
Childhood poverty and social exclusion in England and South Africa

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Abstract

Social exclusion has become a significant policy theme in most ‘developed’ countries and in many ‘developing’ countries as well. England and South Africa are no exceptions. Following a brief review of some perspectives on social exclusion, this paper describes some key policies in England and South Africa designed to combat social exclusion. The notion of social exclusion is examined in the context of addressing childhood poverty. It considers the extent to which these policies conform to a broad or narrow notion of social inclusion. The paper highlights some contradictions, complexities and ambiguities in both policy contexts.

Introduction

This paper explores the notion of social exclusion in the context of combatting childhood poverty in both England¹ and South Africa. The inconsistencies and complexities surrounding the concept social exclusion/inclusion as well as the various versions of social inclusion that are evident in the theoretical and policy literature suggest that its application to children’s well being merits critical scrutiny. A recent collaborative project, funded by the British Council and designed to promote inclusive practices in schools in KwaZulu-Natal provided the author team with an opportunity to examine and compare policies to combat social exclusion in their very different economic and cultural contexts. This paper is an outcome of that collaboration.

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In recognition of the fact that describing United Kingdom/British policy as if it were synonymous with what happens in England is not defensible, the authors focus on England rather than all four parts of the United Kingdom. This is especially important now in the context of the new territorial diversity (Patterson, 2003) of devolved government.

The first part describes the origin of the concept social exclusion, and it considers what might be termed ‘narrow’ and ‘broad’ versions of social inclusion and how the term ‘social exclusion’ has replaced that of ‘poverty’ in policy arenas. The second part offers an account of policies in England and in South Africa designed to address social exclusion. In the interests of clarity, these accounts are presented separately. The third part analyses the extent to which policy in both countries conforms to the narrow or broad versions reviewed in the first part, and highlights some of the complex and sometimes contradictory assumptions underlying the political discourse. This section also comments on the extent to which policies are successful in achieving their objectives.

Versions and approaches

The concept of social exclusion originated in France in the 1970s in connection with the exclusion of disabled people from equal participation in society. In the 1980s, the term came to be used across Europe to refer to people living on the margins of society (Percy-Smith, 2000). Since the 1990s, the Council of Ministers in the European Union (EU) has committed the EU to investigating the problem of social exclusion and to finding solutions to resolving it. The publication of the 1994 White Paper *European Social Policy: A Way Forward for the Union* (Nolan, 2003) made social exclusion central in European social policy.

Social exclusion came to be seen in the context of “social rights to citizenship ... to a basic standard of living and to participation in the major social and occupational opportunities in society” (Room, 1993, p.14). Room added a new dimension to the debate by locating it in a rights-based language when he refers to social exclusion as denying people civil, political and social rights as citizens. The notion of social exclusion gradually replaced the notion of poverty, and the definition just cited marked a shift in EU thinking from narrow economic definitions to definitions incorporating social and political rights and civic participation. Income poverty came to be seen as too limiting and narrow a concept to describe adequately the multiple disadvantages suffered by some groups (Klasen, 2001). Many analysts including Hill (2000) came to see traditional anti-poverty policies as ineffective and not adequately addressing the social policy problems of poverty, favouring instead policies that focus on providing opportunities for inclusion rather than merely lifting people to the poverty line in terms of income.

In South Africa, most social policy documents and legislation that have emerged since the democratic government came into power have been developed within the framework of human rights, social inclusion, redress, equity, and social justice (South African Schools Act of 1996; Department of Education, March 1995; Department of Education, July 2001; Ministry of Welfare and Population Development, 1997; Office of the President, 1996). Social exclusion is viewed as socially constructed disadvantage linked to the notion of vulnerability (Muthukrishna and Sader, 2004), and impacting on members vulnerable to exclusionary pressures within society. This includes children who do not go to school; those who have access to schooling but who experience barriers to participation; those who live in conditions of poverty; children living with HIV/AIDS; those who live with the burdens of disability and disease, those who suffer from sexual exploitation, family breakdown, unemployment, exposure to criminal environments, forced involvement in civil and military conflict, exploitative labour, socio-cultural isolation, geographic isolation and racial and gender bias. The notion of social exclusion in South Africa, therefore, includes poverty.

However, despite dramatic economic, social and political transformation over the last decade, the majority of South African citizens experience either extreme poverty, or continued vulnerability to becoming poor. There is an emerging consensus on the definition of the concept of poverty in South Africa, and it is conceded that poverty is multi-faceted and experiential in nature, that is, individuals' experience of poverty is different. Poverty includes: food insecurity; crowded homes, lack of access to safe and efficient resources of energy; lack of employment, low wages, lack of job security; fragmentation of family; alienation from the community, for example, young single mothers without the support of family and fathers of their children (May, 2000; SA-PPA, 1998). Streak (2004) points out that the evolving understanding of poverty in South Africa includes in addition to the aspects above, social exclusion that goes with lack of access to income and services, and the psychological suffering associated with this.

In examining poverty and inequality in South Africa, May (2000) argues that poverty is not a static condition. Although some households may be permanently poor, others move in and out of poverty as a result of life cycle changes, shifts, and specific events, for example, illness or death of the main income earner as a result of the HIV/AIDS pandemic. Vulnerability is not a synonym for poverty, and is used in the context of these processes of change. Individuals or households become vulnerable not only by a lack of resources

or an inability to accumulate resources and assets, but because they are unable to devise appropriate coping or management strategies when faced with crises (May, 2000).

At the end of the twentieth century, England had the highest percentage of children in poverty of any European country. Children are considered poor depending on the total income of the household in which they live. The median household is the one for which half the rest of the population has an income higher than it does, and half has an income lower. Low-income households are defined as households with income below 60% of the median.

However, as in the case of South Africa, policies designed to combat social exclusion in the United Kingdom focus on a number of exclusionary factors and exclusion on a number of dimensions rather than a focus on just poverty. Traditionally, the Labour Party in England viewed poverty as a social injustice and the solution as a matter of substantive public policy and intervention. Wealth redistribution and common ownership of services (e.g. the health and education services) were historic aims. However, New Labour, under Prime Minister Tony Blair and under the influence of the Third Way project (Hutton, 1999) has substituted aims for creating “a community in which power, wealth and opportunity are in the hands of the many, not the few, where the rights we enjoy reflect the duties that we owe” (Dean, 2004, p.71), for central to Third Way thinking is a notion of citizenship in which there can be no “no rights without responsibilities” (Dean, 2004, p.66). So what we get here is a sense of responsibilities preceding rights – a point we return to below. In the United Kingdom policies to combat social exclusion, the theme of responsibility is never far away.

In both countries, the stance on social exclusion focuses on society, on social relations, and on the processes, mechanisms, and institutions that underlie and entrench exclusion. To varying degrees, the debate moves beyond a focus on descriptions of deprivation to historical and political causes (May, 2001; May 2000; May, Woolard, and Klasen, 2000). This more expansive view of social exclusion implies the need to focus on whole communities in which children are suffering multiple deprivation and agencies are expected to work holistically to tackle problems (e.g. United Kingdom’s Social Exclusion Unit, 2000 in Bynner, 2001). Valuable though this new sense of the problem might be, critics (e.g. Levitas, 1998; Veit-Wilson, 1998) have noted how the use of language (i.e. not referring directly to poverty) hides or at least neutralizes poverty and inequality. However, the rights-based notion of social exclusion is

worth further reflection. We draw on the ideas of Amartya Sen (1999) and on the views of Stephen Klasen (2001) to explore the concept a little more.

Lack of what Sen (1999) calls ‘capabilities’ is the key to the exclusion process. Those excluded are denied access to the material, cultural and emotional resources that would enable them to acquire capabilities. To counter this, she says people have to be allowed equal access to basic capabilities such as the ability to be healthy, well fed, housed, integrated into the community and public life, and to enjoy the social bases of self-respect. One gets a sense here of rights preceding responsibilities, rights that are not conditional in nature. Some implications of a capabilities or rights based approach are important to note (see Klasen, 2001 for a full discussion). First, this approach stresses that the inability to participate in mainstream society is a violation of a basic right. In contrast to the discourse of poverty, which is located in ‘welfare’ issues, the rights language highlights the duty of society to ensure that it facilitates participation and integration of all its citizens, including of course children. Second, the rights based approach does not require uniformity of outcomes for all citizens but instead demands equal ‘freedom’ for all to enjoy all aspects of citizenship. What is key here is choice – there is a distinction between a choice of individuals to not participate in mainstream society and their inability to participate. Thirdly, the capabilities or rights based approach recognises the diversity of people’s ability to make use of opportunities such that an equal starting point (or equal opportunities) may not be enough to guarantee equal capabilities. This view of social exclusion is especially evident in South Africa.

The upshot of the capabilities approach to social exclusion is that it shifts responsibility from the individuals who are socially excluded to mainstream society. Klasen (2001, p.421) refers to this as the ‘intrinsic’ problems associated with social exclusion. He says if social exclusion is a violation of rights or capabilities, it immediately implies that a society which tolerates social exclusion is “intrinsically deficient, since it fails to grant basic rights or capabilities to its ... children”. He adds that the United Nations Convention on the Rights of the Child (UNICEF, 1989) illustrates this intrinsic importance. He also refers to ‘instrumental’ reasons why social exclusion among children should be challenged. Among them are the following: combating social exclusion among children helps enhance their inclusion as adults; socially excluded children may as a result of their exclusion suffer from deficiencies in other capabilities like the ability to be healthy, well educated, housed, etc.; socially excluded children may pose a threat to the

future well-being of society as they become a burden socially and economically or worse as they generate social disruption in a society in which they have no stake. Although not stated explicitly, one gets a sense that there are some inalienable rights like the right to dignity, fair treatment, that people should have as a matter of being human.

The next section will describe the key initiatives in the United Kingdom and South Africa to address social exclusion in both countries.

Policies to address social exclusion and childhood poverty in England

This section will summarise three initiatives in England which have been mounted to address child poverty and social exclusion: the Sure Start programme, the Children's Fund, and the Family Tax Credit. All three derive from government analysis of social issues that had clearly identified social exclusion and child poverty that had to be addressed if, as Prime Minister Tony Blair says, Britain is to achieve the objective of "a better, fairer society that supports the most vulnerable, focuses on the future and delivers quality of life for all" (Blair, 2000). The establishment in 1997 of the *Social Exclusion Unit* (SEU) in the Cabinet Office is indicative of the Government's commitment. Analyses conducted by the SEU indicated that to achieve the Prime Minister's vision of a fairer society, a number of mechanisms would be needed. These mechanisms included: a coherent preventative strategy, policies for reintegration, services delivered in a significantly different way through new partnership arrangements, and agencies which worked *with* people, including children, rather than simply *for* them. In this regard, Sure Start and the Children's Fund could be said to illustrate what Tomlinson (2001) labels 'a post welfare society' in the sense that government taxation and spending decisions are less about challenging wealth and income distribution and more about widening opportunities and equipping people and communities to solve problems. The theme of opportunity is another significant indicator of the discourse of addressing social exclusion in England. Citizens are expected to seek out opportunities for themselves, to help themselves, and to take responsibility for themselves.

Sure start

Sure Start was introduced in 1999 to seek to close the gap in outcomes between children living in poverty and the wider child population (Eisenstadt, 2002). The programme is targeted at pre-school children and their families in disadvantaged areas, with objectives to improve social and emotional development, education and health, and to strengthen families and communities. A programme runs in a geographically defined area of need, and, at the time of writing this paper some 500 programmes are in operation, covering 16% of all children under the age of four years – a third of children living in poverty. Once areas are selected Sure Start services are for all families in the area. Early in its administration, the Labour government identified the lack of co-ordination between agencies both at a national and local level as a major inhibitor to effective service planning and delivery. Both the Modernising Government (HMG, 1999) agenda and the New Commitment to Neighbourhood Renewal (Social Exclusion Unit, 2001) seek to encourage and facilitate more joined-up working between agencies. The goal is high quality, modern, accessible and responsive services. Each programme is designed to build on what services already exist in the area, and to augment these with other services as appropriate to the local community. Sure Start operates on a number of principles that define its ethos. First, the involvement of local parents and carers in the design, management and delivery of services is vital. The assumption here is that the involvement of parents is key to ensuring that any new service will be accessible and appropriate to children's needs. A second key principle is the notion of co-ordination to add value (Eisenstadt, 2002). The intention here is that in the past much effort was wasted in the sense that service providers did not communicate with each other to agree on key aims for children's services, and so services for children were occasionally fragmented and/or duplicated existing effort. The kind of 'joined up' thinking and planning would guard against waste but, crucially and more importantly, would result in the provision of better more responsive services. A third principle is that of cultural sensitivity in service delivery. The director of the programme notes that as Sure Start is aimed at children living in poverty and that Black and minority ethnic families are more likely to be poor, sensitivity in and appropriateness of services are crucial to success. While the programme is aimed at pre-school children and their families and the expectation is that by the time those children participating in the programme are 4 years of age, there will be little need for extra support, where the need for further support exists it will be offered. In this, the Sure Start programme ties in with another initiative – the Children's Fund, which is

designed to provide support for disadvantaged children between the ages of 5 and 13 years.

The Children's Fund

Like Sure Start, the Children's Fund is focused on developing services that support multi-agency working, bringing together preventative services that recognise the value of partnership working between the voluntary, community and statutory sectors as well the beneficiaries of such services. The programme has four elements. It supports services to identify children who are showing early signs of difficulty. It provides children and/or their families with the support they need to realise their potential and thereby overcome poverty and disadvantage. It secures long-term improvement in children's lives by building capacity in the local community, and it actively involves children and their parents in planning and delivering services. In their own publicity material, the Children's Fund is described as "locally determined and flexible". This, it is argued, makes it "particularly good for meeting the needs of diverse and changing communities, adding value to other services and working across boundaries of home and school". There is an emphasis in the programme on supporting children within the home and the school, and in the wider community. There is also a strong focus on supporting parents both in their parenting, and with other issues including domestic violence, counselling, family support and health awareness.

At the time of writing this paper, the whole of England is covered by the Children's Fund programmes. Priority was given to areas with the highest levels of child poverty and those areas were included in the first of three waves of provision. Over a seven-year period (2000-2007), the intention is that £600 million will be made available to set up local partnerships and to fund preventative services at targeted groups of children at risk of social exclusion. Each area is expected to form a partnership consisting of voluntary organisations, local communities, faith groups, statutory agencies, and young people themselves. This partnership plans and develops the necessary preventative services appropriate to address local needs. The expectation is that children will participate in the planning, delivery and evaluation of their local services. Indeed, significant status has been given to children's participation by the commitment of the government to the establishment of core principles for the involvement of children and young people in decisions that affect their lives. The government's objective in this regard is clear: 'the

Government wants children and young people to have more opportunities to get involved in the design, provision and evaluation of policies and services that affect them or which they use' (CYPUP, 2001). The three themes – prevention, partnership and participation – are fundamental to the achievement of the Children's Fund objectives.

Family tax credits and other policies to alter income levels directly

As we already noted above, Britain had the highest percentage of children in poverty of any European country at the end of the twentieth century. At the end of the nineteen nineties, nearly 1 in 3 children lived in a household where no one is in paid work – this is double the proportion in 1979 and four times more than the proportion in 1968 (Piachaud and Sutherland, 2000). In 1999, the Treasury set out to eradicate child poverty by 2020, to halve it by 2010 and to reduce it by a quarter by 2004 (Brewer, 2003). The target for 2004-05 will be monitored with reference to the number of children in low-income households and against the baseline figures of 1989/9.

The Treasury attributes the increase in the number of poor children to two main changes: the inequality of earnings and the fact that more working households rely on part-time work which has often not been sufficient to lift households out of poverty. The overall strategy of welfare reform in Britain has the aim of ensuring paid work for those who can work and security for those who cannot (Piachaud and Sutherland, 2000). Persistent worklessness would appear to be a greater problem than short-term unemployment. New Labour's welfare-to-work policies seek to tackle worklessness. A feature of the approach here is that welfare recipients are subjected to a series of work-related interviews as a condition of receiving benefits. This includes *all* those in receipt of benefit, including the disabled, lone parents, and even partners of unemployed people (Dean, 2004).

Tony Blair (Labour Party, 2001) promised to "re-fashion the welfare state on the basis of rights and responsibilities, with people helped to help themselves, not just given handouts". His approach to altering income levels is shot through with this refashioning. Interestingly, what used to be the Department of Social Security has been replaced by the Department of Work and Pensions.

A number of policies designed to alter directly income levels of the poorest families have been introduced since Labour replaced decades of Conservative governments in 1997. Space prevents an account of each of these but the strategy as a whole rests on two key components – making work pay and helping people to return to or find paid work. Specific strategies include the following (detailed in Piachaud and Sutherland, 2000). Working Families Tax Credit (WFTC) designed to promote paid work – the credit is larger if a parent does paid work for 30 hours a week. Child Benefit has been increased by more than the rate of inflation. A Children's Tax Credit (replacing the Married Couple's Tax Allowance and the corresponding tax allowance for lone parents) is paid to a parent in all families with the exception of those on higher income tax rates. Rates of Income Support and other means-tested benefits have been increased for families with children. All of these are in addition to more general measures such as changes to income tax and the National Minimum Wage which affect all families with children.

Policies to address social exclusion and childhood poverty in South Africa

In South Africa, the national action planning for social inclusion and child poverty has been guided by the core objectives of the reconstruction and development initiatives since 1994. The meeting of basic needs, development of human resources, building the economy and nation building form the foundation of all policies. Within this context, the National Programme of Action for Children, launched in 1996, is a comprehensive move designed to establish priorities and specific targets to promote the realisation of children's rights and well being. The government's pledge to 'Put Children First' is expressed in seven priority areas – child and maternal health, water and sanitation, child protection, leisure and cultural activities, social welfare, nutrition, early childhood and basic education.

This section considers three initiatives in the areas of social welfare, nutrition and health. The programmes in these priority areas derive from the government's analysis of how to heal and socially engineer a new democratic South Africa. The initiatives described below should be seen in this light together with growing concerns of poverty and HIV/AIDS.

The Child Support Grant (CSG)

In the context of chronic poverty, poor health, meagre education, fractured families, inadequate infrastructure, skewed resource distribution as a legacy of apartheid, and massive unemployment in South Africa, social security has become a major commitment of the government and is vital to the survival of many South African families. Aliber (2001, ii) argues that in the South African context, poverty is more complex than a mere lack of income. Six out of every 10 children in South Africa live in poverty, when 'poor' is defined as the poorest 40% of households. Black South African rural children make up the majority of the poor (Office of the President, 1998). This can be attributed to the legacy of apartheid that made many black South Africans vulnerable to poverty, social exclusion, and the effects thereof. Poor families, as the inheritors of deprivation, are unable to provide for their children and unlikely to secure employment due to the lack of cultural capital.

The Child Support Grant is the largest poverty alleviation measure targeting children in South Africa. It aims at helping the caregivers of children to address basic needs, in particular nutrition. Any primary care giver who may be parents, relatives or non-relatives, can apply for a grant on behalf of an eligible child once they are able to prove that the care of the child is their sole responsibility. The Department of Social Development in partnership with the Department of Home Affairs, faith-based organisations, non-governmental organisations, business and labour is responsible for the implementation of this social security measure. Prior to 1994, social assistance for poor children and women was catered for within a racially biased State Maintenance Grant. In April 1998, the latter was replaced with a means-tested Child Support Grant (Case, Hosegood and Lund 2003). The initial implementation began in April 1988 by catering for children between 0 to 6 years. The state of severe poverty and vulnerability, however, led to an extension of the grant to children under 9 in April 2003 as an initial step to extend it to all poor children up to 14 years from 2005 (Department of Social Development, 2003). In the initial implementation of the grant, caregivers received an amount of R100. It has been periodically increased slightly above inflation. At present, it is R170 per month.

The Integrated Nutrition Programme (INP)

The national Integrated Nutrition Programme (Department of Education, 1998) was introduced in 1995 in order to address the nutritional problems in South Africa. Malnutrition is complicated by the many causes in the South African context which range from direct factors such as inadequate food intake, or underlying factors such as household food insecurity. The programme specifically targets children from birth to five and primary school children from poor households. It is a collaborative endeavour of the statutory, community and voluntary sectors. There is a co-ordinated intersectoral collaboration within the primary health care approach and the district health system. At operational level, the programme is organised around target groups, focus areas, interventions and different points of service delivery – clinics, schools and community structures (Department of Health, 2002). The programme has parallel aims: it seeks to build long term capacity in communities to take ownership of their own nutritional needs, and at the same time create healthy outcomes for the most vulnerable groups in society – women and young children.

The programme combines direct and indirect nutrition interventions. It is informed by ongoing information on the growth and development of children. The National Food Consumption Survey of 1999 indicated that 21, 6% of South African children between the ages 1 and 9 are stunted. This is most prevalent amongst young children between the ages 1 and 3 in rural areas (Department of Health, 2002). At primary health care level, the Integrated Nutrition Programme addresses the problem by running an intense growth monitoring service. Special attention is given to childhood illnesses, hygiene, and child neglect. Undernourished children are provided with food supplements. Women are encouraged to breastfeed their children. Nutrition education is provided at all levels of care.

One specific programme within the INP that targets poor children's nutritional needs is the Primary School Nutrition Intervention (PSNP), initiated in 1994. It was intended to be an intersectoral and interdisciplinary initiative jointly managed by Education and Health departments. Its goal is to alleviate hunger and thereby enhance active learning capacity, promote increased concentration, lower absenteeism rates, improve school punctuality, and enhance general health and well being. More specifically, it also aimed to improve health through micronutrient supplementation, parasite eradication, providing education on health and nutrition, and enhancing broader

development initiatives, especially combating poverty. In 2001/02, the programme reached 85% of all primary schools in South Africa. Brand (2004) points out that since its inception and until 2001/02, the programme served an average of 14 746 primary schools per year, and reached 47% of all primary school learners in the country. The school feeding helpers who do the preparation and cooking are mostly unemployed people. They either volunteer their services or become contracted to the food suppliers.

HIV/AIDS - Home and Community-based Care and Support Services (HCBCS)

The Home and Community-based Care and Support Services (HCBCS) form one of three core components of the National Integrated Plan for Children Infected and Affected by HIV/AIDS. The joint collaboration between the Departments of Health and Social Welfare articulates the government's move towards an integrated approach to health issues and community-based care and support. The multifaceted response was necessary because of the rapid spread of the HIV/AIDS pandemic. The HCBCS services are intended to "ensure that persons who are infected and affected by HIV/AIDS have access to integrated services that address their basic needs for food, shelter, education, health care, family or alternative care and protection from abuse and maltreatment" (Department of Social Welfare, 2001, p.3). The goal is to provide accessible and responsive services within specific cultural contexts.

The services have four aims. They provide a functional referral system that creates access and follow up for children and families infected and affected by HIV/AIDS. They seek to empower families and communities to take care of their health and welfare. The aim is to integrate and structure a care plan into informal, non-formal and formal health and social development systems (Mabetoa and De Beer, 2002). Recently there has been a strong emphasis on traditional community life as a resource for prevention, early intervention and support for those infected and affected by HIV/AIDS.

The Departments of Health and Social Welfare work in partnership with non-governmental, community-based and faith-based organisations. The Government provides the finance and the professional expertise (health worker and social workers) in order to support partnership organisations to deliver HCBCS services directly to children and adults residing in affected households. The partnership organisations are instrumental in creating access,

mediating between services for children and caregivers and building capacities in communities (Giese, Mientjies, Croke and Chamberlain, 2003).

The HCBCS service delivery model is based on three key principles. The principles are aligned to the Government's *Batho Pele* (People First) commitment to public service. First, there is recognition that children are better catered for in their local context. The assumption is that if programmes involve the local community, there will be greater chances of people being empowered and taking care of vulnerable children in the context of their families and communities. The second key principle is the use of traditional community life as a resource. The intention here is to use the indigenous culture and traditional leadership to promote messages that are supportive of preventing HIV/AIDS, reducing stigmatisation of adults and children infected and affected by HIV/AIDS, and promotion of collective caring. The third principle is the linking of services to provide an integrated response to the pandemic. This is intended to avoid duplication of services and to provide multi-disciplinary teams of support.

Discussion

The impact of some of the policies noted above on social exclusion can only be judged in the medium or long term although national and local evaluations of them are in progress currently. Others, like the policies aimed at increasing family income for households with the poorest children, have more immediate impact and can be monitored year on year.

In this regard, it is noteworthy that poverty rates have fallen significantly in Britain between 1997 and 2002 and current predictions are that child poverty in 2004/05 should be at its lowest level since 1989 (Brewer, 2003). So taking a very narrow definition of social exclusion, it would appear that the trend is at least in the right direction even though there are complex issues in tackling poverty using tax credits and other direct income strategies (Brewer, 2003; Piachaud and Sutherland, 2000).

Staying with the narrow view for a moment, a less optimistic picture emerges in South Africa. Despite the governments commitment to a rights based approach to social exclusion, research suggests that 10 years into the democracy, poverty is still the greatest exclusionary factor in the lives of children in South Africa. Bray (2002) drawing from survey data argues that

there has been no dramatic decrease since 1994 in the number of children living under the poverty line in South Africa. Porteus (2004) in her analysis of the socio-economic well being of children in South Africa over the past 10 years of democracy suggests that between 58% and 75% of South African children live below the poverty threshold. Poverty is particularly concentrated in rural households.

To what extent do the approaches to social exclusion adopted in both countries comply with a capabilities or rights-based philosophy i.e. a broad approach to social exclusion? Perhaps unsurprisingly, there are no simple answers to these questions. There is no single discourse or approach to social exclusion in either country.

The aims of Sure Start and the Children's Fund in England and the Integrated Nutrition Programme and HCBCS programmes in South Africa are clearly about 'joined up government' and the policy impetus in these initiatives is very much about tackling the causes of poverty – prevention rather than cure in England and prevention *and* cure in South Africa. They are designed to build capacities at the individual and community levels. The evidence base on effective intervention highlights the need to provide coherent interventions that address risk factors associated with individuals, with families and with communities (Farrington, 1996; Bynner, 2001).

It is too early to say in the case of the English initiatives whether they are truly developed within an overarching preventative, partnership and participation strategy (see above), and if they prove to be so, whether they also prove to be successful. What can be said, however, is that there is ample evidence to justify the premises of all these programmes – English and South African (see Craig, 2002; Farrington, 1996; Franklin and Madge, 2000; Hardiker, Exton and Barker, 1991; Sinclair, Pugh and Heane, 1997). In this sense, it is arguable that they have the potential to contribute to a rights based philosophy of social inclusion which emphasises capacities to participate in social, civic and economic life.

Traditional social security is assumed to be, at best about 'cure' (rather than prevention) and at worst investing in failure. As analysts have noted, "redistribution has become politically unmentionable" in Britain (Piachaud and Sutherland, 2000, 7.3) This discourse, which can be used to pathologize individuals so 'blaming the victim' is especially evident in some of Tony Blair's comments. One example illustrates the point: "The basis of this

modern civic society is an ethic of mutual responsibility or duty. It is something for something. A society where we play by the rules. You only take out if you put in. That's the bargain." (Blair, 1997). Yet most of the impact of the policy initiatives in the short and medium term to alleviate poverty depend on redistribution. The redistribution discourse, recommended by Levitas (1998) would appear to be present albeit a less than the 'radical' redistribution justifiably favoured by her. Most of the immediate reduction in child poverty in England results from increases in Child Benefit and Income Support for younger children and the Working Families Tax Credit. As Piachaud and Sutherland (2000) point out these changes are all essentially redistribution to families with children.

It may be that a more radically redistributive policy will be required in South Africa to impact on the appalling statistic of the majority (between 56% and 75%) of children who live below the poverty line. However, the complexities and the massive scale of social exclusion in South Africa merit closer analysis.

An analysis of policies in South Africa designed to address social exclusion has to be made in the context of the macro-economic situation of the country. In general, policy formulation, expenditure, and to a large extent implementation, broadly correspond to the rights based, pro poor approach to social exclusion. However, it has become evident that the structure of the economy in South Africa has worked against the government's commitment to human rights and equity for all its people. Since 1994, the government recognised that a sustained improvement in the country's macro-economic performance was necessary for successful socio-economic transition. Strengthening the economy based on the principle of growth through redistribution was one of the key foundations of the government until 1996. By the end of 1996, this transformational policy was gradually withdrawn. The discourse shifted from massive redress to fiscal restraint. In its place, the government released the Growth, Employment, Redistribution Strategy (GEAR) – a neo-liberal macro-economic programme of deregulation, privatisation and fiscal restraint. The government argued that GEAR was necessary for participation in the framework imposed by globalisation, and the impact of global conditions on national economies (Mokate, 2000). Fiske and Ladd (2004) explain that this conservative shift in economic policy was largely motivated by the desire to convince international investors that the new South Africa could manage its fiscal affairs in a responsible manner. In addition, the assumption was, strongly supported by international evidence, that the most successful strategy for alleviating poverty and promoting equity

is one that focuses on growth and job creation (Streak, 2004). Thus, this combination of fiscal austerity and the economic slow down constrained additional public spending of any type.

These neo liberal economic policies adopted by the South African government since 1996 have not so far been successful. The expected new foreign investment did not materialise at the rate expected – the result was a lower economic growth. In 1997, GEAR projected that more than 200 000 jobs would be created on an annual basis until the year 2000, and that the unemployment rate would decline to approximately 8% by the year 2020. Economic growth rate was set at 6%. However, GEAR missed most of its targets – real economic growth rate was around 3%. Statistics indicate that job losses and thus an increase in unemployment rate occurred from 33% in 1997 to 37% in 2000 (Baatjes, 2003).

In line with neo liberal economics, fiscal discipline became a more significant priority than social provision and equality enhancement. This has made it extremely difficult to address social backlogs in health, education, welfare, amongst others. The amounts allocated for social services were inadequate for the degree of social redress, inequality and imbalances that exist. Porteus (2004) argues that although a range of initiatives across the various sectors have started to operationalise the government's commitment to the rights of child citizens, the gains have not been strong enough to address the inequity and imbalances that exist.

The impact of the macro-economic policy can be seen in the shortfalls on the delivery of the three social policies described earlier in this paper. We have already noted the inadequacy of the Child Support Grant to tackle child poverty due in no small measure to inadequacies in resources made available and in implementation (Leatt, 2004). The Primary School Nutrition Programme was evaluated in 1997 by the Health Systems Trust. The findings indicated that although the overall objective of hunger alleviation had been met in many provinces, the implementation has generally been limited to being a vertical feeding programme despite its broad range of objectives. De-worming, nutrition education, and micronutrient supplementation considered low cost interventions have not been systematically implemented as part of PSNP. The evaluation highlighted many problems with implementation of the PSNP due to inadequate management, infrastructural and institutional constraints, resulting in poor and inconsistent coverage for significant periods of time. These problems continue to impact the programme.

Whilst the commitment by the Department of Health and Social Welfare to the Home and Community-based Care and Support Services (HCBCS) has been welcomed as a positive move towards creating social safety nets for children and adults infected and affected by HIV/AIDS, there have been numerous implementation problems – lack of proper infrastructure, state worker overload, access to state funding, lack of collaboration between state departments, overuse of volunteers without compensation (Giese, Mientjies *et al.* 2003).

Despite the capacity-building attitudes inherent in most policies in the two countries, there remains the view, more particularly in England, of citizens as individually-responsible for seeking and finding their own opportunities to survive and thrive in the new global economy. One has a sense of the entrepreneurial, ambitious individuals on the look out for opportunities to enhance their own situation. With reference specifically to the United Kingdom, Hartley Dean (2004, p.69) notes the “pragmatic instrumentalism and guarded altruism” evident in popular discourse about social attitudes to the welfare state. In our view, this is also directly evident in New Labour’s political discourse, reflected for example in the welfare-to-work policies described above. The emphasis on individualism in New Labour thinking is a serious obstacle to the implementation of a broad and rich view of social inclusion. It is likely that a more expansive notion of rights and inclusion requires a more collective, less individualistic outlook. Recognition of our status as interdependent human beings who need to work collectively (Dean, 2004) may be a prerequisite for the implementation of such a view.

Conclusion

What emerges from our analysis is that a rich and rights based model of social exclusion is evident in the policies in both countries. We conclude, however, that this rights-based model is a stronger feature of the rhetoric in South Africa than in England and this can be attributed to the historical and political context of its new democracy. The rhetoric in England is tempered by an emphasis on ‘something for something’ to draw on Tony Blair’s own phrase, noted earlier. Yet it would appear that the policies in place in England would seem to be having a positive effect on combating social exclusion for children at least with reference to the narrow definition. The complexities and interactions of so many adverse factors in South Africa (poverty, HIV/AIDS, economic instability and the global economy) mean that capacity building and

prevention (rather than merely cure) remain a significant challenge for the future well being of children. Unfortunately, Sen's ideal, capabilities-based notion of social exclusion seems a long way off from the reality.

We recognise the need for further analysis on the policies for combating poverty and social exclusion in both countries. In particular, we suggest the need for continued exploration of the discourses relating for example to citizenship, rights, social justice, welfare and poverty. This could take the form of analysis of the political and popular discourses. Such work is necessary, since discourses are rarely discrete and simply straightforward, they are frequently contradictory, ambiguous and contested, always complex.

No governments in a democracy have a unified ideology and it remains the task of academic analysis to disentangle the varying strands that influence policy making (Paterson, 2003). In this context, we would advocate the need for a good deal more exploration of the way policies on social inclusion are brought into being, how they are popularised, publicised and disseminated, and how they are implemented, interpreted and reinterpreted at local and national levels.

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