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Social Space and Field as Constructs for Evaluating Social Inclusion

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Abstract

This paper addresses the role of evaluation in promoting social inclusion, an important component of social justice, with a focus on exclusion resulting from physical disability. We argue that the evaluation of social exclusion and social inclusion requires evaluators not only to reconsider their role and methods, but also to revise the fundamental constructs through which they study how programs and other interventions generate change at the individual, group, community, and societal levels. Drawing on field theory, we suggest that social inclusion processes can be understood and assessed in terms of the expansion of individuals' life space, which consists of social, political, cultural, and resource dimensions. The paper illustrates these constructs with data from a participative action evaluation of a pilot program for providing services to people with disabilities in Israel. Our aim in developing these constructs is to provide not only tools for assessment, but also ways of thinking that may enable socially excluded people to be more active agents of inclusion. © 2015 Wiley Periodicals, Inc., and the American Evaluation Association.

Social exclusion and social inclusion have increasingly been used to address the idea of social justice as ensuring access for and protection of disadvantaged groups (Riddell, 2009). Social exclusion can be defined as a multidimensional, dynamic socioeconomic process that deprives

particular individuals and groups of participation in the key activities and benefits of the society in which they live (Hills, Le Grand, & Pichaud, 2002). These groups are usually associated with economic (for example, poverty), racial, ethnic, religious, physical (for example, disability), or other differences that mark them off from the mainstream.

The Social Exclusion Knowledge Network (SEKN) of the World Health Organization (WHO) Commission on Social Determinants of Health (Popay et al., 2008) argued for a *relational* (versus *static*) understanding of social exclusion as a process that deprives people of participation as full and valued members of society. Social exclusion is driven by unequal power relationships interacting across economic, political, social, and cultural dimensions and at the individual, household, group, community, country, and global levels. These processes generate a continuum of inclusion/exclusion characterized by unequal access to resources, capabilities, and rights. In other words, exclusion cannot be understood simply in terms of access to material and social benefits, but also in terms of the social relationships in which those benefits are embedded.

Evaluating Social Exclusion/Inclusion as a “Field” Phenomenon

Mertens (2008) applied the social justice theory of ethics to the relationship between evaluation and social inclusion. She argued that the ethical responsibility of evaluators goes beyond avoiding harm and treating every person with respect. Rather, evaluators’ ethical responsibility means giving precedence, or at least equal weight, to the voices of groups who may not have sufficient power for accurate representation and enabling excluded populations to take an active role as agents in social change (Mertens, 2008). We agree with Mertens, but argue that the relational nature of social exclusion/inclusion requires the development of innovative methods for assessing as well as for fostering inclusion. We propose that *social space* and *field theory* provide constructs for capturing relational processes of social exclusion/inclusion with a high level of fidelity. Furthermore, we suggest these constructs can help excluded populations act as more effective agents of their own inclusion.

Social space and field theory were central to the work of the social psychologist Kurt Lewin (1936) and the sociologist Pierre Bourdieu (1993; Bourdieu & Wacquant, 1992). Both men built their innovative social science on the philosophy of Ernst Cassirer (see Friedman, 2011), who made a distinction between a *substantialist* and a *relational* logic of reality (Cassirer, 1961). *Substantialism* holds that reality is composed of concrete, independent *things* that can be observed through our senses. *Relationalism*, on the other hand, holds that reality is best grasped as an *ordering* of elements of perception through a mental *process* of construction that gives them intelligibility and meaning.

According to this approach, space is not a physical concept, but rather a mental creation that can be used to *think relationally* about making order from any given set of elements. Lewin and Bourdieu adopted this idea of space as an essential construct for theorizing about the social world.

They borrowed the concept of *field* from physics as a way of accounting for causality in social space. Spaces are fields because they exert force on and shape the behavior of the people and groups that comprise them. Fields are both phenomenal and structural, linking the internal world of people with the external social world through an ongoing shaping process. Fields can be conceptualized as configurations of social space characterized by four dimensions: (a) the individual and collective *actors* who constitute the field; (b) the relationships among these actors, with a particular focus on relative power; (c) the shared meanings that make the field intelligible and hold it together; and (d) the “rules of the game” that govern action within it (Fligstein & McAdam, 2011; Friedman, 2011).

Processes of social exclusion/inclusion occur when (a) fields are comprised of groups that are marked by difference, (b) the relationships among these groups are characterized by inequality, (c) the meanings attributed to difference are characterized by stigma, and (d) the rules of the game prevent particular groups from fully participating in society. As a field phenomenon, social exclusion/inclusion is generated by social norms that shape the behavior of people and as cognitive structures that become internalized and influence how people perceive themselves and the world around them. Every time people act according to these cognitive structures, they reinforce the field and the behaviors and attitudes it shapes.

Viewing social exclusion/inclusion as field phenomena implies that programs aimed at inclusion ought to lead to observable changes in the field over time. Furthermore, observing field changes means assessing changes in the way excluded individuals perceive their worlds and the social norms that shape these perceptions. Lewin’s concept of *life space* provides a very useful conceptual tool for assessing these processes. The life space is composed of all the perceived elements that determine the behavior of an individual at any given moment. It reflects the total range of behaviors that are possible and not possible for that person in a given situation (Lewin, 1936). Each change in a person’s life space means either expanding or contracting the *space of free movement* (Lewin, 1936), which Lewin defined as the range of what is possible for a person at any given moment.

We argue that processes of social exclusion/inclusion can be observed by mapping changes in the life space of individuals. This kind of mapping can provide evaluators with a tool for assessing the degree to which programs generate social inclusion among their recipients. We came to this insight through reflection on a participative stakeholder evaluation that we carried out with an innovative program for people with disabilities. In the following sections, we describe the program, the evaluation, and how the

evaluation findings can be used to conceptualize social inclusion as change in the life space.

Evaluating a Program for an Excluded Population

Pathways to the Community was established and funded by Israel Unlimited, a strategic partnership between Joint Distribution Committee (JDC)–Israel, the government of Israel, and the Ruderman Family Foundation, for development of services to promote independent living and integration of adults with disabilities into the community. The program is aimed at developing an innovative approach to providing services in small cities and rural areas to people with disabilities, ages 21–65, who have not utilized rehabilitation and/or employment services. The Action Research Center for Social Justice at the Yezreel Valley College conducted a formative *action evaluation* (Rothman, 2012) of the program during its two-year pilot stage in order to generate a model that could be adopted and disseminated by the Ministry of Welfare.

The pilot took place in a small city whose inhabitants are Arab-Palestinian citizens of Israel. The partners included the municipal government, the Ministry of Welfare, JDC-Israel, and a local nongovernmental organization (NGO) that administered the program and offered its Senior Citizen Center as a meeting facility. The first stage of the evaluation was to involve all the stakeholders in setting program goals and developing a logic model. This stage began with two workshops introducing participatory practice to potential candidates who had never been involved in such processes. In the course of the workshops, it became clear that the families of the candidates comprised a separate stakeholder group, and a series of workshops was held especially with them.

After the workshops, members of all the stakeholder groups ($N=34$)¹ responded to a written, open questionnaire asking (a) what their definitions of success (goals) were for the proposed program, (b) *why* these goals were important to them personally, (c) how these goals could be achieved in practice, and (d) what their dreams were for this program. These questionnaires were analyzed separately for each stakeholder group to first identify program goals as perceived by each group. The 34 respondents then met in two separate groups, each of which included members of all the stakeholder groups, to talk together about why this program was important to them (Friedman, Rothman, & Withers, 2006). Next, each stakeholder group met separately to agree on its goals for the program. Representatives of all the stakeholder groups then met to define common program goals, develop a unified program logic model, and plan action. The planning stage culminated with a one-day conference held at the college, during which the logic model was presented to its sponsors, and members of all the stakeholder groups reflected on the participative process.

The program began with 12 “members,” with the goal of reaching 25 within two years. It involved twice-weekly meetings at the Senior Citizen Center as well as services received at home and in the community according to an individual plan developed together with the Program Coordinator. An “Operations Committee” representing all the stakeholder groups monitored the program’s implementation, providing support and advice to the Coordinator.

A first round of formative evaluation was carried out in August 2013. The evaluation focused on (a) qualitatively assessing progress toward achievement of program goals, (b) changes that had occurred, or not occurred, in the lives of each member since joining the program, (c) the program dimensions that contributed to these changes, (d) the participative process and its effects, and (e) recruitment of new members. The evaluation team conducted in-depth interviews with 26 stakeholders (9 program participants, 6 family members, 5 professionals/sponsors, and 6 student volunteers). The interview data were analyzed and presented separately to three main stakeholder groups: the participants, the families, and the professionals/sponsors. The separate meetings enabled stakeholders to review the evaluators’ analysis of *their* data before it was seen by other stakeholders and reports were written.

Assessing Social Inclusion as an Expansion of the Life Space

Evaluation findings pointed to significant positive changes in the lives of most of the program members. However, it is not the goal of this paper to evaluate the program’s effectiveness or to evaluate the theory of change implicit in the logic model. Rather, our goal is to use these findings (1) to illustrate how processes of social inclusion can be conceptualized as an expansion of the life space and (2) to suggest how evaluators might use this construct as an evaluation tool.

To integrate concepts of life space and exclusion, we have merged our conceptualization of field as actors, relationships, meanings, and rules of the game (Friedman, 2011) with the SEKH Model of social exclusion as comprised of social, political, cultural, and economic dimensions (Popay et al., 2008). In doing so, we have merged the actors and relationships components into a single, social dimension. We have also added the economic dimension, which we have reframed as the *resource* dimension so as to account for both material and nonmaterial resources.

The *social* dimension of the life space refers to a sense of belonging based on the extent, nature, and strength of an individual’s relationships (Friedman, 2011). Prior to the program, the social dimension was characterized by a very narrow circle of people with whom they had contact—mostly their families—and a set of relationships heavily determined by hierarchy and dependence. This change was reflected in the wide range of new

relationships that the members established, especially in meeting other people with disabilities:

Member: Everyone here has problems like me. . . . It's very useful hearing others talk about their difficulties and problems. It helps learning from each other. The members of the group . . . give me hope and I like when they talk. . . . It makes me happy.

The sense of belonging was reflected in the fact that they described themselves as “members,” the program as a “family,” and their relationships like that of “brothers and sisters.” Through the program, members also created new, more egalitarian relationships with service providers, researchers, and students—all of which contributed to an expansion of the life space.

The participatory evaluation process, which emphasized partnership, played a role in decreasing the hierarchical relationship between members, their families, and the service providers:

A family member: Of course I feel like a partner. . . . We families really need this space for expressing ourselves. . . . What was really meaningful was that there is a person with disabilities who feels like he is not worth anything and suddenly you give him a real place and that he is really able. It's a wonderful feeling.

The process also put them into relationships of partnership with people from completely new walks of life, such as academic researchers and students.

The most significant finding was that participation in the program was associated with an expansion of the social dimension beyond the program itself:

Member: (The program) was new for me and a little bit difficult, but I was able to overcome (the difficulties). . . . I began to visit friends. . . . I got over the isolation. I was always sitting home alone and wouldn't leave home. I wouldn't visit friends because I was in a wheelchair and there was no accessibility. But today I visit my friends despite the wheelchair and lack of accessibility.

This quotation reflects not only the expansion of the person's social circle but also the psychological nature of the change. While the physical conditions themselves did not change, they no longer kept the person at home and in isolation.

The *resource* dimension refers to access to material and nonmaterial resources such as money, services, knowledge, and social capital. Prior to the program, resources were theoretically available to people with disabilities in the community, but they were not utilized due to lack of awareness, accessibility, or motivation. Even if the community was offering these

resources, they were nonexistent in the life space of these people. The program created a space that was rich in information, knowledge, skill development, and other resources. The members talked about how they benefited from specific courses or activities. By raising awareness, defining needs, and making resources more accessible, the program played an important role in expanding the life space of the members. Furthermore, the individual plan functioned as a tool through which members could reflect on and expand their life space.

The *cultural* dimension refers to the dominant meanings—values, norms, and attitudes—that a particular society attributes to difference and diversity. In this case, the strong negative stigma about disability had instilled powerful feelings of shame:

Member: My world expanded. . . . After I became ill, I was either at home or in the hospital. I didn't go out and didn't do anything. Today I go out to the coffee shop, shopping, and to do other things that I hadn't dared to do beforehand. . . . Today I have a lot more courage.

It was not the lack of physical accessibility that kept the person at home, but rather the fear of being seen with a disability. The courage came from the fact that this person no longer saw his disability as a source of shame. Participation in the program led members to see themselves beyond their disability:

Member: I am happy. I found interesting things and feel as if I have found myself here. . . . I feel as if I am important, that I help others, that I am worthwhile. . . . I have gotten to something.

Member: I feel as if I have returned to myself. I work and I have started to learn English here. I return home feeling that I do something, important things. I tell my wife what I do here.

The life spaces of these people expanded to open up regions of their selves that were either new or had been inaccessible to them. Rather than feeling shame about their disability, they now see themselves as “important” and “worthwhile.”

Finally, the *political* dimension refers to the “rules of the game” governing power and the distribution of opportunity to participate in public life, to express desires, and to have interests taken into account. Given the stigma attached to disability, the rules of the game in this particular community were that people with disability should stay out of the public eye. However, change in the political dimension was evident in interactions between members and their families:

Member: At home, they say I have become difficult. . . . I am always talking and saying what I want.

Family member: Before the program, she had requests but always with tears in her eyes. Now it's different. . . . She asks for things but with a good feeling and she is more satisfied.

Family member: Now she feels important. She feels that she can express her opinion, speak and tell. . . . I feel she is stronger, changed.

As these quotes indicate, prior to the program the tacit rules of their life space led the people with disabilities to avoid asking for help because they questioned the legitimacy of their needs. Furthermore, they felt they had to keep their opinions to themselves. Afterwards, they increasingly began to express and advocate for what they wanted. They felt they had things to say and more freely voiced their opinions. This expansion of the life space was experienced as a change in the person's "world" and that of their families.

Another significant political change concerned accessibility. One of the members explained that, prior to the program, if she were invited to events and tried to attend, but faced an inaccessible barrier along the way (for example, stairs), she would simply return home feeling ashamed. However, after participating in the program, she changed her behavior and waited there until the hosts found a way of enabling her to attend. In her words, "they should feel ashamed, not me!"

The larger field in which these people lived, internalized in their life space, literally kept them "in their place" of exclusion (Friedman & Sykes, 2012). In all of these examples from the political dimension, the change was first psychological, in the sense that a social norm was no longer internalized and accepted by the person. In rejecting these exclusionary norms, they expanded their life space and new possibilities opened up for them. In doing so, they acted as agents of their own inclusion. Furthermore, these changes in the life space had the potential for changing the larger field since others had to respond to these demands for legitimacy and inclusion.

These dimensions can be assessed and mapped onto a visual representation of the life space. Each dimension represents a continuum. For

Figure 3.1. Mapping the Life Space

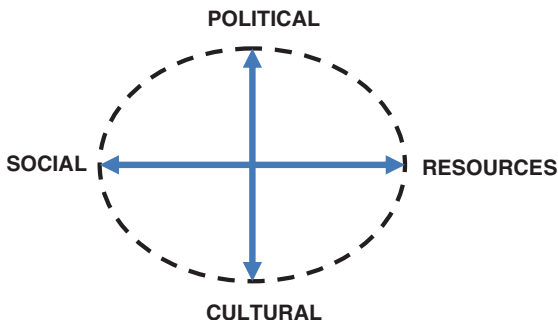
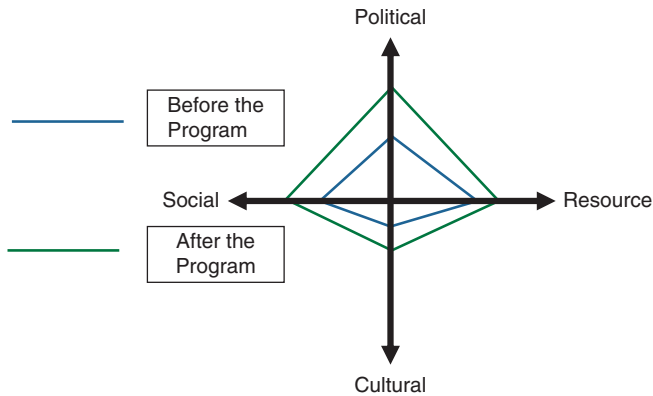


Figure 3.2. Mapping Inclusion as Change in the Life Space

example, the social dimension would extend from few highly unequal relationships and a weak sense of belonging to a large number of equal relationships with a strong sense of belonging. The resource dimension would extend from few resources to a large number and variety of resources. The cultural dimension would extend from a high degree of internalized stigma to a lack of internalized stigma. The political dimension would extend from many and powerful rules of the game that limit participation to rules that promote inclusion.

Specific indicators could be developed for each dimension in which scales could be created to make them roughly measurable. While having little significance in absolute terms, quantification would enable people with disabilities to track changes in their life space over time (see Figure 3.2). It would facilitate the development of instruments for evaluating the effectiveness of programs in promoting social inclusion among a particular group of people. Furthermore, such instruments could be used to help people with disabilities, as well as other excluded populations, become more conscious of their life space and how to expand it. Clearly, an instrument for assessing the life space of individuals would be incomplete without complementary instruments for assessing and challenging the structural relationships that generate exclusion. Nevertheless, a self-assessment instrument for reflection, learning, and action planning would enhance the ability of excluded people to become more effective agents of their own inclusion.

Note

1. People with disabilities (12), family members (10), JDC-Israel (2), Ministry of Welfare (3), Municipal Welfare Bureau (2), Senior Citizens NGO (4).

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