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Marginalization Revisited: Critical, Postmodern, and Liberation Perspectives

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▼ **Abstract**

Marginalization was advocated by Hall, Stevens, and Meleis in 1994 as a guiding concept for valuing diversity in knowledge development. Properties, risks, and resilience associated with the concept were detailed. This conceptualization of marginalization is reexamined here for its sociopolitical usefulness to nursing, from (1) critical theory, (2) postmodern, and (3) liberation philosophy perspectives. Additional properties are proposed to update the original conceptualization. These include: exteriority, Eurocentrism, constraint, economics, seduction, testimony, and hope. Effects of Eurocentric capitalism on all marginalized people are explored. Nursing implications include the need for interdisciplinary dialogue about the ethics of promoting and exporting Eurocentrism in nursing education and practice, and the need for integrated economic analyses of all aspects of life and health.

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MARGINALIZATION AND NURSING KNOWLEDGE IN THE 21st CENTURY

Marginalized people are vulnerable to health risks resulting from discrimination, environmental dangers, unmet subsistence needs, severe illness, trauma, and restricted access to health care. In 1994, Hall et al proposed marginalization as a guiding concept for valuing diversity in nursing knowledge. [1] Changes in the structure and provision of health care service warrant a new look at marginalization and its relationship to nursing's knowledge base, values, and social responsibilities. In considering nursing theory for the next century, this article is an attempt by one of the original authors to critique and adapt the concept of marginalization that was initially explored in the 1994 article in

Advances in Nursing Science. [1]

Questions guiding this exploration were: Is the scope of marginalization broad enough to interpret sociopolitical health issues in all groups of peripheralized people? How are the properties of marginalization congruent with, and different from, tenets of larger philosophical frameworks? What alternatives or additions to the conceptualization are needed to address sociopolitical aspects of current and anticipated health risks? The method used to reexamine marginalization was to review its properties from three philosophical perspectives: (1) critical theories, (2) postmodernism, and (3) liberation philosophy.

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REVIEW OF EXTANT DEFINITION AND PROPERTIES OF MARGINALIZATION

Marginalization was defined by Hall et al [1] as the peripheralization of individuals and groups from a dominant, central majority. Marginalization was seen as a sociopolitical process, producing both vulnerabilities (risks) and strengths (resilience). Properties of marginalization and their associated risks and resilience are briefly reviewed as follows: [1]

* *Intermediacy:* having boundaries that separate and protect, such as the skin, but also referring to risk of personal or territorial invasion and the dangers in herent in living in contested or border environments.

* *Differentiation:* the strength of cultural and personal uniqueness and the risk of becoming a scapegoat and being stigmatized.

* *Power:* access to resources, individual and collective awareness and organization, and risks associated with enforced conformity.

* *Secrecy:* access to, and control of information to protect one's self and group, and the risks resulting from the dominating group's use of insider knowledge to their advantage.

* *Reflectiveness:* survival skills gained from leading an examined life, and the risks involved in the exhaustive processes of constant vigilance, and analysis of each new social encounter necessary for safety.

* *Voice:* expression of one's experiences as valid and different from the dominant myths, and the risks of being silenced.

* *Liminality:* having experiences not shared by others; severe trauma, stigmatization, and illnesses can foster abilities to empathize with others, but carry risks of alienation, altered perceptions, and heavy psychic strain.

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CRITICAL PERSPECTIVES: COMPATIBILITY AND CONTRADICTIONS

The concept of marginalization was generalized from political struggles of women, people of color, the poor, immigrants, the mentally ill, sexual minorities, children, and victims of violence in the United States. Feminist theorists such as bell hooks [2] used the term marginalization to include racial, class, and gender as sources of exclusion. Marginalization as described by Hall et al [1] was inductively based on several studies of diverse populations of women. [3-7] Historicist tenets were evident in these authors' description of marginalization. The properties of voice, power, reflectiveness, secrecy, oppression, and stigmatization were congruent with the critical social theories of the Frankfurt School. [8-10] Other critical theories have addressed the concept of marginalization through analyses of "oppressive education" [11] and a Western medical system that fosters iatrogenic illness. [12] These critical theories are also compatible with the concept of marginalization. Marginalization is thus *inclusive* oppression, but it is also a

consequence of oppression, referring to oppression specifically based on boundary maintenance. In the 1930s the Frankfurt School theorists attempted to understand the processes of world war and fascism in Europe. They were an interdisciplinary group sharing the view that situations must be examined in their historic context with a goal of social change: emancipation. [10,13] These (predominantly Jewish) scholars eventually fled the Nazis, and vehemently condemned the Holocaust. Unfortunately some Frankfurt scholars developed a paralyzing pessimism that clouded their hope of imminent social transformation. [13] Habermas, [14] a second-generation critical theorist, wrote in the 1970s about societal emancipation predicated on communicative action. Technological development as well as hermeneutic understanding would be used in overcoming oppression. Habermas' work gave critical social theory renewed expectations of social change. Nurses have extended Habermas' and other critical social views to nursing contexts. [15-19]

There are ambiguities in assumptions of critical theories and properties of marginalization. Critical theories depend on notions of domination and oppression. Can one be marginalized, yet not oppressed? Does assimilation to the dominant center represent resilience or self-negation? Hall et al [1] were ambiguous on these points.

In answer to the first question, for example, newly immigrating people tend to initially be socially isolated by others in the United States who consider themselves to be in the "majority." Although remaining in one's own ethnic enclave may be a source of resilience, the "majority" is not neutral toward immigrants. At some point immigrants perceive negative stereotypes and majority tendencies toward xenophobia. This potentiates distress based on a convergence of other factors, such as age or gender. Being marginalized without being oppressed is, from a critical theory view, a time-limited lack of awareness of one's oppression and exclusion. An example relevant to the second question is the case of light-skinned African-Americans who consistently pass for white. Some social and economic opportunities may be open to them because of their similarity to the dominant group. Given the visible acts of racial hatred toward other African Americans, the experience of passing fosters alienation from the self. Marginalization is "forced inside." Social connection to others may feel superficial. Thus, even without experiencing direct *personal* threat, oppression can occur. Oppression and marginalization are intertwined. An assumption of critical theories is that no one would want to be marginalized or oppressed. There is evidence of a dominant group belief that persons choose or control stressful social locations and therefore can be blamed for their own distress and illness. [19]

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Resilience and activism

Critical theories are based on social change. Can resilience be individual or must marginalized people act collectively for social transformation? Collective activism increases social support and visibility, and provides positive images for marginalized people. Human relationships are likely to be most authentic if others know crucial aspects of identity. The visibility of activism usually entails "coming out" as a member of a nonmajority group, which may externalize psychic pain without necessarily eliminating social alienation. For example, family nonacceptance and threats to employment often accompany disclosure of being gay/lesbian/bisexual or transgendered. Similarly, some persons with mental illness in the National Association for the Mentally Ill (NAMI) have recently become politically focused and are redefining their health needs and goals. Significant numbers of consumers now seek full partnerships in treatment and policy decisions. [20] Certainly those with stigmatizing psychiatric diagnoses are marginalized, but collectively organizing has increased visibility and resilience.

Children continue to lack their own collective sociopolitical resilience. Adults acting on behalf of children control advocacy for children's health. Furthermore, adult "norms" are still often applied to children. Note the current media preoccupation with child-perpetrated homicides. The dominant group denies children's subjectivity, demanding that they be tried as adults. Comparatively little media attention is given to the vastly greater incidence of adult torture and

murder of children, frequently perpetrated by biological parents. [21]

Marxism, critical theories, and economics

Marxist theory is a cornerstone of most critical social theory. Marxists emphasize not only the economic exploitation, but also the dehumanizing disregard for the worker's experience and contribution to the world. [10,23] Unemployment and underemployment can lead to malnutrition, starvation, loss of housing, dissolution of families, and increased substance use. Economic marginalization is often subtle. Debts can quietly accumulate until crisis occurs. Meaning, recognition, and dignity of work are aspects of marginalization derived from critical theories. [2] Economic oppression was not prioritized as a property of marginalization, but seen as consequential or concomitant with social oppression by Hall et al. [1] Critical theories are consistent with the conceptualization of marginalization, however in the view of Hall et al, the potential empowerment through sociopolitical activism was not clearly emphasized.

It seems likely that individual resilience strategies will lead to individual fatigue, and potentially serious health problems. Group strength and genuine social support are essential for survival and health. Advocating social transformation is common to critical theories, but it is painfully evident that critique alone does not assure social change. A significant barrier to action, [11,24] is the lack of in-depth analysis and intervention on the economic front. In the words of a poor Latina woman, "I don't care about your revolution if I can't get rice and beans." [24(p166)]

POSTMODERNIST PERSPECTIVES: REALITY BYTES

Postmodernism is a collective term for rejection of universal, hegemonic perspectives. Lyotard defined postmodernism as the rejection of "metanarratives." [25] The postmodern perspective effectively decenters the worldview and creates multivocality in narratives. Postmodernism benefited from critical theorists' application of Marxism to counter Hegelian idealism. Many post modernists hold that modernity is always predicated on its negation. A given utterance, text, piece of art, sign, or object can have multiple meanings. Because of this fluidity, "reality" cannot be represented. What is "real" is socially constructed in specific contexts. These basic principles of postmodern thought should not be taken to depict postmodernism as a single viewpoint. What follows is not an exhaustive explanation of all postmodernist thought, but identification of tension and convergence within postmodernism, and between postmodern and critical perspectives as they affect notions of marginalization.

Language, power, and desire

Barthes emphasized that a text cannot be tied to its original author, and many interpretations are possible. [26] Derrida proposed that text be deconstructed by identifying binary oppositions and by focusing on what is *not* said in the "margins" of a text. [27]

Foucault examined power, and conformity. [28] Using an archaeological approach to the histories of these concepts, he posed new notions of power and conformity. Power is not possessed by people but is dynamic, moving through weblike social networks. Discipline is not reserved for criminals but is socially pervasive. Any person's slight deviation from "norms" is met with negative pressure. The source of this "disciplinary normalization" is virtually untraceable because "judgement" is diffused within the network of the judiciary, schools, families, police, and social welfare. Accordingly, "judges" now include doctors, clergy, social workers, and *nurses*.

Disciplinary power has become very intrusive for the marginalized, those least able to "conform to norms." For example, the media and self-seeking politicians have demonized "welfare mothers." In fact most families needing Aid for Dependent Children (AFDC) would likely rather not be in this situation; nevertheless they are considered deviant. Marginalized people are different, and are watched closely in society. Thus, as Foucault's description implies, they are most prone to be incarcerated or otherwise punished. The network of power dominates social structures and extends punitive treatment to the marginalized even if they are not cognizant of their perceived deviance. Without being aware of it, a person's behavior is shaped toward "conformity." An aspect of marginalization might then be lack of information about what is "normal" or expected. One must know the "rules of the game."

In the 1960s Baudrillard [29] examined the postindustrial manufacture of materialism and the resultant desire for objects of possession. Objects of possession create the illusion of personal uniqueness founded in inconsequential details. In his postmodern perspective, all persons are seen as attracted to "objects." The dominant class desires objects and is praised because they have the means to obtain them. When the poor attempt to fulfill these self same desires they are criticized for making foolish choices (eg, seeking "luxury" over meeting basic needs of a family). Baudrillard also explored the dynamics of seduction and secrecy. Seduction depends on the lure of withheld knowledge, and the hollow experience of being satisfied, only to discover that more is hidden. Persons experience addictive preoccupations with what is hidden. Seduction is the unattainable desire to be an "insider." [29]

Postmodernist views and marginalization

Some postmodernist views resonate with the properties of marginalization. Some feminists find postmodern multivocality as an avenue for previously silenced women to be heard. [30] This is consistent with the Hall et al property of "voice." [1] Marginalized persons may not only speak a different language or dialect, but also when using words common to the dominant group, they may not be expressing the same *meaning*. [26] The words of the marginalized cannot be interpreted simply by their dictionary definitions. For example, persons with schizophrenia often use language in a highly subjective way. [31,32] There is resistance to some forms of postmodernism related to marginalization by those who reject the relativism of "social constructionism" and the denial of subjectivity and identity. [33,34] Bell hooks believes that postmodernism can either separate, or create new human bonds, depending on whether it creates or destroys options for the marginalized. [35] Taken to its logical end, postmodernism implies validation of subjective reality for marginalized persons, but does not necessarily affirm their claim to rationality. In this case, marginalized people do not gain credibility and power if each reality is equally valid (or invalid).

Postmodernist rejection of metanarratives may inadvertently devalue collective stories as sources of solidarity and identity for marginalized groups. Rejection of universals undermines the idea of all-inclusive human rights. Some feminists have cautioned against accepting such an extreme postmodern position. [36] Specifically the tenets of postmodernism are viewed as imposing on nursing aims and values. [37] Hall et al took issue with those postmodernists who argue that society is "decentered;" and that there is no powerful elite "running things." [1] Seminal postmodern theorists have been privileged European white males, which also raises suspicion in marginalized groups. Postmodernists engage in political struggle at the discursive level. To combine postmodern and critical theory one must analyze discourse for power differentials and engage actively in emancipatory struggles.

Ironically, many postmodernists resist labeling their perspectives as philosophy, but the undermining of "modernism" is itself a philosophy, a metanarrative of heterogeneity. This metanarrative can also be reified. In summary, the value of postmodernism as reflecting the complexity of realities in

marginalization is significant. There is undoubtedly a middle ground within this perspective that does not constrain, but enhances social change. 38

Postmodernism and the reality of pain

Marginalization can be expanded in scope though postmodern insights: Heterogeneity and diversity are acknowledged. Deconstruction of texts as multi-vocal, considering what is *not* said, affirms the existence of the peripheralized. Power is illuminated as complex and dynamic, precluding the oversimplified notion of "oppressor versus victim." Postmodernism challenges nurses about judging and enforcing "norms" to control marginalized persons. (Such judgment is glaring in nursing terms such as nonadherence and noncompliance.) Secrecy is clarified through postmodern analyses of seduction and power. Un fortunately, because of the tendency toward abstraction, most postmodernist perspectives fail to directly address the reality of agony. When the marginalized claim a valid but irrational "reality," it is a hollow, dispassionate victory. As the next section will clarify, postmodernism alone falls short of providing a tangible basis for hope. 23

LIBERATION PHILOSOPHY: TRANSMODERNISM AND TRANSFORMATION

Hall et al focused on the marginalized as a "minority" existing at the periphery of a dominant "majority" in the United States. 1 Global health is a nursing imperative, a *universal,* (hence an emancipatory) goal. From a global view, the "marginalized" comprise the *majority* of humanity. According to liberation philosophy, a focus on global survival and health is the way to relieve the agony of the marginalized. It is from "outsiders" that new ideas are born.

The liberation perspective presented here is primarily based on past and current liberation struggles synthesized brilliantly by the Argentinean philosopher Enrique Dussell in *The Underside of Modernity: Apel, Ricoeur, Rorty, Taylor, and the Philosophy of Liberation.* 23 Briefly, it points out historical and current economic and cultural exploitation of the global majority of "southern," (ie, African, South American, Asian) peoples by Eurocentric nations in the north. Also members of this majority are "innercity" urban poor (the third world within the northern nations). This majority includes the starving, victims of violence, those without homes, and those whose labor is severely exploited. The dominating processes and ideologies that characterize the relations between the discounted and oppressed majority by the affluent minority will henceforth be termed "Eurocentrism" or "Euroamericanism." Euroamericanism includes not only the use of workers for below subsistence wages, but also programs of "development" that demand conformity to capitalist values, exclusive use of English language, and so on. 23

The roots of liberation philosophy

Liberation theologies have been written over the last three decades by intellectuals involved with the struggles of the poor, in Latin America, and other "third world" contexts, including some in the United States. 39,40 Extension of these theologies into all areas of life has provided basis for liberation philosophy. 23,41

Much of recorded Eurocentric history holds that subjectivity and modernity began with the Reformation and the French Revolution. Liberation philosopher Dussell 23 emphasizes that advocacy for subjectivity and human rights began earlier, in the 16th century. For example, Bartolomeo de las Casas condemned the invasion of the "New World," that had in resulted in the genocide of 13 million American Indians, and 16 million Africans captured for slavery. One third of the African deaths occurred in crossing the Atlantic. According to Dussell, European

colonization and slavery, the exploitation of land and labor, provided the economic *basis* of "modernity." To justify savage treatment of slaves and Native Americans, they were designated subhuman by Europeans. 23 Dussell refers to the decimation of American Indians and Africans amidst an "Enlightenment," as the "underside of modernity." Underside (in Spanish *"reverso"*), does not refer to the abstract Other of postmodernism, the negation of reason, but to the *negation of that negation*. Neither pre- nor anti- nor postmodern, liberation philosophy is more accurately named a "*transmodern*" perspective. 23

Liberation philosophy is postmodern in the sense that it challenges hegemonic metanarratives of "God" and "the free market" offered by "fetishized" religion and faith in "global capitalism." 42 Yet liberation philosophy is not postmodern if metanarratives of "revolution" merely replace metanarratives of "oppression." Liberation philosophers deny that these are dichotomous, explaining that plurality can be affirmed without discarding empowering spirituality. 23 Emmanuel Levinas's work "bridges" postmodernism and liberation philosophy. Dussell used Levinas' ideas to illustrate that one can relate to the "Other" not as simply abstract "irrationality," but as the "real human face(s)" of the "exteriorized." Exteriority refers to being completely outside the social bounds, not considered human. 43 Fanon's view of the Algerian condition names the exteriorized "the wretched of the earth." 44

Likewise, plurality of narratives does not preclude connectedness among them in the liberation perspective. For example, when exteriorized persons, such as women tortured and imprisoned in El Salvador, tell their subjective stories of suffering (in Spanish, *testimonios*), they see themselves as part of a heritage, as one among others who share the same agony, including those who have died in the struggle for liberation. The subjective is affirmed without losing a sense of solidarity with a larger ongoing, living history. Testimonies are "narratives of unity," not reified "metanarratives." 45

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Voices of the exteriorized

My recall is nearly perfect ... I can't help it; there are too many things to remind me of the 23 and 1/2 hours that I'm in this cell ... I might be the most resilient dead man in the universe. - -George Jackson, Soledad Prison, April 1970 46 (p174)

Excluded from the system by economic deprivation, or incarcerated within it, the exteriorized make appeals, or "interpellations." 43 These appeals are not likely to be understood or legitimized by the dominant group because the exteriorized often do not have access to language rules and the norms of "rationality." They are not privy to exclusive, secretive communications and practices used within the dominant group. Their demands are not understood as "reasonable." According to liberation philosophy, however, the poor/exteriorized are not the negation of reason, they are people *with* reasons. Theirs is a positive movement toward a better future. The exteriorized appeal for what are *now,* and *should always have been,* their rights. 23 The postmodern analyses of discourses are helpful, but not comprehensive enough to explain and concretely change the exteriorizing dynamics; discourses presuppose common language, and preclude nonlinguistic communication. Batstone differentiates between the two in describing (dis)*Courses* of liberation, actions that "speak," praxis toward freedom. 47

Liberation philosophy focuses on economics: of survival (food, clothing, and shelter), pedagogy 11,48 erotics (gender equality and freedom of sexual minorities) political life, ecology (health of the planet), 49 and religion (spirituality). 23 All of these are aspects of health, and are therefore essential nursing concerns. Liberation philosophy holds that these "economies" must be discussed in a balanced, holistic way. For example, an environmental concern about deforestation would not be debated separately from the subsistence needs of the poor in the location in question. 49

"All these poor and suffering folk are about as esteemed as garbage. They do not exist as far as the world is concerned." 49(p181) Eurocentric communities have extensive technologies of communication, distribution, transportation, and health care. How do these Eurocentric communities apparently not perceive the pain of the exteriorized? They simply do not come to mind. For example, the face of human immuno deficiency virus (HIV) illness is often associated with gay men or injection drug users, yet the vast majority of those with HIV are from East Africa. Historical evidence from the 16th century onward documents Euroamerican responsibility for the pain of the exteriorized. There are reasons for it. It is not irrational. The exteriorized are not suffering from a "social construction." This pain has taken different forms over the centuries in connection with specific Eurocentric demands. For example, genocide has occurred in the past, but is less frequent now because rather than needing land and raw materials the Eurocentric communities desperately need new markets for consumption, and sources of cheap labor. The exteriorized majority provide new markets, and a highly exploitable labor force. 23 Failing to form alliances against these oppressions impedes social transformation. For example, nursing must "see" transnational corporations that perpetuate starvation, child labor, and environmental demise. Only when critiques remain connected to real political struggles can Eurocentric cooptation be avoided, and solidarity with the exteriorized be assured. 50

Liberation philosophy and hope

How can the hungry not *hope* to eat tomorrow" 37(p4)

It is from the exteriorized that hope can come. Those who have experiences outside the system can invent novel responses to the failures of Eurocentrism. In the words of Fanon:

For centuries they have stifled almost the whole of humanity in the name of a so-called spiritual experience. Look at them today swaying between atomic and spiritual disintegration ... the European game has finally ended; we must find something different ... European achievements and techniques ... ought no longer to tempt us and throw us off balance ... I see only a succession of negations of Man [sic], and an avalanche of murders ... let us combine our muscles and brains in a new direction ... we do not want to catch up with anyone. What we want to do is to go forward all the time, night and day ... Humanity is waiting for something from us other than ... imitation, which would be an almost obscene caricature ... we must invent, and find discoveries. 44(pp311-315)

Eurocentrism and global capitalism necessitated construction of an economically polarized center-peripheral system, and maintenance of that system through the poison of racism. 50 In the crisis of Eurocentric capitalism many of the marginalized are incarcerated. Besides preventing organized rebellion, today prisons are among the largest growth enterprises in the United States. There are 1.5 million people in prisons; disproportionately they are people of color and the impoverished. More are on probation or parole or incarcerated involuntarily in mental hospitals. Contracting for prison labor is now legal in 30 states. This labor has been sold to corporations, including Dell, IBM, Honda and Toys R Us. Hence, capital is produced through labor so cheap that it appears miraculous: "Something out of nothing." 49 When needed inside the system (as labor, or scapegoats) the disposable people are most accurately termed marginalized; when their existence as humanity is dismissed and their resources taken, they are exteriorized. 37 When the exteriorized burst in upon the system with demands for justice, they are "disappeared" by that system (become *desaparecidos*). At this point the poor are feared, confined, tortured, and murdered by dominant powers. 45 In the United States the poor are disappeared and discredited as human beings through incarceration and the "over distribution" of handguns, crack cocaine, and heroin in their locales. The young are confined to a brutal underworld of seduction, profound exploitation, and deadly risks.

Eurocentrism has reached an impasse. What incentive is there for the wealthy one fifth to magically distribute their "fortunes" into the hands of four fifths of humanity? The Eurocentric system lacks hope because the appeals and ideas of the exteriorized have not been listened to. 37 Hope, for the exteriorized is not expectation based on ideals, but sure-footed belief in the future, based on experience. Hope is concrete evidence, in the present, of change in the foreseeable future. It is not "pie in the sky" dreaming, but a keen awareness of the past, and the economics of freedom. Hope is constructed, not by imagination, but by hands engaged in daily thoughtful action (praxis). Hope is recognition that actions … are woven into an ongoing history. Hope is clarity and awareness, not blind faith. 28

Liberation philosophy and marginalization

Liberation philosophy raises questions about the definition of marginalization: Are those in the north, currently considered marginalized, really "peripheralized" or are some of these persons exteriorized? Are there *situations* when marginalized people are actually outside of the system? Are cocaine-using women who have been raped, "disposable" African American youth, abused children, street dwelling persons with AIDS, and those labeled "schizophrenic" truly considered persons in Euro/America? Are they blamed for their conditions? Are those in prison marginalized? They were not a focus of the extant description of marginalization. 1 Liberation philosophy challenges whether the properties of marginalization identified thus far are comprehensive, inclusive and incisive enough to connote the severity of the pain experienced by groups on the edge or outside the dominant group. Violent bodily invasion, neglect, starvation, imprisonment, and torture (rape) were discussed by Hall et al, 1 but not from a global perspective, nor with emphasis that such violations occur in the United States at an alarming rate of frequency, producing severely negative health outcomes.

IMPLICATIONS FOR NURSING INQUIRY AND PRACTICE

Critical theories support the basic properties of marginalization, but also indicate that collective social activism is necessary for social transformation. Individual resilience is not enough. Postmodernism supports the concept of marginalization by illuminating complexities about power, language, desire, and subjective experience. The "tools" of deconstruction are used to examine and reframe authoritarian ideologies. Yet simply recognizing social constructionism and validating multiple "realities" does not transform untenable social conditions.

Liberation philosophy offers the concept of transmodernity, and the economic praxis of social transformation. It is a perspective that grew out of an experiential epistemology. It is a source of hope. It challenges marginalization, questioning whether the referent groups are at times exterior to the dominant, Eurocentric system.

Initially this appears to be a more dismal pronouncement. Yet if the term exterior fits, the tenets of liberation philosophy offer the possibility of new answers and a new future. Emancipatory narratives (sometimes called "counternarratives") of the exteriorized in the United States can be linked to liberation struggles against Eurocentric capitalism. Liberation philosophy calls for economic understanding of all aspects of life as integral to health. An immediate nursing concern is commodification of health services as a profit-making industry that will not include the global majority because they are not a source of health capital.

ADDITIONAL PROPERTIES OF MARGINALIZATION

Marginalization 1 already included elements of all three philosophical perspectives, though they were not always designated as such. The reassessment is a basis for proposing additional properties to increase the concept's global relevance and comprehensiveness. These properties are described, including related aspects of risk and resilience:

* *Exteriority:* The condition of being outside the dominant system, beyond societal protections and resources. Marginalized people may often be regarded respectfully. Yet it is unlikely that they have not also experienced definition as "nonhuman." For instance, often treating injection drug users because they are "reservoirs" of HIV and hepatitis or drug-resistant tuberculosis is not based on valuing them as persons in their own right (and many know this), but on protecting the dominant group. The use of children as labor and in prostitution, exteriorizes them as sources of capital, and objects for adults" sexual and power gratification. Risks associated with exteriority include shortened life span, potential torture, starvation, devaluation of self, depersonalization, and cultural collapse. Suicide is a significant risk of exteriority. Imagine a youth who in shame and terror about his (undisclosed) gay identity commits suicide, believing that his sexual orientation makes him a "non-person." Heterosexual family members and friends are incredulous and shocked: "We have no idea why this happened, he had every reason to live. ..." They have no means to comprehend the young man's agony; he was outside, "exterior" to their world.

* *Constraint:* Bodily restriction experienced in incarceration, entrapment in violent environments, or physical intrusion (eg, rape). This is related to the property of intermediacy, as described by Hall et al, but presents more severe risks. When others have control over the body of a marginalized person, (such as a prisoner, or a beaten child), there are lasting "impressions" that can lead to mental or somatopsychic health problems, especially posttraumatic stress. The resilience associated with constraint or intrusion of the body is the ability of the body to carry memories over time. 62-64 This phenomenon is of great significance to health over and above actual injuries. It deserves nursing inquiry.

* *Eurocentrism:* The pervasive ideology and interpretation of history that holds European and North American values and technologies as superior to those of exteriorized peoples. It is supported by denigration of people in the Third World as undeveloped, as well as racism, sexism, global capitalism, unregulated "free" markets, and consumerism. Risks to the marginalized include sudden exteriorization, illness, and death from lack of basic resources (food, shelter), vilification and torture, war, and internalized self-/group-hatred. Resilience associated with Eurocentrism is awareness of how it works, so as to avoid harm. For example, youth can make each other aware that they are being specifically targeted by cigarette companies as a "market," and resist smoking from a sociopolitical (vs. moral) stance.

* *Economics:* The set of contingencies that affects marginalized peoples" access to resources of all kinds. This property obviously includes social class and income, but also "costs" related to education, transportation, immigrant status, health, sexuality, and ecological issues. The dynamics of exchange are interrelated in these areas. Economic risks include combinations of these "costs" that further marginalized and impoverish, and exacerbation of health problems resulting from profit-centered health systems. Resilience associated with economics is the ability to locate resources, balance needs against one another, and oppose capitalist reductionism (the belief that economic development automatically brings with it social improvement). 58

* *Seduction:* The "manufacture" of desires for material objects that promote the consumer marketplace and objectification of persons. Seduction is the dynamic of many forms of "addiction." In the case of drug addiction, all transformative energy is diverted into activity that will secure more drugs, with risks of isolation, victimization, and legal problems. Other risks of seduction include preoccupation with consumption, hindering authentic reflection on sociopolitical and interpersonal life. Resilience associated with seduction is knowledge of how it depersonalizes.

* *Testimonies* (testimonios): Personal narratives elaborating exteriorized life experiences and survival. Testimonies are stories that specifically link one's history of agony and hope with those previously or currently in similar situations. Risks associated with the telling of these stories include the distress of recalling painful experiences, repressive retaliation by dominant groups (including incarceration and torture). These narratives are, however, a powerful source of resilience for marginalized persons and groups. They validate perceptions, provide information about how exteriorization affects people, foster hope and connectedness among marginalized persons, and enable them to educate those, such as nurses, who wish to become allies in liberation struggles.

* *Hope:* Positive view of the future based on concrete efforts toward sociopolitical transformation 28 (not based on Eurocentric metanarratives and ideals). An associated risk is the possibility of disappointment (hopelessness) and hopeful actions may incur repression by Eurocentric forces. Hope constitutes resilience through the claming of positive potentials and affirmation of marginalized identities. Hope is a liberation-based aspect of health that enhances the authenticity of relations, and fuels personal and collective empowerment.

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VIABILITY OF THE CONCEPT OF MARGINALIZATION

The concept of marginalization remains germane to the sociopolitical dimensions of nursing. It is also a work in progress. The added properties are not proposed as applicable to all marginalized people and experiences, but they may inform nursing inquiry and practice in particular circumstances. These new properties provide for consideration of both positive and negative consequences of marginalization: risks and resilience. These risks may affect anyone; but the marginalized are closer to the fire.

What is nursing's vision in serving marginalized populations? Assimilation of these persons into "the mainstream?" Do nurses believe all will fit in the Eurocentric circle? Is there really a "piece of the pie" for everyone? How can Eurocentric capitalism recognize all as persons, when it is predicated on sources of cheap labor, violence, racism, seduction, and a constant need for new markets? What healthy outcomes can realistically be expected, and at what cost for the marginalized? These are disciplinary questions, requiring collective reflection, dialogue, and decisive action.

It is not enough to note cultural, and sociopolitical differences among populations and to affirm cultural diversity. Nurses have a responsibility to transform *exteriorizing* social structures, especially in health care contexts. Nurses need to thoroughly explore their Eurocentric disciplinary roots, including the exportation of Eurocentric values and practices through education of international students. The discipline needs to develop integrated analyses of the many "economies" that constrain all aspects of life. Subsistence needs must be prioritized. Hope is essential for the health of marginalized people and is therefore a major nursing concern. What do nurses know about the dynamics of hope and the costs of hopelessness? Nurses have the compassion and knowledge to address the politics of agony, but this will require many difficult choices in the new millenium. Boff put it simply:

All human beings should have the basic right to existence. This means they should be able to eat at least one meal a day, have a roof over their heads, and be helped with basic health care … Serve life, beginning with the most threatened. 48[(p128)]

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Key words: access to health care; cultural competence and safety; liberation and hope; marginalization; resilience; vulnerable populations