RESEARCH

A Continuum Deconstructed: Exploring how Day-care Staff's Discursive Practices Construct Children as Possibly Impaired

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Based on interviews and fieldwork in Norwegian day-care institutions, I examine day-care staffs' descriptions of children suspected of, but not (yet) diagnosed as, having impairments. The main research question is: how do children become constructed as possibly impaired and positioned outside the realm of a perceived normality in Norwegian day-care centres? Understanding impairment as discursively constructed, I explore how day-care staffs' portrayals of three young boys construct them as deviant and possibly impaired by drawing on cultural values and ideas about children and childhood. I use a continuum concept (Davis 1995) to visualize and conceptualise the fluid and blurry areas between the binaries, disabled/non-disabled and normal/abnormal, and explore how day-care staffs' statements deconstruct or cut-off the continuum, thus, (re)produce categories and position some children as deviating from what is perceived and accepted as normal.

Keywords: Early childhood education and care; Inclusion; Special needs; Critical Disability Studies; Norwegian day-care institutions

Introduction

Norwegian day-care institutions are considered central arenas for inclusion processes, and should offer all children, no matter their individual ability or background, good developmental and learning opportunities (St. Meld. 18, 2010–2011)—they are, or should be, inclusive arenas without social/environmental barriers. At the same time, day-care institutions are perceived as key arenas for the discovery of children with special needs and impairments (St. Meld. 16, 2006–2007, St. Meld. 18, 2010–2011, Mørland 2008). Currently, in Norway, there is an extreme growth in practices that monitor, test, and evaluate day-care children's skills and abilities (Østrem, et al. 2009) to detect deviations from a pre-established norm. Diagnosing children, or categorising children as having special needs, is seen as a crucial first step in order to create equal opportunities and inclusion within the educational system. Somewhat simplified, the idea is that if one discovers and defines children's 'deviations,' the institutions can adjust and better serve the child. One could say that these types of inclusion measures rely on the logic: 'Changing what is wrong with society, […] implies finding out what is "wrong" with the people in it' (Grue 2010, 169). In other words, in order for day-care institutions to take appropriate measures and become inclusive, staff members are expected to discover and report to external authorities[1] their concerns about a child that may have special needs. In this article however, day-care children's potential impairments or special needs are not considered to be *discovered*, but rather *constructed*. My overarching research question is: How do children become constructed as possibly impaired and positioned outside the realm of a perceived normality in Norwegian day-care centres?

The starting point of my exploration is that impairment is a discursive construction (Hughes & Paterson 1997) rather than value-neutral description. I draw on post-structural approaches that destabilize notions of impairment and individuals' inherent qualities, and apply a notion of 'deconstructing a continuum' (Davis 1995) in order to conceptualize how binary categories are constructed. As such, I aim to disrupt 'the apparent stability of distinct and bounded categories' (Shildrick 2012, 40). Influenced by both Critical Disability Studies and Social Studies of Children and Childhood,[2] I use somewhat unconventional theoretical positions on children, disability/impairment, and day-care settings in order to ignite new and alternative understandings.

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[1] For example, the Educational and Psychological Counselling Service (PPT).
[2] Also known as Sociology of Childhood.

Based on interviews and short-term fieldwork in four day-care units, the analysis illustrates how day-care staffs' discursive practices construct some children as possibly impaired, and how this construction is based on culturally informed ideas about what constitutes a normal child and a proper childhood.

Theoretical position

I am influenced by post-structural perspectives on disability/impairment, in particular the growing field of Critical Disability Studies (Goodley 2012, Shildrick 2012, Meekosha & Shuttleworth 2009, Tremain 2005). In addition, I draw on Social Studies of Children and Childhood (James & Prout 1997, Qvortrup, et al. 1994, Jenks 1982), an interdisciplinary research field that emerged in the 1980s and that grew rapidly in (Northern) Europe. Social Studies of Children and Childhood established itself by challenging previous understandings of children and childhood as natural and universal phenomena (James & Prout 1997). The field contains diverse approaches that focus on childhood as a social structure, children's agency, participation, and post-structural orientations (Alanen 2001). With an emphasis on children and childhood as socially and culturally constructed, the field provides a platform for critically examining established notions and dominant cultural ideas and norms (Jenks 1982). There is not much research that combines Social Studies of Children and Childhood with Disability approaches. However, calls to connect the fields have been made since the late 1990s (Priestley 1998, Shakespeare & Watson 1998, Davis 2012), and the combination has among other things emphasised the voices of disabled children (Davis & Watson 2001, 2002) and reconceptualised the notion of the disabled child (Goodley & Runswick-Cole 2010, 2011).

In this article, the fields are interconnected as the analysis explores how cultural and local ideas of children and childhood intersect with constructions of possible impairments. I highlight how ideas around what constitutes a normal child are socially and culturally informed (rather than universal or natural) and explore how some children become positioned outside the realm of a perceived normality.

Starting out with the notion that concepts such as children, normality, and impairment are socially and discursively constructed invites a critical stance towards taken-for-granted definitions and understandings (cf. Hacking 1999). Instead of seeing language and categories as neutral communications about natural patterns (or discoveries), I regard a category or concept as one representation among many possible and I regard these representations to construct what they describe (Henriques et al. 1998). Representations make sense and become meaningful in discourses. Discourses are regulated systems of statements which produce acceptable ways to talk, write, and behave (Foucault 1999, Hall 2001). In regard to impairment, as discursively constructed, I agree with Tremain (2002) and 'hold that there are no phenomena or states of affairs that exist independently of the historically and culturally specific language-games in which we understand them and with which we represent them' (Tremain 2002, 32). I also consider it necessary to overcome binary ways of thinking and refrain from approaches that promote 'a conceptual distinction between "impairment" as a functional limitation and "disability" as a socially generated system of discrimination' (Meekosha & Shuttleworth 2009, 50). I thus draw on perspectives that challenge disability binaries and adhere to an understanding of impairment as a discursive construction (Hughes & Paterson 1997) and the impaired body as a social body (Meekosha & Shuttleworth 2009). Following, impairment categories (e.g. Attention Deficit Hyperactivity Disorder, Autism Spectrum Disorder, Emotional and Behavioural Disorder) are not seen as describing natural phenomena, but as constructing what they attempt to describe (Goodley 2011). And the notion of (special) needs is here considered a cultural construct relative to values and judgements about children and childhood (Woodhead 1997). In other words, I favour fluidity of all categories; including disability, impairment, special needs, non-disabled, and normality.

I apply Davis' claim that '[t]he construction of disability is based on a deconstruction of a continuum' (1995, 11) and his critique of binary thinking as a way to visualize and conceptualise the blurred and fluid areas between what is perceived as 'disability' (or impairment) and 'non-disability' or 'normal'. I interpret deconstruction to be based on how a continuum is divided or cut off, thus constructing separate (oppositional) categories. Emphasising how ways of being can be seen as located on a continuum, illustrates how categories of disabled/impaired and non-disabled are constructions, and, they reveal the boundary separating those who count as disabled/impaired and non-disabled as not self-evident. As such, I use the concept of a continuum in order to destabilize categorical, binary thinking.

My starting point is the recognition of commonality between disabled and non-disabled—represented as a fluid continuum. Underlining the concept of a continuum, I find it crucial to commit to a perspective of instability and fluidity in understanding identities and self. As such, I regard disability, impairment, and ability as inherently unstable and fluid categories, akin to the instability of the concept of identity (Davis 2002) and the post-structuralist contention that the self is a discursive and contingent construct. The point is that parameters of all forms of embodiment are uncertain, dependent, and unsettled (Shildrick 2012). In this sense, the self is not an autonomous stable core, but rather the self-shifts, depending on context and social relations. This instability implies a lack of a clear distinction between disabled/impaired and non-disabled forms of embodiment.

In contrast, the *deconstruction* of a continuum implicates a different (modernistic) way of thinking, where individuals can be measured and compared to certain standards and categorised in reference to an ideal norm. For example, certain standards of functioning (e.g. how well one can see, walk, hear) cut off a continuum of what is perceived as normal and establish a separate category of disabled/impaired (Davis 1995). As the human body and mind is made quantifiable, an individual can be seen as falling beneath a standard and positioned in a category other than the perceived norm. I

use the idea of a continuum being 'cut off' when a boundary is (re) established to position people in a category other than the norm. In this article, I analyse how some children's manners or behaviours are described in ways that construct them as deviating and as possibly impaired.

Method and analysis

The method for this study included semi-structured interviews and participant observation in four Norwegian day-care units in three different locations[3] (Hammersley & Atkinson 2007, Kvale & Brinkmann 2009). I conducted one individual interview with each of the 16 staff members working in the units. The interviews lasted for about one hour, and were recorded and later transcribed. I also conducted participant-observation for three weeks in each unit, following the same staff members during their everyday activities (for a total of three months fieldwork during 2009/2011). I took field notes about daily day-care life and about conversations with or among staff members. The field notes were predominately used to provide understanding of the day-care context. All statements and excerpts in this article are from the recorded and transcribed interviews.

The methods used aimed at producing information about the staff members' perceptions and assumptions *about* children, while the children themselves were not studied. This was a productive approach since the study's overall focus was directed at staff members' discussions, reflections, descriptions, and practices as constructing undiagnosed children as possibly having special needs or impairments. The methods and focus of study are in line with the aforementioned theoretical positions of disability/impairment and children and childhood as discursively constructed phenomena.

The staff members in the study were given written and oral information about the study beforehand, and written consent was collected from the participants. Parents of children in the units I attended were given written information about the study. The names of staff and children have been changed in order to maintain anonymity. Much consideration has been given to the ethical responsibility of treating the informants with respect when approaching the data with a critical perspective. As such, I have chosen to focus on statements in the data that represent common day-care discourses without tying them to particular staff members or professions. In order to respect the children described in the study, I stress an understanding of the data presented as descriptions and valuations, not facts or truths about a child. The study was approved by the Norwegian Social Science Data services (NSD).

The staff members in this study worked with children 1–5 years of age. Since Norwegian day-care staffs are encouraged in national guidelines to discover possible deviations and report children to external experts, I knew beforehand that it is common in day-cares that some children are seen as possibly having impairment or special needs. The interviews gave staff members an opportunity to reflect and share their thoughts about a common topic. I invited them to tell everyday stories, to describe their concerns about a child, when and in what situations they first started to wonder about a child, and why they found something worrying. I encouraged as many details and nuances as possible from concrete situations in order to avoid merely producing general statements and opinions about children (Staunæs & Søndergaard 2006).

When analysing staff member's statements and reflections during interviews, I focused on *how* staff members discuss, describe, and legitimize their concerns for a particular child. In line with the theoretical perspectives, the concept of 'discourse' frames the analytical exploration of data in this study. Positioned within a post-structural paradigm, this article recognizes the constitutive force of day-care staff's discursive practices, and the analysis focused on how discursive practices produce social realities (Davies & Harré 2007).

During the initial analytical process, I noticed similarities in the ways staff members' described children and identified patterns and key issues. Staff presented a wide range of child conduct and characteristics to explain their concerns about a possible impairment or special needs. I then explored further, the manner in which a child's conduct was described. The analysis illuminated an overarching pattern in how what was talked about as problematic conduct was not unusual—this conduct could also be considered common child conduct. During the analysis I noticed that it was the degree or way of performing 'common' child behaviour that led to staff seeing it as a deviation. As such I looked at constitutive properties of words and phrases used by the staff and how they constructed a divide between what was considered normal and deviating, thus speaking into existence a deviation (cf. Graham 2005). I then searched the staff's statements for clues of discourses that could provide validity and meaning to their statements (Wetherell 1998). In other words, I tried to illuminate the discursive premises on which the descriptions were based (Søndergaard 2002).

Based on the initial process, the analysis explores the manner in which day-care staff members discursively deconstruct a continuum of various ways of being a child and position some children along binary lines of normal and not-normal. In order to analyse this matter in-depth, I focus on one particular key issue, which is over-activity and restlessness.

Day-care staffs' descriptions and constructions

In this study, concern for a child being impaired or having special needs often emerged as unknown but suspected: 'We do not know what it is, but we sort of know that there is something', said one staff member. Staff members told me

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[3] The data was produced as part of the author's PhD thesis (Franck 2014) at the Norwegian University of Science and Technology.

they frequently were the first ones to express concern about a child's development, discussing a child's conduct with the parents and bringing in external experts to observe and refer children for assessment.

The group of staff members participating in this study were heterogeneous and made up of women (predominately) and men with different educational and professional backgrounds. The statements used in this article were made mostly by pre-school teachers, teacher assistants, and special educators working as permanent staff. The following analysis explores descriptions made by the day-care staff regarding three boys in two different day-care centres. All three boys had attended day-care since they were 1–2 years, as is common in Norway. The boys had all been referred to and observed by external experts, but had not received any diagnose at the time of this study. I present descriptions of these particular boys because the statements made about them exemplify what I found to be common discursive practices among day-care staff, and the manner in which the discursive practices concerning these boys focused on one particular type of behaviour (active child conduct), made it possible to illustrate the deconstruction of a continuum.

It is important to note that the descriptions of the children are those of staff members. Descriptions are in the analysis interpreted as *valuations* of a child's conduct—as the concept of normality is not a neutral observation, but a valuation of what is desirable and average (Turmel 2008). As such, descriptions in this article do not claim to reveal any sort of truth about the children themselves.

The following analysis focuses on how the staff's descriptions contribute to the construction of the boys' active conduct as being abnormal. With the starting point of seeing children's behaviour as fluid and shifting along a continuum, the analysis illustrates how staff members' discursive practices cut off the continuum and position a child within binary categories; opposite to what is deemed normal and desirable. The analysis is divided in three parts focusing on discursive practices that: construct active conduct as not-normal, describe behaviour as decontextualized and presumed to come from the inside, and use comparison to constitute boundaries.

Active conduct: Too much of a 'good' thing

Being active is considered positive and valuable for day-care children in Norway. One can say that the ideal child is active, participating, self-initiating, and curious. Free-play and playing outside are important activities in Norwegian day-care centres, where children are expected to run around, preferably in nature (Nilsen 2008). There are, however, some implicit expectations within the day-care about how to be active 'the right way', which is highly context-dependent (Franck 2014, Nilsen 2000). Play as an activity is also a focus for adults' assessment and categorisation (Goodley & Runswick-Cole 2010). In this study staff members would frequently explain their suspicions of children having impairment or special needs with reference to behaviour perceived as excessively active and 'urolig'. The Norwegian term 'urolig' can be translated as busy or restless (the opposite of 'urolig' is calm). These expressions were used by the staff to explain why they suspected a child to be impaired. For instance, when describing 'Thomas' (five years old) one staff member said in the interview:

> He moves all the time. (Yes)[4] He is actually never—this one is never still. (Oh no. No…). No, he has an incredibly high activity. (So, it's…) So, he, well he, well, it isn't entirely true what I'm saying, he is of course still, he is still, because what he likes best is to play board-games. (Oh yes). And when we play, he sits still. But it has to go very fast. (Okay). It must not become boring. It has to go very fast. [...] Yes, but one notices he is restless, because it is almost like you get restless by sitting next to him, if you know what I mean. (Yes, I understand, it's a bit contagious). Yes, it's contagious. (Oh yes, yes). It is a bit like—it is very like… a tension when he is part of something. [...] Like full speed ahead (Yes). [...] He has incredibly high activity, and it has to go fast…

During the interview this was how a staff member described a child's active behaviour as part of a suspicion and concern there might be 'something wrong'. On one hand, being active is common among both children and adults, however, when describing Thomas, his 'incredibly high activity' and 'restlessness' is emphasised. In other words, behaviour that is perceived as normal is considered to be performed at an extreme level (Graham 2008). Describing his active conduct in such excessive terms discursively positions him as deviating from what is expected and accepted as normal. The staff member does not need to explain explicitly why incredibly active and restless conduct is not considered normal, since it evokes a relevant context for interpretation (cf. Wetherell 1998). A relevant context of interpretation is a dominating discourse around the need for day-care children in Norway to be 'properly' active (Franck 2014), which entails (among other things) to not wander, to adjust activity level according to the situation, and to self-regulate. A normal child in the Nordic context is in many ways constructed as a child who fulfils expectations of the institutional setting (Alasuutari, Markström, & Vallberg-Roth 2014, Franck & Nilsen 2015). Thus, a phrase such as 'incredibly high activity' can be interpreted within this institutional setting to imply something out of the ordinary/deviating. As such, a continuum of ways in which children perform active conduct becomes segmented following a discursive practice that constitutes some ways (or levels) of being active as abnormal and unwanted. This was not exclusive for describing Thomas, or for describing active conduct.

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[4] The statements in parentheses are from the interviewer. All interview extracts were translated to English by the author.

As mentioned there was a pattern in this study in how day-care staff positioned children outside the realm of normality by emphasising a child doing either *too little* or *too much* of what was otherwise considered normal behaviour, for example being too dependent or too independent, or not sufficiently engaged in social interaction (For further study see: Franck 2014).

Generalizations were also common in the study. In the above extract for example, the staff member claims that Thomas moves *all* the time, and is *never* still, but later she says that he *can* sit still when he is doing what he likes best, playing board-games. One way of interpreting her statements is that she is modifying her initial generalization by contextualising the behaviour. However, she continues by explaining the child's conduct as restless ('urolig'), which can be interpreted as signalling something 'abnormal'. Restlessness was a commonly used term among staff members in this study when describing behaviour deemed to be deviating.

In the following I will elaborate on how describing restlessness as an individual trait represents another key issue in the way staff members discursively deconstructed a continuum and (re)produced static categories marking a child with a fixed identity as not normal.

Coming from the inside? Decontextualized behaviour and fixed individual traits

Understanding children's conduct as influenced by contextual factors such as social relations, activities, and the day-care environment was not uncommon for the staff members in this study. However, when a child was perceived as displaying unwanted behaviour in several settings, the behaviour was at times presented less as a relational phenomenon, and more as an individual characteristic. In order to explore the discursive practices that position children as abnormal, the following analysis focuses on descriptions of behaviours and its cause as an individual trait.

Peter was five years old when I interviewed the staff members in his day-care unit. When describing Peter, his restlessness was the main topic:

> Staff: This is a boy who is, he is incredibly restless. Yes. (Yes. Like physically?). Yes. (Cannot sit still and…?). A bit un-concentrated, but—yes, he is, has something—it comes from within, I think, his restlessness. (Yes). It seems like it. And very impulsive (Yes) […] [I] have now gone through different issues, but … well—it can be—he can, maybe it has to do with…. Does he have ADHD? Really, or is it just that he becomes so…he might get restless because he maybe can't, that is, what should I say? One is supposed to perform, and if you are a bit frightened you might not be able to do what you are supposed to, so one can get restless because of that too. (Yes). I do not know what comes [first]. (I see). But then it seems like the restlessness comes from inside. It seems like; whatever we do it gets like that.

The staff member starts by telling how incredibly restless Peter is and also a bit distracted. Once again 'incredibly' is used to mark the behaviour as out of the ordinary. The staff member describes how she has reflected on Peters' conduct ('been through different issues') from questioning whether he has ADHD to whether he is frightened and nervous to perform. The staff member's ambivalence reflects how the child is positioned in a grey-area, characterised by uncertainty and suspicion of impairment or special needs. Explaining restlessness as caused by being nervous to 'not be able to do what you are supposed to' relates the conduct to a demanding context. This can be associated to the long holistic tradition in Nordic day-care centres to focus on relations and the socio-environmental aspects in pedagogics (Kjørholt and Qvortrup 2012). As such, that part of the day-care staff's account can be interpreted in line with a social and relational understanding of children's behaviour, which does not necessarily position a child as abnormal. The child's behaviour can still be interpreted as fluid and unstable, depending on context and as part of a continuum.

In contrast, the staff member in the excerpt also questions whether Peter has ADHD and states that the restlessness comes from inside, which promotes an understanding of the behaviour as the result of an individual characteristic or trait, and disregards the context in which the child is restless (Armstrong 1996). His restlessness is then not regarded as depending on context (as she says 'whatever we do it gets like that') or understood in relation to Peter's environment and the people he is with. The manner in which the staff member refers to the restlessness as coming from inside the child can be seen as a way of 'psychologising' children and childhood matters (Dahlberg & Lenz Taguchi 1994). A discursive practice that locates restlessness inside a child presumes that a child's behaviour can produce knowledge about these inherent traits or characteristics. While there is, as mentioned, a strong holistic tradition in the day-care field, there are also strong ties to traditional developmental psychology and notions of skills and abilities being inherent in the individual (Franck 2013, Dahlberg & Lenz Taguchi 1994). However, Valery Walkerdine (among others) has demonstrated that developmental psychology's scientific object—the 'developing child'—is a not a pre-given object, but rather a product of a discursive enterprise and premised on locating certain capacities within the child (1984, 154). To describe Peter, or other children, as being 'restless from the inside' makes sense when an individual is understood as a fixed subject with certain inherent abilities and an inner (psychological) world (Taylor 1989). A focus on individual traits may be said to reproduce the individualized approach that is common among professionals when assessing children (Davis 2012). It also adheres to and reproduces dominating understandings of impairment in the Norwegian day-care field as an individual loss, damage, or deviation (e.g. Mørland 2008).

While Peter had not been classified as having any impairment (yet), parts of the staff members' description can be related to a presumed discovery of an individual inherent deviation. As such, it is no longer the behaviour alone that is deemed inappropriate or unwanted, the individual child itself has become an object of concern.

'Not like the rest of us.' Constructing boundaries thru comparison

Interrelated to children perceived as being overly active and 'urolig', the need to be calm was also stressed by day-care staff in the data material. For instance, one staff member described how David's conduct was a cause for concern by elaborating on how he did not rest properly or find peace as she expressed it. David was 3.5 years old at the time:

> And then he is really active (laughs a bit). No, but … well, he can relax and enjoy himself (yes) but not like the rest of us, we can lay totally relaxed, some kids lie down without moving, but I still have never seen him lay completely still on a mattress and truly find peace… [During resting-time] Well, then each of them has their own mattress and it isn't—his butt goes up and down….

The staff member describes David as different from other children as he is not completely still during the day-care centre's resting-time, while other children do not move while resting. A description of the conduct 'his butt goes up and down' is given a different meaning when communicated in light of other children who 'lie down without moving'. Comparing David to other children in the unit is common when assessing day-care children's abilities in term of age and development. Comparing children at particular ages is a key conceptual device for assessment and creating norms (Rose 1999), from which normality would be considered the average (Turmel 2008). When describing David's conduct as the opposite of other children (perceived as normal), it positions him as deviating from what is considered normal. In other words, what could be visualised as a continuum of individual variations among children becomes divided in discursive practices that use comparison to impose a standard or norm for performance, thus producing binary categories.

The staff expressed concern for the children who were not calm in reference to the children's personal well-being. In other words, they did not complain about David disturbing other children or disobeying the adults, they worried that he may not thrive without the ability to find peace and be calm. The Norwegian term 'kose seg' was often used, which means to snuggle, to be at ease, and to relax. A focus on being calm and cosy can be understood in connection to the Norwegian day-care settings' long tradition of creating a home-like environment, emphasising intimacy, warmth, and safety (Nilsen 2000, Korsvold 1998). When, for example, the staff wanted the other child, Thomas, to take a break from running around, they did not command him to sit still. Instead they told him to: 'Sit down and snuggle up for a while' (in Norwegian: '*sett deg ned og kos deg litt nå*'). So it is not arbitrary which conduct becomes target for evaluation by comparison, rather it is part of central cultural values and presumed needs of a child. However, there is no exact standard for how a child is supposed to perform active and calm conduct. By comparing and contrasting what are considered important abilities and behaviours, a boundary becomes discursively constructed and a child may be seen as deviating from other children.

At the same time, a position as deviating can be negotiable, as with David—staff members and parents did not agree. For example, one staff member told me that David's father had spoken up in a meeting, saying: '*No, now we must calm down. He is three years old—he is an active boy.*' The use of the term active by the father can be understood as re-introducing a commonality, thus repositioning David as a normal three-year-old boy. His argument is strengthened with an emphasis on David as a boy, since boys are commonly perceived as highly active. The father thus discursively reconstructs a continuum between David and other boys the same age.

Concluding thoughts

In this article I have critically reflected on the very first steps in a process by which an increasing number of day-care children are labelled as having special needs. Evaluating children in order to discover 'what is wrong' with a child may be initiated in order to provide a child with support and to create inclusive environments. However, this entails a form of exclusion since a child becomes positioned as deviating from a perceived normality. In order to challenge practices that exclude by labelling and categorising children, I have argued against the idea that deviations are *discovered* in children, and set out to illustrate how deviations from normality are *constructed* instead. While children are increasingly measured, monitored and evaluated in the Norwegian day-care setting, this article turns the focus over to the institution that measures, monitors, and evaluates.

Based on theoretical perspectives that understand impairment as a discursive construction I aimed to illustrate the unstable and fluid area between children considered normal and those viewed as possibly impaired. The recognition of commonality between disabled and non-disabled in the article was represented as a fluid continuum. Furthermore, the analysis explored how the continuum becomes divided or cut off into separate categories when day-care staff members discursively construct boundaries in order to position some children as possibly impaired. The staff members' descriptions presented in the analysis illustrate how impairment can be constructed discursively within discourses that promote certain ideas, values, and norms of what constitutes a normal child and acceptable child conduct in Norwegian day-care settings. With a focal point on children's active conduct viewed as deviating, the analysis draws attention to day-care discourses that position children outside the realm of normality and (re)produce binary categories. The analysis draws attention to how active conduct is valued in Norwegian day-cares, but evokes concern when not performed in a

particular manner. Some ways of being active are perceived as extreme and inappropriate, and become interpreted by the staff as demonstrative of something inherently wrong with a child. The staff member's descriptions of children in the analysis are understood in light of the day-care context with its institutional demands, expectations, norms, and values, which influence what child conduct is noticed and on what terms it is evaluated. I have also drawn attention to how certain dominating discourses in the day-care context enable and possibly encourage the staff to position children within binary categories.

In order to explore these issues, I drew from interdisciplinary academic fields (Social Studies of Children and Childhood and Critical Disability Studies) that criticize dominant understandings and perspectives regarding children and disability. Central writings in both fields move beyond dualistic thinking and highlight the importance of understanding how such divisions are made (e.g. Prout 2005, Shildrick 2012). While some scholars have, as mentioned, brought together perspectives from both fields in previous literature, I regard there to be a lack of literature and research that approach the day-care setting with a combination of these fields.

The aim of the article is not to simply change how people relate to day-care children with possible impairments, but rather to transform the underlying assumptions of some children as inherently impaired. Illustrating the manner in which a continuum is cut off in order to construct and position children along binary lines will hopefully enable others to identify similar discursive practices and possibly reconstruct a continuum from which all children's behaviour can be understood as shifting and fluid, dependent on context and social relations.

Competing Interests
The author has no competing interests to declare.

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