DOING NORMALCY: ATTRACTIVE INTERACTIONS FOR TEENAGE BOYS WITH DISABILITIES

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ABSTRACT: *The contemporary expansion of diagnoses is a well-known phenomenon. What is rarely investigated, however, are people's subtle ways of deconstructing medical stigmas in everyday interactions. This article, based on an ethnographic study of a recreational activity for teenage boys with diverse diagnoses and disabilities (for instance, Asperger's syndrome, ADHD, and cerebral pares), shows how a de-stigmatizing "normalcy" may be interactively and situationally maintained in the periphery of a society's health care system. The studied activity takes place in a garage setting and is built around repair work on an old American car. The practical and mundane elements of this activity, analyzed thematically as "garage work", "the jargon", "doing nothing", and "a coffee ritual", proved to supply significant occasions for deconstructing stigmatized selves in undramatic ways.*

To be identified as disabled in a Western welfare state no longer has to mean isolation and exclusion. Despite lingering discrimination, there is now a wide range of professionals and organizations aimed at assisting people with disabilities, as well as alleviating their pains and problems. Social support in itself however, may give rise to identity troubles (Robinson 1993, p. 20-21). People with disabilities may feel stuck in a "disability world", constantly typified as special and difficult, or as subjects for sympathy and help, but rarely treated as just ordinary persons with different personalities and talents (Sellerberg 2007).

The proliferation of diagnoses is characteristic for modern times (Horwitz 2002, Hallerstedt 2006). An increasing amount of human troubles, formerly unnamed or completely unknown, have now been diagnosed and subjected to specialized treatment. As Erving Goffman (1963/1990) showed, such processes may easily involve stigmatizations. Researchers of our day, though, point out that stigmatizations are also openly challenged by the stigmatized themselves (Scotch 1989). Numerous associations for patients and their family members are devoted to fighting prejudices and overthrowing stigmas in relation to a diagnosis or disability, thereby providing arenas for proud identities (Scotch 1989; Sellerberg 1993, 1999). Less attended to, however, are people's discreet or inconspicuous ways of deconstructing stigmas beyond societal macro-struggles. Researchers have not devoted much interest to the art of "being ordinary" within a mundane disability frame rather than a political one. In such a context, how do people "do" normalcy?

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This article uses a constructionist and interactionist approach to analyze a set of face-to-face interactions from an ethnographic study of a popular recreational activity in southern Sweden for a group of teenage boys with diverse behaviourally-oriented diagnoses. With the help of observational data, my purpose is to show how through this activity, individuals with disabilities construct "ordinary selves" (Gubrium & Holstein 1995), and how the participants interactively construct a break from diagnostically based typifications. Through undertaking practical tasks and engaging in a traditionally masculine jargon, and by a loose yet structured atmosphere, medical stigmas are sidestepped in a semi-private and non-institutional context. The article demonstrates the attractiveness of these interactions not merely in terms of a "story of normalization" (Robinson 1993), but more as a "pocket" of normalcy in social practice.

Medical Stigmas and Normalization

From the very beginning, research on stigmas has been coupled with research on how people downplay or resist stigmas. In Erving Goffman's (1963/1990) classic study this is clear in his analysis of stigmatized persons' techniques of "passing" and information control, as well as their "covering" in relation to others. It is also evident in Goffman's concept of "courtesy stigma", that is, stigma accepted by persons affiliated with the stigmatized who thereby seem to "carry a burden that is not 'really' theirs", as Goffman (1963/1990, p. 44) put it. Family members of a person with disability may feel stigmatized themselves, for example parents of children with autism (Gray 1993), mothers of retarded children (Birenbaum 1970), or mothers of traumatically brain-damaged children (Wästerfors 1999). Goffman notes that persons with courtesy stigma provide "a model of 'normalization'," since they can show how far others may go in treating the stigmatized person as if he had no stigma.

That problems faced by stigmatized persons may "spread out in waves" (Goffman 1963/1990, p. 43) and that this may affect the social life around the stigmatized is not only evident when it comes to medical stigmas; stigmas linked to convicted criminals or "outcasts" (Braithwaite 1989, p. 55) are another striking example. Disintegrative shaming may stigmatize and exclude in general, no matter what specific ground a community is referring to and putting into operation.

Equally evident is that opposition towards stigmatization may also spread out in waves, so that parents, spouses, other relatives and friends can be mobilized in societal struggles for better treatment and attitudes that are more tolerant (Scotch 1989; Sellerberg 1993). A growing number of associations, founded on diagnostic and medical labels, are in this sense challenging the notion of hegemonic and one-sidedly negative stigmatization. An illness, disability or diagnosis does not have to be treated as a taint or burden (Hahn & Belt 2004); it can also bring about closer social ties (Rehm & Bradley 2005, p. 818), as well as lay the ground for social movements and collective identities (Scotch 1989; Sellerberg 1993, 1999). Although the very designation of some behaviour as "disability" may be looked upon as normalization per se (since it may give the individual a legitimate excuse for his or her behaviour, see Haber & Smith 1971), these associations advocate and demonstrate a twist. Now it is society, and not its seemingly

deviant individuals, that should become "normalized", that is, adapted to various illnesses, disabilities and symptoms. A social problem is to a greater extent localized in society, rather than among the disabled (cf. Loseke 2003).

This growing research interest in resistance towards medical stigma represents a break from the sociological tradition. Whereas the conventional focus has been on stigmatized persons as more or less passive recipients of an identity mark and the management techniques they use to cope with it (Goffman 1963/1990; Davis 1961; Kaiser *et al.* 1985; Gramling & Forsyth 1987, p. 401), a more actor-oriented picture is taking shape. One might say that in a late-modern context, it would be misleading to investigate medical stigmas solely in Goffman's spirit, that is, in terms of how persons with physical disabilities manage appearances among others (Kaiser *et al.* 1985), or how a "strained interaction" (Davis 1961) between stigmatized and others is managed. Medical stigmas are received and disavowed reflexively, and the stigmatized themselves seem to be conducting a Goffmanian analysis, as well as discussing its moral and political implications (Davis 1999). "Normal doesn't really exist anywhere, anyhow," a mother to a medically fragile and developmentally delayed child said (Rehm & Bradley 2005, p. 814), "it's just your perception of what your life is." Such empirical examples, however, does not necessarily suggest a post-modern argument saying that there are no stigmas, nor any hegemonic normalcy, but just free-floating images of various 'deviances' or 'normalities' that individuals might want (or not want) to identify with. Rather, it suggests that stigmatized own analyses and practices must be taken into account, and that completely inescapable and all-embracing stigmatizations cannot be presumed.

Not as evident in the contemporary rise in disability studies (Rehm & Bradley 2005) are the small-scale and mundane ways of de-dramatizing or simply neglecting stigma. In Carole A. Robinson's (1993, p. 9) words, "the dominant societal story" for individuals and families living with chronic conditions is still one of deviance and difficulty, but their preferred story is an alternative story of normalization (or, to use the vocabulary of criminology, a story of neutralization; cf. Sykes and Matza 1957). Whereas the former story is told in media and politics (also, when it is objected to), the latter is more hidden, told in subtle ways and in privacy. In interviews with people who manage their own or their family members' chronic illnesses, Robinson found that they minimized the personal and social significance of the illness whereas "ordinariness" was maximized. To do what other people do and to be treated like everyone else proved to be essential, as was to communicate that you have a normal life. We are normal people with normal days, the interviewees said, even though we have some special problems. Robinson also found that in this social construction, health care professionals were far from helpful. Professionals were seen as uncooperative, engaged in "servicing your illness" rather than in helping you get on with your life (Robinson 1993, p. 20), sometimes even engaged in "sabotage of doing normal things" (Robinson 1993, p. 21). Professionals tend to adhere to the dominant societal story of problems and deviance, Robinson argues, not responding to the interviewees' ideal of normalization.

As a constructivist continuation of Goffmanian analyses, Robinson's study represents an analytic expansion. "A normal-appearing round of life" is not only seen as an adaptation or a way of managing a stigma (Birenbaum 1970, p. 197), but as a creative and everyday production. Indeed, one could question if such an expansion is valid and attainable for all chronic conditions (Rehm & Bradley 2005), but one could also ask if it can be drawn out even further. Apart from life stories in research interviews, are there any other versions of accomplishing normalcy not yet studied, within or close to a disability world? If so, what does it mean, more specifically, to "be" ordinary? In this article I will answer these questions through an ethnographic analysis of a practically accomplished normalcy, carried out non-conspicuously and without drama in the margin of a society's health care system.

During a study of a recreational activity in southern Sweden for a group of teenage boys with diverse behaviourally-oriented diagnoses, "normalcy" emerged as a significant theme. Here, the data did not include episodes of managing stigma in relation to "normals" (as in Goffman 1963/1990), nor were there any stories of defining and minimizing one's medical problems through a normalcy lens (as in Robinson 1993). Instead, there were locally situated interactions producing normalcy without any explicit reference to a disease, diagnosis, disability or the like. Rather than constructing a "new normal" (Clarke-Steffen 1997), or not bothering to seem normal according to other people's standards (Rehm & Bradley 2005, p. 817), this recreational activity offered ordinariness in practice. Taking place in and around a garage of a motor association in the countryside, and built around repair work on a shabby old American car, the activity at first sight looked quite special, particularly when compared to conventional therapeutic programs. A more detailed analysis of the activity's interactions gave another impression. Although the activity is arranged by adults connected to habilitation and therapy (which could have given it a more official and instrumental frame), it proved to represent an informal "pocket" of normalcy in the lives of these young boys.

There are several contextual reasons behind the existence of this "pocket". First, the recreational activity was strikingly non-institutional. Although two of the leaders are employed at the regional health care department for children with disabilities (from which the activity also gets some financial support), there were no visible connections to official health care, and the project was started together with middle-aged, male members of a local motor association that had no previous link to boys with disabilities. (The Swedish term for some of the members' lifestyle would be *raggare*, originally meaning "youths who ride about in old American cars", and the activity was jokingly named after this: "Projekt Raggarbil".) Its official purpose was not to offer habilitation or therapy but to simply give these boys a leisure activity in which they could feel 'at home', despite their respective problems. No official structure seemed to guide the project, nor any official aim or ideology. As will become apparent in the analysis, the easy atmosphere in the garage was a huge step from any physiotherapists' goal-oriented exercises. In the garage, visitors were more reminded of a club or youth recreation center than a health care institution. Whereas therapy usually is publicly organized

and delivered free in Sweden, the boys and their families paid for this activity in the form of a (inexpensive) club membership.

Second, there was no professional classification of the boys; they were not "treated" in accordance with their respective problems but lumped together in a collective. Instead of documenting, measuring and evaluating each participant individually, a team evolved, whose members undertook different tasks in the garage and socialized with each other. The team was arranged without any considerations about whether these boys "should" get along, given their diverse diagnoses and disabilities, and this happened to an extent that officials at the regional health care department were surprised when I explained this situation for them in detail. Placing boys with Asperger's syndrome together with boys with cerebral pares, ADHD and even a boy recovering after surgery for a brain tumour, how could that work?

Third, the boys themselves did not divide themselves in accordance with their disabilities or diagnoses (even though they all were aware that the others "have" something too, to use the phrase I met, implicitly referring to diagnoses or disabilities). Consequently, this activity does not exemplify any open mobilization against others' stigmatizations, or any struggle for tolerance, acceptance, or equal rights. The boys and their leaders were not engaged in managing deviances in public places (as Goffman described), but rather in, one might say, putting deviances in brackets in a semi-private place. Diagnoses and disabilities were not cared for; one acted "as usual".

How this usualness was accomplished and why it served as an attractive suspension of typifications from a disability world is the topic for this article. Instead of defining normalcy *a priori* or questioning established definitions, my aim is to empirically specify how an implicit lay version of normalcy may be interactively *done*, in this case how disabled and diagnosed boys can–despite their problems and backgrounds–be situationally constructed as "anybody".

Method

The primary data for this study consists of field notes from participant observations during the spring and summer of 2006. At the beginning of the study, I obtained verbal permission from the leaders, participants and parents of the participants to follow the activity in order to document talk, gestures and other interactions in a notebook. The group consisted of 10 to 12 teenage boys who met one evening every week, sometimes also on weekends, and were led by four adults.

The formal reason for my study was an assignment from the section for Research and Development at the regional health care department, which provides some financial support to the activity and now asked for an evaluation and a written report. As I followed the activity in the spring and summer, I filled my notebooks with jotted-down situations from the garage and the surrounding buildings. I also conducted interviews with two of the leaders as well as field-based interviews (not tape-recorded) with the boys and their parents.

Following Robert M. Emerson and his colleagues' recommendations (Emerson *et al.*, 1995, p. 66), I tried to compose my notes to create "scenes". My objective was to capture dialogues or other interactive episodes in ways that more or less made them look like small dramas or plays. Short or long rejoinders, vocabularies, questions and answers, commentaries and jokes attracted my attention, as did the participants' non-verbal actions, their movements and their ways of forming or dissolving small groups in and around the garage. I also took notes on the environment or background as such. Sometimes I wrote down things after my observations, sitting on the grass beside the garage or (afterwards) in my car, but mostly I just sat around the boys with my notebook, talking, watching, now and then helping them by handing them a tool they reached for or assisting them in cleaning up after work.

Emerson's recommendation to capture "scenes" does not necessarily refer to a show or performance but rather something more general: an image of social life, constructed so that an outsider (for instance, somebody reading a report) is able to imagine it. Later on, I clarified and developed my notes to communicate details and contexts that I initially took for granted (Emerson et al 1995, p. 40). I added what happened before or after the noted episode (names, items, facial expressions, tone of voice, etc.), and made fair copies out of more or less personal abbreviations. By working up my field notes in these ways, my intention was to de-privatize my data, to create "scenes" (in Emerson's terms) out of a scattered "field manuscript".

Although I did not start with any particular interest in normalcy as interaction, my attention was quite soon directed to the activity's mundane character. I had an expectation that something extraordinary should happen (since the activity was surrounded by that reputation), but got confused since I got the feeling that nothing particular was happening. In an effort to kill time, I started to write down this "nothing", which eventually made me observe that it actually happened a lot, although in subtle and rather inconspicuous ways. To follow the activity on the spot instead of just conducting interviews or using questionnaires proved to be fruitful in this respect. Most likely, as Atkinson (2006) points out, I would never have noticed the repetitive and slow character of this field without having adopted an ethnographic approach.

John M. Johnson (1975, p. 95 ff.) argues that the construction of trust in a field may involve a series of practical procedures, such as a reconstruction of one's biography (to fit in) and a demystification of one's role as a researcher. Ethnographic research is more personal than it is usually considered to be, Johnson claims. The field worker may, for instance, inject irony into his or her role and thereby try to de-dramatize it, or openly instruct members on how to manage a researcher.

After finishing my fieldwork, I recognized Johnson's remarks. I had also tried to establish trust by joking about my role and by setting up markers of distance in collecting data. Many times, I put aside my notebook to chat about something unrelated to my research agenda (my family, others' families, the surroundings, the weather, the equipment in the garage, the music the boys played on the portable CD player, etc.),

although later on this actually also gave me data on how the participants spend their evenings in the garage. The boys and their leaders openly joked about things that I should not take into account or the opposite, saying "Did you get that?" A particularly funny event would be sighed over by addressing me: "Well, *this* will be very hard for you to describe."

I also recognized, as Johnson (1975, p. 119) did, that even though I managed to establish trust, it did not mean opening a "magic door" for the collection of material. Rather, it meant that relatively more time was devoted to things other than research, since my role as a researcher became less defined. Occasionally, I did not feel like I was working but just having a lazy time, as if (it struck me later) I had acquired the boys' habit of hanging around the garage. Whereas I could return home with a bad conscience about not working efficiently, I later on learned to appreciate this "laziness" as a way of getting closer to the group and its atmosphere.

Apart from notes and interviews, I also examined the activity's website. Here is a huge collection of photos with commentaries written by the leaders, as well as a web version of the participants' joking jargon. The website as a whole also constitutes a form of communication for all participants. Some of the boys spend a lot of time in front of their computers at home (especially those with Asperger's syndrome) and apparently, they keep themselves updated by checking out these photos, commentaries and news. Although I do not analyze the website directly in this article, it has served as a source to describe the activity in general terms, as well as a confirmation of a collective historiography that was sometimes alluded to during interactions.

Doing Normalcy

Garage Work

Repair work on an old American car is not the only pursuit in this recreational activity. The boys and their leaders sometimes arrange small excursions (for instance, to go fishing) or shopping tours in a city nearby to buy things needed in the garage. They sometimes go out for a pizza or visit a café, or visit some of the boys' houses to grill sausages over an open fire. On the floor above the garage is a spacious racecourse where they play with their small radio-controlled cars. In other words: part of the activity consists of forming social ties that can endure outside of any therapeutic context around these boys, ties that cultivate ordinary selves rather than disabled ones.

Still, the participants eventually return to the car wreck in the garage, around which they most often hang about. Their work here can best be described as garage work: putting things together, sandpapering or polishing, screwing things on the car motor, sorting and choosing tools and taking care of them, instructing each other on how to use them. The boys climb in and out of the car, polish it and observe it, sometimes lying underneath it or hanging over it, scrutinizing details carefully and for a long time. They get oily and dirty and have to wash their hands; they clean the garage,

sweep the floor and throw away garbage. Slowly, the car is repaired; the distant goal is to make it work again. During the time that I followed the activity, loudspeakers for a stereo were put in the car. The boys planned and tested the construction, sawed holes for the loudspeakers in plywood, attached cords and connected them together. Further, the steering wheel was polished and painted, the motor was detached and unloaded, and an oil filter was removed. To collect money for rebuilding the car, parts of a moped were polished; the moped was to be sold later on.

All actions in this garage work are also interactions, in which "doing normalcy" emerges and plays out. Even though some tasks are carried out in solitude and therefore may seem non-social, they are in fact social when it comes to their initiations and fulfilments, as well as their very definitions. The leaders sometimes initiated garage work at the beginning of the evening with straightforward descriptions ("today, I was thinking we should…"), but the tasks could also just continue from the last meeting, without being introduced anew. The adults wander around, stepping in to assist when it comes to difficult phases and then letting the boys carry on. The distribution of work is far from equal; some boys do more than others do. When studying my field notes, I realized that many tasks have a little "audience" with one or several guys watching, which also indicates the social orchestration of this garage work. Indeed, such an audience can be taunted for just standing there, but everyone is free to do as he pleases and work is not compulsory. The leaders (at least four most of the time) give comments, jokes, instructions and encouragements.

> "George, how's it going?" One of the leaders walks down to a corner of the garage and starts to give instructions to George, who is occupied with sorting cans and bottles on the shelves along the wall. "Then you'll take these things belonging to the car… we can put them nice and tidy over there," the adult says. He repeats these instructions and lets George work for a while. A little later, two other boys have taken over. One of them stands on a ladder whereas the other one stands beneath, handing him bottles and other things to put on the top shelves. The work goes on for quite a long time and is finished as the two boys put the ladder back in its place. "Watch the varnish (of the car)!" one of leaders shouts from the other side of the car, with a slightly exaggerated, playful tone. "Toot-toot," the boys say, passing with the ladder in front of me and a couple of other boys beside the car. We have to move. Dennis next to me laughs at the tooting.

The work is practical, directed towards physical objects and commented on by others. The practical aspect is emphasized by the visible result, and the out-turned aspect is evident in the actors' orientation; in and around the garage, one is never solely directed towards each other but also towards an object. Certainly, the boys and their leaders talk and socialize a lot but mainly through items or tasks. If a person is put on the spot, it is done either jokingly or due to an already accomplished task.

> Samuel and Raoul are busy with unscrewing some parts at the top of the car motor, which is about to be unloaded from the car. Raoul is doing most of the work whereas Samuel is standing next to him and commenting. One of the adults is standing

beside the car and talking to me while at the same time trying to encourage Samuel and Raoul to keep on working; he hands them screwdrivers and helps them attach these to the screw bolts. Samuel starts to unscrew the bolts. Later on, two other adults come by to hang over the bonnet, commenting on what Raoul has done and instructing him on which bolts to unscrew next. They give him credit for this and one of them says, "So that's why you look so happy!" They make eye contact and Raoul smiles a little.

The boys may also wander around to check on the adults rather than vice versa. On one occasion, a boy was given the task of polishing the steering wheel before it would be painted. He did this for a long time, silently and apparently absorbed in this job, sitting on the staircase outside the garage. One of the adults would come by, asking him how he was doing, but the opposite also happened: the boy found the adult in the garage, showed him the wheel and received comments. "Very good, perfect. If you touch it like this…" the adult says and runs his finger along the side of the wheel, "the dents you feel should be taken away." The guy returns to his place and goes on polishing. This sort of doing the rounds of the garage may also evoke commentaries from the other boys. "Hey there, wheel man!" one of them shouted on one occasion. The "wheel man" smiled and forced his way past.

The leaders may also entice the boys to a certain task in the garage to create a little audience and be able to give credit to those who have been working: "Guys, have you seen this…?", "Excellent work!", "I'm very impressed!" The boys form a group around a specific job, break up after a little while, and get attracted to another job or just hung around for a while. The act of wandering around the garage to view another's work or demonstrate one's own work suggest a considerably interactive construction. In order for the participants' acts, skills and deeds to take on significance, they must have an audience or acknowledgement and this they get, although not in an explicitly therapeutic way (as in professional physiotherapy, for instance) but in a mundane and spontaneous way; comments are given *en passant*. This particular social arrangement, which is not stated in any official purpose of the project, is in other words creating a quite ordinary intersubjectivity: people are treated "as anyone", doing ordinary garage work in an ordinary garage.

In conversations with the leaders, I learned that some of the activity's tasks could be modified according to what the individual boys could be expected to handle. "Certain things are quite… if you have never held a grinding machine before, that could be deadly dangerous," one of the interviewed leaders said. Nonetheless, this matching of tasks and boys is not noticeable during execution of these very tasks; no one talks about it, and no aspect of the garage work implies any individualized training or habilitation, despite the fact that all boys are formally considered as behaviourally disabled. It is, on the other hand, not a matter of highly efficient work either. What is going on in the garage could rather be described as "fixing" and "organizing", sometimes performed in a more intense way, sometimes in a diverted. This recreational activity is in other words structured so that disability is downplayed to a minimum, or simply sidestepped altogether.

The fact that tools and unfinished projects in the garage seem to be waiting to be used or continued supports this structure. The nature of garage work offers a context in which the boys can "do normalcy" since the boys can easily engage in this work, or watch others engaging in them, in the same way as anybody else. How the person doing the task at issue "is"–disabled or not, diagnosed or not–becomes irrelevant since the task as such is put at the center. The boys are not doing things to get better (even if that might happen, as a side consequence), or to manage their individual problems; their activities have a purpose beyond themselves. The irrelevancy of personal traits is also marked in clothing. All wear blue overalls, that is to say, clothes lacking any connection to habilitation or therapy. Instead, the blue overall connects to something ordinary: physical work and workers' culture. If only for an evening once a week, the boys now fit into a garage identity.

Compared to conventional therapy for people with disabilities, the garage work is quite different since it does not look like therapy at all. Still it is not my intention to gloss over the importance of the structured nature of its interactions; the fact that some tasks are modified and that nobody talks about disabilities or diagnoses when working in the garage undoubtedly belongs to the amount of work that goes into arranging and reproducing this activity, from the leaders' as well as the boys' perspective. To "do normalcy" does not have to happen spontaneously, and it is unavoidably tied to its opposite: "doing stigma" in other contexts, to which these teenage boys usually belongs. Nevertheless there are plenty of spontaneous aspects within this structure, since the very performance of tasks (and their surrounding dialogues) is not planned in detail, nor identical from time to time, as many exercises are in conventional therapy. Even the ideal is different in this context: the participants are supposed to hang around and wander around the garage, looking for things to do or watch, and not merely being activated in a top-down way. There is in other words a structure in which normalcy emerges, but that structure paradoxically depends on actors not being particularly structured.

Compared to conventional therapy for people with disabilities, the garage work also constructs a certain relaxation. In interviews with the leaders, they talk about "permissiveness" or "we don't require anything of them," which parents also mention in an appreciative way. The fact that other activities, for instance team sports, do require things from their participants has a deterrent effect for these boys, parents say, and some boys also tell me about having tried various sports but eventually giving them up. Drawing on my field notes, however, this argument could be specified. It seems true that garage work as a whole does not imply any demand for initiating or finishing tasks, or any demand for working independently. Every task as such, though, does imply certain requirements since it cannot be done just anyhow. When the boys are situated "in" a task, when they are more or less absorbed in it (as the boy who polished the steering wheel), they are required to adapt to certain circumstances and follow certain instructions.

In that sense, the garage work is not "permissive," as leaders and parents say. Rather, what seems to make the adults choose the word "permissive" is the vague and

disperse organization; the activity is characterized by a low degree of social control. Participants do not have to know what is going on everywhere (as in many team sports), which means that not everybody is watching you while you are doing whatever you are doing. To get an overview, you have to wander around, and in doing so you leave one task for another. In that way, an individual can hardly loose his face if he fails; he does not even have to fear loosing his face. The audience is either small or simply gathered as the task is done.

The Jargon

Another way to do normalcy lies in the jargon that emerges within the social context of this activity. The participants are constantly joking and making ironic remarks about each other, launching prompt and sarcastic comments straight through the garage or just avoiding being too serious or boring.

During my fieldwork, this jargon turned out to be quite sophisticated. First, it is marked by an expressive lack of care. Joking and laughing, as Michael Billig (2006) points out, does not imply treating each other tenderly or carefully, which in this case means that the boys appear far from weak or pitiful. Rather, they appear as somebody you can joke with (and about), as strong and "adult". This aspect contradicts a specific image: that these boys "have" diagnoses and disabilities and therefore should be cared for and treated tenderly. It also contradicts the content of certain diagnoses; persons with Asperger's syndrome, for instance, "should" not be able to understand irony and sarcasm, according to psychological experts, but to use the leaders' words, "they just got used to it right away":

Interviewee 1: It was very hard (to avoid joking). Sometimes, in the beginning of the activity, you tried to take the attitude of not being sarcastic [Interviewee 2: Yeah] and every time you said something, you kind of reminded yourself that "What did I say?". *David:* [laugh].

Interviewee 1: But then, no, this isn't working. [David: Mm] You're not yourself [No, I see] so especially in the motor association [Uhum] there, we live out of irony and sarcasm [Uhum] [[laughs a little]] so it didn't work [No]. They just got used to it right away. It wasn't any problem.

An initial caring attitude within the project, tailored for boys with Asperger's syndrome who are said to not understand irony and sarcasm, was in other words quickly replaced by being "yourself": "we live out of irony and sarcasm". In this way the activity does not subscribe to a protective frame, which would typify the participants as weak and vulnerable, but to a frame of everyday life, typifying the participants as "anyone" and consequently as persons with whom you may very well have a joking relationship. Peculiarities that diagnoses attribute to the boys–in this case the inability to understand certain humour–is downplayed or neglected, and the boys accept and enjoy that manoeuvre. Along these lines, medical stigmas are not attacked or questioned openly but rather sidestepped or avoided in a silent and quite undramatic way.

Second, the jargon is explicitly contextualized, that is to say, it does not stand alone (as for instance a funny story being told as an event in itself) but gets incorporated into other interactions. That means jokes and ironic comments suddenly appear in relation to a particular event or task, and then disappear just as sudden; they seem to be dependent not on permeating everything or interrupting other activities but rather on being interposed now and then, as the participants go on doing things in the garage.

> "What's this?" one of the boys says, holding up something he found in the garage. "It's a drill that is broken," one of the adults say. "It's Johnny who's broken it," he adds, now a little louder. Johnny, who stands on the other side of the car, answers "What, me?" in an exaggeratedly innocent tone. The adult again: "He heard that, for sure." Somebody laughs a little and then everybody carries on with that they were doing.

Thus, the jargon is built up as a joking way of doing things together, which in turn is emphasizing that "this is all very normal, this we can easily joke about".

Third, the jargon relies on long-lasting relations. The leaders joke with boys who have been participating in the activity for a long time more often and in bolder ways. In my fieldnotes it became evident that the adults prefer to joke *with* veterans but *in front of* newcomers, which might serve as an introduction of the jargon to the latter, without the risk of scaring them away. Such jokes often build upon the garage work, in order to mobilize some energy: "If you're so smart, how come you don't do more?" or "Is it okay if we work instead of you?" Undoubtedly this structure of humour also contributes to socializing the boys in accordance with the norms of the group, for instance the norm "here all participants should do some work", which means that the jargon at issue fulfils multiple functions. What I would like to stress here, though, is the fact that long-lasting relations help the leaders and the boys to develop more qualified jokes in comparison with short-lived relations, which in turn induces an atmosphere of normalcy: "we do not need to use polite and standardized jokes, we can joke as old friends do".

The leaders also joke with each other in front of the kids and the kids joke about the leaders, the car or the work. The social character of jokes may explain the fact that those with Asperger's syndrome also seem to understand them, at least socially; even if they may have problems understanding irony individually, they see that others are laughing and by laughing too, they adapt to a sort of local culture. Some of the boys' rejoinders are not jokes in a conventional respect but rather dry, teenage comments that nevertheless can harass the adults a little.

> Johnny has been sawing two holes for the loudspeakers in a piece of plywood and he is commenting on this work to an adult who is partly hidden by the car, from Johnny's point of view. "It is too large (this hole), it falls right through", he says, holding the loudspeaker just above the hole, which in fact is perfectly shaped for it. "It does?" the adult asks, frankly interested. Johnny: "No."

A fourth characteristic of the jargon might be called exclusiveness. To tease and make fun of each other presumes that you know each other to some extent; you have

to have this knowledge as material for jokes and comments. When the boys and their leaders wander around between different tasks in the garage, they gather such material, which sometimes also is forwarded to the activity's website (in the form of a "comment of this week" and the like). Underneath the harsh surface, there is in fact a certain tenderness, but it is not distinguished by pity towards a weak and disabled person, but by respect towards an equal you may not always manage to keep silent.

> One night, when Johnny is loudly joking around with everybody during the coffee break, he gets several comments from the rest of the group: "What's your medication today? Special pills?" and "Could somebody please just drive this guy home?" But nothing seems to stick on Johnny, who goes on joking, for instance by imitating scenes from movies he watched as well as lines from movies and music hits. He is entertaining the whole group. "There's something wrong with him!" one of the leaders cries out, whereupon the others double up with laughter. Johnny seems to be pleased and unconcerned, and he goes on joking.

Lines like "There's something wrong with him!" quite clearly show how this jargon is tied to this particular activity and its group. Had it been uttered in another, more serious context, it might have stigmatized Johnny, or reinforced an already established stigma (Johnny is one of the boys diagnosed with Asperger's syndrome). Here, this line serves as glue in a Gemeinschaft instead, and at the same time it boosts Johnny's status.

The latter interpretation is worth discussing further. Similar to the activity's garage work, the jargon may make the participating boys feel special, although in an ordinary rather than stigmatizing way. From an interactionist perspective, one could say that they also become special; the task as well as the jargon unites all participants simultaneously as some, for a moment, are lifted up or focused on.

This combination of individualizing and collectivizing features in the jargon coincides with features in the garage work. On one occasion, the old car is about to be pushed out to the courtyard in order to be photographed, and William (one of the boys) is given the task to sit in the front and steer. Almost everybody is helping (except one or two who gets taunted for their modest contribution), which renders the quality of a collective show to the scene. The fact that William is sitting in front of the steering wheel (and that he has been sitting there long before the car is to be pushed in order to really live the part) makes him special; this is also an individual show. In the same way, the joking jargon is both uniting and individualizing; personal traits are highlighted and sighed over in a mocking tone, even positive ones. On another occasion, after a session of games with the radio-controlled cars above the garage, where Dennis won the competitions, he does not miss an opportunity to brag about this, and the leaders do not miss an opportunity to sigh over this continual bragging. The fact that Dennis won and could brag about it gives him individual status, whereas the others' sighs and jokes seem to strengthen the collective.

As parents drop in to pick up the kids, they may sometimes be invited to participate in the jargon. In this way, parents get information not only about what happened

during the night but also about the very atmosphere. Dennis' mom, for instance, found out he had won the car competitions in such a way:

> Dennis' mom arrives during coffee at the end of the night and one of the leaders talks with her. "We don't like Dennis anymore," he says, loudly so that everybody hears. "Really, what's he done now?" the mom answers, picking up the leaders' irony. "He wins too much." "Well, what's he been winning?" The leader tells about the competitions; Dennis is listening with great interest, as if he wondered how far the irony could be taken. "Well, it was fun as long as it lasted," Dennis' mom says and pretends to finish his membership by reaching out her hand to Dennis, as if preparing to leave with him. "Two times I won," Dennis says a little later, whereupon the leader sighs, "Yes, we knooow!" evoking everybody's laughter.

May the activity's jargon be described as a masculine jargon? The fact that both leaders and youth (hitherto) are male sustains such an interpretation, as do the form and tone of the jargon. The participants bond by pushing and wrestling with each other, although in a playful and verbal way. Non-verbally, they also sometimes push and wrestle, but it is done as easily as can be expected in other male communities. This masculine character, however, does not exclude characteristics that culturally are associated with femininity, for instance, care and tenderness. The fact that the project is driven by men is in itself not an argument for considering it "masculine"; the male jargon should instead be seen as a cultural form (Connell 1995) that could exist among men, women or mixed groups.

In this case, the allusions to masculinity can be seen as yet another mark of normalcy, not in the sense that this particular form would be particularly "normal," but in the sense that the participants take a gendered society for granted. By implying such a society in their local interactions, a general sense of conventionality is being accomplished.

Doing Nothing

Hopefully I have managed to make clear that the studied activity is marked by voluntariness and a slow tempo. What still might be unclear, though, is the possibility that the boys would withdraw from both work and jargon to just spend a little time with themselves. It is not a question of isolation or loneliness, but rather one of seclusion and integrity, a legitimate self-removal or moving "away" (Goffman 1963, cf. Bettez Halnon 2001). The boys seem to act almost like guests at a big party who mingle and move around from company to company, chatting with people as he or she feels like, and then perhaps standing in front of a window for a while, or on a balcony and just looking out.

> A boy is hanging around in the garage, wandering from side to side and checking out what is happening at different places. Eventually he finds the corner where the second piece of plywood for the loudspeakers is about to be sawed. He stays there for a while, standing there and watching.

Along one of the walls in the garage there are two worn-out armchairs that offer some seclusion. Even though you sit very close to the car and consequently close to

where the action is, it seems to be a legitimate place to pull out a little, for instance, by reading the motor magazines that are piled here.

> Two guys are sitting in the armchairs, absorbed by the motor magazines. They talk a little to each other, pointing at images in the magazines and browsing through them, saying "Check this out… check this out…" On other occasions, I have been drawn into this browsing myself and the guys have showed me pictures of cars that have impressed them and whose prices and looks we have judged. Now I'm standing too far away and the two boys are occupied with their magazines and each other. In front of them, there is another thing going on: one of the leaders is just about to temporarily attach the steering wheel in order to turn the car's wheel (normally it is removed to be polished and painted). Two boys are sitting inside the car. It strikes me that the boys in the armchairs are right in front of this little drama but it is hard to say whether they are noticing it or not. Maybe they glance a little? Anyhow, they have withdrawn for a while, but they are still sitting close to the others.

The car itself may be used in the same way as the armchairs. One or two boys dive into it and sit there for a while: listening to music from the portable CD player in one of the corners, joking with other boys or adults passing by, just checking out the car from the inside, studying it and perhaps dreaming that they are driving it. To open the old door and jump into the car serves as a way to mark distance towards the others; to peek out from the windows, and to now and then say a few words to the people around them and thereby participate in their dialogues is, on the other hand, marking the opposite.

Studying my field notes, I realized that I often observed the boys were "doing nothing" but not when they started to do so, and neither did I observe when they returned to the others. I did notice the social breaks but not so much the moves from one thing to another. An explanation could be that these moves are quite discreet; the boys just grab their chance to do what they feel like. It appears significant that the leaders take breaks and hang around, to show that it is accepted and to be available for talk and company. The way in which the evening is started and ended also seems significant. When the boys are delivered as well as picked up, their parents often stay for a while and talk in the courtyard, especially if the weather is nice. Either the boys hang around next to them or they wander away for a last round in the garage. The setting as such provides the boys with sign equipment and symbols that make "doing nothing" explicable and permissible, so that no explicit account for it is needed (cf. Bettez Halnon 2001). As a member of this setting you are allowed to hang around and do nothing, and by doing so you still become "somebody", that is an acknowledged member of the setting. You do not, though, become "disabled" in any way, since such a person would rather be expected to be occupied by his or her disability and its related troubles. To be non-social or withdrawn from sociable activities, which under other circumstances could be treated as a problem and a consequence of a behaviourally oriented diagnose, is here *building* self-esteem instead of tearing it down.

One could of course ask whether these boys could not hang around and "do nothing" anywhere, for instance in their own homes. Do they really need a special recreational activity for that?

My answer would be yes, at least in the sense that a special context most likely makes it more attractive to play out one's integrity and "do nothing", if there are simultaneously new and odd things to discover. A setting with news (or a certain quality of unusualness) may even be socially handled in such a way; instead of plunging into everything at once you may taste a little piece at a time. It is not until there is a background of interesting events (to push out the car together, to engage in a discussion of car types, etc.) that the art of doing nothing becomes meaningful.

An example is when one of the leaders takes the boys (in two rounds) for a ride in his private old car, a 1968 Chevrolet, which made a definite impression. It would be exaggerated to say that such a ride makes all passengers enthusiastic; they seemed rather just content. Nevertheless, having participated in such an event, they may withdraw a little from each other, as if pondering the experience and recovering one's breath, knowing that another event may soon come up.

A Coffee Ritual

A soda, a cup of coffee and a biscuit or two round off the evenings at the garage. Now the boys and their leaders gather in a motor-club clubhouse near the garage to sum up the day, retell what happened and collectively visualize the future. It is also a way to physically assemble the boys; soon their parents will pick them up and often the parents head directly to the clubhouse since they know the boys usually are sitting there.

Here, too, several aspects create normalcy. The scene is conventional: people drinking coffee and soda, talking and joking. Cups and glasses are not put on the table in the style of an elegant café but in a style that resembles a coffee break at a working place or an office. One just seems to take a break as one sits down at some quite ordinary chairs and tables. The talk is also quite ordinary, although the social organization is less vague than in the garage and the possibility of withdrawing or doing nothing is considerably lower. This is rather a stage for small performances from some of the participants, whereas the rest act as an audience. Johnny (one of the boys) may for instance put himself at the center of everybody's attention: teasing the leaders and displaying his comical talent. The leaders may tease him back or make small speeches about the day or future plans, constantly interrupted by comments, mumble or laughter from the "audience".

> "Now, as you're sitting here, all of you, nice and quiet…" one of the leaders says. "Blah-blah-blah-blah-blah," Johnny says. Everybody laughs. The leader returns to his speech, which this time happens to be on the moped that is about to be sold, and on whether there is any interest in going to the drag races in a city nearby and a possible fishing trip.

Pertti Alasuutari (1992, p. 113 ff.) has noted how an everyday ritual like drinking coffee can be imported to a group and be filled with general as well as specific meaning. The general meaning from the surrounding Nordic culture of drinking coffee (to relax, take a break and talk over a cup of coffee–in Swedish called "fika") is brought into this recreational activity and given a certain structure. At the same time, a specific meaning

(to summarize and plan the garage work, etc.) is ascribed to the habit of drinking coffee. The activity is rounded off in a way that resembles what Oddner (2003, p. 112-117) calls an ordinary café visit with no other purpose beyond itself, but it also resembles what he calls an instrumental café visit since there actually is a purpose: to assemble the group and remind it of its shared history and future. One might say that the group is adopting an everyday ritual.

The purposeless aspect of coffee drinking, evident in the boys' spontaneous talk and jokes, proved to be most delicate during my fieldwork. My presence as a fieldworker was more clear here than in the garage. The first night seemed stiff, which surprised the leaders. "You're very quiet today, I say…", one of the leaders said to the boys. After a while, when the boys start talking and the atmosphere becomes more joyful, I am told that "now they're getting started."

Conclusion

The recreational activity studied in this article is directed towards teenage boys with diverse diagnoses and disabilities: Asperger's syndrome, ADHD, cerebral pares, etc. In my analysis above, however, I have showed that diagnoses and disabilities are not constitutive of the activity's social life; what is constitutive is instead a continual and interactively accomplished production of normalcy. The participants engage in garage work spiced with a sarcastic and masculine jargon, they hang around and do nothing and they socialize, drink coffee and eat biscuits. Instead of presuming that these boys should be occupied with their specific problems, and be located in specific contexts for the treatment of such problems, the activity as a whole presumes that they can be occupied with ordinary things in ordinary places, like doing repair work on an old car in a garage. Instead of acting as if these boys would be especially vulnerable if they are treated "like anyone else", they are considered "ordinary" enough to put up with real tasks and real garage work, as well as with sarcasm and jokes. In this respect, normalcy is produced not in response to "normals," as in a Goffmanian normalization (Goffman 1990/1963), or as a proud manifestation in a political context (Scotch 1989, Sellerberg 1993), but as a pocket on the outskirts of a disability world. Social ties and contexts are created in which interactions take another direction than the expected. These teenage boys with disabilities do not play out their "disabled" identities but their "normal" ones, as if not being disabled at all. No special equipment is present that could remind them of therapy or habilitation, no special vocabulary is used that would typify them as weak or vulnerable, and the tasks that are waiting to be done in the garage are not centred around themselves or their respective troubles but around something above and beyond themselves: a car to be repaired, and all cooperation that comes with that.

To feel and act normal is not "an all-or-nothing phenomenon", as Rehm and Bradley (2005, p. 817) points out. Families with medically fragile and developmentally delayed children, for instance, may redefine normality, or just enjoy particular conventional aspects of one's life, without believing that one is "normal" by other

people's standards (Rehm and Bradley 2005, p. 817). In the case studied here, though, such an elastic normalcy is accomplished by visiting an ordinary setting that contains resources crucial for people's construction of ordinary selves: locally shared interactions, a set of biographical particulars that participants bring with them, and meaningfully available material objects (Gubrium & Holstein 1995).

Nevertheless, a typification of the boys as disabled is also present, if only silently and indirect. By that I do not mean to say that the interacted normalcy would be forced and thereby direct attention to its opposite. The way this activity borrows aspects from everyday life (such as the garage work, the blue overalls and the coffee ritual) is so discreet and tactfully accomplished that a visitor feels far from any indication of professional therapy or habilitation. A typification of the boys as disabled is instead present in the very attraction of "doing normalcy" and, accordingly, in the boys' enticement to be ordinary.

A critic to a first draft of my report asked if this activity were not described as "too rosy", since my field notes hardly ever revealed any conflicts or quarrels, or even somebody feeling depressed or upset. Indeed, conflicts and troubles cannot be excluded since I have obviously not seen or heard everything that goes on; no fieldwork is all encompassing. Still, the absence of conflicts and troubles could also be explained in terms of the position of this recreational activity in the boys' biographies. Neither my field notes nor the activity covers their whole lives. Parents may, for instance, tell about the boys' tiredness and trouble in concentrating in school (even their troubles to motivate themselves to go to school), as well as their difficulties in finding other appreciated activities. A mother explains that her son has changed a lot during his engagement in this activity, that he has become "more open, more social", that now "you can see this happiness in his face", whereas before he was more withdrawn and spent many more hours alone in front of his computer. The leaders tell me that sometimes the boys have "bad days" (cf. Charmaz 1991), which make them stay home and skip the week's gathering.

Thus, the "rosy" atmosphere in and around the garage should be understood in the context of a respite from the boys' remaining lives, whose details lie beyond this study but still are alluded to in the data. The time spent in the garage appears to be an island of normalcy in a not-too-"normal" or untroubled life situation. The boys have not completely escaped society's gaze but have found a refuge from being typified as disabled. The sarcastic jargon should also be remembered in this respect; here, it is not characteristic to treat each other tenderly and carefully, but relatively harshly. Minor tensions do exist, in other words, even though that seems to contribute to rather than sabotage an ordinary and appreciated mood. If everything were entirely rosy, the boys would most likely not feel at home.

Apparently, non-conspicuous and trivial interactions in this respect become meaningful in this very context. Interactions in general are constructed by significant gestures that have repercussions on the actors' selves (Mead 1934/1967, p. 65 ff., 137

ff.). The self does not merely precede social conduct but emerges "within conduct" (Mead 1934/1967, p. xiv); social life brings forth an individual's consciousness and self (Asplund 1967/1978). According to Mead, the mechanism for this is the spoken language, or rather all meaningful gestures, since gestures indicate meaning for various objects and the self is an object within and between individuals. If a person meets interactional repercussions that indicate him as odd and problematic, it is logical that a pocket of interacted normalcy appears attractive; such interactions contribute to an ordinary identity.

In this case, these interactions take an enacted form of what Robinson (1993) calls a "story of normalization", but whereas Robinson is unsure why people strive for that kind of story (and the enactment of it), constructionist and interactionist theory gives an answer. Robinson (1993, p. 12) refers to normality's perceived "goodness". Here it can be expressed differently: if carried out without drama, interacted normalcy is destigmatizing.

Finally, as diagnoses spread and multiply in contemporary societies, and as more types of behaviour are deemed troublesome, an interesting observation should be made when it comes to the studied activity's lack of professional classification of its participants. All boys are lumped together in a collective, regardless of their diagnoses. When their individuality becomes relevant, it is not related to their particular medical problems but to things, events, tasks and talk in the garage. The minute specialization and classification of people with troubles of various kinds may have evolved in such a way that, in the periphery of a society's health care system, there is now a demand for social sites accomplishing just the opposite.

Acknowledgements

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