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Re-evaluating Sufficientarianism in Light of Evidence of Inequality's Harms

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ABSTRACT

Classic sufficientarians like Harry Frankfurt dismiss inequality 'as such' as morally insignificant. I ask whether the plausibility and practical import of this claim is in any way undercut by evidence of the durable effects of high inequality on some aspects of individual and societal well-being. Studies demonstrating that large socioeconomic inequalities are persistently correlated with low social mobility and social trust, greater health disparities, and racial and gender hierarchies put pressure on classic sufficientarians' claim that inequality's supposed harms are largely reducible to poverty or too-low welfare. They also suggest that inequality's harms do not only affect those below the threshold of sufficiency. I show that the classic sufficiency view of inequality disregards the close connections between poverty and inequality, as well as the ways in which large relative inequalities reflect and reinforce morally concerning harms like status hierarchies, racial segregation, and low levels of social trust. Revised sufficiency views, such as those of Satz, Anderson, Axelsen & Nielsen, and Shields, are more readily able to grant the significance of relative inequalities and comparative assessments of welfare. but are hampered by their adherence to classic sufficientarianism's negative thesis denying the relevance of inequality.

KEYWORDS

Sufficiency; sufficientarianism; poverty; inequality; social determinants of health; Harry Frankfurt; social trust; relational egalitarianism

Introduction

In *On Inequality*, Frankfurt (2015a) updates his classic essay on the doctrine of sufficiency by dismissing widespread concerns about rising economic inequality as misplaced: 'To focus on inequality, which is not in itself objectionable, is to misconstrue the challenge we actually face. ... [T]he reduction of inequality cannot be our most essential ambition' (3). Frankfurt's reassertion of this sufficientarian claim, central to his case against 'economic egalitarianism as a moral ideal' (vii), follows two decades of studies by economists, epidemiologists, sociologists, and political scientists examining the negative effects of rising inequality on individual and social well-being; statements by medical associations in the US, the UK, and elsewhere identifying inequality as a key determinant of individual health and cause of health disparities;¹ and warnings by powerful transnational economic institutions like the International Monetary Fund and the Organisation for Economic Co-

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Operation and Development that rising income and wealth inequality jeopardizes economic growth and stability, undercuts social mobility, and 'creates economic, social, and political challenges' (OECD 2011, 4; see also Giles 2014; Gurría 2013). In light of these concerns and research on inequality's harms, it is worth revisiting Frankfurt's insistence on 'the moral innocence of economic inequality' (2015a, vii).

Frankfurt's rejection of inequality per se as a valid source of moral concern (1987, 1997, 2015a) is tempered by his acknowledgment that some distributional inequalities have negative effects in the sense of jeopardizing other goods that we have reason to value, such as democracy. But Frankfurt attributes these harms to an underlying absolute insufficiency in resources not to mere distributional discrepancies as such; many subsequent sufficientarians substitute welfare or capability, but the structure of the argument remains the same. The claim that we should not be morally concerned about inequalities per se is best seen as a component of sufficientarianism's 'negative thesis', namely, its 'rejection of egalitarian and prioritarian reasoning at least above some critical threshold' (Casal 2007, 299). As Casal argues, this position 'fails to establish that when everyone has enough, it does not matter how unequally additional resources are distributed' (Casal 2007, 307; her italics). In particular, Frankfurt's assertion of the irrelevance of discrepancies among people above the threshold of sufficiency – 'those who are doing considerably worse than others may nonetheless be doing guite well' (Frankfurt 1997, 5; see also Benbaji 2005) – may be challenged by growing evidence of high inequality's negative impact on health and social well-being along many dimensions. High income inequality is correlated with lower levels of social mobility, social trust and overall population health, and higher levels of gender and racial inequality and crime. These findings are conceivably inconvenient for classic sufficientarians insofar as they point to harms to individuals above the threshold of sufficiency, as well as to society as a whole - and thus irreducible to absolute deprivation or low welfare. Moreover, if large income and wealth inequalities are found to reliably and inescapably inflict damage on important values like social trust, then classic sufficientarians will have trouble dismissing them as merely instrumental, peripheral harms.

Below, I explore the prospect that some of the data on inequality's harms may put pressure on two related claims made by classic sufficientarians: that harms associated with inequality are simply the result of too-low levels of resources or welfare; and that any harms associated with inequality are purely tangential and can be redressed by tackling poverty head-on, or else by directly pursuing 'other socially or politically desirable aims' (Frankfurt 2015a, 66) that may be undermined by large discrepancies in wealth and income. This line of inquiry may appear to miss its target: after all, sufficientarians like Frankfurt are only committed to rejecting the proposition that inequality is 'inherently bad' (Frankfurt 1997, 5), and not precluded from recognizing that some inegualities have bad effects. They allow that extreme inequalities may need to be reduced or regulated as part of the effort to raise people to a sufficiency threshold, or in cases where such inequalities jeopardize genuinely important values, such as 'the integrity of our commitment to democracy' (Frankfurt 2015a, vii). But this clarification does not obviate the need to press classic sufficientarians like Frankfurt, whose message that concerns about inequality as such are mistaken and even morally harmful still enjoys surprising traction (Frankfurt 2015b, 2015c; Starmans, Sheskin, and Bloom 2017). For far from conceding that goods like self-respect, social trust, and social cohesion may inherently

be jeopardized by high inequality, Frankfurt has stuck to his original claim that 'from a moral point of view, economic inequality does not really matter very much, and our moral and political concepts may be better focused on ensuring that people have enough' (2015a, vii).

If it turns out that empirical data on inequality's harms casts doubt on the tenability or relevance of sufficiency's negative thesis, this would not disprove its *positive* thesis stressing 'the importance of people living above a certain threshold, free from deprivation' (Casal 2007, 297-298). What, then, might we accomplish by discrediting sufficiency theory's negative thesis, including its analysis of inequality? First, it might prompt sufficiency proponents to consider whether some kinds (and/or degrees) of inequalities are inherently unacceptable, even once a fairly high threshold of socioeconomic sufficiency has been met. Democratic egalitarians, for example, have shown why inequalities in educational funding that track racial disadvantages and contribute to racial segregation are always incompatible with the goal of equal citizenship (Anderson 1999, 2007; Satz 2007, 2010). If high income inequality is similarly found to be reliably correlated with disparities in health, social mobility, and racial and gender status, then sufficientarians may need to concede that it is, for all practical purposes, always (instrumentally) bad - thus necessitating more equitable distribution of income and wealth. Second, showing the limits of sufficiency thinking about inequality could encourage normative political philosophers, sufficientarians included, to think more deeply about the relationship between poverty and inequality. While some sufficientarians accept that determining levels of sufficiency will often require comparative assessments and that relative inequalities have implications for resource distribution and social policies (Axelsen and Nielsen 2015; Nielsen and Axelsen 2017; Nussbaum 2006; Schemmel 2011; Shields 2012), many nonetheless remain beholden to an outdated view of poverty as absolute, not relative – thus ignoring the constitutive role of social-structural inequalities in creating and sustaining poverty.

I begin by setting out some of the evidence for the claim that income and wealth inequalities in high-income countries (HICs) have negative consequences irreducible to the harms of absolute poverty, as encapsulated by sufficientarians' idea of insufficiency. Next, I explain why classic sufficientarianism may be vulnerable to data suggesting that high socioeconomic inequality may cause health and social problems not explicable in terms of insufficiency (or absolute low welfare) alone. I then trace some of the difficulties faced by classic sufficientarians to their static, one-dimensional views of inequality and poverty, which I argue bifurcate these concept too sharply. Their approach is very much at odds with current understandings of poverty, which see structures and processes of relational inequality as central to material and social deprivation – and so can better account for the wide range of harms attributed to high inequality. I consider how revised sufficientarian arguments aim to incorporate concerns about inequality's effects into the sufficiency framework, noting which inequalities these approaches can acknowledge and even redress, and which may remain obscured by the paradigm's misconceptions about poverty and inequality. The concluding section reflects on what remains of sufficientarians' case against the moral salience of inequality once we acknowledge the structural connections between the processes and dynamics of poverty and inequality.

Research on inequality's harms

It has long been known that absolute income is correlated with individual health. But in developed countries there is growing evidence that the *relative* distribution of income and wealth also impacts many aspects of individual health and social well-being. Social epidemiologists and medical anthropologists have observed a social gradient in health in developed countries correlated with individual and/or household income. Significantly, this social gradient has been observed to span across the whole income scale, tracking health inequalities even between those individuals that sufficiency proponents would characterize as having enough for a good life (i.e. the middle and upper classes).² Best associated with the social determinants of health thesis first advanced by epidemiologists Michael Marmot and Richard Wilkinson, this research has led to numerous studies into the effects of economic inequality on many aspects of social well-being in developed societies. While certain claims about inequality's consequences remain controversial, credible recent data suggest that high income inequality is indeed correlated with a greater incidence of specific health and social problems. In particular, researchers detect elevated rates of cardiovascular disease, obesity, diabetes, and smoking-related illnesses, as well as higher rates of violent crime, greater racial and gender inequalities, and lower social trust in developed societies with high income inequality.

What relationship is believed to exist between income inequality, health, and social well-being in rich countries? Two (non-mutually exclusive) main hypotheses have been advanced. The first of these suggests that relative income inequality - inequalities among individuals' incomes within a given reference group – is correlated with significant differences in individual health and social well-being in wealthy societies. Earning considerably less than the regional average income, or less than others in one's age cohort, may negatively impact one's health, according to the relative income hypothesis (RIH). A second thesis has to do with the effects of inequality on society as a whole: the income inequality hypothesis (IIH) posits that societies with high income inequality lag behind comparatively poorer but less unequal countries on several indicators of health and social well-being, such as social trust and crime. This hypothesis notes that industrialized societies with high inequality have a much steeper social gradient of health (marking health disparities across social classes) than do more equal societies, and worse population health overall. Explanations for these effects (in both the RIH and IIH) point to indirect, material factors - highly stratified societies invest less in public goods and services, have lower levels of social capital, and higher rates of crime - as well as to more direct, psychosocial pathways, such as the stress responses associated with status differentials, social exclusion, and lower job control.³

The IIH aims to account for differences in the health outcomes of a number of HIC – that is, to explain why certain countries with a high average national income fare worse on morbidity, mortality rates, and life expectancy than do countries with similar or even much lower average incomes. Among wealthy countries, a nation can be as much as much as *twice* as rich as another – using national income data – without adding any benefit to life expectancy rates (Wilkinson and Pickett 2009, 11); the US and Britain have higher average incomes than Finland and Japan yet have poorer health outcomes and lower life expectancy. But while several studies have corroborated Wilkinson and Pickett's findings (Backlund et al. 2007; Kawachi and Kennedy 2006; Ross et al. 2000), some

have challenged them. One problem is that the use of such a global variable as life expectancy makes it difficult to ensure that other possibly relevant but exogenous factors, such as education levels and public spending on health services, are not affecting health outcome (i.e. acting as confounders). The Wilkinson-Pickett data linking high income inequality to lower life expectancy has also been criticized on methodological grounds,⁴ including the charge of cherry-picking data by eliminating certain countries that might skew the nonlinear curve of their graphs demonstrating the IIH. In the absence of dispositive evidence adducing lowered life expectancy to high income inequality, the IIH is vulnerable to sufficientarians' likely rebuttal: namely, that variations in life expectancy among rich countries are merely due to the higher number of people living below the sufficiency threshold in countries with greater inequality. The RIH, by contrast, may be less susceptible to this counterclaim, because studies testing this hypothesis do not draw solely from national level data (such as average income) which can obscure the numbers of those living in absolute poverty, but rather, also include regional and individual level economic/income data that give a fuller picture of economic status.

Given the disciplinarily diverse nature of the study of inequality's relationship to health and social well-being, it is no surprise that a consensus has yet to emerge. Indeed, disagreement persists regarding the best way to isolate and test for the effects of income inequality, since income is often intertwined with other potentially significant factors, like education.⁵ More recently, the question of what latency period is needed in order to discern the true effects of inequality on health has become a source of debate. Fortunately, these and other concerns have led to improved study designs better able to control for additional and confounding variables. Like earlier studies, these are typically statistical analyses (including meta-analyses) of data on health and social trends that employ regression analysis to control for other variables (i.e. to separate confounders from mediators). Significantly, evidence from a more recent wave of studies lends credence to a positive link between income inequality and rates of particular diseases and social ills in HIC – supporting both the IIH and RIH. A cross-country analysis of the relationship between inequality and self-assessed health by health economists using 2006 data from over 40 wealthy countries found that 'average income in the respondent's age group correlates negatively with better health in high income countries... Being poor relative to people of the same age is thus associated with worse health' (Karlsson et al. 2010, 884) This study also found strong support for the IIH, estimating that 'bringing ... the current income Gini coefficient in the UK down to the Danish level ... is estimated to be associated with an increase in the probability of reporting very good health by 5 percentage points – or almost 11% (since 46.9% of UK respondents report very good health)' (Karlsson et al. 2010, 884). Research on the correlation between high income inequality and medical conditions made more prevalent by stress also reveals significant linkages: a team studying the relationship between income inequality and cardiovascular disease – morbidity as well as risk factors like mean body mass index (BMI), systolic blood pressure, smoking impact ratio, cholesterol levels, and obesity - have found a strong correlation between these in HIC (Kim et al. 2008).

Epidemiologists and medical sociologists who find evidence for the IIH and RIH believe that distributional inequalities affect health through both psychosocial and material pathways. The former includes such things as the 'psychosocially mediated effects of social comparison', which can both follow from and compound the effects of relative material deprivation (Wilkinson and Pickett 2008).⁶ Health, in this view, is highly sensitive to social dominance and social status differentials (Wilkinson 2005b, 184–185). The higher levels of chronic stress experienced by persons of lower status in highly stratified societies, and workplace arrangements in which workers have lower job control, also contribute to negative psychosocial processes believed to induce stress. Psychologists at UCLA comparing data from over 200 published experiments measuring people's cortisol levels in response to different everyday stressors found that the largest increases resulted from 'tasks that included a social-evaluative threat (such as threats to self-esteem or social status)', particularly where they had little control over the outcome of the performance.⁷

By far the most important studies of how income and social status differentials can affect the health of individuals even in the absence of material deprivation are the Whitehall Studies. Whitehall I was a long-term study beginning in 1967 that investigated the incidence and causes of heart disease and certain other chronic illnesses among over 18,000 British civil servants of different ranks, aged 20–64. Instead of finding heart disease highest among the top level/status workers as they expected, researchers found the opposite: men in the lower echelons of the civil service had three times the rate of heart disease of those at the highest level (administrators). This difference remained significant even after controlling for age differences and lifestyle factors like obesity and smoking. A later phase of the study, and a second study (Whitehall II) that included women and studied over 10,000 civil servants aged between 35 and 55, confirmed that low job status predicted a much higher risk of heart disease among workers (Marmot et al. 1991). The studies also found that low status put workers at increased risk for diseases in which stress is often a contributing factor or else a trigger: gastrointestinal diseases, back pain, depression, suicide, and some cancers. About one third of the variance in death rates from heart disease that researchers observed was attributable to lifestyle factors like smoking and obesity; notably, poverty was not thought to be relevant, since all workers were civil servants receiving incomes well above the poverty line (i.e. all at least middle class). The researchers concluded that the greater chronic stress and lowered sense of control experienced by those in nonprofessional jobs accounted for their poorer health (Wilkinson and Pickett 2009, 75). Subsequent studies in other countries have replicated the Whitehall Studies findings, though they sometimes point to different explanations: for example, an 18-year-long Finnish study published in 2008 found that lack of predictability in the workplace – experienced at a higher rate by workers of low social status – was more important than the lack of decision-making autonomy that other studies have pointed to (Väänänen et al. 2008).

Sufficientarians may rightly wonder whether the evidence linking high inequality with poorer health outcomes necessarily implicates distributional inequalities *directly*: perhaps the more proximate causes of harm are the factors that comprise the 'pathways' through which inequality is said to impact health, like status hierarchies or stress from low job control?⁸ But insofar as these features are central, durable aspects of income inequality in capitalist countries, it is disingenuous to separate them off sharply; indeed, it is more accurate to see status hierarchies and low job autonomy as pervasive and constitutive features of the phenomenon of high socioeconomic inequality. This way of viewing the relationship between high economic stratification and its sequelae (status hierarchies, etc.) provides a better view of the interlocking harms of rising socioeconomic inequality; as Marmot (2006) argues, 'it is not position in the hierarchy per se that is the culprit, but

what position in the hierarchy means for what one can do in a given society: the degree of autonomy and social participation' (1306). This takes us squarely back, then, to the pivotal role that inequality in household income (after tax credits and social transfers) plays in individual and social well-being. Granted, sufficientarians might then counter that the psychosocial and behavioral processes through which income inequality is said to affect health could just as easily be triggered by factors other than income inequality: precarious employment and insecure housing, for example, affect individual health in myriad ways. But this argument also does not quite work: contexts of high inequality play a direct role in *activating* these very processes, so it is implausible to try to sharply bifurcate them in this way.

Significant for our discussion, high income inequality is also hypothesized to erode communal bonds and to reduce social trust and social capital via macro psychosocial processes. In a 2010 study of 33 rich and middle-income countries, high income inequality was found to correlate negatively with levels of trust, confirming earlier studies linking inequality with lower trust in US states (Elgar and Aitken 2010). This study, which drew data from 48,641 adults and used a multilevel analysis, concluded that 'income inequality related to less trust after differences in per capital income and sample characteristics were taken into account' (241). As in the case of inequality's effects on health, both psychosocial and neomaterial explanations (which are mutually compatible) have been proffered to explain this connection. According to the former, high income inequality within a society ultimately reduces social capital, which provide the building blocks of trust: more specifically, it 'intensifies social hierarchies, which affects levels of social anxiety and class conflict and erodes social trust and cohesion' (Elgar and Aitken 2010, 241). Indeed, some researchers have suggested that 'a regime of high inequality in which failure becomes more costly' may contribute to risk-averse decision-making when it comes to choosing housing, schooling, and even friends (Neckerman and Torche 2007, 350). Neomaterialist explanations point out that neoliberal economic policies, a feature of highly unequal societies like the US, make it harder for people to access social and healthcare services, thereby negatively impacting individual health (see Coburn 2004). A lack of publicly funded programs in such contexts may also reduce the sense of duty to help care for fellow citizens important to many European social welfare systems.⁹ Among rich countries, social mobility is lowest among those with high inequality (Corak 2004, 2006). Importantly, low social mobility is associated with trust-damaging patterns of class and racial segregation in housing and education: high inequality coupled with low mobility and less public investment in social services gives middle and upper classes reason to try to consolidate their socioeconomic status and buffer themselves from the less fortunate in housing, education, and even employment – further weakening the social capital and communal bonds that underpin social trust.

High income inequality is, finally, associated with other social problems relevant to our assessment of sufficiency's negative thesis. Economically stratified societies have higher reported rates of crime, particularly violent crime: the World Health Organization views this correlation as conclusively supported by numerous studies (CSDH 2008), including a much-cited World Bank study of homicide and robberies that controlled for per capita income and country-specific factors.¹⁰ A Harvard School of Public Health study found that societies with high inequality are also ones in which racial discrimination is more prevalent: across 50 US states, more unequal states had consistently higher rates of

racial discrimination (Wilkinson 2005a, 51). Other studies have shown that women's status, as measured by political participation rates and the gender gap in income, is also lower in more unequal societies (Wilkinson 2005a, 52).

In short, distributional inequalities appear to hold a variety of negative consequences for health and social well-being, at least some of which are irreducible to absolute poverty in the narrowest sense of material scarcity. The precise reasons for these effects, while interesting to explore, are not strictly essential to the critique of the sufficiency doctrine at hand. We may lack consensus regarding inequality's effects and the pathways through which these take hold, but there is ample data suggesting that a context of high distributional inequality contributes to increased morbidity with respect to some diseases; to lower levels of trust, social cohesion, and social mobility; and to higher levels of racism (including racially segregation in housing and education), gender inequality, and crime. That these correlations are significant even when controlling for the variable of income suggests that the bad consequences of high inequality are not strictly reducible to deprivation, as claimed by classic sufficientarianism. Arguably, these findings reduce the reach and relevance of the doctrine insofar as its claims (relating to the negative thesis) can not be credibly extrapolated to real-world contexts of inequality and deprivation.

Classic sufficiency doctrine and data on the harms of inequality

Frankfurt's sufficiency doctrine - more a critique of economic egalitarianism than an independent or full-fledged normative theory of distribution – asserts that economic inequality itself is not a cause for moral concern;¹¹ inequality is instead 'a purely formal characteristic' (Frankfurt 1997) denoting differences in people's shares of assets or resources, and tells us nothing about what really matters, which is people's noncomparative levels of welfare. Far from caring about inequality, we should care about people not having enough for a good life. Frankfurt's central claim, defended over the course of 30 years, is simply that what matters morally is that everyone has sufficient resources to be content but not that they have equal shares of resources or assets: 'If everyone had enough it would be of no moral consequence whether some had more than others'. (1987, 21). Focusing on equality prevents us from discovering what is important to each of us as individuals, and from discerning what we need for our own satisfaction and well-being (Frankfurt 1987, 22–23); in so doing, 'the doctrine of equality contributes to the moral disorientation and shallowness of our time' (Frankfurt 1987, 23).¹² Notice here how Frankfurt's sharp contrast between scarcity/insufficiency and inequality - a core assumption of classic sufficiency theory - is at odds with the now-widely accepted view among poverty researchers that relative and relational harms are partially constitutive of poverty.

Frankfurt supports his rejection of the ideal of equality by observing that an egalitarian distribution 'may fail to maximize aggregate utility' and in some cases 'actually minimizes aggregate utility' (Frankfurt 1987, 30). To illustrate, he asks us to imagine a group of 10 people each of whom requires five units of a vital resource in order to survive. If there are only 40 units available, then an equal distribution of shares (four each) will result in no one surviving – a 'morally unacceptable' solution (Frankfurt 1987, 31). Frankfurt sees this as evincing the falsity of the claim that 'where some people have less than enough, no one should have more than enough': we must not assume that a person who has

more of a needed resource is necessarily better off than someone who has less (31). Both may have too little to survive, and the person who has more may be worse off since their suffering (in the above example, by starvation) may last that much longer. Frankfurt thus generalizes from small-group examples of extreme resource scarcity to the reach the conclusion that distributional inequality in itself is unproblematic: 'It may be morally quite acceptable, accordingly, for some to have more than enough of a certain resource even while others have less than enough of it' (Frankfurt 1987, 32). As proof that insufficiency is what we really care about, he observes that we feel abhorrence when we witness the suffering of those living in poverty; we are moved not by comparative assessments of welfare, but by the sight of people who do not have enough (Frankfurt 1987, 32). When limited to the hypothetical, two- and ten-person scenarios that Frankfurt invokes, his claim that deprivation has no necessary relationship to inequality is, of course, true; in contexts of abundance, unequal distributions do not necessarily give rise to 'more urgent needs or claims', (Frankfurt 1987, 35). But in a context of globalized capitalism, it is undeniably the case that chronic poverty and patterned exploitation are driven by structural social and economic inequalities; even a society as opulent as the Principality of Monaco has exploited guest workers and relatively high income inequality.

That such a context of uniform plenty does not exist would of course not count against Frankfurt's argument if he were simply making a conceptual distinction not intended to bear on real-world debates about welfare and economic policies. But Frankfurt has recently made clear that he believes his analysis is relevant to debates about rising income and wealth insofar as it 'may actually be harmful to regard economic equality as ... a morally important goal', are highly (2015a, xi). Objecting to President Obama's statements expressing concern about rising inequality, Frankfurt (2015a, 1) insists that 'our most fundamental challenge is not the fact that the incomes of Americans are widely unequal. It is, rather, that fact that too many of our people are poor'. This statement suggests a striking lack of awareness of the myriad ways in which actually existing poverty is bound up with the social and economic processes and structures of inequality. Given Frankfurt's intimation of sufficiency doctrine's policy implications, evidence of inequality's durable harms is significant. Not only do these harms apparently impact society as a whole, including people above the threshold of sufficiency; but to the extent that some of inequality's harmful effects seem to be durable and inescapable – notably the impact of high socioeconomic inequality on social mobility, social trust, and cohesion - sufficientarians cannot readily frame these as merely peripheral and transient effects. Not only does this put into question Frankfurt's claim that inequality's harms are purely tangential, but it renders less plausible his proposed remedy: that of pursuing other (noneconomic) values and states of affair directly, without attending to socioeconomic inequalities as such.

As noted earlier, sufficientarians might counter that the purported negative effects of socioeconomic inequality simply track the fact that more people in highly unequal societies fall below the threshold level of welfare. But while it is true that poverty among HIC is higher in those with high inequality (like the US, UK, and Spain) this rebuttal does not quite settle the matter, for as we have seen, there is by now a large body of evidence of the negative health effects of high income inequality even for those living at, or even a bit above, what we would take to be a threshold level of sufficiency. There is also abundant evidence of the negative consequences of high inequality on rich societies *as a whole*: lower overall health outcomes (as measured by mortality rates and average life

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expectancy), higher levels of crime, and lower levels of social trust and social mobility. If these effects are purely contingent and unrelated to inequalities in income and wealth, then sufficientarians still have to explain why the patterns and correlations remain even once confounding factors that could be proxies for poverty are removed. Revealingly, Frankfurt generalizes from his abstract claim (distinguishing inequality from insufficiency) to actually existing societies in his critique of Dworkin's essay, 'Why Liberals Should Care About Equality', where he insists that Dworkin is simply confusing poverty with inequality. The conditions Dworkin laments in the United States of the 1980s – high unemployment and the phenomenon of the working poor – have nothing whatsoever, Frankfurt insists, to do with inequality as such (1987, 33–34). Frankfurt can only reach this conclusion, I suggest, by employing outdated and counterfactual conceptions of poverty and inequality.

The limits of classic sufficiency conceptions of poverty and inequality

In contrast to classic sufficientarians' bifurcated view of deprivation and inequality, poverty is increasingly defined by poverty researchers – including development economists and those who study market economies – as either a consequence of, or as an aspect of structural social and economic inequalities across multiple levels and in many domains.¹³ This emphasis on unequal social relations and structures as drivers of poverty has led many researchers to study what they call 'poverty dynamics' (Addison, Hulme, and Kanbur 2009; Salverda, Nolan, and Smeeding 2009) and to explain poverty as a condition of 'social exclusion'. The relational and relative character of poverty is reflected in the evolution of the measurement of poverty: in developed countries poverty is usually measured using the metric of relative income: specifically, those living on less than 50 percent of the median income of their society are said to be poor (or 60 percent for Europe).¹⁴ The reason for this is that, in developed societies, *rela*tive household income (after tax and transfers) gives a much clearer picture than does absolute income of what individuals have access to, in terms of material resources and opportunities, which activities they can participate in.¹⁵ This suggests that it is difficult to address lack of sufficiency or low levels of absolute welfare without also investigating patterns of social and economic inequality, since the latter are in some sense constitutive of the former. By contrast, Frankfurt, as we saw, sharply disaggregates inequality and deprivation, imagining that it is possible to raise people to a threshold level of adequate welfare without redressing social and economic inequalities. While he allows that egalitarian policies may at times be an efficient means of achieving sufficiency or protecting other sufficientarian values, he denies that this is suggestive of a fundamental relation between inequality and poverty.

Some revised accounts of the sufficiency doctrine allow that the actual *threshold* of sufficiency is sensitive to the relative incomes and assets of others, in a very limited sense. Huseby's (2010) proposal of two sufficiency lines, for example, get at the relative character of people's *assessments* of their well-being; the 'maximal sufficiency threshold' denotes 'a *level of welfare with which a person is content'*, and since people's subjective assessments of their contentedness necessarily enter the picture here, so too must comparisons of others' welfare (181; emphasis in the original). This is because people's contentedness may be affected by substantial perceived gaps in welfare; the issue, for Huseby, is not envy, but

rather that 'the total welfare level, and the way it is distributed, affects the way a person evaluates her own level of welfare, and reasonably so' (Huseby's 2010, 183). This is as close as *classic* sufficientarians come to conceding that relative deprivation or inequality may in some way be related to sufficiency.¹⁶

Classic sufficientarians' view that inequality and poverty are highly distinct and independent phenomena thus appears at odds with the concepts that have evolved within poverty research and studies of inequality. This leaves their criticisms of inequality, which support classic sufficiency doctrine's negative thesis, on shaky grounds. These outdated accounts of poverty and inequality may also be implicated in other vulnerabilities of classic sufficiency theory – for example, the charge that it implicitly privileges benefits to small numbers of people below the utility threshold (provided this raises them to sufficiency level) over comparatively large benefits to many more people just over the threshold. In sum, classic sufficientarians' rejection of inequality as a valid source of moral concern lacks plausibility and practical relevance insofar as it fails to grasp the close interconnections between poverty and inequality that give rise to the durably harmful effects of high socioeconomic inequality on some morally important values and goods. They also seem to assume a conception of deprivation devoid of the many nonmaterial and 'relational/symbolic' dimensions that have become central to poverty research, like humiliation, disrespect, stigma, and social exclusion (see Lister 2004) – all of which are bound up with the relative and relational inequalities that classic sufficientarians deem unimportant. Relying on counterfactual hypothetical contrasts between different groups of rich people to support their claim that inequality as such lacks moral salience (Benbaji 2005; Frankfurt 1987), classic sufficientarians miss the corrosive and possibly intrinsically bad effects of concrete (large) inequalities in wealth and income on some aspects individual and social well-being, such as self-respect and social trust.

That Frankfurt continues to assert that economic inequality per se is morally irrelevant thus suggests two things: that he denies the interconnectedness of socioeconomic inequalities and poverty; and that he is still beholden to an outdated view of poverty as wholly reducible to material deprivation. Not only do current definitions of poverty - as distinct from explanations of what causes it - foreground relative social inequalities that manifest as social exclusion and marginalization (Addison, Hulme, and Kanbur 2004; Lister 2009), but there is growing consensus that in developing countries, both chronic and episodic material poverty are caused and sustained by durable inequalities in income and assets. If poverty researchers and development economists are right about these matters, then Frankfurt's continued insistence in the importance to public policy of grasping 'the inherent moral innocence of economic inequality' (1987, vii) is at best puzzling. But flawed classic sufficiency arguments may unfortunately provide fuel for positions that reject widely distributive policies. While they need not oppose policies that promote economic equality where these are the best strategy for bringing people up to the threshold of sufficiency, Frankfurt himself has equivocated on the matter of whether this is a sound strategy to pursue: in 'Equality as a Moral Ideal', he rejects a blanket policy of prioritizing transfers to the poor on the grounds that this may not make much difference to the number of persons who can reach sufficiency level, and thus may fail to improve their condition (1987, 32). Accordingly, he also disputes the idea that 'no one should have more than enough while anyone has less of them than enough' because, he reasons, it is simply not true that 'giving resources to people who have less

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than enough *necessarily* means giving resources to people who need them, and therefore, making those people better off' (Frankfurt 1987, 31–32; my emphasis). While not strictly speaking untrue, this sentiment risks undercutting arguments for a steeply graduated or progressive income tax and systems of poverty-sensitive tax transfers.

Classic sufficientarians of course also reject redistributive measures and transfers above the sufficiency threshold on the grounds that comparative differences in social and economic welfare above the threshold level are morally insignificant (though some revised approaches, such as Shields 2012, discussed below, abandon this view). Yet pace Frankfurt, sociological and epidemiological data on inequality's harms suggests that small reductions in income inequality – via social welfare programs, income subsidies, or higher taxes on the wealthy – may indeed have an impact on the prevalence of certain health and social problems. Sufficientarians can of course endorse transfers to those with low welfare (however this is defined); but their belief that 'benefits to people are of special moral importance only if these people are badly off' (Benbaji 2005, 316) cannot readily justify these (at least on sufficiency grounds) in cases of wider social harms triggered by high inequality, such as the erosion of social trust. Redressing these harms in affluent countries will require more than bringing people up to a threshold of sufficiency however that threshold is defined (single or multiple), and wherever it is set. Arguably, it will require sustained policies targeting structural and systemic inequalities in key domains of education, housing, employment, and health.

How do revised sufficientarian approaches respond to the challenges posed by inequality?

In the years since Frankfurt first set out his sufficiency doctrine, several philosophers have proposed friendly revisions to redress some of its deficiencies. Several of these are attempts to correct classic sufficientarianism's blind spots with respect to inequality; I outline the main such attempts below and offer a brief assessment of each.

A. One approach aims to make sufficiency more sensitive to relevant inequalities by manipulating the threshold of sufficiency with respect to welfare. Huseby (2010), for example, has proposed the use of two thresholds, minimal and maximal – the latter corresponding to Frankfurt's 'contentedness' level. In Huseby's view, absolute priority should go to those who fall below the maximal sufficiency level, and within that, strong priority goes to those below the minimal sufficiency threshold (184). Priority would in turn be given to large benefits to the greatest number of people 'not sufficiently well off'. Benbaji has advanced a nonabsolutist, 'multilevel doctrine of sufficiency' to enable more discriminating decisions about transfers. Using multiple levels of sufficiency/utility thresholds, he reasons, we would have more utility comparisons and so could better discern when it is important to benefit some over others. It will sometimes be more urgent, for Utilitarian reasons, to benefit those who are not the most badly off, especially if they are more numerous and the benefits to them are larger and so of greater impact (Benbaji 2005, 321; 2006). Crisp proposes that the sufficiency principle is best guided by gauging the point at which an impartial yet compassionate spectator would cease to feel compassion: those living below the threshold of welfare that would trigger the compassion of the impartial spectator

deserve absolute priority in the distribution of benefits, taking 'into account both size of benefits and numbers of recipients' (Crisp 2003, 757). This ensures that priority is accorded to the worse off only provided that they are *truly badly off*, since 'where the individual in question has enough, compassion seems to give out' (2003, 761). Crisp thus reformulates the sufficiency principle: 'compassion for any being B is appropriate up to the point at which B has a level of welfare such that B can live a life which is sufficiently good' (2003, 762).

The move to two or more thresholds may mitigate the controversy over just where to set the level of sufficiency, and allow us to consider the significance of benefits to those living above a bare minimum level of welfare. Yet both multithreshold versions and Crisp's compassion-guided principle of sufficiency retain the focus on *having enough* resources or sufficient welfare, yet fail to see these states as partially dependent (at least in some domains) on the relative amounts that others have. Huseby's approach accords importance to comparative assessments of welfare but only because of the way these affect the relevant threshold of contentedness (2010, 183). Like the original doctrine, these revised conceptions fail to consider the ways in which structural socioeconomic inequalities tracking hierarchies based on class, race, and other social categories can and do prevent members of disadvantaged groups from achieving sufficiency and well-being in many domains.

- B. Relatedly, Shields (2012) has argued that the sufficiency threshold 'seems to mark a shift in the nature of our reasons to benefit people further', reflecting 'the different distributive criteria that apply to those who have secured enough and those who have not' (108). Shields argues that his 'shift thesis' - that is, 'once people have secured enough there is a discontinuity in the rate of change of the marginal weight of our reasons to benefit them further' (108) - renders sufficiency theory compatible with many different distributional schemes, including variants of egalitarianism above the sufficiency threshold. While sufficientarianism thus reconceived via the shift thesis retains the doctrine's signature emphasis on redressing absolute deprivation, then, it could conceivably allow (once sufficiency is achieved) distributive schemes above the threshold that support egalitarian principles. But what if alleviating absolute deprivation or low welfare requires policies that target — upfront — the reduction of income and wealth inequalities? As we saw earlier, there is growing consensus among poverty researchers that large inequalities in wealth, assets, and income ineluctably drive poverty dynamics in both low income and high income societies. Shields's shift thesis, while leaving open the possibility of pursuing egalitarian principles above the threshold, follows classic sufficiency theorists in assuming that there is bright line demarcating between insufficiency/poverty from socioeconomic distributional inequalities. This limits the reach of Shields's otherwise insightful reformulated account, for it directs us to redress absolute low welfare without special regard to the material and structural inequalities that are partially constitutive of poverty.
- C. Relational or democratic egalitarians like Anderson and Satz emphasize the ways that certain relative inequalities among people (and groups) can undermine important values like self-respect and equal citizenship. While democratic egalitarians endorse sufficiency over egalitarianism, they see sufficiency thresholds as requiring relational and comparative assessments between individuals and social groups in order to

determine which policies and distributive patterns support citizens' 'equal standing in civil society' (Anderson 2007, 615). For Satz, any standard of sufficiency is highly sensitive to, and dependent on, relative inequalities:

What is sufficient to serve as a social minimum is inevitably conditioned by the resources that others have and what they can do with those resources. When some people have a lot more, this may effect what others need to take part in community life. If this is so, then sufficiency is not logically distinct from equality in Rawlsian theory. (Satz 2007, 639)

Satz (2010) flatly rejects Frankfurt's claim that sufficiency is essentially noncomparative except in a very limited sense, and outlines several ways in which disparities and relative comparisons may be instrumentally important to sufficiency. Importantly, she also argues that 'distributional considerations matter noninstrumentally for the way we draw and understand the sufficiency threshold' (65). This is especially so for 'positional goods ... whose value to its possessor depends on how much of that good the possessor has relative to others' (66). In the case of such goods, 'the more a good is positional and competitive, the more necessary it is to be egalitarian, even if one's central focus is on assuring sufficiency' (66). Crucially, the importance of many positional goods to people's equal dignity and status as citizens shows that 'adequacy for citizenship has egalitarian dimensions' (Satz 2007, 639); sufficiency or Satz's preferred term, 'adequacy' – is not achieved, for example, when students receive seeminally adequate educational resources and instruction within a context of racial and class segregation. Democratic citizenship, including full participation in the political and economic life of the society, simply cannot be achieved in such a segregated setting. Adequacy will therefore require that all children have access to educational resources that will give them equality of opportunity as citizens, in social and institutional environments that are also conducive to this goal.

Satz's analysis shows why classic sufficientarians' attempts to establish thresholds of sufficiency in a nonrelational, noncomparative manner necessarily fails: 'sufficiency looks like it is to be defined in terms of an absolute level, but once we realize that this level is determined relationally, the sharp contrast between this concept and considerations of how others are doing is eroded' (2010, 67). Her analysis thus ultimately 'undercuts the sharp divide philosophers often draw between sufficiency and equality' (2007, 638); in so doing, it lends support to my argument that the sufficiency principle cannot ground distributive justice because it ignores the deeply relational character of poverty and the extent to which it reflects multiple structural inequalities. Satz's demonstration that 'comparative and relational elements' (2007, 635) are intrinsic to assessments of adequacy, and that in practice, educational adequacy will usually require substantially egalitarian distributions in the domain of education, would seem to undermine classic sufficiency's rejection of inequality as a matter of moral concern. Yet curiously, Satz holds fast to sufficiency's negative thesis insofar as she views her notion of adequacy as far preferable to egalitarian principles (including equality of opportunity perspectives), largely out of concerns that the latter would lead to 'leveling down' of educational resources disadvantageous to the development of talents. One effect of this is, as Macleod (2010) observes, is that Satz's reformulated sufficientarianism applied to education would still permit significant (and unacceptable) inequalities in educational opportunities – the result of parents' discretionary spending on education, school fundraising activities, and so on. I will not enter this debate here, except to note that Satz's rejection of egalitarian principles suggests she too may not accord sufficient weight to the persistent effects of structural socioeconomic inequalities on the well-being of disadvantaged and subordinated social groups. These are harms that approaches based on notions of sufficiency or adequacy – or Satz's hybrid relational egalitarian-sufficiency view – seem ill-equipped to redress.

D. Finally, some sufficientarians have explicitly shifted away from unidimensional measures of sufficiency – such as money or income (Frankfurt 1987), or welfare in the sense of contentedness (Huseby 2010) - towards more multidimensional measures of well-being. These measures, which are more in line with the ways that researchers in poverty and development studies currently conceptualize and measure deprivation, are more sensitive to the importance of relative inequalities than are classic sufficiency views. One such revised position recently advanced by Axelsen and Nielsen centers on the idea of 'sufficientarianism understood as freedom from duress' (2015, 406). Influenced by the capabilities approach, this view posits that sufficiency is best understood in terms of people's freedom 'from pressure against succeeding in each of the central areas [of human life] - as opposed to being adequately well-off on one aggregated scale (such as utility or welfare)' (407). Importantly, Axelsen and Nielsen define these 'central areas' broadly: 'capabilities related to basic needs such as basic health, decent housing, adeguate education ... but also more complex aspects that make up capabilities which are in the fundamental interest of all human beings in a social setting such as rational development and critical thought, respectful social relations, and political freedoms' (409; emphasis in the original).

When sufficiency is conceived in terms of people's capabilities to succeed in certain key areas related to basic needs or fundamental social and political goods, a wide range of inequalities become salient. Similar to Satz's analysis of 'positional goods', Axelsen and Nielsen argue that many capabilities – such as 'political freedoms ... societal status, and the social basis of self-respect' – have 'strong positional aspects' and inequalities in these domains 'will, in themselves, generate insufficiencies' (2015, 423). Additionally,

sometimes inequalities in capabilities that are not directly positional, such as the capability for good health or housing will affect the distribution of political or social capabilities. Thus, non-positional capabilities may be interweaved with positional capabilities and, thus, generate insufficiencies *indirectly*. (423; emphasis in the original)

In such cases, 'a person's relative capability level determines their absolute level, and thus, dictates whether they are sufficiently well-off' (Nielsen and Axelsen 2017, 57). Wherever people face 'duress' vis à vis their capabilities in key areas, justice demands that particular distributional remedies or 'different distributional patterns' (Axelsen and Nielsen 2015, 407) be applied. Large discrepancies in material goods and opportunities, in particular, 'influence one's absolute level of freedom and, thus, make one's freedom insufficient in absolute terms' (407). In practical terms, reversing this unfreedom would likely require a range of redistributive measures aimed at removing 'significant pressure(s) against succeeding' (424) in crucial areas of life. While they do not discuss structural and systemic inequalities – such as a

racialized/racially unequal education system, or a gendered labor market – it seems clear that these would need redress insofar as they hamper people's capabilities in key areas.

Axelsen and Nielsen's reformulated sufficientarianism greatly expands the scope of inequalities deemed relevant to an assessment of whether sufficiency demands have been met. They thus successfully deflect the criticism that the sufficiency principle invariably ignores the significance of relative inequalities above a minimum threshold for human well-being. But like relational or democratic egalitarians, they adhere to the doctrine's denial that inequalities *as such* are significant. Yet for all practical purposes, Axelsen and Nielsen's reformulated sufficientarianism shows that a commitment to sufficiency in people's central capabilities will require persistent and concerted attention to the distributional inequalities that underlie core capability deprivation or duress. Their insistence that seemingly significant distributive inequalities 'are actually positionally determined insufficiencies' (420) arguably obscures the social relations of power and sub-ordination that are constitutive of socioeconomic inequalities.

Conclusion

Growing evidence of inequality's negative effects gives philosophers good reason to consider anew the question of how much socioeconomic inequality is morally acceptable in a fair and just society. This project is hindered by classic sufficientarians' denial of the structural, relational, and relative dimensions of deprivation. While some recent sufficientarians have followed democratic egalitarians in acknowledging the need for relative and comparative assessments in determining sufficiency or adequacy, their vision is limited by a continued commitment to an oversharp bifurcation of poverty and structural inequality. This article has raised objections to several problematic assumptions made by proponents of classic sufficiency theory with respect to both poverty and inequality. I have argued that their claim that inequality in itself is not morally troubling (and so should not be a focus of social policy) is driven by poorly supported assumptions: the belief that increases in the income or wealth of some individuals typically have no effect on the well-being of others; the view that poverty or low welfare is unconnected to patterns of social and economic inequality; and the supposition that achieving adequate welfare or resources for all is in principle and practice compatible with significant inequity in the distribution of those resources. Initially presented as logical propositions, these claims morph into unsubstantiated (and implausible) claims about socioeconomic inequality in contemporary societies.

I have tried to show how sufficientarians' outdated conceptions of poverty and inequality and their lack of attention to structural, durable inequalities, hampers efforts to make the sufficiency doctrine relevant to real-world contexts of deprivation and subordination. Were sufficientarians to acknowledge the persistently corrosive effects of some relative social and economic inequalities, and the complex intertwining of poverty and inequality, it is unclear whether they would continue to stress the importance of affirming that inequality as such is not morally concerning. Sufficientarians' claim that inequality per se is not a problem falsely generalizes from hypothetical but implausible scenarios of abstract inequality; such examples cannot ground their broader claim that lack of sufficiency is, strictly speaking, unrelated to inequality, or that inequality's seeming harms are caused by — and reducible to — material deprivation or too-low welfare. Upon closer examination, it turns out that poverty and inequality are tightly connected, both within and between countries (particularly North–South inequality, which I have not taken up here). The implications of these different understandings of inequality and its relation to poverty is no small matter, for they point, potentially, to dramatically different policy approaches to these problems. As Arneson has argued (2002, 174), the assumption that what is important is simply 'having enough' – and not reducing inequality – stretches far beyond the philosophical arguments of sufficiency (and priority) proponents: 'In a rough-and-ready way, the sufficientarian approach conforms to the antipoverty focus of the welfare policies adopted by modern governments.'

While my discussion has not challenged sufficientarians' rejection of economic egalitarianism, much less vindicated egalitarian principles, my analysis echoes many of the reasons – such as fairness, dignity and social self-respect, and unequal power – that egalitarian liberals like Scanlon and O'Neill and proponents of democratic equality like Anderson give for objecting to social and economic inequality (Anderson 1999; O'Neill 2008; Scanlon 2002). Research on inequality's harms does not vindicate the intrinsic value of egalitarian distribution, of course, but it does point to an array of instrumental, as well as apparently intrinsic, harms of high socioeconomic inequality on health and aspects of social well-being. It is far from clear, then, that policies to reduce economic inequality are justifiable only insofar as they protect other values (like democracy). Nor is it obvious that the inequalities sufficientarians deem (instrumentally) relevant can be satisfactorily redressed via policies that aim only to alleviate absolute low welfare, without regard to systemic and structural social inequalities tracking gender, racial, and class hierarchies.

Notes

- See the March 2013 statement from the Royal College of Physicians, the Royal College of Surgeons, the Royal College of General Practitioners, and 18 other organizations, discussed in Torjesen (2013) and Ritterman (2011).
- Marmot (2006), principle investigator in the Whitehall Studies and former Chair of the World Health Organisation's Commission on Social Determinants of Health, says 'there is a social gradient in health in individuals who are not poor: the higher the social position, the better the health' (4).
- 3. The 'biological stress pathways' include 'the sympatho-adrenomedullary axis and the hypothalamic-pituitary-adrenal axis' (Marmot 2006, 1306).
- 4. For a discussion of the problems with studies that claim to show that average life expectancy correlates strongly with distributional income inequality, see Sreenivasan 2009, 47–49.
- 5. Studies that examine the impact of income on health sometimes control for the effects of education and occupational class, yet still find a significant relationship. A study of Nordic countries found a social gradient of health (tracking income) 'strongest in Finland and Norway, and weakest in Denmark, with Sweden taking an intermediate position' and noted that 'differences in the income gradient between countries were only reduced to a small extent after controlling for education and occupational class' (Huijts, Eikemo, and Skalická 2010, 1969).
- 6. The strong correlation was not observed in low-income countries.
- 7. See research by S. Dickerson and M. Kemeny, as discussed in Wilkinson and Pickett 2009, 38.
- 8. Economist Deaton (2003, 152), for example, argues that rank can be protective of health in contexts where income inequality is insignificant, like prisons and the military.

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- 9. For an account of how rising inequality erodes the public trust and reciprocity necessary to support collective social programs, see Lenard (2010).
- 10. This study, which looked at 39 countries, concluded that 'crime rates and inequality are positively correlated within countries, and, particularly, between countries, and this correlation reflects causation from inequality to crime rates, even after controlling for other crime determinants' (Fajnzylber, Lederman, and Loayza 2002, 1).
- 11. The priority view (see Parfit 2002), which I do not take up here for reasons of space, makes a slightly different version of this claim namely, that those who are worse off have an absolute level of welfare that is too low.
- 12. He reiterates this position in On Inequality (2015a).
- 13. See, for example, Salverda, Nolan, and Smeeding 2009, especially Part V, 'The Dynamics of Inequality.'
- 14. See OECD (n.d.) statistics on 'Income Distribution and Poverty: Poverty Rate (50% of Median Income).'
- 15. Some economists who study poverty consider consumption a better measure than disposable income; other possibilities include imputing 'income from durables, owner-occupied housing, and non-cash benefits' (Nolan and Marx 2009, 320).
- 16. These criticisms do not apply to Axelsen and Nielsen (2015) and Nielsen and Axelsen (2017) capabilities-approach-inspired version of sufficiency theory.

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