

Chapter 13

Marginalization

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Chapter aims

- 1. To understand the nature of social marginalization**
- 2. To consider values that contribute to marginalization**
- 3. To consider values that can counter marginalization**
- 4. To establish the relevance of critical community psychology praxis for working against marginalization**
- 5. To propose analytic and practical tools for working against marginalization**
- 6. To reflect on some potential problems community psychologists can meet when trying to work against marginalization.**

Marginality is an experience affecting millions of people throughout the world. This problem is considered to some extent in most of the following chapters. Being poor, unemployed, discriminated against, or being disabled by a society that won't work around the problems of impairment; they all bring with them the risk of exclusion. Being excluded from economic, social and political means of promoting one's self-determination can have adverse effects for individuals and communities alike. This chapter focuses on social marginalization to see how community psychologists can understand it and challenge it at the same time.

Marginalization is strangely ignored in the psychological literature: in preparation for writing this chapter we carried out a search of the psycINFO database for the period from 1876 until the present day, using both 'marginalization' and 'marginalisation'. We found 52 items that included the term in the title - of these, only 17 actually dealt with the experience of social marginalization by people in positions of oppression, exclusion, vulnerability or discrimination: the others dealt with things as diverse as a statistical technique or the marginalization of certain professional groups or practices. Curiously, there was no entry at all from before 1982. Over 55,000 references are currently added to the database each year, so in the year 2000, for instance, there were two out of 55,000 or 0.0036 per cent of relevant references. Although there will be many more texts that deal with the question (but do not mention it in the title), this still looks like a remarkable neglect by the established field of psychology. Having said this, it is

important to note that Community Psychology has a history of working with marginalized people. People with mental health difficulties, and the services developed to support them, have been at the heart of the discipline since its inception (Levine & Perkins, 1997; Orford, 1992), although over time there has been a shift in favour of specific problem areas and marginalized groups (Speer, Dey, Griggs, & Gibson, et al., 1992). For example, there has been considerable and varied community psychological work on homelessness, a highly marginalized population. This work includes accounts from homeless people, typologies of homelessness, access to services, public attitudes to homelessness, mental health and homelessness paths to, through and from homelessness, stress and coping, policy analyses and social support.

What is Social Marginalization?

Marginalization is a slippery and multi-layered concept. Whole societies can be marginalized at the global level while classes and communities can be marginalized from the dominant social order. Similarly, ethnic groups, families or individuals can be marginalized within localities. To a certain extent, marginalization is a shifting phenomenon, linked to social status. So, for example, individuals or groups might enjoy high social status at one point in time, but as social change takes place, so they lose this status and become marginalized. Similarly, as life cycle stages change, so might people's marginalized position.

Let us consider for a moment the position of many civic organisations in South Africa under apartheid. Although excluded from the mainstream, these groups held important positions in the fight against apartheid. Post apartheid, their status changed. Those people prominent in resistance organisations, and indeed some of the organisations themselves, were incorporated into Government. In contrast, at the local level, those young men who had high status as 'freedom fighters' almost overnight became virtual outcasts as their reliance on countering violence with violence had no place in the rhetoric of the new South Africa (see Noyoo, 2000). These are examples of shifts in marginalization that occur alongside social and political change. A different type of example would be found in communities, or sectors of communities, in which social and economic changes propel people into marginality.

Charlesworth (2000) wrote a moving phenomenological account of working class life in a former steel-manufacturing town in England. In discussing the ways in which people's social position affects their identities and even their appearance, Charlesworth says that

It is the economic changes and the social conditions they ushered in that have consigned these people to a life of marginality which, naturally enough, manifests itself in their comportment,

manner and style. (p. 160)

One of the local people in his book describes the hopelessness that such marginalization engenders:

Ah get up some times an' it's just too much fo' mi, yer know, it creeps over yer, it just gets too much an' tha can't tek no mo'ore [...] It's heart breakin', it's just a strain all time an' tha just wants t' not live, tha just can't see n' point in thi' life... (p. 160)

At certain stages of the life cycle the risk of marginalization increases or decreases. For example, the marginalized status of children and youth may decrease as they get older; the marginalized status of adults may increase as they become elders; the marginalized status of single mothers may change as their children grow up, and so on. Even so, there are different risks within particular social groups at risk of marginalization. Eldering and Knorth (1998), for example, demonstrate that the risks of marginalization of immigrant youth in Europe vary with ethnicity, irrespective of the particular host countries, or of degree of acculturation. Kagan and Scott-Roberts (2002) working with NGOs supporting families in the slums of Kolkata, illustrate how having a disabled child further marginalizes them. Similarly, Wenzel, Keogel and Gelberg (2000) draw our attention to the different risks faced by homeless women compared to homeless men, and Taywaditep (2001) discusses forms of marginalization amongst gay men.

In his unjustly neglected book, Personality and Ideology, Peter Leonard (1984, p.180) defines social marginality as '*being outside the mainstream of productive activity and/or social reproductive activity*'. This includes two groups, firstly a relatively small group of people who are voluntarily marginal to the social order - new age travellers, certain religious sects, commune members, some artists, for instance. Here, however, we are concerned with a second group, those who are involuntarily socially marginal. Leonard (1984, p.181) characterises these people as remaining outside 'the major arena of capitalist productive and reproductive activity' and as such as experiencing '*involuntary social*

marginality'.

The experience of marginality can arise in a number of ways. For some people, those severely impaired from birth, or those born into particularly marginal groupings (e.g. members of ethnic groups that suffer discrimination - the Roma in Europe, Indigenous people in Australasia and the American continent, African Caribbean people in Britain), this marginality is typically life-long and greatly determines their lived experience.

For others, marginality is acquired, by later disablement, or by changes in the social and economic system. The collapse of the Soviet Union plunged millions into unemployment. In Manchester, our own city, neoliberal economic policies closed down the traditional industrial base and led to unemployment and various patterns of insecure and casual employment for many. As global capitalism extends its reach, bringing more and more people into its system, more communities are dispossessed of lands, livelihoods, or systems of social support (Chomsky, 2000; Petras & Veltmeyer, 2001; Potter, 2000; Pilger, 2002). Indeed we argue that capitalist development in its current globalising phase inexorably creates increasing levels of marginalization throughout the world, particularly as collective safeguards, from indigenous cultures to trades unions and government welfare programmes are attacked.

Marginalization is at the core of exclusion from fulfilling and full social lives at individual, interpersonal and societal levels. People who are marginalized have relatively little control over their lives and the resources available to them; they may become stigmatised and are often at the receiving end of negative public attitudes. Their opportunities to make social contributions may be limited and they may develop low self-confidence and self esteem. If they do not have work and live with service supports, for example, they may have limited opportunities for meeting with others, and may become isolated. A vicious circle is set up whereby their lack of positive and supportive relationships means they are prevented from participating in local life, which in turn leads to further isolation. Social policies

and practices may mean they have relatively limited access to valued social resources such as education and health services, housing, income, leisure activities and work. The impacts of marginalization, in terms of social exclusion, are similar, whatever the origins and processes of marginalization, irrespective of whether these are to be located in social attitudes (such as towards impairment, sexuality, ethnicity and so on) or social circumstance (such as closure of workplaces, absence of affordable housing and so on).

We can identify the above general processes that generate marginalisation, but different people will react differently to marginalization depending on the personal and social resources available to them,. Nevertheless, some common social psychological processes can be identified. We pay particular attention to processes that facilitate or prevent collective social action (see Burton & Kagan, 1996).

Poverty and Economic Marginality

People who are experiencing marginalization are likely to have tenuous involvement in the economy. The sources of their income will vary. Some will be waged and some will depend on state benefits, marginal economic activity such as casual work, or charity (see for example, Sixsmith, 1999). It is not unusual for people to combine, or move between, these various ways of getting money in their struggle for survival. Poverty, dependency, and feelings of shame are everyday aspects of economic dislocation and social marginalization.

Box 1: Exercise - Marginality and the Economy

Once or twice a month a young man (we'll call him Tony) knocks on our door. He speaks with an impediment and begins his well-practised introduction about how he has been unemployed for more than a year so he thought he'd do something about it by selling some household items. The items are of poor quality and about 50% more expensive than in the shops, but some people buy them out of compassion, particularly if the weather is cold or wet. Tony of course knows that he is an object of pity and charity. Tony has to pay a fee to the company that runs the scheme. The company gave him a basic training and supplied the goods. He has to declare his earnings, and after a few pounds his social security is reduced by what he earns. Some weeks he is no better off than if he were not working, but in a good week he has a little extra - the social security is not sufficient to live on for more than a short time, and people build up debts.

In Britain people who are disabled through significant levels of intellectual difficulty still receive reasonably high state benefits, but the state monitors their wealth very closely. If they manage to save more than a few hundred pounds, the state reduces their benefit level. Since the early 1990s social services departments have (because of central government policy) levied a charge for the assistance people receive. Few people have waged employment because this can lead to a change in benefit status, so they risk becoming worse off if they lose the job. They are therefore trapped in a position of economic dependency, and subject to the official gaze.

Consider the following questions: What might be the implications of government policy for a person's self-concept, self-esteem, and confidence? Is the state making reasonable provision that its money is well spent, or is it proceeding from the belief that people are dishonest? In what ways do the actions of the state combine to maintain the marginality of the people mentioned?

Impaired Support Networks and Social Marginalization

A further problem is the relative or complete exclusion of marginalized people from social networks. People born into marginality will be, at best, able to access resources through strong social networks (for example a person born with impairments into a rich family). Others will be able to access weaker networks, such as neighbourhood, or church based organisations. But often these sources of support will be weak or overburdened. For example, in some poor communities where unemployment is the norm, and social problems are rife, tenants association have retreated to a minimal role of working just in the interests of those on the committee (see for example Kagan, Lawthom, Knowles & Burton, 2001). Isolated from the world of work, strong associations like trades unions are not available to economically marginalized people.

People who have become disabled, and those with a severely disabled child, often report rejection and isolation from their former friends and allies. Marginalisation then means reduced opportunity to link with others in common action to solve problems. The result can be described as disempowerment.

Box 2: Listening to Parents of Children with Disabilities

The experiences of parents of severely disabled children in England can throw light on processes of marginalisation and survival. One of us (CK) had been working with a group of parents of adult sons and daughters with severe and multiple impairments. The authority in which they lived had some money to support these parents and it had been agreed that the parents, not the professionals, should decide what it should be spent on. After a series of

meetings, in which the parents had met each other, often for the first time, they agreed that what was needed was a 24-hour telephone line through which they could contact someone 'just to listen' if needed.

On the whole they thought they managed pretty well, but every now and then things got too much for them. Senior managers from both the health and social services were invited to meet the parents and hear their suggestions. At this meeting they were concerned that a telephone line would not use up all the money available and pressed the parents for more concrete (and expensive) ideas. After a while one of the mothers, who had got impatient with the professionals, stood up and said 'I have looked after my son for 35 years. For 35 years no one has come near me and asked what I wanted. For 35 years I have not dared to even think about how our lives could be different. Now you come along and ask me 'What do I want'? How can I tell you what I want? When I do, you don't want to hear. We have said we want someone to be available on the telephone. You say 'Don't you want a washing machine?'. No, we want someone to listen to us.' The senior managers were humbled and the rest of the parents delighted. From then on, there were regular meetings between the parents and the services got a little better at listening to them.

Ideological Aspects of Marginalization

The above two dimensions of marginalisation, poverty/economic dislocation and disempowerment/social dislocation, can be regarded as primary material insults. But being a member of a marginalised group also brings the risk of some more psychosocial-ideological threats. The first of these is the definition of one's identity by others: the ideological definition of one's marginalised identity in the interest of the dominant groups in society. There have been many examples of this, and so far as we know, without exception, all the social movements representing oppressed and marginalised groups have pinpointed and offered critiques of the phenomenon. What typically seems to happen is that the situation of the marginalised persons is portrayed as a result of their own characteristics. What is essentially a social and historical phenomenon is presented as a biological or an intrapsychic phenomenon.

Figure 13.1:

Sources and dimensions of marginalisation and resistance

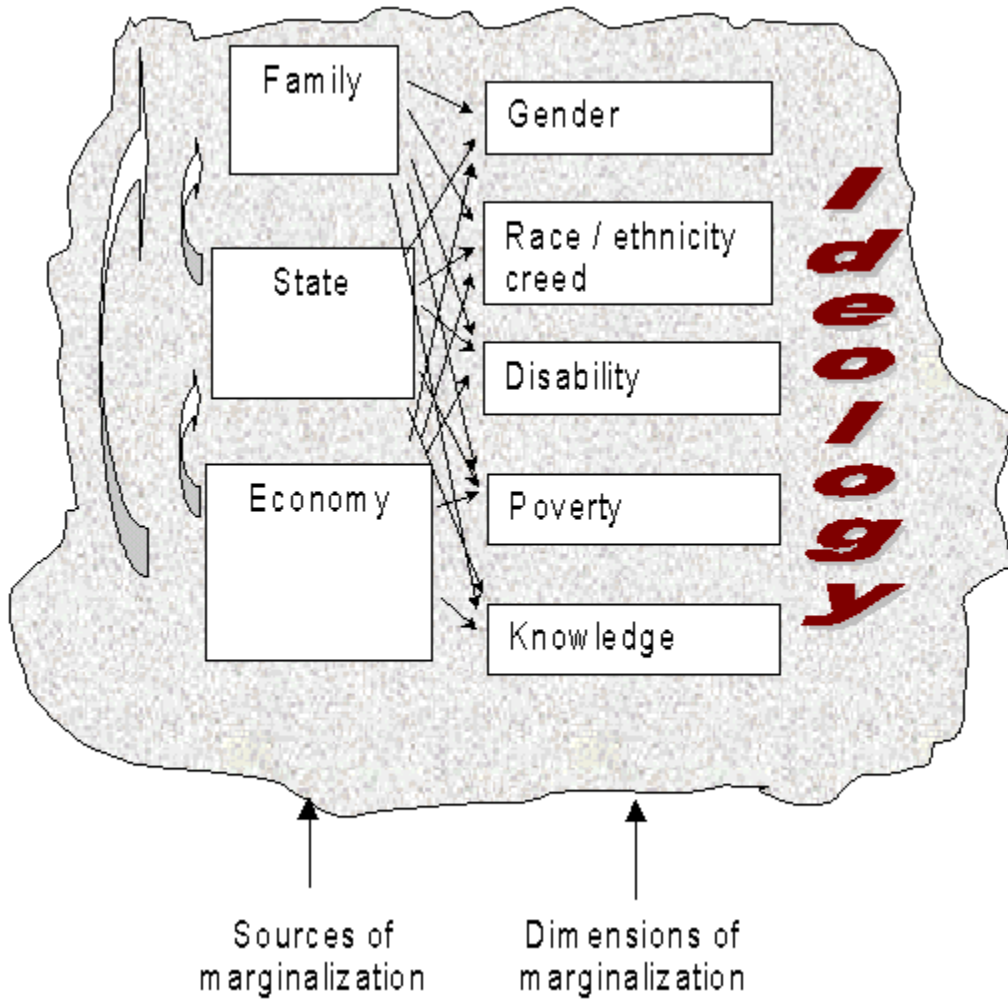
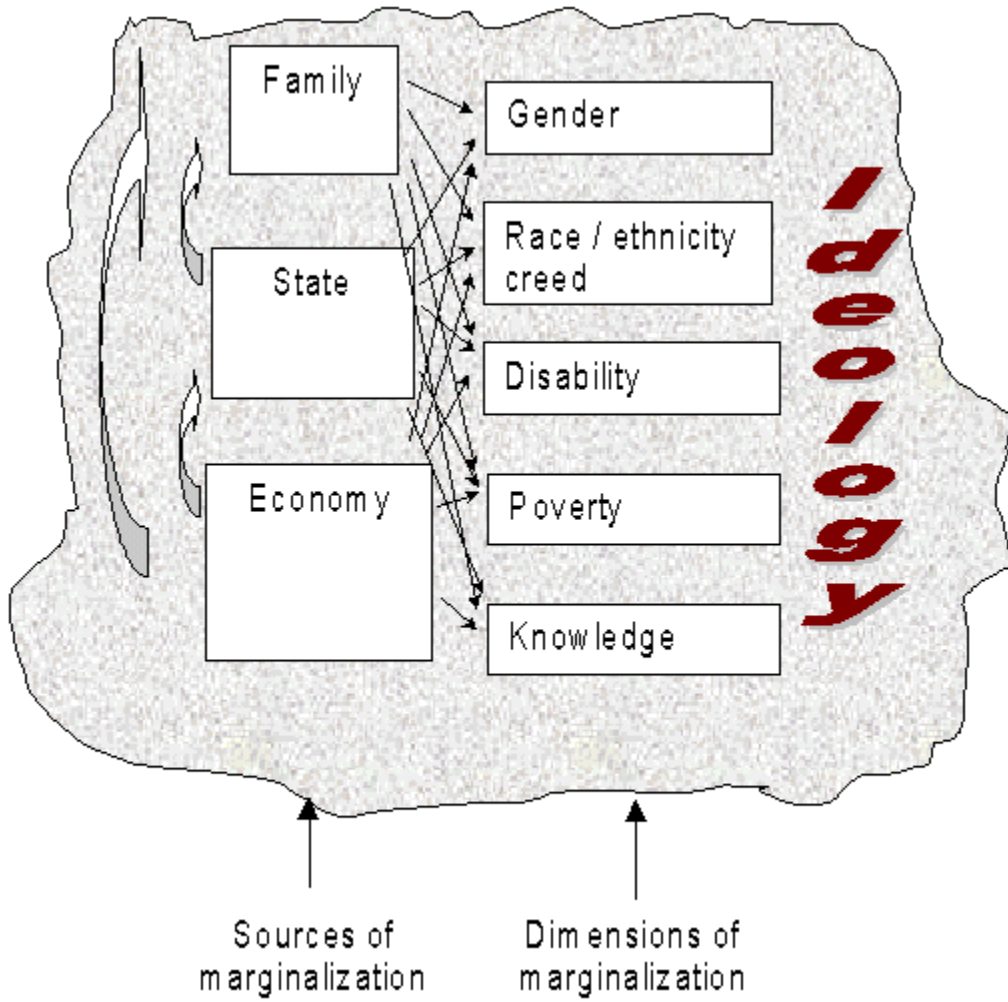


Figure 13.1:

Sources and dimensions of marginalisation and resistance



The problems that people face are then seen as of their own making, or at least as inseparable from their particular nature. The phenomenon is naturalised, seen not as a socially determined reality, but as something to be expected given the way the person is. This phenomenon has been called 'blaming the victim' (Ryan, 1976), which is part of a more general 'culture of blame' (Farber & Azar, 1999). Examples of this should be familiar, and will be encountered in the following chapters in relation to particular oppressed groups.

Psychology has often colluded with ideologies that blame the victim by offering endogenous causes of the situation in which oppressed people find themselves. These causes have reflected the scientific and psychological theory of the time, from MacDougall's use of instinct at the turn of the last century, through drives and personality traits, to the maladaptive cognitive structures that today's cognitive theorists claim to detect. The latter have some justification because oppressed people internalize aspects of the existing social reality and its ideological 'story'.

Some psychological writers have offered analyses of what goes on in processes of internalization (e.g. Fanon, 1986; Martín-Baró, 1996a). Martín-Baró studied the phenomenon of fatalism in Latin-American societies. Psychological explanations had hitherto considered this in terms of the character of the people concerned. It had been suggested that these personality characteristics develop in a specific cultural context, for example a 'culture of poverty' in which destitution leads to cultural patterns that are passed on and are no longer adaptive.

Martín-Baró suggests other explanations. The first of these is fatalism's 'truth'. The impossibility of social change - poverty, debt, failed social movements -- leads to an internalisation of external reality. As a result, we see a correlation between the societal context and psychological structures. The oppressed classes assume that their destiny is out of their control. The structure condemns to failure whatever members of the poor classes do to 'get ahead'.

Secondly, he looks at fatalism as the internalisation of social domination. Martín-Baró follows

Fanon who suggested that violence imposed by the coloniser is introjected, turned inward, by the colonised. It remains anchored in their musculature as repressed tension, and in their minds as guilt. Similarly for Freire (1974, 1994), the oppressed are immersed in a condition in which they are robbed and rendered helpless. Unable to get to the source of their condition, they take refuge in a fatalistic attitude, transforming history into nature. Impotence becomes proof of their worthlessness. The oppressor becomes an irresistible model for the oppressed, with whom they identify, and whose orders they follow.

Finally, Martín-Baró identifies the ideological nature of fatalism. Fatalism saves the oppressor from having to exert coercive control; it induces a docile reaction to the demands of those who wield power. In keeping with fatalism, historical forces are rendered mythical, so they seem to resemble nature, or God.

A further result of victim-blaming ideologies, imposed but assimilated, is the definition of one's reality by 'experts'. This is most obvious in the case of disabled people and those with mental health difficulties, where personal experiences become a set of pathologies with technical names and technological treatments.

Resistance and Resilience

Despite all the negative impositions of ideology, the situation of oppressed people is also characterised by resistance and resilience. In resilience there is the potential for an enhanced, reclaimed and re-invented identity. The very fact of being oppressed, of having fundamental rights denied or diminished, elicits attempts to remediate the situation. This can be negative and destructive, as in the vandalism and petty crime of disaffected youth in our cities, or in the pathologies of self-destruction, addiction, and depression. However, attempts at remediation can also be highly positive, as in collective action to improve social arrangements. Potential or actual resilience and resistance can be key resources in community psychology praxis.

As people are affected by social forces and changing social relations, and as they organise to resist oppression and reclaim what is truly theirs, they experience changes in identification and affiliation. A person who becomes unemployed is likely to lose both the social context and network of work, and to begin seeing herself in other terms - not defined by her working life. This is likely to involve a struggle, often lost, to retain a positive self-concept and not be defeated by feelings of worthlessness and superfluity (Charlesworth, 2000; Leonard, 1984, Chapter 9). Similarly, when people in the UK have to move house due to their age (Churchill, Everitt & Greene, 1997) or due to housing policies, there are marked changes in how they feel about themselves and about the social contributions they can make.

People who take collective action, on the other hand, describe how their sense of belonging and personal worth change for the better through their political engagement (e.g. Kagan, Lawthom, Knowles & Burton, 2001; McCulloch, 1997; Menchú, 1984; Stewart, 2000). Again, it is important for community psychologists to understand these processes if they are to be helpful in supporting community based movements for change.

Why Does Marginalization Matter?

It is worth focussing briefly on why marginalization is actually a problem. There is something fundamental here to the very meaning of being human. It is commonplace to find the assumption that the self precedes society, and therefore that society is made up, in a cumulative way, from individuals (or in Margaret Thatcher's words: *'There is no such thing as society, only individuals'*). An alternative view can be found in the work of figures as diverse as Karl Marx (see Sève, 1975) and GH Mead (1934) who emphasised the construction of the 'human essence' (Marx) or the 'mind', and the 'self' (Mead), from the 'ensemble of social relations' (Marx) or the 'organized pattern of social relations and interactions' (Mead). In other words we 'become our selves' through the relations we enter into in the society and its communities. For those people who are severely involuntarily marginalised, their selfhood, their humanity, is threatened.

Reflecting what Thekaekara and Thekaekara (1995) found on peripheral estates of Britain, Charlesworth (2000, p. 60) puts it thus:

... no matter what one has done occupationally ... [once marginalized] ... there is no way one can escape the experience of a social context that is like a stagnant pond in which we are the suffocating organisms. There is an absence of the social conditions that make optimism and hope a realistic life strategy. (Charlesworth, 2000, p. 60)

It is therefore unethical to do nothing about social marginalization: it is a major human problem, undermining the essence of humanity.

Based on multiple sources of evidence, Doyal and Gough (1984, 1991) argue that there are two fundamental human needs: physical health, and autonomy. Autonomy is further divided into two levels, autonomy of agency, the ability to initiate actions; and critical autonomy, the opportunity for participation in political processes. People who are involuntarily marginalized, then, would have to be

seen as having their fundamental needs compromised. Doyal and Gough go on to suggest that the abstract human needs of health and autonomy can be achieved through a process of learning: learning as a *social* process, involving people interacting in social groups. Learning from history, learning between groups within a society or across cultures, are all very important. In fact, they argue that the ability to translate lessons into practice is what they call 'human liberation' (Doyal & Gough, 1984 p. 22).

Box 3: Doing Critical Community Psychology

The process of learning and the ability to translate this into practice is a key area of possibility for critical community psychological praxis. The transfer of knowledge and skills, and the strategic thinking often required to put them into practice, usually called 'capacity building' is one way in which community psychologists can shift resources over to those who are marginalised. Two examples from our own work can illustrate this.

The first is of a project that sought to enable community groups, interested in different ways in health and well being (and which varied from oral history groups, to walking clubs for elderly people, to regeneration of housing projects), to understand and use meaningful methods of evaluation. The knowledge and skills of evaluation are usually retained by professional experts and rarely by marginalized people. Through a process of participatory and creative evaluation techniques, modelled directly in multi-project workshops, some of this understanding was transferred to approximately 150 projects (Boyd, Geerling, Gregory, Midgley, Murray, Walsh and Kagan, 2001).

The second project is one in which we are working with colleagues in Kolkata, India, to enable health workers in urban slums to understand and be able to work with families with disabled children in order to maximise the likelihood of their inclusion in local life. Not only are slum dwellers marginalised because of their place at the bottom of the caste hierarchy, families with disabled children are further marginalized. These families are often unable to maintain the levels of work necessary for basic survival. Furthermore, they lose social contacts by being confined to their homes. Some of the intermediary health workers, too, are marginalized by virtue of the fact that they work in the slums and receive little funding for their work. Many of those involved in the project work as volunteers and themselves live in the slum areas. Thus the work is about enabling intermediary health workers to develop the capacity to work with disabled children and their families and then to pass on this knowledge and skill to the families and those who live locally themselves. (See Kagan and Scott-Roberts (2002) for discussion of community psychological perspectives on the project.)

Dussel (1998; see also Alcoff & Mendieta, 2000), a Latin-American philosopher of liberation, offers a critique of the conditions caused by the dominant geopolitical system from the perspective of the 'oppressed other', the victims of the system. He articulates a practical approach to ethics in a world where the majority are excluded from the possibility of producing, reproducing and developing their

lives. He affirms the principle of liberation - the positive critical duty for us to work for liberation, whether that is through feasible reform of aspects of the system or feasible transformation of the whole system.

What Dussel and Doyal and Gough have in common is the view that human life is inseparable from the ability to enter into, and critically negotiate, social relations. For marginalised persons, groups and communities, the inability to meet these expectations has negative repercussions for their biological and psychological wellbeing.

The Relevance of Community Psychology to Marginalization

Community psychology should be particularly well placed to help people respond to the challenge of their marginalization in constructive ways. Its refusal to restrict itself to the individual level, and to attribute social problems to pathology carried by the victims, is a first step. In addition, it can critically utilise concepts from the psychology of individuals to understand the processes that penetrate and dominate marginalised persons. Community psychology should avoid two complementary mistakes: the individualisation of social problems and the neglect of the subjective experience of social actors. By taking a transactional view that sees the personal, relational and societal planes as interrelated, interdependent, and of similar importance, a critical community psychology can equip itself to work on the various problems of marginalisation at the same time.

Let us take as an example, some of the work we have undertaken, along with others, with people with learning difficulties, their families and services in the North West of England (Burton & Kagan, 1995; Kagan, 1997). As psychologists we might have limited our activities to working with individuals, so as to enhance their skills and capacities. As social workers, we might have limited our activities to ensuring disabled people and their families got full access to their welfare entitlements. As health workers, we might have limited ourselves to improving the health status of individual people. As community psychologists, though, we extended our work to Regional (and national) policy development, the facilitation of interagency work, the training of professionals and education of disabled people and their families, the facilitation of self-help groups, the identification of service gaps and abuses, the exposure of unequal access to social institutions and the facilitation of both organisational change and community development, so that existing services and social facilities were able to include disabled people and their families on an equal basis with everyone else. This work led to increased capability and self-determination for disabled people and their families (personal well-being); less isolation and more community connection for disabled people and their families (relational well being); wider social changes stimulated by and informed by the experiences of disabled people and their families (collective well being). As this is a process of countering marginalization, the work continues.

Working against social marginalization: Tools and examples

It is one thing to assert that a critical community psychology can help, but a more difficult matter to do so. It is not for community psychologists to go forth with a reforming zeal to rescue, to lead, or to liberate. There are constant dangers of reinforcing marginalisation or unwittingly colluding with the forces that create it.

Box 4: Example of Co-optation through Participation

An inner city suburb had its slum housing replaced in the late 1960s. Ten years later the 'deck access' flats were acknowledged to be another housing disaster. The flats were damp and expensive to heat; children had nowhere to play safely, and because it was difficult to monitor who was coming into the vicinity of each flat, there were high levels of vandalism and violence. The city council stopped housing families there, and the remaining families were found alternative accommodation. Nevertheless the accommodation suited some people, including students, single people and young childless couples, as well as craftspeople, and small social firms. Because of poor construction the majority of the flats needed replacement, so in the early 1990s the council won funding from central government for a complete rebuild of the area. The agency set up to lead the redevelopment affirmed the importance of working closely with the local population (as well as the development companies), consulting and holding a number of participatory events, so the people concerned could take part in the redesign of their neighbourhood.

Community development activists were of course involved in this work, and they were able to help local groups put forward proposals that were innovative on social, ecological sustainability, and architectural grounds. Nevertheless, it soon became clear that the extent of this participation was to be limited. In terms of Arnstein's (1969) 'ladder of citizen participation', for example, only the first five rungs (which together only amount to 'non-participation' and 'tokenism') were reached, with none of the top three (citizen power) rungs of partnership, delegated power, and citizen control being attained.

Of the proposals made by local people, only two small schemes were approved, and the bulk of the redevelopment was almost indistinguishable from that in any other redeveloped inner urban area, both in Britain and elsewhere. It was private capital that had the most influence on the design and operation of the new housing and structure of the neighborhood. As Croft and Beresford (e.g. 1992) suggest, the participation perhaps served some other purposes at a level of national (neo-liberal) government policy: delay, incorporation/co-option and diversion of the energy of activists, legitimization of pre-determined decisions and plans, and tokenistic involvement of minorities bypassing representative organizations.

The use of public participation, and its limited success (from the perspective of those who participated), can be understood in terms of the broader policy context whereby urban areas competed with one another for central government funds that supported redevelopment by large construction companies - to which the profits of course went. The participation by unrepresentative and ad hoc groups marginalised the already weakened structures of local democratic accountability, bypassing the local council. Nevertheless the whole enterprise could be cosmetically presented as an inclusive project where local voices were respected.

(Based on local experience and knowledge, and papers by; Croft and Beresford, 1992; Mayo, 1997; Randall, 1995; and Thekaekara and Thekaekara, 1995. **See also Cooke and**

Kothari, 2001, for a more sustained critique of the abuse of participatory methods.)

If there are dangers of co-optation and tokenism, as seen in box 4, there are also some powerful models for effective work. Much of this comes from outside the field of psychology, but psychological concepts and principles can be employed to strengthen and develop such approaches.

What could be called the Latin-American model of liberatory praxis summarises a vast body of work by educators, community workers, social movements, and community psychologists. This is work done with, and in the service of, oppressed groups in that region (see for example, Montero, 1994, 1998; Quintal de Freitas, 2000; Sánchez. & Wiesenfeld, 1991). Particularly through the work of Freire (1974, 1994; Freire & Faundez, 1989) and Fals Borda (1988), this approach has also been applied in other countries of the South and with marginalised groups in capitalist core countries (e.g. Atweh, Kemmis and Weeks, 1998; Kane, 2001).

A key theme in liberation thought is that liberation is not a thing, nor can it be located in a moment in time. It is not something to be given, but rather it is a movement and a series of processes. It has origins in the interaction of two types of agents or activists: -

1. External catalytic agents (which may include community psychologists), and
2. The oppressed groups themselves

The Latin American notion of liberation proposes a strategic alliance between these two sectors. A central idea is Freire's concept of *conscientization*. Martín-Baró (1996b) identifies three aspects:

1. The human being is transformed through changing his/her reality, through an active process of dialogue.

2. In this process there is a gradual decoding of the world, as people grasp the mechanisms of oppression and dehumanisation. This opens up new possibilities for action.
3. The new knowledge of the surrounding reality leads to new self-understanding. Such learning is about the roots of what people are at present and what they can become in the future.

Freire is careful not to provide blueprints for this process, since every situation is different, and the danger is that the worker will misapply a concrete model from one context to another where the particularities are different. However, two examples from British community psychologists working with people with mental health difficulties give some flavour of these ways of working.

Holland (1988, 1991, 1992) and Melliush and Bulmer (1999) worked with groups of women and men, respectively, in deprived urban communities. In both cases they started with people referred for psychological help, and used group-work methods to build confidence and understanding. With the support of community psychologists, both groups were able to move beyond a focus on personal problems and individual psychological explanations, to a community action perspective. As Melliush and Bulmer (1999) caution,

The literature on men's health has tended to link men's psychological distress with the negative effects of male socialisation and masculinity. This analysis ignores social class influences on the experience and communication of distress, is at risk of misrepresenting the nature of working class men's experience, and may lead to practice that is oriented towards intrapsychic approaches or men's inner worlds. (p. 93)

Their project took account of working class experience by emphasising

the role of the group rather than the individual, social instead of internal causes of distress, and the role of action rather than introspection. Distress was generally hidden, not so much because people were unwilling to talk, but because it tended to be viewed as a personal experience about which the community could do little. The group therefore focused on how to overcome such feelings of resignation and passivity, and how to start making changes at the community level. This transition from support group to action group was motivated in diverse ways. For some of the men it was a result of the frustration with the ineffective or misguided actions of official agencies. Others simply wanted a place for themselves to meet as a group. Others were keen to reach out to other men that they saw as needing help and who were not getting it. Personal commitment to the prevention of distress and suicide were also important. Their group grew and became both organisationally and economically self sufficient without the input of the workers.

It would be a mistake to see these interventions as relating only to people with mental health difficulties. Community psychology is concerned with wellbeing more generally and with working with people who are marginalised in different ways.

The three aspects of liberation identified by Martín-Baró could be seen in some work that we did, by invitation, with some residents living on a run-down City housing estate, which was, somewhat unusually, placed in the prosperous countryside. Some women on the estate had begun to talk about how things could be made better for residents on the estate in the face of disinterested and negligent councils. They heard of the community psychologists through an unrelated article in the local paper and invited us to talk things through with them. Our initial brief had been no more than to show interest, discuss what was going on with the local women, give ideas and links to other projects, and to use their experiences to spread understanding of what living in poverty in Britain was like. The very involvement of the University gave self-proclaimed strength to the women and helped them gain media interest in life and changes on the estate.

Through this dialogue, the women began to see how their lives were linked to political priorities within both the local councils and the Government and to see that their scope for change was going to be limited. They also began to see how it would be necessary to broaden the base of interest and action on the estate. They chose two forms of action. The first was to clear rubbish from the centre of the estate, and the second was to find out what residents thought about their housing. The rubbish clearing was met with suspicion and hostility:

I hear (the same phrases) from residents who tell me I'm wasting my time trying to clear up here. ... neighbours are so passive...I have felt the hopelessness of the people...

As they persisted with clearing the rubbish, some others, including children, joined them. People would stop and talk and begin to open up:

People have started to 'come out' (to members of our women's group) with regard to 'nuisance neighbours', domestic violence, homelessness and many other issues. But seem powerless to take the smallest action on their own behalf, but it's a start.

In relation to the housing, the women carried out a door-to door survey. Carrying out the survey meant they had to work together, and begin to appreciate each other's strengths. More people joined in the activity, and more and more people began to share information on the doorstep.

I'm still delivering [information] and Heather now has 2 women who come round with her surveying. Meg (age 78) is there for moral support and her daughter Kate... ..the survey is shocking and every day we hear more abuse stories. This week an elderly woman was afraid to ask for repairs.... Families such as one where the father had seriously abused daughters then committed suicide are 'coming out', no cure whatsoever for the girls (now women) and rage and anger acted out daily - their own children being first in line. So many broken people. The light on the situation yesterday was that people came out asking for information.

By this time there was a considerable group of residents becoming active and seeing possibilities for change in other directions. Over a period of about 6 months, they formed a residents' association that developed and steered a number of other community projects. They had a complex understanding of the constraints imposed upon their lives as well as of their own capabilities.

An interesting incident arose [with] Joe bringing some forms for Heather to complete (he could not write) - it seems many people are coming to her with similar requests. Someone asked for advice on resisting care proceedings; someone else wanted to be accompanied to a court hearing. About 10 residents are planning to go with him.... Heather has met someone whilst out surveying who wants to run a toddler's group - she's got whatever qualifications they have. (A good sign is) we've even started to get angry with each other due to tiredness and stress (of community activity) and funnily enough, both women afraid of conflict and confrontation in normal life, and here we are in the thick of it.... Heather and Leila are beginning to work together more, and Jack is turning out a few good letters in his particular style, which I can see would be particularly useful for communicating with Zombies (Officials)...Heather says she has found things she didn't know she had in her

Whilst the situation appeared optimistic, the residents were limited in what they could achieve and were thwarted at about every turn by officialdom (see Kagan, Lawthom, Knowles & Burton 2001 for a fuller account). Nevertheless, people on the estate have become more involved, active and have a stronger understanding of how they might improve things for themselves.

In the UK there is a major policy led initiative which has the potential to reduce social marginalization. In 1997 the Government established the Social Exclusion Unit. Social exclusion is

considered to be

a shorthand term for what can happen when people or areas suffer from a combination of linked problems such as unemployment, poor skills, low incomes, poor housing, high crime environments, bad health and family breakdown It includes low income, but is broader and focuses on the link between problems such as, for example, unemployment, poor skills, high crime, poor housing and family breakdown. Only when these links are properly understood and addressed will policies really be effective.

Social exclusion is something that *can* happen to anyone. But certain groups, such as young people in care, those growing up in low income households or with family conflict, those who do not attend school, and people from some minority ethnic communities are disproportionately at risk of social exclusion. There are also particular times when people are most vulnerable, such as when leaving home, care or education ... When the Government came to office it made tackling these interlinked problems a priority, because of the huge human costs to individuals and society, and the impact on the public finances and the competitiveness of the economy. (SEU, 2001c, Chapter 1)

Human and social costs of social exclusion were identified. The human costs were faced by: individuals who experience social exclusion - underachievement in education and the labour market, low income, poor access to services, stress, ill-health and the impact on children; and wider society - reduced social cohesion, higher crime and fear of crime, and higher levels of stress and reduced mobility. The social costs included the financial costs in paying for crime, school exclusions, drug misuse and unemployment, and in lost tax revenue. Business suffered too from a less skilled workforce, lost customers and markets, and - like the rest of the population - had to pay the tax bills for social failure.

The social exclusion unit targeted a number of priority areas, including truancy and school

exclusion, rough sleeping (homeless people sleeping on the streets), neighbourhood renewal, teenage pregnancy and young people leaving school. Each priority area has a platform of consultations (what is hailed as 'bottom-up' policy making) and action plans. The neighbourhood renewal programme consists of nearly 600 recommendations for actions which are publicly audited (SEU 2001b).

Paid work and access to the labour market dominates UK Government policy (Levitas, 1998; Williams, 2002). Even so, one of the current projects of the Social Exclusion Unit is concerned with transport - thus broadening both the understanding of exclusion and its remedies (SEU, 2002). These policies look promising. From the outset, however, commentators have been concerned with the ways in which causes of exclusion are frequently seen to be located within individuals and their personal deficits (Colley & Hodkinson, 2001) thus rendering deep-seated structural inequalities invisible. It is a 'rights and responsibilities' approach that focuses on individuals doing things differently, to fit with existing social structures, not necessarily an approach focusing on social change.

Much was made of the consultative, 'bottom up' approach of work of the Social Exclusion Unit, which is leading to the identification of those marginalized from this process (Matthews, 2001; Morris, 2001), and thereby any impact of its policies. Similarly, much was made of the move to 'joined up Government', underpinned by the Social Exclusion Unit. However, we can still see the ways in which different Government policies pull against each other, in for example, housing (Lemos, 2000; Shelter, 2002), and neighbourhood renewal (Home Office, 2002; LGA, 2002; Social Exclusion Unit, 2001a). Thus, there is an interesting experiment in policy driven attempts to reduce marginalization and social exclusion in operation in the UK. However, problems have been identified with an over-emphasis on individualized causes and solutions, an emphasis on exclusion from paid work, groups being marginalized from the process, and contradictory policies diluting efforts and creating further pockets of marginalization. Nevertheless, the identification of social exclusion as an issue to be addressed, opens possibilities for more community psychological work, illustrated above, and the long term effects

of the policies are still to be seen.

Conclusion

The Social Exclusion Unit stresses 'joined up policy and practice'. Similarly, the community practice examples, above, involve an alliance between the community psychologist and the people at risk of marginalisation: the professional contributes some general templates and understandings, some organisational know how and some access to resources. The community members bring their own commitment, their local knowledge and contacts, and their lived experience of what life is like. From the combination of these sources action (and perhaps research) can emerge. Ideas from psychology and related fields can create a synergy with local knowledge to bring about liberatory change (Burton & Kagan, 2000; Choudhury & Kagan, 2000; Kagan, 1995; Mollison, 1988).

There are no guarantees that any real change will occur: there are many obstacles, counter forces, distractions and setbacks. But nurturing and supporting community activists, who speak and act on their own behalf and on behalf of others, is one way in which barriers may be overcome. It is important that this social action at the local level does not end up as isolated community activism. One of the great challenges is to make such projects connect up to contribute to broader social change in the interests of marginalised people everywhere.

One of the challenges to community psychology is, to use a well-known proverb, to 'think global and act local'. Our analyses of marginalization must take account of the wider global picture, and the onus is on us to share links, internationally, not in the grandiose ways of much academic and professional activity via the medium of academic publishing, but via direct links with local projects.

As community psychologists we can work together to help evaluate what works best, what are the barriers to change, and what change projects are all about (see Kagan & Burton, 2000). We would argue that to work at the margins of psychology, with one foot in and one foot out of the discipline,

with those who are marginalized, demands particular ways of being. This work requires us to make personal commitments to social justice, not just in our work, but in our lives as well.

Resources

Websites

Our Community Psychology UK website: <http://www.compsy.org.uk> has links to a variety of resources relevant to marginalisation, as well as to some of our other work in community psychology, and related areas.

Information on the Latin American model of liberatory praxis can be found in several places:

<http://www.oneworld.org/cantera/education/index.html> - an English language website based in Managua, explains the Freirian model of popular education, while for those who read Spanish, the following site is that of a Latin America - wide network of popular education centres: <http://www.ceaal.org/>

The Instituto Paulo Freire in Brazil has some pages in English:

<http://www.paulofreire.org/>

Finally the Brazilian Landless Workers' Movement, the MST has a good site in English and Portuguese, covering the MST's history, its settlements, and its educational programme:

<http://www.mstbrazil.org/>

The site for the World Social Forum, held annually in Porto Alegre, Brazil contains links, articles and information on this innovative approach that advocates and works towards a different globalisation that includes the marginalised:

<http://www.forumsocialmundial.org.br/home.asp>

More information on the British Government Social Exclusion Unit, including reports that can be freely downloaded can be found at their site:

<http://www.cabinet-office.gov.uk/seu/>

New Internationalist magazine provides an international perspective on exploitation, diversity and discrimination, human rights, the abuse of power, and alternatives:

<http://www.newint.org>

Films

The films of Ken Loach, for example, *Bread and Roses*, *Cathy Come Home*, *Kes*, *Raining Stones*, *Navigators*, *Sweet 16*, all deal with issues of marginalisation and people's resilience and resistance to it.

Similarly the films, journalism and books of John Pilger give a great deal of material of relevance to worldwide struggles of and for the marginalised. See

<http://www.johnpilger.com/>

References

- Alcoff, L.M. & Mendieta, E. (Eds.). (2000). *Thinking from the underside of history: Enrique Dussel's philosophy of liberation*. Lanham, MD: Rowman & Littlefield.
- Arnstein, S. (1969). A ladder of citizen participation. *Journal of the American Association of Planners*, 35, 216-224.
- Atweh, B., Kemmis, S. & Weeks, P. (1998). *Action research and social justice: Partnerships for social justice in education*. London: Routledge.
- Boyd, A., Geerling, T., Gregory, W., Midgley, G., Murray, P., Walsh, M. & Kagan, C. (2001). *Capacity Building for Evaluation: A report on the HAZE Project to the Manchester, Salford and Trafford Health Action Zone*. Centre for Systems Studies, University of Hull.
- Burton, M. & Kagan, C. (1995). *Social skills and people with learning disabilities: A social capability approach*. London: Chapman and Hall.
- Burton, M. & Kagan, C. (1996). Rethinking empowerment: Shared action against powerlessness. In I. Parker, and R. Spears (Eds.), *Psychology and society: Radical theory and practice*. (pp. 197-208). London: Pluto Press.
- Burton, M. & Kagan, C. (2000, September). Edge effects, resource utilisation and community psychology. Paper given at the *European Community Psychology Conference*: Bergen, Norway.
- Charlesworth, S. J. (2000). *A phenomenology of working class experience*. Cambridge: Cambridge University Press.
- Chomsky, N. (2000). *Rogue states: The rule of force in world affairs*. London: Pluto Press.
- Choudhury, M. & Kagan, C. (2000). Inter-generational understanding in the inner city: 'Edge effects' and

- sustainable change in community organisations. Pp. 58-70, In C.Kagan (Ed.), *Collective action and social change*. Manchester: IOD Research Group.
- Churchill, H., Everitt, A. & Green, J. (1997). Taken away from community: Older people and sheltered housing. In P. Hoggett (Ed.), *Contested communities: Experiences, struggles, policies* (pp 105- 121) Bristol: Policy Press.
- Colley, H. & Hodgkinson, P. (2001). Problems with *Bridging the Gap*: The reversal of structure and agency in addressing social exclusion. *Critical Social Policy*, 21, 335-359.
- Cooke, B. & Kothari, U. (2001). *Participation: The new Tyranny?* London: Zed Books.
- Croft, S. & Beresford, P. (1992). The politics of participation. *Critical Social Policy*, 12, 20-44.
- Doyal, L. & Gough, I. (1984). A theory of human needs. *Critical Social Policy*, 4, 6-38.
- Doyal, L. & Gough, I. (1991) *A theory of human need*. Basingstoke: Macmillan.
- Dussel, E. (1998). *Ética de la Liberación en la Edad de la Globalización y de la Exclusión*. [Ethics of liberation in an age of globalization and exclusion]. Madrid: Trotta.
- Eldering, L. & Knorth, E.J. (1998). Marginalization of immigrant youth and risk factors in their everyday lives: the European experience. *Child and Youth Care Forum*, 27(3), 153-169.
- Fals Borda, O. (1988). *Knowledge and people's power: Lessons with peasants in Nicaragua, Mexico and Colombia* (Translation of *Conocimiento y poder popular. Lecciones con campesinos de Nicaragua, Mexico y Colombia* Bogotá, Siglo XXI Editores (1985). New York: New Horizons Press.
- Fanon, F. (1986). *Black skin, white masks*. London: Pluto Press. (First published in French, Paris, 1952.)
- Farber, B.A. & Azar, S. T. (1999). Blaming the helpers: The marginalization of teachers and parents of

- the urban poor. *American Journal of Orthopsychiatry*, 69, 515-528.
- Freire, P. (1974). *Pedagogy of the oppressed*. Harmondsworth: Penguin. (Reprinted and revised New York: Continuum, 1993.)
- Freire, P. & Faundez, A. (1989). *Learning to question: A pedagogy of liberation*. Geneva: World Council of Churches.
- Freire, P. (1994). *Pedagogy of hope: Reliving pedagogy of the oppressed*. New York: Continuum.
- Holland, S. (1988). Defining and experimenting with prevention. (pp. 125-137) In S. Ramon & M.Giannichedda (Eds.), *Psychiatry in transition: The British and Italian experiences* London: Pluto Press.
- Holland, S. (1991). From private symptom to public action. *Feminism and Psychology*, 1, 58-62.
- Holland, S. (1992). From social abuse to social action: A neighbourhood psychotherapy and social action project for women. *Changes: An International Journal of Psychology and Psychotherapy*, 10, 146-153.
- Home Office (2002). *Building cohesive communities: A report of the ministerial group on public order and community cohesion*. Retrieved October 6, 2002, from http://www.homeoffice.gov.uk/new_indexes/index_community_cohesion.htm
- Kagan, C. (1995). *Regional development in health and social services in the U.K. 'Edge effects' and sustainable change in welfare organisations*. Manchester: IOD Research Group.
- Kagan, C. (1997). *Regional development for inclusion: Community development and learning disabled people in the north west of England*. Manchester: IOD Research Group
- Kagan, C. (2002). *Making the road by walking it*. Manchester Metropolitan University: Department of Psychology and Speech Pathology.

Kagan, C. & Burton, M (2000). Prefigurative action research: an alternative basis for critical psychology. *Annual Review of Critical Psychology*, 2, 73-87.

Kagan, C. & Burton, M. (2001). *Critical community psychology praxis for the 21st Century*. Manchester: COP Research Group.

Kagan, C. & Race, D. (1996). *Participation in and by communities: What can we learn from community development?* Whalley: North West Training and Development Team.

Kagan, C. & Scott-Roberts, S. (2002). *Family Based Intervention in the slums of Kolkata for children with cerebral palsy and their inclusion in the community: Community psychology and community occupational therapy perspectives*. Manchester: COP Research Group.

Kagan, C., Caton, S. and Amin, A. (2001). *The need for witness support: Report of a feasibility study in Heartlands, Northtown*. Manchester: COP Research Group.

Kagan, C., Lawthom, R., Knowles, K. & Burton, M., (2001). *Community activism, participation and social capital on a peripheral housing estate*. Manchester: COP Research Group.

Kane, L. (2001). *Popular education and social change in Latin America*. London: Latin America Bureau.

LGA (2002). *Draft guidance on community cohesion*. Retrieved October 6 2002 from <http://www.homeoffice.gov.uk/cpd/ccu/commcohe.pdf>

Lemos, G. (2000). *Homelessness and loneliness - the want of conviviality*. London: Crisis

Leonard, P. (1984). *Personality and ideology: Towards a materialist understanding of the individual*. London: Macmillan.

Levine, M. & Perkins, D.V. (1997). *Principles of community psychology: Perspectives and applications*. New York: Oxford University Press.

- Levitas, R. (1998). *The inclusive society? Social exclusion and new labour*. Basingstoke: Macmillan.
- Martín-Baró, I. (1996a). The lazy Latino: The ideological nature of Latin American fatalism. In A. Aron and S. Corne, (Eds.) *Writings for a Liberation Psychology*. (pp. 135-162). New York: Harvard University Press.
- Martín-Baró, I. (1996b). The role of the psychologist. In A. Aron and S. Corne, (Eds.) *Readings for a Liberation Psychology* (pp. 72-82). New York: Harvard University Press.
- Matthews, H. (2001). *Children and community regeneration: creating better neighbourhoods*. London: Save the Children.
- Mayo, M. (1997). Partnerships for regeneration and community development: some opportunities, challenges and constraints. *Critical Social Policy*. 17, 3-26.
- McCulloch, A. (1997). "You've fucked up the estate and now you're carrying a briefcase!" In P. Hoggett (Ed.). *Contested communities: Experiences, struggles, policies* (pp 51 - 67). Bristol: Policy Press.
- Mead, G.H. (1934). *Mind, self, and society from the standpoint of a social behaviorist*. Chicago: University of Chicago Press.
- Melluish, S. & Bulmer, D. (1999). Rebuilding solidarity: an account of a men's health action project. *Journal of Community and Applied Social Psychology*, 9, 93-100.
- Menchú, R. (1984). *I, Rigoberta Menchú: An Indian woman in Guatemala*. London: Verso.
- Mollison., B. (1988). *Permaculture: A designer's manual*. Tyalgum, NSW Australia: Tagari.
- Montero, M. (1994). *Psicología Social Comunitaria* [Social community psychology]. Mexico: Universidad de Guadalajara.

- Montero, M. (1998). Psychosocial community work as an alternative mode of political action (the construction and critical transformation of society). *Community, Work and Family*, 1, 65-78.
- Morris, J. (2001). Social exclusion and young disabled people with high levels of support needs *Critical Social Policy*, 21, 161-183.
- Noyoo, N (2000). From resistance to development: Civil society and democracy in post apartheid South Africa. *Scottish Journal Community Work and Development*, Autumn, 35-44 (Special Issue in collaboration with IACD 'Citizen Action and Democratic Renewal').
- Pilger, J. (2002). *The new rulers of the world*. London: Verso.
- Orford, J. (1992). *Community psychology: Theory and practice*. Chichester, Wiley.
- Petras, J. & Veltmeyer, H. (2001). *Globalization unmasked: Imperialism in the 21st Century*. London: Zed Books.
- Potter, G.A. (2000). *Deeper than debt: Economic globalisation and the poor*. London: Latin America Bureau.
- Quintal de Freitas, M de F. (2000). Voices from the south: the construction of Brazilian community social psychology. *Journal of Community and Applied Social Psychology* 10, 315-326.
- Randall, S. (1995). City Pride - from 'municipal socialism' to 'municipal capitalism'? *Critical Social Policy*, 14, 40-59.
- Ryan, W (1976). *Blaming the victim*. New York: Vintage Books.
- Sánchez, E. and Wiesenfeld, E. (1991). Special Issue: Community social psychology in Latin America. *Applied Psychology: An International Review*. 40, 111-236.
- SEU (2001a). *A new commitment to neighbourhood renewal: National strategy action plan*. London:

Cabinet Office, Social Exclusion Unit.

SEU (2001b). *National strategy for neighbourhood renewal: Policy action team audit*. Social London: Cabinet Office, Social Exclusion Unit.

SEU (2001c). *Preventing social exclusion*. London: Cabinet Office, Social Exclusion Unit.

SEU (2002). *Making the connections: Transport and social exclusion*. Retrieved from the Social Exclusion Unit website October 6, 2002. <http://www.socialexclusionunit.gov.uk/publications/>

Sève, L. (1975). *Marxism and the theory of human personality*. (D. Paveti, Trans.). London: Lawrence and Wishart. (Original work published 1968.)

Shelter. (2002). *Where's Home?* London: Shelter.

Sixsmith, J. (1999). Working in the Hidden Economy: The experience of unemployed men in the UK. *Community, Work and Family*, 2, 257-278.

Speer, P., Dey, A., Griggs, P., Gibson, C., Lubin, B., & Houghey, J. (1992). In search of community: An analysis of community psychology research from 1984-1988. *American Journal of Community Psychology*, 20(2), 195-209.

Stewart, A. (2000). Unpaid work in the community: an account of becoming a community activist. *Community, Work and Family*, 3, 111-114.

Taywaditep, K.J. (2001). Marginalization among the marginalized: Gay men's anti-effeminacy attitudes. *Journal of Homosexuality*, 42, 1-28.

Thekaekara, S. & Thekaekara, M. (1995). *Across the geographical divide*. London: Directory of Social Change and Centre for Innovation in Voluntary Action.

Wenzel, S.L., Koegel, P., & Gelberg, L. (2000). Antecedents of physical and sexual victimization among

homeless women: A comparison to homeless men. *American Journal of Community Psychology*, 28, 367-390.

Williams, C. (2002). Social exclusion in a consumer society: A study of five rural communities. *Social Policy and Society*, 1(3), 203-211.

See also: [ww](#)

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