

# **Social Isolation and its Relationship to Multidimensional Poverty**

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## **Abstract**

While the multidimensionality of poverty is well-recognised, one dimension of poverty which has been often overlooked is weak social connectedness. This paper draws on conceptual, participatory and measurement literatures to show that social connectedness appears to be an important missing ingredient of multidimensional poverty analyses, with social isolation being a feature which exacerbates the condition of poor persons. To provide contextual detail as to its impact on persons in marginalized communities, we present qualitative primary data from South Africa and Mozambique and review pertinent studies of the First Nations of Canada and among persons with disability. A policy challenge for social isolation is that it is often seen as stemming from an individuals' capacity rather than resulting from the broader social context. The closing section outlines areas for policy.

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The study of multidimensional poverty has enlarged the range of factors which are considered part of impoverishment. For example, the Commission on Global Poverty Measurement led by Tony Atkinson proposed that physical security from violence be regularly monitored by the World Bank as a non-monetary dimension of poverty (World Bank, 2016). We argue in this paper that social isolation and decreased social connectedness can be important results of living in poverty, are themselves an aspect of poverty, and are also contributory factors to the persistence of poverty; consequently, they merit more extensive analysis than they often receive. This paper aims to catalyse that analysis by drawing together literature, case studies illuminating social isolation in different contexts, and observations of policy responses, in order to suggest how appropriate analyses of social isolation can meet a deeply human demand and improve policy design.

Synthesising a dispersed literature, we first examine how social isolation fits into multidimensional poverty conceptually. We then discuss primary field research from South Africa and Mozambique which reveals the influence of social isolation in the lived experience of poverty from the perspective of the impoverished themselves. The next section draws on documented histories of the Aboriginal peoples of Canada to investigate how isolation – in residential schools – created long-term impacts on poverty and isolation. Finally, drawing on the discussion on incorporating people with disabilities, we explore how reducing social isolation, through programmes aimed at reintegrating people with disabilities into their communities, can provide insight into directions for policy. In concluding, we show how addressing the issue of social isolation in a concerted fashion while recognizing that it arises in diverse contexts can potentially mitigate poverty.

## **Social isolation and multidimensional poverty**

In the global discussion on poverty, the focus on income alone has long dictated priorities. Yet the Sustainable Development Goals (SDGs) are emblematic of a conceptual shift which has occurred in understanding poverty. The SDGs refer to poverty in ‘all its forms and dimensions’, recognising that monetary poverty is an important component of the complex of interlinked conditions which constitute poverty – but not the only one (United Nations, 2015). Amartya Sen (1999) has been a leading voice among many others calling for such a change by providing powerful arguments why this focus on income is too narrow. Firstly, there are huge variations

in people's different abilities to convert income into capabilities. A person with disabilities may: (1) have problems earning a decent income, and (2) face greater difficulties converting income into capabilities (the things needed to live well). Thus a person with disabilities may be disadvantaged 'even with the same job and the same income' as compared to a person without disabilities (Sen, 1999, p. 119). Secondly, income is not a proxy for non-income deprivations – having income cannot always purchase non-income capabilities, such as access to healthcare or education. These realisations point to a skewed relationship between income-earning and income-using ability, and lead to a 'coupling of low incomes with handicaps in the conversion of incomes into capabilities' (Sen, 1999, p. 119). Outright exclusion and generally lower levels of access to education for people with disabilities or poor children (often due to stigma) create barriers to finding paid work in adulthood, meaning such exclusion can be a predictor of poverty (Nussbaum, 2004; Sen, 1999).

Much of the early work on wider conceptions of poverty and development broadened it to include health and education – for example, the Human Poverty Index (Anand and Sen, 1997) or the Multidimensional Poverty Index which succeeded it (Alkire and Santos, 2014; UNDP, 2010). However just as the Human Development Index (HDI) was seen to be too narrow a measure of development (Fukuda-Parr, 2003; Ranis, Samman and Stewart, 2006), so too studies of multidimensional poverty are being expanded to include other dimensions such as work and physical safety – but hardly, at the moment, relationality. Yet the centrality of human relationships to understandings of poverty has been recognised in prominent studies, some of which are briefly surveyed below.

The Voices of the Poor study encompassed a pioneering attempt to investigate the multidimensionality of poverty from those living the experience. This vast effort, organised by the World Bank, collected accounts from more than 60,000 poor men and women in 60 developing countries. The reports highlight the 'pain' of poverty. 'Poverty is pain: it feels like a disease .... It eats away one's dignity and drives one into total despair' (Narayan, Patel, Schafft, Rademacher and Koch-Schulte, 1999, p. 6). Another interviewee explained that being poor contributed to isolation and shame – when a person is too poor to participate in community gatherings and feels compelled to isolate themselves, that is when 'a person goes mad and wishes to commit suicide' (Narayan, Chambers, Shah and Petesch, 2000, p. 258). The case studies and quotations provided by the Voices for the Poor study highlighted the relevance of social isolation in impoverished peoples' experiences of poverty (Narayan and Petesch, 2002; Narayan et al., 1999, 2000).

Yet many of the dimensions which poor people cite as important (Narayan et al., 2000) remain ‘missing’ within international datasets (Alkire, 2007). One of these missing factors is social connectedness. Social relations are so fundamental that some argue that social isolation is an intrinsically important component of poverty (Grootaert, 1998; Narayan et al., 1999; Sen, 2000). Sen builds on Adam Smith’s observation that the inability to interact freely with others is a deprivation which ‘relates to the importance of taking part in the life of the community, and ultimately to the Aristotelian understanding that individual lives an inescapably “social life”’ (Sen, 2000, p. 4). Relational deprivation, Sen argues, is intrinsic to poverty: people ‘have good reason to value not being excluded from social relations, and in this sense, social exclusion may be directly a part of capability poverty’ (ibid). Furthermore, relational deprivation is instrumentally a cause of poverty, as not being able to interact freely can result in other deprivations (e.g. being excluded from employment opportunities), thus leading to diverse capability failures. Without social connectedness, without an opportunity for empathetic interactions with one’s peers, without the give and take of generalised reciprocity which Putnam argues is ‘the touchstone of social capital’ (Putnam, 2000, p. 134), isolation can become an overwhelming burden.

In 2008, former French President Nicholas Sarkozy convened a commission to identify the limits of current indicators of economic performance and social progress, and to suggest improvements. The commission concluded that social connections should be considered simultaneously alongside other dimensions, such as material living standards, health, education, personal activities, political voice and governance, environment, and economic and physical insecurity in determining quality of life globally (Stiglitz, Sen, and Fitoussi, 2009). The World Bank’s former Chief Economist Basu (2013) likewise argued that one’s sense of belonging is decisive in enhancing capability or supporting economic progress. The reasons which explain the differences between individuals in benefiting from development run deeper than can be explained by standard economic models: ‘Once people are treated as marginal over a period of time, forces develop that erode their capability and productivity, and reinforce their marginalisation. Such people learn not to participate in society and others learn to exclude them, and this becomes a part of “societal equilibrium”’ (Basu, 2013, p. 324).

A particularly resonant aspect of relational deprivation for poverty is social isolation. In earlier work, we defined social isolation as ‘the inadequate quality and quantity of social relations with other people at the different levels where human interaction takes place (individual, group, community and the larger social environment)’ (Zavaleta, Samuel and Mills, 2014, p. 6). Many

definitions of social isolation stress the importance of the quantity and quality of social relations in its measurement. Our definition of isolation can be conveyed intuitively as that experience in which a person feels like they are sitting alone at the bottom of the well – they feel as if no one knows they are suffering; no one cares; if they call out they cannot be heard; they are invisible and outside all circles of concern.

More formally, isolation can be defined both by external and internal circumstances. Externally, it means having few meaningful relationships with other people (de Jong Gierveld, van Tilburg and Dykstra, 2006). Internally, it refers to ‘the distress that results from discrepancies between ideal and perceived social relationships’ (Hawkley and Cacioppo, 2009, p. xx). External assessment can be made regarding the number of a person’s social relations (e.g. frequency of contact), and some quantitative evaluation can occur. The quality of social relations can be harder to assess. In this instance, ‘quality’ refers to two aspects: a relationship which satisfies a person’s expectations or standards, and the instrumental value of the relationship – one type of friend or network might yield a different contribution to life than another. Evaluation in this internal sphere is affected by a person’s perception of an ideal quantity or quality of relationships, and by their past experiences. The sum of the external and internal spheres thus reflects the overall set of social relations, and both must be considered in the discussion of social isolation and poverty.

There have been recent attempts to measure social connectedness (the absence of which may be defined as social isolation). The OECD (2011) used four indicators from social capital literature to examine ‘social connections’: (1) social network support; (2) frequency of social contact; (3) time spent volunteering; and (4) trust in others. These indicators were selected because of their capacity to inform concerning informal and formal types of connections and to measure important individual and societal outcomes. The UK’s Office for National Statistics explored social connectedness on a large scale, as part of its Measuring National Well-being Programme (Self, Thomas and Randall, 2012). New Zealand’s ongoing Social Report uses social capital and subjective social isolation indicators to assess social connectedness (Cotterell and Crothers, 2011). The Social Report, published<sup>1</sup> since 2001, blends social indicators with economic and environmental variables to provide information on outcomes, changes over time, and group differences in social outcomes. It contains data on social connectedness, defined as ‘the relationships that people have with others and the benefits these relationships can bring to

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1. 11 editions have been published since 2001, annually for the first seven years and then roughly biennially after that.

the individual as well as to society’ (New Zealand Ministry of Social Development, 2010, p. 110). However, in these studies the data for each indicator are derived one-by-one from various sources, which ordinarily prevents analysis of the joint distribution of social, economic and environmental circumstances for each individual.

Counting techniques exist and are widely used to describe, analyse, and measure the joint distribution of deprivations, but as yet these have not included social isolation. As mentioned above, in 2010, UNDP and OPHI developed the Multidimensional Poverty Index (MPI). This index measures indicators of poverty in three areas: health, education, and living standards (Alkire and Foster, 2011; Alkire and Santos, 2010, 2014). Alkire and Santos emphasise that ‘a key priority for future work on multidimensional poverty must be gathering more and better data around core areas such as informal work, empowerment, safety from violence, and human relationships’ (Alkire and Santos, 2010, p. 13), acknowledging the importance of assessing social connectedness as one dimension of poverty. Work using the MPI has drawn attention to ‘Missing Dimensions’ of poverty data – things like violence (Diprose, 2007); disempowerment (Ibrahim and Alkire, 2007); informal work and safety at work (Lugo, 2007); and shame, humiliation and isolation (Mills, Zavaleta, and Samuel, 2014; Zavaleta, 2007; Zavaleta et al., 2014). At the present time, information on these aspects of poverty remains systematically overlooked by internationally comparable datasets, so cannot be included in the global MPI its analysis.<sup>2</sup> Information on these aspects is needed for specific sector studies, but it is also needed to track, analyse, and reduce the simultaneous disadvantages experienced by those living in poverty.

Yet empirical measures of social connectedness exist. The Foundation pour les Etudes et Recherches sur le Developpement International developed a Relational Capability Index, which ‘focuses on the quality of relationships among people and on their level of relational empowerment’ (Giraud, Renouard, L’Huillier, de la Martinière and Sutter, 2013, p. 2). This index assesses three aspects of relational capabilities, each with multiple components which include assessment of access to employment and information, strength, quality and quantity of personal relationships, and ties to the larger community. One of the characteristics of this index, which is limited to relational aspects in the assessment of multiple dimensions of poverty, is

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<sup>2</sup> Without having the data in the data-set, it is not possible to confirm whether it would be desirable to include social isolation in a multidimensional poverty measure or to analyze both together, and this paper does not take a position on that issue. In addition to technical issues, the appropriate course of action will depend upon the policy context.

that income is not directly measured. Instead, the focus is on personal, social and political connections which impact on economic means.

Another significant initiative which includes social connectedness in multidimensional wellbeing measurement, starting at the individual level, is Bhutan's Gross National Happiness Index (Ura, Alkire, Zangmo and Wangdi, 2012, 2015). The GNH Index (Bhutan Gross National Happiness, 2010) has nine domains, of which one is community vitality. Alongside community vitality, the GNH Index covers domains of health, education, living standards, time use, good governance, environment, culture, and psychological wellbeing. The GNH Index is constructed by creating individual-level wellbeing profiles, which show how adequate each person's achievement is in indicators across each of the nine domains. The community vitality indicators include a sense of belonging, trust in neighbours, family relationships, safety from violence, donations of time and money to community activities, and volunteering.

Empirical estimates show that in Bhutan, community vitality is one of the four dimensions which contributed most to GNH in 2010 (Ura et al., 2012). Yet by 2015, while there was growth in GNH nationally, mainly driven by increases in income, services, housing and health, achievements in some psychological and social indicators had decreased significantly – including belonging. The question of belonging used in the GNH is a basic one, in that persons are asked: 'How would you describe your sense of belonging to your local community?' and they may respond: Very Strong, Somewhat Strong, Weak, or Don't know. And yet even such a swift, inexpensive, and imperfect question was able to single out and suggest a potentially worrying trend – because it was measured in the same survey as the other indicators of GNH and also analysed together with other indicators (Ura et al., 2015).

In a related paper, we analysed indicators of social isolation which were covered in nationally representative samples in Chile and Chad, and began to develop a set of measurement tools which can be incorporated in multi-topic household surveys that measure poverty or wellbeing (Zavaleta, Samuel and Mills, 2017). To develop measurement tools, however, it is essential first to listen keenly to the lived definitions of social isolation as it is experienced in different contexts.

The next three sections study marginalised populations who face difficulty in 'taking part in the life of the community' (Sen, 1999, p. 89). They illustrate how social isolation contributes to multidimensional poverty and vice versa, and how mitigating social isolation can ultimately improve lived experience. Because multidimensional approaches to poverty enable the exploration of whether particular persons, or a particular group, have their lives battered by



deprivations in different dimensions, they are particularly relevant for groups which have experienced high levels of marginalisation and exclusion.

## **Impact of isolation among vulnerable populations – case study of South Africa and Mozambique**

Our qualitative field research<sup>3</sup> in South Africa (Soweto and Grabouw) and Mozambique (Chibuto and Xai-Xai) probed the value that people living in marginalised communities placed on social connectedness, and the ways in which isolation (self-imposed or not) removed people from their community and contributed to their lived experience of poverty in all its dimensions. This research used approximately 60 semi-structured interviews of community members and three focus groups. Respondents were aged 19–82 years, engaged in a mix of occupations (including being unemployed), and slightly more females than males were interviewed. Extensive thematic analysis was conducted using themes participants proposed, and points of contention as well as consensus were carefully noted (Mills, 2013). The two most common themes which emerged from these conversations were: (1) the high value that people attached to social connections, both for intrinsic and instrumental reasons; and (2) how poverty impairs social connectedness through a myriad of different mechanisms, particularly through the intricate link between stigma and isolation.<sup>4</sup> All quotes in the following section not otherwise referenced are from this qualitative fieldwork.

When asked to name the five things which were most important in their lives, participants included relationships with others (both with family and broader communities) as one of their choices (alongside food, shelter, education, and work). Participants' rich justifications for this choice demonstrated both the instrumental as well as the intrinsic value they attach to social connections, and how the different arenas where relations take place (family, friends,

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<sup>3</sup> From 24 July 2013 – 17 August 2013 a team of researchers from Oxford Poverty and Human Development Initiative (Kim Samuel, China Mills and Diego Zavaleta) visited South Africa and Mozambique, to learn from local communities about the experience of social isolation. The fieldwork took place in Soweto and Grabouw (South Africa), and Xai Xai and Chibuto in Mozambique. This research was facilitated collaboration with a number of partners; the Synergos Institute (both in the U.S.A and Southern Africa), the Nelson Mandela Children's Fund (NMCF) and the National Association of Child Care Workers (NACCW) in South Africa, and the Foundation for Community Development (FCD), and Recontro in Mozambique.

<sup>4</sup> These themes were central in all the focus groups and in a vast majority of the interviews held. The aspect of the centrality of social connections emerged from an open question enquiring about the most important aspects in people's lives and the reasons why people valued this aspect. In turn, the aspect of stigma emerged spontaneously during the first phase of fieldwork as no question was specifically prepared to enquire about this issue. A specific question on stigma was then added for the second and third phase of the fieldwork to test its relevance.

community) matter. One participant in South Africa said, ‘Whenever people are around you, whatever is eating inside you will become better because you are surrounded by people, as you are talking you will be able to talk out whatever is bothering you inside, because when you’re with people you are talking, talking, talking’.<sup>5</sup> This need for connections extended beyond familial relations. Some interviewees pointed out that good relationships with neighbours are important when a person is experiencing difficulties or breakdowns in relationships with family members:

If I have a problem with my family then I go to the community and they can help me with things my family can’t help me with ... I can cry loud but my family won’t hear me but the community will hear me and they will be able to help me.<sup>6</sup>

This suggests that good relationships with neighbours, being connected to community life, can alleviate certain worries (for example, about safety) and provide an outlet for other kinds of worries – someone to talk to about problems in the home or outside of it. Across respondents, having connections within the community, and particularly with at least one close friend, seemed to be of intrinsic importance. Some suggested that not having someone with whom to cry, or share problems, is a deprivation in itself.

Connectedness within the community seemed to alleviate people’s worries about facing adverse events in the future, such as illness, and thus appears to provide ‘peace of mind’ which may allow people to make better use of social opportunities. Good relations with neighbours was also observed to lay the ground for people to build connections to others (within or outside the community), or to sustain and nurture connections which continue at a distance (for example, with old friends and family who may live far away).

Summing up the intrinsic importance of connectedness, one interviewee from Soweto explained that:

... if people are friendly you will see that you are important and it’s very important to live with them and share ideas and try to help one another and know you are safe. Even if maybe a person wants to rob you, they won’t be able to because you know people they will always be there for you.<sup>7</sup>

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<sup>5</sup> From interview 26 July 2013, St Matthews, Endemi, Soweto, South Africa, ‘Tryphosa’.

<sup>6</sup> 27 July 2013, Focus Group with Isibindi Child and Youth Care Workers, Soweto, South Africa, ‘Bandile’.

<sup>7</sup> 27 July 2013, Soweto, ‘Lulu’.

In outlining an approach to understanding poverty as relational, Amartya Sen refers to Adam Smith's observation that linen shirts and leather shoes, while not strictly speaking necessities, were necessary in the England of his day as they were required by social custom to be worn by those who were seen as creditable, and thus were required in order to go about without shame. Those who could not afford a linen shirt would be ashamed to appear in public, as this denoted a 'disgraceful degree of poverty which, it is presumed, nobody can well fall into without extreme bad conduct' (Sen, 2000, p. 332; Zavaleta, 2007, p. 405).

Similarly, custom has made leather shoes a necessity, so that even the 'poorest creditable person of either sex would be ashamed to appear in public without them' (Smith, 1937/[1776], pp. 351–352). In our case studies, it was not linen shirts as much as branded trainers, lunch boxes, and not living in a shack which allowed people to appear in public without shame. The effects remain similar – those who 'have' cannot play with those who 'have not' (as the quote below suggests). The more isolated people feel, the more vulnerable they become. The durability and persistence of these judgments and ways of marking out social divisions, over generations, was illustrated by one woman in Soweto:

If I get successful and my neighbour lives in a shack, I won't allow my children to play with her children ... even after I'm dead and their parents are dead, these children will not have a good relationship, because mine will know they are better. And those that are living in the shack, when they grow up, they will make sure they destroy everything that I have ... just to make me feel the pain they are feeling.<sup>8</sup>

It is no wonder that she goes on to explain that these sorts of judgments make people 'feel anger and creates hatred'.<sup>9</sup> Or as another participant said, 'It kills both of the people's spirits, it hurts' and it 'kills our community'.<sup>10</sup> This makes evident how these divisions and exclusions pass down through generations. It also locates part of the problem of bad relationships being caused by some people 'knowing' they are 'better', while evoking the pain, and subsequent potential destructiveness, of those who have long been told they are inferior. The importance of emphasising social connectedness is perhaps best illustrated by another participant who, after describing the importance of relationships with others because of their capacity to sustain

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<sup>8</sup> 27 July 2013, Focus Group with Isibindi Child and Youth Care Workers, Soweto, South Africa, 'Minenhle'.

<sup>9</sup> Ibid.

<sup>10</sup> 27 July 2013, Focus Group with Isibindi Child and Youth Care Workers, Soweto, South Africa, 'Reeta'.

people, reduce poverty and give a sense of solidarity and of hope, felt compelled to state that 'poor people have the right to have relationships'.<sup>11</sup>

From accounts from people living in poverty, both in the literature as well as within the preliminary fieldwork discussed here, social isolation tends to manifest itself in association with the stigma of poverty and the shame associated with being labelled as the 'poorest of the poor'. Here it seems that isolation may work in two directions, sometimes simultaneously. People may be excluded by others based on a process where they are marked out within a community as being 'poor'. But people may also isolate themselves and withdraw from community participation in order to avoid the shame of being seen by others as 'poor' due to not being able to meet normative cultural standards, such as not having enough money to bring food to share at a communal gathering.

A powerful illustration of the stigma which surrounds isolation is evident in the way that respondents talked about the importance of participating in funerals in South Africa. The social and cultural expectation that participation requires specific contributions of food can act as a barrier and serve to isolate the individual from the very activities which support social connectedness and community bonds. Connectedness within communities was summed up as:

... important because when you are experiencing some problem, the neighbour they are ones who come first. Let's say death, they [neighbours] are the ones who come and assist you with things before your family come. So I can say community relationship it is good.<sup>12</sup>

A woman from Mozambique explained:

Being poor means not having anyone to care for you, for example an orphan child ends up becoming poor because of lacking those relationships that would result into a support to him.<sup>13</sup>

This experience of shame may be particularly critical for poor children, as Vujovic (2012, p. 13) observed:

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<sup>11</sup> 27 July 2013, Focus Group with Isibindi Child and Youth Care Workers, Soweto, South Africa, 'Thabo'.

<sup>12</sup> 27 July 2013, Focus Group with Isibindi Child and Youth Care Workers, Soweto, South Africa, 'Minenhle'.

<sup>13</sup> 12 August 2013, Chibuto, Mozambique, 'Gilda'.

These children (living in poverty) cannot articulate their needs. They are outside what is considered the norm. You know you can be in a group (in school) so physically you may not seem isolated, but emotionally you really are.

This reiterates the relative nature of social isolation: it may not be immediately obvious to those on the outside that an individual is isolated, but their interior landscape is barren.

In our field research, as in prior studies (e.g. Biggeri, Trani, and Mauro, 2010), impoverished people themselves cited social isolation as a powerful and important component of the lived experience of poverty. Without connections to their families, their neighbours and their community, they reported feeling invisible and alone, without any way out. Maintaining relationships with others is necessary in their view to minimise poverty. Our study advanced previous research by documenting direct and detailed analyses of the relational components of poverty in these communities.

### **Isolation in Indigenous communities of Canada**

Because multidimensional approaches to poverty enable analysts to explore many dimensions of deprivations, they are particularly relevant for groups who have experienced high levels of marginalisation and exclusion in high-income countries, such as the Indigenous peoples of Canada. Thus, multidimensional analyses can be useful for those groups who experience particular difficulty in ‘taking part in the life of the community’ (Sen, 1999, p. 89; see also Alkire and Santos, 2014).

Reading the literature and interviewing leaders in the First Nations of Canada suggests that the systematic isolation of a group may dramatically contribute to continued poverty in its many dimensions among that population. As is well-known in Canada, First Nations people living on Reserves experience inadequate housing, lack of access to healthcare, and greatly inferior educational opportunities as compared to the rest of the country (Best Start Resource Centre, 2012). A child born into an Indigenous community in Canada is twice as likely to die in infancy as one born elsewhere in the country (Smylie, Fell and Ohlsson, 2010). If that child makes it to her teenage years, she is five times more likely to commit suicide (Kielland and Simeone, 2014). And if she survives, she is more likely to end up in jail (Owusu-Bempah et al., 2014) than to graduate from high school (Richards, 2014).

The historical disenfranchisement of Indigenous peoples has led to widespread isolation of this group, and has contributed to their lived experience of poverty. The roots of Aboriginal poverty can be traced back to the forced relocation of Canada’s Indigenous peoples onto reserves,

(Legacy of Hope Foundation, 2010). This destroyed many of the traditional ways of life, including economic pursuits, and continuing lack of funding support or access to aid agencies has perpetuated the cycle of isolation and poverty. Work in communities in the Cowichan Valley on Vancouver Island revealed that the women interviewed, who were living below the income poverty line as defined by the Canadian government, identified isolation as a key feature of the deterioration of their emotional wellbeing (Ocean, 2005; cited in Raphael, 2011).

In the instance of Indigenous peoples' lived experience of poverty, there is a strong historical component of government-supported exclusion. The destruction of the traditional lifestyle of the Indigenous people by relocation to Reserves served to isolate this group, both along an urban/rural divide, but also within the isolated Indigenous community itself. This is reflected in the shocking statistics related to suicide among Indigenous communities. Kral (2012, 2013) reports that Indigenous communities have suicide rates ten times greater than the rest of Canada, while half of all deaths of young people in one Indigenous community – Inuit Nunangat were suicides, compared with approximately 10% in the rest of Canada (Oliver, Peters and Kohen, 2012).

The thread running through the many documented stories of Indigenous peoples is one of isolation – geographic isolation on Reserves, and cultural isolation through forced assimilation in a residential school system which forcibly removed children from their families and their culture. This school system, beginning in 1849 and ending only as recently as 1996 when the last residential school closed (Elias et al., 2012), removed children as young as four from their families and kept them isolated from their families and communities until their teen years. The policy objective of the day, chillingly stated as to 'kill the Indian in the child' (Milloy, 1999, p. 42), sought specifically to disconnect children from their families, their cultures, their languages and their homelands:

First Nations, Inuit, and Métis children were often separated from their parents for long periods of time, living in an institutional rather than a family home environment. This impeded the transfer of valuable parenting skills. The isolation of children from their families and communities also thwarted the transmission of language and culture, resulting in significant cultural loss. (Legacy of Hope Foundation, 2012, p. 12).

Children going through this school system ended up with low literacy rates and other school achievements, and were pre-disposed to experience continuing isolation throughout their adulthood, leading to multi-generational effects.

Both the statistical description of present poverty in the Indigenous population within Canada, together with evocative and consistent descriptions of their isolating experiences, suggests that isolation had a pervasive historical impact and demonstrates the importance of generating strategies grounded in this understanding.

## **Reintegrating people with disabilities into community**

We now turn to consider isolation among people with disabilities. In many contexts, people with disabilities experience profound stigma and isolation. Without deliberate policies of inclusion, their access to essential services may be limited because of their disability, thus jeopardising their health and wellbeing. When people with disabilities are invisible due to systemic marginalisation, even responses to pressing global issues on disability by governments, civil society organisations, and the private sector may fail to completely address the rights and protections of people with disabilities and their families.

The sense of shame and isolation which can be related to a wide range of disabilities is pervasive. One respondent in our South Africa study explained:

I think people are still hiding their children ... the parents are ashamed, they think they did something bad that is why God gave them the children like that ... or that they deserve it .... Most people in the community look at the disability and not the child.<sup>14</sup>

These processes of dehumanisation are acknowledged by both people with disabilities and those living in poverty. The dehumanising seems bound up with a process of labelling, as evident in the account of extreme poverty given by respondents in a comprehensive study:

... that people disrespect us by calling us names like ‘social case’, ‘bad mother’, ‘incapable’, ‘good-for-nothing’ demonstrates how they are judging us and do not know about the reality we face. We experience the violence of being discriminated against, of not existing, not being part of the same world, not being treated like other human beings. This everyday violence is abuse. (ATD Fourth World, 2012, p. 39)

Such ‘everyday’ violence and humiliation is also experienced by many children with disabilities (Goodley and Runswick-Cole, 2011) – indeed, hate crimes against

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<sup>14</sup> 27 July 2013, Focus Group with Isibindi Child and Youth Care Workers, Soweto, South Africa, ‘Thabo’.

people with disabilities are a global problem (Sherry, 2010). Examining discrimination in the lives of children with disabilities in the UK, research has found a tragic ‘propensity for violence against disabled children ingrained in the relationships, institutions and cultural acts of our time’ (Goodley and Runswick-Cole, 2011, p. 614). How this impacts on the lives of children with disabilities is illustrated in the account of a mother in Bangladesh My daughter cannot bathe herself and neither can she comb her hair .... She cannot use her hands for anything .... That is why her younger brothers beat her, and even neighbours bully her. People ask, ‘Why is your daughter like this?’ .... [They] talk in an ugly manner and make ugly remarks. (Participate, 2013, p. 8)

Many people with disabilities living in poverty also experience violence and humiliation (ibid, p. 8). Multidimensional poverty is not exclusive to low-income countries but is most devastating in the developing world. For example, 80% of people with disabilities live in developing countries, meaning that an enormous number of people live with disabilities in contexts of poverty. The limited available data suggest that people with a range of disabilities are more likely to live in poverty (Mitra, Posarac and Vick, 2013). Indeed, they may be among ‘the poorest of the poor’ in diverse contexts globally, and exist on the margins of society with many barriers to full participation (Groce, Kett, Lang and Trani, 2011, p. 14).

A report by Human Rights Watch (2014) raised concerns that nearly 30% of all Russian children with disabilities live in state-run orphanages where they are likely to suffer severe abuse and neglect. These children often lack access to healthcare and adequate nutrition, as well as to formal education.

They are further isolated in that at least 95% of children living in Russian orphanages and the foster care system still have at least one living parent. The report documents that the parents of many children with disabilities were pressured into giving them up, and were told they would be unable to care for their children adequately:

... many parents face pressure from health care workers to relinquish children with disabilities .... Human Rights Watch documented a number of cases in which medical staff claimed, falsely, that children with certain types of disabilities had no potential to develop intellectually or emotionally .... (ibid., p. 5).

Even within such care homes, children with disabilities were apparently forcibly isolated from one another. For example, when moved from one institution to another, these children were typically required to spend time (from days to a month) in a separate wing with little



stimulation. Other examples of deliberate isolation policies included confining children to cribs or in rooms without any interaction with staff (Human Rights Watch, 2014). So what kinds of policy responses can address the very immediate marginalization which arises from the attitudes and untrained responses of children, health workers, and communities?

Siperstein, Norins, Corbin, and Shriver (2003) examined attitudes towards people with intellectual disabilities in several countries, and demonstrated how public attitudes impact quality of life directly. The study surveyed the general public in Brazil, China, Egypt, Germany, Japan, Nigeria, the Republic of Ireland, the UK, Russia and the US. The results showed that although public perceptions of people with disabilities varied in different cultures, the end conclusion was that people with disabilities are marginalised worldwide. The result of these attitudes is a very low expectation of what people with intellectual disabilities are capable of achieving, thereby limiting their opportunities from the outset.

For young children with disabilities, just as in the previous references to poor communities in southern Africa, social isolation relates to multiple communities. Children may face isolation within their own family, their local school or the community at large: consequently, it is a multilevel challenge. This was highlighted in studies by Favazza, Zeisel, Parker, and Leboeuf (2011) and Favazza, Mwangi, Masila, Ghio, and Siperstein (2014b) on the Young Athletes (YA) programme of Special Olympics International, which illustrated the power of an intervention to improve motor skills not only to improve the motor abilities of children with disabilities but also to open doors to greater inclusion:

At the close of the YA program at Pugu Secondary School in Tanzania, we [the investigators] watched as the YA leaders called all the children together for a closing song and dance. The children stood in a circle holding hands and the YA leader began to sing in Swahili. The children, smiling ear to ear, full of energy, joined in. The YA leader took the hand of one of the children, Sonia, and brought her into the center of the circle. The leader began to dance and, grinning sheepishly, Sonia imitated the dance putting her hands in front of her body and rocking back on her heels. Her eyes lit up as she danced and she gained a confidence that we had not seen before. Sonia rejoined the circle, and each child had a chance to step in the middle to dance. There was sheer joy on the faces of the children and some looked surprised as they participated in a traditional tribal group dance. (Favazza, Siperstein and Ghio, 2014a).

Favazza et al. (2014b) argue that this was the first time these children had participated in the communal tribal culture. Before this moment, they had been isolated from communal society because of their disabilities. By being invited to join in with the song and dance these isolated children were finally allowed to belong. Thus, 'the opportunity to participate in a traditional dance or hold hands with someone or make a friend or to wear a Young Athletes shirt all signify belonging .... Being a part of YA creates a sense of belonging in a place where belonging and community is at the core their culture' (Favazza et al., 2014a). Such experiences of belonging are not only important to the children at the time, but may well affect them into the future:

When a child becomes a part of Young Athletes, change seeps into every aspect of the athlete's development, ushering him/her into adulthood, sure of his/her capacity to go to school, have a job, have a family, participate more fully in life. That change comes to rest in families who develop new perspectives about the value and potential they now see in their child. That change unsettles our collective conscious, demanding that we all rethink what it means to live included in, not excluded from, all of the opportunities the world has to offer. (Favazza, 2014, p. 4)

The Young Athletes programme is one example of an intervention to redress social isolation among individuals with disabilities. Another example is the Special Olympics programme in South America which seeks to include people with disabilities in athletics partly in order to offer a better opportunity to connect with a wider community (Harada, Parker and Siperstein, 2005). A study of this programme concluded that athletes 'participate because they value the social opportunities and friendships that come along with playing sports .... The benefits of participation in Special Olympics are substantial for its athletes ... there is significant improvement in athletes' sense of self, social skills, and relationships with others as a result ...' (ibid., p. 50). Furthermore, participation benefits the children's families in addition to directly impacting the lives of people with intellectual disabilities themselves; becoming part of a broader community helps everyone concerned.

The positive effects of reducing isolation and increasing social connectedness is not limited to people with intellectual disabilities. Work with the elderly with disabilities has demonstrated that something as simple as a telephone outreach programme can lessen feelings of loneliness and isolation (Evans, Smith, Werkhoven, Fox and Pritzl, 1986). Creating environments in which people with physical disabilities can participate in and contribute to their communities is critical for reducing their social isolation, and the ways in which loneliness contributes to poverty.

In all of the accounts in this section, participants speak of the pain arising from not being listened to, for their opinion not to count, not to be seen as fully human, and to have people distance themselves from them. This social pain was expressed both by people living in poverty – those seen as the ‘poorest of the poor’ – and by people with disabilities.

### **Towards a policy agenda confronting isolation**

Social isolation is arguably part of a broadened understanding of poverty, and its measurement, while imperfect, is improving. It would seem, therefore, to be a core deprivation which, like other dimensions of poverty, requires an appropriate policy response. But even if clear measures and extensive analyses existed, could states of social isolation be changed by policy?

A first policy entry would be to do no harm. The First Nations’ case illustrates powerful links between stigmatisation, isolation and poverty. The effect of stigmatisation is to undermine agency and create fear, shame and anxiety among those who are poor, who receive welfare, for example, due to disabilities, making such people more vulnerable to abuse and diminishing social solidarity (Sepúlveda Carmona, 2013). It Stigma can also become internalised with people coming to understand themselves as inferior:

The indifference and contempt to which people in extreme poverty are subjected is so violent that they end up submitting themselves to such judgments, doubting themselves and seeing themselves only through the eyes of others: useless, incapable and reduced to ‘waste’. (ATD Fourth World, 2012, p. 36)

This illustrates Martha Nussbaum’s point that ‘poverty is not just a deprivation, but also a degradation’ (Nussbaum, 2004, p. 285). What seems especially problematic is that international poverty reduction interventions and state welfare services often repeat this process of othering, labelling and stigmatising by ‘targeting’ the poor in a way which evokes public hostility towards people living in poverty (Fraser, 1998). This is problematic for a many reasons, not least because social assistance programmes which are stigmatising have limited take up, are often avoided by many (Chase and Walker, 2012), and can reduce self-esteem. Thus, as a first step, poverty reduction policies generally should be examined to ensure they are not producing a stigmatising outcome as a side effect.

A less traditional but critical avenue for policy intervention is to address psycho-emotional effects of isolation among disadvantaged children. Stigma can lead to people devaluing themselves because other people assume they live a life not worth living, perpetuating a cycle of hopelessness and isolation. How does the stigma of being seen as poor get ‘under the skin’

– causing those who are stigmatised immense pain and distress? Social isolation can lead to physiological disruptions similar to those seen with high blood pressure, obesity, inactivity or smoking (Cacioppo and Patrick, 2008; House, Landis and Umberson, 1988). The experience of social isolation can also alter genetic activity in the immune system in a manner linked to increased stress responses and adverse health outcomes in individuals identified as experiencing high levels of loneliness (Cole et al., 2007).

Furthermore, functional brain imaging has revealed that the ‘pain’ of social isolation activates portions of the brain which are triggered with the experience of physical pain (Eisenberger, Lieberman and Williams, 2003). This body of health research points to another entry point for policy and programmes to address isolation: well-conceived psychosocial policy interventions may help to mitigate stigma and convey confidence and inner pride, as well as confronting approaches which reproduce stigmatizing attitudes and behaviours.

The cultural norms which make possible and sustain situations where people stop participating in what is customary in their societies due to their poverty situation (like attending a funeral in the South African case study), or allow abuse of disabled people, provide the grounds for a further policy entry point: a cultural shift towards recognising the need to build and re-build social connections. The situations described earlier suggest the need to explore how social isolation is embedded within the ‘injurious social arrangements and artificial fictions of incompetence’ that Martha Nussbaum identifies as long impeding people with disabilities (Nussbaum, 2004, p. 309). For Nussbaum, the ‘myth of the citizen as a competent independent adult’ has meant that people with intellectual disabilities are not seen as productive citizens, meaning that the ‘basic structure of society is mapped out without including them, and their needs are left as an afterthought’ (ibid., p. 312).

Indeed, who does meet these norms? As Martin Levine, a disabled Canadian self-advocate points out:

I may need help in some things, but I’m not retarded. I can take care of myself ....  
Everyone needs help. Some people need more. Even the ones in the outside – the normal people, have marriage counsellors and other people to help them. (Goodley, 2001, p. 215)

Complete independence and perfection are myths which hide the fact that we all have varying impairments and asymmetrical needs of dependency, that we can be both ‘capable and needy’ (Nussbaum, 2004, p. 313), and that life is lived through mutual interdependence. In devising poverty reduction policies, perfectionism should not be used to justify ‘denying the right to be

in the world to large numbers of people whose heightened vulnerability is the result of social arrangements organised around the needs of a dominant group' (ibid., p. 318).

The capabilities approach developed by Sen and Nussbaum provides a particularly useful and sensitive tool by conceiving politics as tasked with providing support for human flourishing, for what people value, and for what enables them to live a life they value. Therefore, the overall task of policy in this area is to address influences which stigmatize or isolate the poor in particular, and also actively to create enabling and facilitating environments which recognise and support interdependence and expansive ideas of what it means to be human.

## Conclusion

Multidimensional poverty analysis attempts to take into account distinct deprivations which are all part of the fabric of poverty, which people living in poverty articulate, and which go far beyond a simple lack of economic resources. Going beyond the familiar domains of health and education, one key component of deprivation is lack of social connectedness. The ties poor people have to their friends, families and community play an enormous role in their lived experience of poverty, as well as in their practical ability to escape poverty. Social connectedness is a critical area to consider in effectively addressing multidimensional poverty.

As illustrated both conceptually and through different case studies, social connectedness appears to be an extremely relevant aspect of people's lives, for both instrumental and intrinsic reasons. Moreover, a shortfall in social isolation is linked to poverty in a diversity of ways: it can cause poverty or it can be the result of being poor, it can be the product of a particular condition or of belonging to a particular group, etc.

In the wider literature, social connections have been recognized to be critical due to their instrumental power: social connections have a positive impact on health, wellbeing, job opportunities, financial security and physical safety (Cattell, 2001; Kahneman and Krueger, 2006; Putnam, 2000). Yet this recognition has not fuelled a widespread change in measurement and analysis – nor in policy. Also, besides the instrumentality of social connections, most people value social connections intrinsically.

They value belonging to a community, having emotional attachments, and participating in society. Indeed, people place such high value on social connectivity that they 'report that good relationships with family members, friends or romantic partners – far more than money or fame – are prerequisites for their happiness' (Helliwell and Putnam, 2004, p. 1437). This is evident in a quote from the Voices of the Poor study, where an impoverished Bulgarian woman states:

‘I like money and nice things, but it’s not money that makes me happy. It’s people that make me happy’ (Narayan and Petesch, 2002, p. 258). But too often, ‘people’ have appeared to baffle policy.

Using a conceptual review of intersections between poverty and social isolation, as well as studies from developing countries, marginalized groups, and those with disabilities, this paper has re-articulated the importance of including social connectedness in studies of multidimensional poverty because of the myriad of ways it can impact the lived experience of individuals and communities. We also outlined the importance and the possibility of designing improved policies to address social isolation among poor and marginalized communities.

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