work; employment- centred social policy; self- sufficiency social policy

While there are good jobs for some, many face a situation in which they either cannot find work, or the work they do is not sufficiently well-paid to allow them to avoid poverty, homelessness, or social assistance. Depending on the version adopted, such analyses lead to recommendations for everything from a societal strategy of paying a “citizen wage,” to a clear strategy for creating employment in the third sector, which is promoted by some governments and Green politicians,¹¹ and to the “employment-centred social policy” of the OECD.¹²

⁹ This table is constructed from “Three Scenarios on the Future of Work” in Betcherman and Lowe, *The Future of Work*, p. 10. They label the three ideal-types: Technology not People, Work not Jobs and Almost Business as Usual. For purposes of clarification here, I have relabelled the first two.

¹⁰ The policy prescriptions are also adapted, with some adjustments, from Betcherman and Lowe, *The Future of Work*, p. 10.

¹¹ This has been an important element of French governments’ policies for *emplois de proximité*, as well as the European Union’s policy initiatives. See also Alain Lipietz, *La société en sablier : Le partage du travail contre la déchirure sociale* (Paris: La Découverte, 1996).

¹² See OECD, *Employment Outlook 1998*. Its editorial promotes employment-centred social policy, by which it means social policy which reinforces and supports labour force participation. The examples of such

Analysts also stress the key role that collective organizations, unions and other workplace institutions can play in managing the transition to the new workplace and new work.

Whatever the specific measures, such prescriptions tend to rely heavily on the *tax regime* for absorbing the unemployed, by paying benefits to individuals or companies in accordance with their tax situation and tax burdens. Therefore, an earned income tax credit is a classic example of a policy instrument directed towards individuals. Employers' access to such programs comes via fiscal advantages.

Programs such as the Self-Sufficiency Project sponsored by HRDC are another example of measures designed to match available workers with available jobs. In order to encourage long-term social assistance clients to enter the labour force, they are provided with a supplement to their wages, which they can access as long as they did not access income assistance. Another type of program targets the long-term unemployed and those who have exhausted employment insurance benefits. Again, the effort is to match supply with demand, via retraining and, increasingly, individualized job counselling. Several provinces and many European countries have developed these programs for employability (a mix of active and passive labour market measures) that fall somewhere between unemployment insurance and income assistance.¹³

In contrast to the weight given to fiscally delivered benefits, *services* tend to be quite limited. When they are provided, services focus on training and educational benefits, as in the examples above.¹⁴ Increasingly in Europe, the service component includes payments to individuals so they can themselves become employers. Thus, for example, the frail elderly or parents with young children who employ as a care-provider someone who is in need of employment, receive significant tax advantages.¹⁵

Diagnosis #2 – The Problem is Poverty

In recent years, increasing attention has gone to the problem of poverty. Earlier decades also saw their “poverty debates,” giving rise to important social policy initiatives each time, including the basic structure of social policy since the 1960s.¹⁶ That we are again engaged in such

employment-centred social policy are a “reasonable” minimum wage and certain in-work benefits, such as an earned income tax credit.

¹³ For an overview comparing several jurisdictions, see Gérard Boismenu and Pascale Dufour, “Nouveaux principes de référence et différenciation des arbitrages politiques : Le cas des politiques à l’égard des sans-emploi,” *Revue canadienne de science politique*, vol. 31:1, 1998.

¹⁴ For example, HRDC’s Self-Sufficiency Project also provided basic services to help with the job search.

¹⁵ For example, Care Allowances available in many countries encourage the frail elderly and disabled to hire someone who is currently unemployed or not participating in the labour market. See Jane Jenson and Stephane Jacobzone, *Care Allowances for the Frail Elderly and their Impact on Women Care-Givers*, Labour Market and Social Policy Occasional Papers #41, OECD 1999. Several countries have also developed tax credits for those who employ targeted categories of the unemployed for in-home services. The Belgian Minimax is a good example here.

¹⁶ For an overview of Canadian debates see Ronald Haddow, *Poverty Reform in Canada, 1958-78: State and Class Influences* (Montreal: McGill-Queen’s University Press, 1993).

discussions suggests that the current moment is one for rethinking the basic principles and needs of a social policy regime.

Definitional issues are very controversial in this area, because of at least two matters. One is the measurement issue. Should poverty be measured as Low-Income Cut-Offs (LICO), in a Market Basket Measure (MBM), or according to basic needs? This matter has generated a large amount of analysis and dispute, but will not be considered in any detail here.¹⁷

More to the point for this *Backgrounder* are the controversies about whether poverty is a “condition” that can be captured by measures of income or whether it has other dimensions as well, relating to having “living conditions and amenities that are customary” in the society to which the poor belong.¹⁸ For example, while most work focuses on using consumption or *income-based measures* of poverty (whether LICO or basic needs measures), others – such as the Human Poverty Index of the *UN Human Development Report* – include *non-income dimensions* of poverty in the mix.¹⁹

For a number of years it has been clear that public policy plays a major role in affecting the extent of poverty, both across the board in any country and in any social category. Canadians have witnessed one of the most important policy provoked changes, as poverty among the over-65s has been reduced dramatically. The same phenomenon characterizes most of the OECD countries that extended social protection to the elderly.

Increasingly central to such debates are two issues. The first is the link to *inequality*. As the World Bank – dedicated officially to “a world free of poverty” – puts it:

There is a renewed interest in inequality for a number of reasons. First, recent empirical work re-examines the link between inequality and growth. If at all, it tends to find a negative relationship, especially when looking at the impact of asset distribution and growth. They assert that the more equal the distribution of assets such as land, the higher growth rates tend to be. Second, with poverty reduction in many countries being slow at best, the scope for public policies to have a poverty-reducing impact through redistributive effects – from safety nets to social expenditures – needs to be examined. Third several empirical studies also examine the impact of inequality – independent of the poverty level – on health outcomes, such as morbidity or mortality rates, or as a cause for balance.²⁰

Discussions of inequality must consider poverty, to be sure, but they also have to look well beyond the distribution of individuals and households living below a certain poverty line. Incomes at the top and in the middle may be just as important to take into account, for understanding economic development and well-being more generally.²¹

¹⁷ The proportion of Canadians classified as poor in 1996 ranges from 19 percent, using LICO, to 7 percent, using the Sarlo BNL.

¹⁸ The need to do the second is argued, for example, in Peter Townsend, *Poverty in the United Kingdom* (Hammondsworth: Penguin, 1979), p. 32, from where this quote is drawn.

¹⁹ For good discussions of the debates about poverty, both currently and throughout the post-1945 years, see the World Bank’s *PovertyNet*.

²⁰ See the World Bank’s *PovertyNet* and the discussion of inequality on www.worldbank.org/poverty/inequal.

²¹ For example, in considering inequality, *PovertyNet* hypothesizes that wide differences in income, including those within households, may contribute to stress, leading to higher morbidity, mortality and violence among poor populations.

Again, with respect to reducing inequality as well as poverty, numerous empirical studies point to the key role played by public policy.²²

A second issue is the *reversibility* of poverty. Because most advanced capitalist countries have dedicated their social protection programs to limiting, if not eliminating, poverty, they have generally adopted a position that good public policy can move individuals and families over a threshold.²³ Increasingly, there is a concern that the traditional policy instruments – such as investments in human capital or income assistance payments – may require modification in the face of current conditions, in which several disturbing patterns are observable.

- There is increasing evidence that the duration and depth of poverty may be increasing for certain high-risk groups.
- These high-risk groups are, in turn, concentrating geographically in urban areas where social norms do not always discourage “anti-social behaviours.”
- That working, even full-time, does not always bring an end to poverty. Moreover, the jobs that are available may be too precarious to prompt individuals to leave social assistance and the benefits it provides in addition to income.²⁴
- Poverty rates have not changed significantly in the last 20 years, despite investments in human capital. Low-income Canadians are more educated than ever before and the education gap between the poor and not poor is narrowing.²⁵ Yet, poverty rates are not falling.

With these observations, we can ask our three questions about a diagnosis in terms of poverty.

- *What is causing marginalization?* Here there are several answers. (1) Being poor for an extended period or living in neighbourhoods that have concentrations of poverty. (2) Working, but not earning enough to buy the necessities of life and, therefore, suffering some of the effects of poverty.
- *Who is marginalized?* Increasingly, certain identifiable high-risk categories of the population (see Table 1).
- *Why is there marginalization?* Because of individual circumstances, market failures, ineffective social policies and/or overly inegalitarian income distributions.

²² Just by way of example, see M. Janti, “Inequality in five countries in the 1980s: The role of demographic shifts, markets and government policies (Canada, Great Britain, Netherlands, Sweden and the United States),” *Economica*, Vol. 64, 1997.

²³ The difficulties in doing so are set out in Gascon, *Revenu potentiel et pauvreté au Canada, 1986-1996*.

²⁴ This is, of course, a formulation of the problem of the “welfare wall,” in which working does not “pay” enough to encourage social assistance recipients, especially those with health needs for themselves or their children, to leave social assistance for the labour force.

²⁵ This is an aggregate indicator. Among the high-risk populations identified in Canadian data (lone parents, people with disabilities, recent immigrants, and singles over 45), individuals with more education demonstrate less probability of living in poverty for an extended time.

Despite these generalizations, there are different ways of describing the links between poverty and marginalization, as Table 4 shows.

Table 4. Marginalization and Poverty

Diagnosis of Marginalization/ Poverty Interface	Prescriptions for Dealing with Marginalization
Poverty is a <i>preventable</i> condition; anyone may be poor for a time. Marginalization is a threat if poverty is not overcome.	<ul style="list-style-type: none"> Promoting labour force participation, including education and training to encourage acquisition of human capital and self-sufficiency programs that foster and facilitate labour force participation. Provision of basic social supports, including those supplementing income from work or other sources.
Poverty is a <i>debilitating</i> condition, sapping health and trapping individuals in a “spiral of disadvantage.” It produces marginalization.	Carefully targeted programs to address specific needs for “remedial purposes.” Health and social services, including those to break intergenerational cycles of poverty.

The first version of the poverty diagnosis puts the accent on *fostering labour force participation* among the poor. Basically, living on social assistance means living in poverty. Therefore, governments have sought ways to move individuals into the labour force.

The approach includes a wide number of self-sufficiency programs (*parcours d’insertion*) targeted to non-participants. These programs include both income supplements and services. Active labour market programs are the best known examples here, especially those targeted to young people, the long-term unemployed, or lone parents.²⁶

Other programs are targeted at particular categories. Canada, for example, uses the tax regime to help lower or eliminate the welfare wall for families with children under 18. The Canada Child Tax Benefit (CCTB) and provincial child benefits and working income supplements are examples of this strategy. However, the National Child Benefit (NCB) also includes a range of services intended to smooth the transition from social assistance to paid work. Depending on the province, these include health and dental benefits, child care, transportation, and so on.

The second version of the poverty diagnosis recognizes that the experience of living in poverty for extended periods may lead to *an accumulation of conditions that put an individual or group at-risk*. Therefore, more is needed than simply changing the incentive structure so that “work pays.”

It is also necessary, probably through services, to address the blockages that are hindering individuals’ ability to recognize or take advantage of changed incentive structures because they are too marginalized. Services paying attention to basic social skills, parenting, and personal health promotion are often components of this type of package. It is here that the poverty diagnosis begins to approach that which is phrased in terms of exclusion.

²⁶ HRDC conducted its Self-Sufficiency Project as an experimental program between 1992 and 1999 for lone parents who had been on social assistance for more than a year. The evaluations are generally positive. See the ARB Web site.

Diagnosis #3 – The Problem is Exclusion from the Mainstream

For those who utilize this diagnosis, the primary significant division in society is the border between an *included majority* and an *excluded minority*. Poverty is not a synonym for social exclusion; personal circumstances among the poor may mean that some individuals do not lack social ties.²⁷ Rather, social exclusion “refers to the dynamic process of being shut out, fully or partially, from any of the social, economic, political and cultural systems which determine the social integration of a person in society.”²⁸

Focusing on the border between the included majority and the excluded minority, “attention is drawn away from the inequalities and differences among the included.” Exclusion appears as an essentially peripheral problem, existing at the boundary of society.²⁹ The goal of social interventions becomes to facilitate the transition across the boundary, so that as many individuals as possible can become an insider rather than an outsider.

Applying our grid of questions, we find the following formulations.

- *What is causing marginalization?* Isolation and lack of capacity to participate fully.
- *Who is marginalized?* The long-term unemployed, lone mothers, the poor.
- *Why is there marginalization?* Because of individual circumstances, the failure of the labour market to provide work for all, and social pathologies.

As in the case of the previous two diagnoses, there are different versions of the exclusion argument. In one view, exclusion is described as *the denial (or non-realization) of the civil, political and social rights of citizenship*; an unequal distribution of power and wealth excludes some. The goal is to achieve full citizenship, thereby holding out a more egalitarian view of society, with its focus on shared characteristics rather than a division between insiders and outsiders.³⁰ This helps to explain why there is increasing interest in the “citizenship” dimensions of social policy in many quarters.³¹

A second view focuses on *labour force participation as the route to integration into society*. Labour force participation will bring inclusion in its wake. This version of the exclusion discourse is particularly popular in the European Union’s view of exclusion.

²⁷ For the differences between women and men in this regard, see Margaret Maruani (ed.), *Les Nouvelles frontières de l’inégalité* (Paris: La Découverte-MAGE, 1998).

²⁸ See Alan Walker and Carol Walker (eds.), *Britain Divided: The growth of social exclusion in the 1980s and 1990s* (London: Child Poverty Action Group – CPAG, 1997), p. 8.

²⁹ This description is drawn from Ruth Levitas, *The Inclusive Society? Social Exclusion and New Labour* (London, Macmillan 1998), p. 7.

³⁰ Levitas, *The Inclusive Society*, p. 12. See also Robert E. Goodin, “Inclusion and Exclusion,” *European Journal of Sociology*, vol. 37:2, pp. 343-71, 1996; and Ruth Lister, *The Exclusive Society: Citizenship and the Poor* (London, CPAG, 1990).

³¹ See, for example, Camil Bouchard, Vivienne Labrie and Alain Noël, *Chacun sa part. Rapport des trois membres du Comité externe du réforme de la sécurité du revenu* (Montreal: March 1996). See also, Jane Jenson, *Mapping Social Cohesion: The State of Canadian Research* (Ottawa: CPRN F-03, 1998), pp. 20-22.

A third stream in the analysis of exclusion is one that leads to a moralizing discourse about the “failures” of parts of the population to live up to expectations of “normal” society.

There are, in the same way as we have already seen with respect to the other two diagnoses, several ideal-typical ways of analyzing exclusion, as shown in Table 5.³²

Table 5. Marginalization and Exclusion

Diagnosis of Marginalization/ Exclusion Interface	Prescriptions for Dealing with Marginalization
Exclusionary distribution of resources (economic, social, political)	Promotion of full citizenship, including a redistribution of power and income across individuals, groups and communities
Lack of social integration	Integration depends on real access to the labour force
Social pathologies	Social cohesion depends upon promotion of activities leading to self-improvement

If the third position is present but not dominant in Canadian discussions about marginalization,³³ the first two are quite present in political discourse in Canada. The first leads to efforts to empower individuals and their local communities.³⁴ Much of the work on the social economy in Quebec falls into this category, as does that of the European Union, which is putting a greater stress on community development in order to promote, *inter alia*, social cohesion.³⁵

An analysis of marginalization in terms of exclusion depends on income transfers and service provision. But it also puts a great deal of emphasis on *practices*, those that will empower the marginalized to take better control of their lives and re-knit social bonds. Increasingly, attention turns to efforts to address the complex and interconnected social factors, often spatially concentrated, which bring about individuals’ exclusion.

Experimental efforts at community development, such as Centraide Montreal’s *1,2,3 Go!* fall into this category, as do many of the social economy initiatives in Quebec.³⁶

³² The description of the three discourses of exclusion described in Table 5 are based on Levitas, *The Inclusive Society*.

³³ This underpins the discourse of some politicians promoting workfare. In some cases, it is considered legitimate to withdraw certain citizenship rights from those who do not conform to “normal expectations” of society. The treatment of young unmarried mothers by Ontario’s LEAP program would fall into this category, as does Quebec’s differential access to social assistance to youth under 25.

³⁴ In *The Inclusive Society*, Levitas writes, “French discourses of exclusion, themselves contested, broadened out to a consideration of groups marginalized economically, socially, culturally and, in the case of *the outer suburbs*, spatially; and in the fields of education, employment, housing and health. Although insertion, as the obverse of exclusion, acquired a similarly wide brief, a key measure was the introduction in 1988 of a residual benefit, the RMI (*Revenu Minimum D’Insertion*), stressing the reciprocal nature of solidarity.” (p. 21, emphasis added).

³⁵ See, for example, the work of the European Foundation for the Improvement of Living and Working Conditions, located in Dublin (www.eurofound.ie).

³⁶ Benoît Lévesque and Marguerite Mendell, “L’économie sociale au Québec : éléments théoriques et empiriques pour le débat et la recherche,” *Lien social et Politiques*, #41, spring 1999.

Convergence and Differences: Moving the Dialogue Forward

This *Backgrounder*, prepared for the structured dialogue on marginalization of 25 September 2000, describes three ways of framing the issue of marginalization – as a lack of work, a lack of resources, and a lack of social ties. Each analysis leads to its own prescriptions for overcoming the problem of marginalization and fostering inclusion. The goal for the meeting is to identify convergence as well as differences in these approaches and to begin to draw some conclusions about their implications for public policy.

As a step in that direction, this section lists a number of questions around which the discussion might focus. Most generally, there is a key difference among the three diagnoses, and one that has profound consequences for policy choices: the *location of the problem*.

For some, the focus is the *behaviour of individuals*, and fighting marginalization demands individual solutions, ranging across the acquisition of human capital through education and training, income supplements, or self-sufficiency services. Others explain marginalization by a *complex of social structures*. Only by changing these structures can we hope to get at the reasons for the intransigence of the problem. Some would reform labour markets, while others focus on local communities. In both cases, however, there is a recognition that even if marginalization appears as a problem of individuals, behind it lies a structure of inequality that needs reform.

There are some points of convergence, nonetheless. Convergence, however, does not mean consensus. Therefore, it is useful to examine these points of convergence carefully.

In each of the three diagnoses, at least one position argues for *work and employment* as a solution. The poverty diagnosis is most enthusiastically committed to this position, with its prescription for moving people over the threshold of the poverty line via self-sufficiency programs.

Yet, another diagnosis moderates this enthusiasm for employment as a cure-all. Those who examine the changing workplace point to an absence of suitable jobs, even when there is work that needs doing. In addition, cyclical downturns in the economy may only exacerbate the structural problem. Diagnosis #1 teaches that labour markets cannot always be counted on to produce sufficient jobs or employment with sufficient income. Attempting to induce participation without paying attention to the supply of jobs may result in failure because it is not addressing the problem at one of its sources, the changing work force.

Question: Are there strategies that can “correct” each diagnosis with the insights of the others?

Question: Are *interventions in labour markets* to transform unpaid work into employment or to adjust minimum wages, for example, a necessary strategy for addressing marginalization?

Similarly, those who focus on the debilitating effects of living in poverty and the long-term consequences of being excluded from full citizenship identify serious problems that hinder people's capacity to respond to the incentive structure of the labour market, even as modified by employability programs and transitional benefits. They point to the need to address a range of other issues, such as programs for mental health, anti-violence, or community development.

The definition of marginalization with which we began the *Backgrounder* suggests that individuals' capacities and empowerment are key to avoiding marginalization. Marginalization is, by definition, an example of the complexity of *multiple disadvantage*. Lack of access to resources is not the whole story. Knowledge and capacity are also important, while maintenance of social ties is, in part, dependent on both identifying with and being recognized as a contributor to a common enterprise.

The three diagnoses address these broader notions of marginalization differently. Those focused on the workplace assign unions and other workplace institutions the responsibility for achieving a better power balance. For those who define the problem as one of poverty, there is some attention to changing individuals' sense of self and capacity. However, it is the third approach that pays most attention to the key factor of identity and sense of self, both as an individual and a member of a community.

Question: What dimensions, if any, of *a life lived in poverty or exclusion*, interfere with efforts to alter the incentive structure for "making work pay" and fostering labour force participation?

Question: What strategies are needed to address the *multiple disadvantages* that underpin much marginalization?

There are also differences across the diagnoses in the extent to which they recognize the spatial dimensions of marginalization. Those who define the problem of marginalization as one of exclusion recognize the importance of redistributing political power and citizenship in disadvantaged communities, via community development. Diagnosis #1 ignores the spatial dimension, while Diagnoses #2 and #3 provide some insights into how to understand the concentration of disadvantage in certain communities. Action programs to address that concentration require, however, a shift in the level of analysis, moving beyond the individual to take into account community or workplace structures.³⁷

Question: What importance should be given to the *spatial dimensions* of marginalization?

Question: What strategies are available for addressing these spatial dimensions?

³⁷ It is interesting to contrast two different strategies for dealing with the observation of geographically-based concentrations of disadvantage. Most countries have turned to community development, and cross-sectoral partnerships to dismantle the structures of disadvantage. In the United States, a more individualistic solution has been chosen. Selected families are moved out of the poor neighbourhoods and installed in middle-class communities. For information about the latter, entitled the Moving to Opportunity Project, see www.princeton.edu.80/~kling/mto.