

# **Common engagements as resources for inclusion: Children with disabilities transitioning from one age group to the next within general day care**

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## *Abstract*

This article presents a social psychological study of three-year-old children with disabilities who are transitioning from one age level to another within inclusion day care centres in Denmark. I investigated children's transitions as a decentred participation-problematic by drawing on material feminist disability studies, social practice theory and German-Danish critical psychology. The study included four children, all with disabilities, during the transition from one age group to another. I foregrounded one child, a girl, to illuminate the specific access barriers she faced as a new group-participant handling age level changes. I analysed this girl's socio-material *visibility* and her personal *engagements* as a way to explore her local action possibilities and her emerging action potency across age level settings. The analysis shows that children with disabilities are at risk of becoming *objectified* as *impaired children* prior to, as well as during such age level changes, suggesting that professionals need to study how changes in institutional arrangements present personal barriers to children with disabilities and to their inclusion into the general education system. The study concludes that inclusion for transitioning children with disabilities relies on how children's personal actions and common engagements are understood, investigated, and developed in and across contexts as part of a changing day care practice.

## *Keywords*

children with disabilities, transitions, day care, participation, inclusion, institutional arrangements, community of practice

## Introduction

The article focuses on the theoretical and practical question of how access to resources for inclusion is distributed in social practice in day care. The article investigates how the transitional process of a child with disability relates to institutional arrangements and social practice in change within general day care. The study draws on material feminist disability studies (Garland-Thomson, 1997, 2011, 2012), social practice theory (Lave & Wenger, 1991), and German-Danish critical psychology (Dreier, 2003a+b, 2008, 2009) to investigate the conditions a child with disabilities has as an active participant in structures of social practice. This theoretical knowledge base builds on a relational ontology that invites researchers and practitioners to conceptualize disability as a situated and practical difference tied to conflictual participation in historical social practice under change – a perspective that stands in stark opposition to the widespread and dominating impairment-related, biomedical research traditions, where the focus is on deficit within the individual’s universalized human body.

The aim of the study was to generate knowledge from practice about children’s transitions in order to understand how children with disabilities are finding their way through educational arrangements (Lave & Wenger, 1991; Dreier, 2008, 2009).

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The empirical study involved four 3-year-old children with disabilities in newly established resource day care centres<sup>1</sup>. In the municipality of Odense all children in day care centres are transitioning from their initial group to the next when they are 2 years and 10 months old. I followed the four children with disabilities prior to, and, during the children’s transitioning processes. In the receiving day care groups, children were from 2 years and 10 months of age and up to 5 year old. Each resource day care centre holds three placements for “children with special needs” and employs one extra full time professional in comparison to other general day care centres.

Throughout the research process, the children’s engagements in practice were in the centre of attention as a way to explore how their actions related to the socio-material possibilities in resource day care centres.

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<sup>1</sup> In 2013, The Municipality of Odense changed its organization of day care centres from what Madsen (2005) calls “an integration model” to “an inclusion model” as a way to open up the general educational system to children that until then had been cared for in segregated day care arrangements. The resource day care centres are developed out of already existing general day care centres.

The research questions capture the conflictual relations that a child with disabilities faces as a participant in a local practice, where s/he is a newcomer:

1. How a child with disabilities is engaged in his/her age level transitions within the resource day care centre?
2. How does participation problems occur from the perspective of the transitioning child?

The article begins by addressing the way children with disabilities and their everyday life has been set apart in clinical studies of children and in biomedical understandings of disability. I argue from a social relational view on disability for the investigation of the conditions participants have, (re)produce and transform in local practice. This theoretical point of departure facilitates an exploration of how ‘disability’ takes form in practices and becomes vested with social meanings in institutional arrangements. Next, I present the various explorative research methods I used to investigate children with disabilities as active participants in a historical social practice of ‘ability – disability’. The research methods have accommodated an exploration of theory and practice in their dialectical relation, and the research-practices I have developed continuously over time in line with Lave’s understanding of “research as apprenticeship” (Lave, 2011).

The introduction to the Danish day care system that follows contextualize and problematizes the access-demands children with disabilities encounter as new participants in the general day care arrangement. I use empirical examples of one girl’s transitioning process to illustrate what it takes for small children to have access to common conditions for participation, and hence, for inclusion in day care. Implications drawn from the research suggest that by exploring participation and access-problems from the perspective of the transitioning child, professionals can identify and act to break down participation-barriers as they present themselves to children. By exploring participation and by consolidating common engagements in action, day care professionals can assist children in actively developing conditions that may afford expansive action potentials in and across institutional arrangements and other action contexts (Højholt, 2016).

### **Setting the scene: The decontextualization of children with disabilities**

Institutional day care arrangements may produce vulnerability and participation difficulties for children with disabilities, especially if professionals view these children’s presence and personal engagements as problematic for sustaining existing group practices (Fisker, 2012; Bendix-Olsen, 2018). A common participatory problematic that follows from having institutional age-based

arrangements applied to diverse groups of participants is the risk of identifying “the impaired child” as the problem (McDermott, 1996; Mehan, 1996; Davis & Watson, 2001). Traditional individualizing understandings of children’s development in psychology have long been the norm (for a critique of individualizing approaches to studying children, see Gulbrandsen & Ulvik, 2015; Hedegaard, 2011; Hedegaard & Flear, 2008, 2013; Hundeide, 2010). Individualizing understandings of child development can be said to be an a priori assumption in clinical studies of children with disabilities, and thus, also within the impairment-related tradition of special education (Oliver, 2009; Goodley, 2011, 2014). These individualizing understandings of child development often serve and preserve standard age- and needs-based institutional arrangements, so they are not typically perceived as part of the inclusion problematic (Holt 2003, 2004a+b, 2007; Garland-Thomson, 2011). This, then, blocks critical examination of institutional arrangements, understood as historical action-conditioning contexts, because they are already entrenched as commonsensical and legitimate (Lave & Wenger, 1991; Lave, 2006, 2012).

In his critique of such decontextualized approaches to child research, Hundeide (2010) argues that psychological research should avoid isolating the individual child from its social world. Experimental research, he points out, often ends up diagnosing the child’s individual competence rather than situating the child’s actions within its everyday social practice and experience. Further, Hundeide argues that research methods that are not in dialogue with the participating child may lead to biological reification (Hundeide, 2010, p. 151 - 152). In his view, test-based-research-methods can contribute to a “ranking practice” that tells us more about notions of normativity within a given society than it does of a specific child’s actions, perspectives and inter-subjective production of meanings.

In concert with Hundeide’s perspective, Dreier (2008) argues for the development of psychological studies that include the subject’s everyday life as both an ontological and methodological point of departure. Dreier emphasizes the vital importance of the first-person-perspective, rather than isolated individuals, isolated psychological functions, and isolated locations, which Dreier calls ‘a third person perspective’, an un-situated view from “nowhere”. If we want to understand the social practice children face as part of their development, we need to study children as participants in and across local action-contexts (for an extended critique, see Dreier, 2008 and 2009).

In contrast to decontextualized child research, a growing number of researchers are undertaking studies from a social relational view of disability, investigating the social conditions for participation in day care (e.g., Davis & Watson, 2001; Ytterhus, 2003; Rasmussen, 2008; Fisker, 2010; Åmot &

Ytterhus, 2014; Hilleshøy, Johanson & Ohna, 2014; Wilder & Lillvist, 2017). However, we still lack extensive research knowledge about children with disabilities as active participants in and across general day care arrangements and are, therefore, missing important insights into how the (re)production of ability - disability occurs in concrete situations. More research is needed to investigate how subjects, including children, parents, and professionals, relate to or may communally succeed in transforming conditions for participation in local practices (Højholt, 2016; Mørck & Huniche, 2006).

### **Empirical and analytical research practice**

My empirical work took place from 2014 - 2016 in three newly established resource day care centres, where I studied four children with disabilities as active participants in social practice. I followed two children's everyday life during their transition from one age group to the next: Ruben, "a late developing<sup>2</sup> boy"<sup>3</sup> and Amina, "a girl with Down syndrome". I observed Ruben in his group for the 0 to 2 year 10 months-olds for 21 days and for an additional 5 days when he transitioned into his new group. I observed Ruben one day a year and four months after his transition. I followed Amina for 9 days in her group for the 0 to 2 year 10 months-olds, and again for 4 days when she transitioned into a new group. Amina stayed in 'the middle-group' for 14 months. Thereafter she got a placement in a special day care for children with severe and lasting impairments. I interviewed two professionals after Amina had transferred to the new placement.

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<sup>2</sup> The quotation marks indicate that such categorizations and understandings of the human body relate to a societal problematic of 'ability - disability' tied in situated ways to institutional arrangements and specific historical social practices. Naming children with regard to their functions and impairments is not a neutral act. It is, I argue, engaging in social struggles over practice (Holland & Lave, 2001; Lave, 2011). However, as Shakespeare (2014) argued, it will lead to "contextual essentialism" if bodily impairments would be out of the picture, and only barriers and environmental factors would be foregrounded academically. He argues for a "progressive disability politics" that engage with impairment instead of ignoring it (p. 75). While I agree, to a certain extent with Shakespeare on this point, this impairment concept (re)produces certain biomedical and ontological assumptions about the capable human as an individual outside the context of its social environment. Hence, the context and the individual (I prefer the term "subject") cannot be understood in separation of each other, as they constitute one another in a relational dynamism.

<sup>3</sup> Children's names, sex, and, circumstances have been altered and/or blurred to secure anonymity for the involved children and their families.

Furthermore, I studied the two children, Thor and Dina, primarily as intervention cases during action plan meetings and through recorded interviews with professionals and one parent.

I feature Amina's transitional process here because she was the only child not to stay in the general day care system. Amina's transition and inclusion was (partly) "un-successful" from a pro-inclusion perspective, and in this way, her transition presents a particularly interesting contrasting possibility. Amina's transitional process shows more clearly, how conditions for participation must be developed collectively and have roots in the children's mutual and often conflictual engagements. I have used the knowledge I gained from studying the other children's situation as analytical ballasts.

I conducted this study in line with the tradition for critical ethnography (Lave, 2011), critical psychological practice research (Dreier, 2008; Højholt & Kousholt, 2014), and cultural historical observation practices (Hedegaard & Fler, 2008). In short, this means over a longer timespan to develop an explorative research practice in and across local contexts with the different co-participants who live their lives there. I produced written records from ethnographic field notes, participant observations, as well as from spontaneous talks and semi-structured interviews.

My research practice takes inspiration from Lave's conceptualization of research as the exploration of a theoretical/empirical problematic (Lave, 2011, p. 150). According to Lave, a problematic relates to the Marxist idea of praxis, i.e. "*...the idea that human beings make their lives together, in a complexly structured, historically and materially changing world*" (p. 161). A problematic is produced in an ongoing way by persons living under conflicting and contradictory conditions that lead to struggles and the creation of historical subjectivities in action (Holland & Lave, 2001). The social struggles emerge and manifest themselves in situated ways for subjects, as for example, when a child identified as "disabled"<sup>4</sup> is transitioning from one institutional arrangement to the other. As indicated in Lave's writing about critical ethnographic practice (2011), the research practice involves that the researcher:

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<sup>4</sup> To identify subjects as "able" or "disable" is an example of a struggle over historic subjectivities. The historic subjectivity that I promote by using the linguistic compilation "children with disabilities" over other historic subjectivities means taking part in the problematic of "ability – disability" in institutional arrangements which nowadays is referred to as inclusion. I choose to emphasize the subject first (child with disabilities) instead of "highlighting" the impairment as for example by referring to "a physically or mentally impaired child" because I see this as the least objectifying and most dynamic way to conceptualize and refer to children and disability in a changing world. See also note 2.

...looks at a specific aspect of social life in its relations made with, in, and through other objects, persons, institutional arrangements, contexts, and events. This requires establishing how specific aspects of social life are part of other human activity in a “world” that is historically construed. A problematic includes assumptions (an ontology, an epistemology, an ethics) about relations between persons and world, the nature of human being and how it is produced, in what terms we can know it and the nature of knowledge (Lave, 2011, p. 150).

In Lave’s understanding of research in, of and through changing practice, “*theoretical and empirical endeavours are mutually constitutive and cannot be separated*” (p. 2). In this way, she conceptualises research as ongoing apprenticeship-practices (p. 147ff).

When exploring children’s participation, I followed Dreier’s stance: “To gain a richer, more concrete and lively theoretical conception of the person, we must, paradoxically, not look directly into the person but into the world and grasp the person as a participant in that world” (Dreier, 2008, p. 40). The idea of looking from the position of the child, not on or into the person him/herself, has thus been a guiding principle. This decentred and context-sensitive take on acting subjects foregrounds participation analytically. Thus, I have looked for situations, where the children’s participation was “unproblematic” and/or became conflictual in relation to their inclusion in and across arrangements.

The following questions have served as tools for my analyses of the empirical material:

1. How do transitioning children with disabilities engage in social practice across day care arrangements? (What do they do and how are they orienting themselves?)
2. What does member-qualifying participation look like in the different contexts?
3. How do the different institutional arrangements condition the children’s transitional processes?

### **The Danish day care system**

Denmark has an extensive public day care system. Almost all children attend day care centres on a daily basis<sup>5</sup>. This means that almost all children conduct their everyday lives in and across institutional day care arrangements. Most children

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<sup>5</sup> According to the Ministry of Children and Social Affairs (2017), 90% of 1 to 2-year-old children and 98% of children between 3 and 5 years old attend general day care.

experience their first institutional transition when they are around three years old<sup>6</sup> when they move from the institutional arrangement for the youngest children, *vuggestue* in Danish, to the next institutional arrangement, *børnehave* in Danish, for children up to nearly six years of age. Until now, this transition has not received much attention in research, whereas the transition from day care to school has been explored in detail (see Ballam et al., 2017; Hedegaard & Fleer, 2013; Stanek, 2011; Broström, 2005; Højholt, 2001). Transitions within general day care, especially for children with disabilities is an overlooked research area<sup>7</sup>.

Since 2007 “children in need of special measures” have had the right to inclusion<sup>8</sup> in the general day care system in Denmark (see Dagtilbudsloven, §1, section 3, [www.retsinformation.dk](http://www.retsinformation.dk)). However, this does not mean that all children with disabilities are, in reality, included in the general day care system. Children with “*significant or lasting impairment of physical or mental functioning, where the need for support and treatment requires a special placement*” are placed in a different “specialized system” (See National Instruction on Day Care: Vejledning om dagtilbud mv. VEJ nr 9109 af 27/02/2015, section 102, [www.retsinformation.dk](http://www.retsinformation.dk)). When a placement in “the specialized system” is in question an expert professional makes an assessment of the specific child in relation to his/her needs for special support, treatment and training. In this parallel system, special groups or day care centres are set up as autonomous units in respect to pedagogy, administration and economy with the official aim of children’s inclusion back into the general education system, if possible and with time. This arrangement continues the dual track system, which might be indicating that children’s individual “needs” and bodily “functions” serve as

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<sup>6</sup> The transition from home to day care is of course the first institutional transition, if we view the family as an institution in the sociological sense of the word.

<sup>7</sup> As day care or preschool provision may or may not be private and/or part of national welfare models, day care arrangements vary a great deal in distribution, organization, costs, educational philosophies and traditions across nation states. This may provide a partial answer as to why the literature lacks a sufficient body of international research on general day care transitions. Additionally, over the years, the formal school has attracted more political attention and more research funding because the school is considered the most important public institution for children’s learning (Lave, 2012).

<sup>8</sup> Inclusion in day care centres in Denmark has different historical roots. Since 1919, the public day care centres have been part of the state’s social policy and have been part of the state’s preventive measures in relation to children at risk, mostly targeted at children and families in social difficulties (see Nielsen, 2013, p. 74f). With the ratification of the different UN conventions on *all* children’s universal rights, children with disabilities have stipulated rights to inclusion in the public day care system in Denmark. The UN conventions in mind here are The Convention of the Rights of the Child (1989), The Salamanca Statement (1994) and The Convention on the Rights of Persons with Disabilities (2006).

important selection criteria<sup>9</sup> for initial or continuing access to general day care. This may also indicate that general day care centres become provisional arrangements for children with disabilities who do not “function” well enough as measured by the institution’s existing practices. Said another way, participation in general day care centres can be seen as provisional or temporary for children whose participation cannot be accommodated within the typical day care practices.

The invention of the resource day care arrangement was an initiative that sought to bridge the historic gap between the general and the specialized system in order to provide a day care arrangement for most children. However, the existence of the dual track system still seems to call forward a selection procedure of individual children and their personal needs and abilities before granting initial placement or entry to the next age level. Not a critical investigation of how access to participation is conditioned by the different understandings of ability - disability in historical institutional arrangements. Paradoxically, the resource day care arrangement can reproduce differentiation practices that work against the rights to inclusion.

### **Children’s engagements in resource day care centres**

Children’s actions connect with both institutionally assumed age level standard of child “behaviour” and the local and diverse access-demands for becoming a member of the community of practice. The following field note illustrates how the presence of children with disabilities raises questions about children’s ways of taking part and how their actions may contribute to the institutional context.

“I wonder what she is investigating?!” a professional said, referring to Amina who had just transitioned to a new age level. Amina, a girl (“with Down syndrome”), was standing “by herself” on the playground in a bent over position touching her shoelaces. Now and then, Amina looked up. It looked as if she was noticing the whereabouts of the staff. The children “around her” moved about and were in motion. They formed groups that dissolved and formed again in new constellations. Sounds of activity filled the air” (Fieldnote, Bendix-Olsen, September, 2016)

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<sup>9</sup> When the understanding of children’s personal *needs, abilities and functioning* work as a state’s selection criteria for granted rights to access in general day care, it becomes even more important to study *how practically embedded understandings* of children’s needs, abilities and disabilities are influencing the everyday lives of children with disabilities.

The situation puzzled me that day and continued to do so, well after the fieldwork had ended. It made me wonder in what respects the day care practice, as well as my presence<sup>10</sup> in the new group, made Amina's participation stand out (Garland-Thomson, 1997, 2011). Was the professional commenting on Amina's engagement as that of an intentional acting subject or was she referring to Amina's anticipated inabilities due to her "Down syndrome"? Was the question marking an interest in Amina's perspective or was it marking the distance between the observer and the observed? My point here is not to pin down the actual intention of the professional or to pass judgements on the staff's professionalism. I include this field note only to point out that the actions of transitioning children with disabilities may reveal day care practice as contradictory and potentially including/excluding. On one hand, day care practices can enable children's personal development and social inclusion. On the other, day care practices can differentiate between children's (bodily) performances and thereby contribute to institutionalized selection procedures within and across educational arrangements.

The field note and questions that arise from it invite exploration of how children with disabilities are understood as acting subjects that conduct their lives in and across contexts, and who are dependent on other co-participants in order to be included socially and materially as members of the community of practice.

Below, I will explore how Amina is finding her way in the new age level setting and try to identify the different participation-barriers she faces in the process.

### **Visibility and material misfits**

In the field note, Amina was engaged in an activity on her own. However, she was neither out of sight nor anonymous to the professional or to me and probably not to her peers either. Material feminist Garland-Thomson (2011) describes the visibility of specific bodies, as indicative of the vulnerable position that arises from the reoccurring misfits between a materially arranged setting and the acting body. She states, that "*...the way that bodies interact with the socially engineered environment and conform to social expectations determine the varying degrees of disability or able-bodied-ness, of extra-ordinariness or ordinariness*" (Garland-Thomson, 1997, p. 7). For Garland Thomson the interacting body is key to exploring how ability - disability is produced and has social and personal ramifications in material action-contexts.

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<sup>10</sup> My presence as a participant observer investigating the inclusion of transitioning children with disabilities is, in itself, a practice that may produce intensified attentiveness towards Amina as a certain kind of subject.

Garland-Thomson relates vulnerability to disability in several ways. To her vulnerability is a universal, bodily-material, relational and political concept (Garland-Thomson, 2011). Vulnerability is universal as it is an inescapable part of our existence and of living our lives. Throughout our existence in time and space, we are all depending on others and are, in different situations and ways and to varying degrees, in need of care and help. However, the materiality of the world makes certain embodiments visible in exclusionary and dependent ways, which is where the concept, according to Garland-Thomson relates to politics.<sup>11</sup> To her, disability oppression materializes in everyday life and “*emanates from prejudicial attitudes that are given form in the world through architectural barriers, exclusionary institutions and the unequal distribution and access to resources*” (p. 591). Garland-Thomson argues that in many situations minority embodiments are produced when the materiality of the world does not accommodate to all varying embodiment types, as could be the case in transitions of educational arrangements and local settings. As a consequence, minority embodiments stand out as *misfits*, i.e. deviants up against unaccommodating material arrangements. In her words: “*...to misfit renders one a misfit*” (p. 593). To Garland-Thomson, it is important to determine the relation between the embodied subject and the material environment as the misfitting agent, never the body itself.

Garland-Thomson (2011) draws attention to important inter-connections between embodiment and materiality as an ongoing process of bodily becoming and world-making that is closely tied to everyday life in institutional arrangements. By paying attention to the material arrangement and how it co-constitutes participation Garland-Thomson shows how materially arranged disablement is situated in practice and has lived consequences for what she calls minority embodiment-types. For example, this process becomes animated during transitions with children with disabilities when they become visible objects of study, as they carry their bodies in surprising ways or carry out actions in ways that their co-participants consider “wrong” for their “age group”.

While Garland-Thomson focuses entirely on material arrangements; I have broadened her concept to include socio-material arrangements, such as

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<sup>11</sup> From a minority-embodiment-position, showing how a person’s visibility and vulnerability relates to materiality is political in two ways: (1) it is advocating for universal design and equal rights to participation for all embodiment-types in a rights based society (social justice) and (2) it may potentially have consciousness raising effects for a subject to be experiencing enduring misfit-relations. As a kind of subjugated knowledge of the “marked” subject, this knowledge may lead to oppositional consciousness and politicized identity (identity-politics, activism) (See Garland-Thomson, 2011, p. 597).

participation in playground activities and mealtime, as well as other ongoing daily produced “configurations” of socio-materialism.

When I observed mealtime during my fieldwork, I noticed that transitioning children would sometimes smear their food around, cry and not abide by the expected, socio-material conduct. In situations, such as these, they quite often were called “small” or “babies” among the other children, and especially older children would also point at them and say: “look!” Some of these children would signal a certain distance to the transitioning child’s surprising actions by moving away or by encouraging him/her to make more “extraordinariness”. In such situations, the transitioning children became very visible participants and at the same time relationally vulnerable.

This extraordinary visibility of newcomers with disabilities may indicate how failing to live up to the expected socio-material practice can lead to misfit-positionings of children with disabilities. Seeing Amina as “*a misfitting child*”, would position the peer-group as an already competent body of participants, i.e. as ordinary participants. An alternative way into the “participant-and-socio-material-access-problematic” would, from a material feminist disability studies perspective, be to see socio-material misfit-situations as opportunities for shared learning and practice development. Understood in this way, relational vulnerability and participation-problems can be regarded as educational springboards for the whole community of practice to engage in. When participation-difficulties are identified when they occur as misfit-situations, then they are discovered as positions and relations of limited access, and thereby efforts of practicing inclusion becomes an ongoing co-creation of socio-materially afforded everyday practices.

Borrowing from Garland-Thomson’s (2007, 2011) analytical concepts, we see the need for additional research to explore the socio-material conditioning of care and educational arrangements as they relate to small children’s inclusion (see also Holt 2003, 2004a+b, 2007, 2012 for more studies on materiality in school settings with an emphasis on inclusion).

I will now shift from Garland-Thomson’s work to the work of Lave and Wenger (1991) to further explore how transitioning children are active participants in social practice. This is a shift from analysing how power and privilege relate to materiality to focusing on membership of a community of practice in relation to accessing common learning resources. Both perspectives help identify how institutional arrangements set conditions for acting children with disabilities in situated practice.

## Becoming a member of a community of practice

Transitions studied from Lave and Wenger's (1991) theoretical contributions centre on the process of becoming a member of a community of practice and, within that process, the paramount question of how newcomers gain access to participation in the community's practices. As Lave and Wenger illustrate in their work on situated learning, the newcomer must have access to a rich textured landscape of practices within the community of practice<sup>12</sup> to be able to draw from and contribute to shared learning resources. With the term "*legitimate peripheral learning*", Lave and Wenger re-conceptualize learning as a process of social and personal transformation in communities of practice. They show that "learning" cannot, in itself, be an individual and purely cognitive endeavour; it is better grasped as a practical matter involving conflictual engagements with others. Likewise, gaining access cannot be reduced to the individual's personal choices and actions. "*Depending on the organization of access, legitimate peripherality can either promote or prevent participation*" (p. 103). This means that a person's participation must be analysed in respect to the way the community of practice is "recruiting" its members and how the members participate in producing the community through their overlapping engagements. A newcomers' limited access to shared participation is a sign of an enduring lack of overlaps of common engagements, leading over time to social marginalization.<sup>13</sup>

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<sup>12</sup> Lave points out that she and Wenger introduced the term "*communities of practice*" in "*an attempt to move away from an abstract universal notion of group or social category to emphasize that people are mutually engaged in doing things together!*" (Lave, In prep., p. 8)

<sup>13</sup> In a community of practice, not all members' engagements overlap or complement each other as social practice is always changing, conflictual and contradictory. This further means that there is no absolute "centre" of the community of practice as an end goal for the newcomer to reach in order to become a "full participant". The dualism of "peripherality" and "centre" as well as the "mechanistic" interpretation of newcomers' learning trajectories leading toward an assumed centre, Lave opposes to and criticizes in her recent work (Lave, In prep. 8). Lave describes a community of practice as an analytical concept meant to grasp participants' mutual and ongoing learning in situated local, historical changing practice. The work by Lave & Wenger (1991), I use to critically investigate how common learning resources are produced in, and through practice and how community processes take on different organizational forms in different social contexts (For elaborations, see Lave, In prep, p. 2f). In Lave's own critique of the 1991 book, she states that she regrets not to have emphasized more strongly, how "*institutions and the forces of production give some participants power over legitimate peripheral participation indivisibly*" (p. 9). This hidden access to power and learning resources is what I see is being reproduced and come into effect when 'children with disabilities' become extraordinarily visible, and are viewed as misfitting children in a certain socio-materially arranged action context.

As an example, Lave and Wenger (1991) describe how butcher-apprentices in a supermarket are only used as meatpackers; they are not involved in the wider range of butcher-practices due to the employers' wish to minimize wage costs. The legitimate peripheral learning of the apprentice is, therefore, "frozen," or put on hold, until the apprentice is granted with or otherwise gains access into new action possibilities/responsibilities within the community of practice. The example illustrates how the specific organization of access to community practices has social ramifications, in particular for the newcomer, but also for the community of practice in respect to holding back new learning resources and, thus, its opportunities for change and renewal.

By studying the newcomers' access-problems as a participation-problematic over time, we discover how everyday life is both structured by the old-timers and developed through participation with newcomers as potentially included co-participants. Marginalization seems to occur if the newcomer's actions and engagements are considered to be too unusual, become restricted or not recognized as valuable for the reproduction or renewal of the community of practice. Under such conditions for participation, the newcomer's actions work in relative isolation and the newcomer's personal and social development becomes stalled. From the work of Lave and Wenger, the transitional process of children with disabilities can be understood as distributed within the community of practice. How such distributed access-relations work in and across communities of practice, I will explain in more detail throughout the rest of the article.

In the next section, I follow up on how the transitioning children's participation-problems may reflect not only organizational or community dynamisms but could be identified as societal contradictions that will need to be handled collectively in order to support the child in his/her developmental task of forming a coherent everyday life.

### **The development of personal action potency**

In German-Scandinavian critical psychology drawing on Holzkamp's work (for example 2005, 2017), a subject develops his/her "*action potency*" in relation to his/her "*personal conditions*" for taking part in historically developed social practices (Dreier, 2003a+b, 2008, 2009; Højholt, 2016). According to Dreier (2003a), the subject develops his/her action potency and social self-understanding "*vis a vis his or her immediate situation in the social structure*" (p. 21). Thus, it is crucial to explore the child's different and changing conditions for acting and contributing to practice from his or her position as the participating subject. For example, as three-year-old Amina takes part in developing her

everyday life in a new age level arrangement, she is also encountering the societal contradictions that present themselves to her as personal conflicts.<sup>14</sup> Dreier argues that a subjects' participation is a dynamic, conflictual, and, a socially constitutive process:

As a person moves from one context to another, his or her position varies, and so does that person's possibilities, resources and degree of influence. It therefore takes different personal action potencies to participate in them, and a person participates in different ways and for different reasons in different social contexts. All this introduces complexity into every person's life and modes of functioning. Faced with this complexity, people do not just shift mode of functioning as they move from one context into another, as some would have us believe. Rather, they must to some degree compose their everyday lives, and certainly conduct them in and across different places in a way that depends on their varying personal scope, influences and co-participants. (p. 23f)

Following Dreier, the everyday life of the transitioning child is to a certain degree actively composed by the child in a co-constructed social practice. However, in the case of children with disabilities, the development of action potency within an institutional arrangement, where the children historically have been denied access, may in many respects be a too difficult task for them to handle. The day care arrangements do not necessarily facilitate participation-access seen from the position and perspective of the children with disabilities (Bendix-Olsen, 2017, 2018). The institutional arrangement may in fact, manifest itself as disabling to the child's development of a coherent everyday life, especially if the child's conditions for taking part are arranged or distributed in ways that limit his or her mutual engagements in local practice (Højholt, 2016). Here the care and differentiation practices of general day care come into play in contradictory ways for children with disabilities.

Returning to my initial field observation and looking at the situation from Amina's perspective, we see her actions as efforts to experiment with and orient herself in a new social situation. As noted earlier, Amina spent time looking at her shoes. When Amina looked up from her engagements with her shoes, she seemed to follow the movements of the staff. Here, she might have been trying to develop her conditions for taking part in the day care centre. However, neither professionals nor peers supported her emerging action potency in ways that

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<sup>14</sup> Garland-Thomson (2011) conceptualize such personal conflicts due to societal contradictions as material misfits and Lave and Wenger (1991) as an access and membership-problematic related to mutual engagements in social practice.

might have helped her become a more consolidated member of the community of practice.

The literature suggests that professionals with appropriate experience and knowledge can be very important co-participants in play and social encounters for children with disabilities and their peers. They can support the development of mutually meaningful engagements through their awareness and mediation of the institutional demands, possible misfit-situations and community based participation challenges. However, when I study my field notes, I cannot not find many examples of professionals' adroitly encouraging or facilitating common engagements with Amina as an "able" and competent, i.e. "*fit*" participant. It seems clear, that Amina would have benefitted from engaging more directly with the other children to increase the likelihood, that she would be seen by the other children as a contributing member of the new group. However, to support and promote the development of children's personal action potencies, professionals need extensive and situated knowledge of the children's different orientations and experiences. (For studies pointing to this practice-informed professionalism, see Ytterhus, 2003; Theorodou and Nind, 2010; Fisker, 2010; Bøttcher, 2012; Cecchin, 2013; Hilleshøy et al. 2014; Hilleshøy, 2016; Janson, 2010; Luttrupp & Granlund, 2010; Hellblom-Thibblin & Marwick, 2017).

### **Common engagements as community resources for transitioning children with disabilities**

The work by Garland-Thomson (1997, 2011, 2012), Lave and Wenger (1991) and Dreier (2003a+b, 2008, 2009) have each contributed to the exploration of personal and common engagements as interrelated in dynamic and complex ways in different contexts and institutional arrangements. From this theoretical perspective, I will illustrate *how* children with disabilities can be limited in developing their action potency both *before* and *during* changes in age levels, because of *limited access* to community resources.

Typically, children in this municipality change groups when they turn 2 years and 10 months old. However, since Amina is a "child with Down syndrome", her parents and the professionals wanted her to stay somewhat longer in the younger group so she could "develop further" and, with time, be better suited for the transformational processes ahead of her with the older children.

This decision to give Amina more time before transitioning to the next group brought unexpected troubles for the professionals. The children Amina knew from the group moved up to the next group when they turned

2 years and 10 months old, and their spaces were immediately filled by one-year-old babies. As time went by, the staff found it increasingly difficult to handle Amina's needs as well as those of the new babies in the group. From my observations in the group and from talking with the staff, I learned that Amina was sometimes biting the smaller children, which put increasing demands on the professionals to keep all children safe. As a solution, Amina's caretakers (family and professionals) decided that Amina would transition into the older group. She had now turned 3 years 1 month old. (Field notes, Bendix-Olsen, September, 2016)

In this case, Amina's caregivers made a well-intentioned decision to postpone her transition for some months because of her "special needs". The professionals' understandings of Amina's "impairment" and their wish to give her more time to develop as an individual made a prolonged stay seem like a plausible and advantageous solution. Meanwhile, however, the world changed and likewise Amina's conditions for taking part in the group also changed as the rhythm of the day increasingly revolved around the needs of the babies. What initially was intended as a protective measure gradually put a spotlight on Amina's participation and made her increasingly visible (Garland-Thomson, 2011). The situation shows us how Amina's conditions for sharing her engagements with others --as part of conducting an everyday life in a changing world --connects to the collective organization and responsibilities of the day care centre as a whole, including such elements as the staff-ratio and the professional's obligations to provide incoming infants and families with a good start (Dreier, 2003b).

When Amina's "needs" became evident, planned for and acted upon without taking into consideration her relations to her transitioning peers, she became at risk of exclusion. These problems arose because the focus was, basically, an intervention to address Amina's impairment, not on embracing and supporting her participation rights by ensuring that she had access to the community of practice as the group's constellation changed. Amina's new group was located in the same day care facility --however, the professionals in the two groups did not cooperate very much on helping the children develop their everyday life across age level-arrangements. This organization of distinct groups was due to autonomous planning within each group, different daily routines and activity times primarily connected to children's perceived needs and ages, which functioned as structuring principles.

The receiving community of practice was larger and more complex in terms of the number of children and their different engagements; for example using the signing practices that Amina knew from her earlier group was therefore much harder than anticipated for the professionals. Thus, Amina participated in the new

age level without much signing practice to help mediate between her and others. The following field note illustrates Amina's situation:

It is after lunch in the middle-group and the professionals are guiding the children to the playground outside. As I am heading down the tiled path in front of the 0 – 2 year 10 months-old's building, I see a professional holding Amina's hand as they go in the direction of the playground. Amina stops in front of the window to her former group setting. She slaps her hand against the window and looks in. The professional is waiting next to her with some sand-play-tools. The professional seems impatient (eager to reach her destination), and her body signals that she wants to be on the move. Amina is not moving. She sits down on the pathway. The professional says standing: "We'll find some sand for this" and points to the tools that she holds close to Amina. Amina reaches out and takes a shovel. The professional kneels down and says: "No, not into the mouth". Amina is exploring the tools with her mouth. Amina turns over and moves towards the window. The professional says: "No", followed by: "Out on the playground". Amina softens her legs when the professional grabs her. The professional tries to hold her by her hands. The professional lifts and walks Amina to the sand pit. Amina sits down alone when arrived at the sandpit. (Fieldnote, Bendix-Olsen, 2016)

The situation is interesting, as Amina seemed to be using an opportunity to reach out and connect with an already well-known context by sending greeting gestures to those inside the building. I have also seen other transitioning children and their parents do such daily rituals. The former setting is, I argue, still an important part of Amina's everyday life, but connecting with this context is not an option any longer, even though its "materiality" is so close by. Interestingly, the professionals paid positive attention when her peers waved at the children and staff in their previous group. However, the professional in this situation seemed to view Amina's gestures as "acts of impairment," perhaps because she did not produce any accompanying words or narratives as the other children did, or because of her frequent incorporation of sensual and tactile engagements that differed from those of her peers.

As the professional tried to motivate Amina to go to the playground where she now "belongs", Amina looked as if she were protesting or resisting in a bodily fashion (see Ytterhus & Åmot, 2014 for a study on diagnosed children's resistance to educational rule enforcement). Amina's "soft legs" seem to reveal that the professional did not see her intentions as directed and her actions as unfulfilled. Clearly, Amina and the professional had very different understandings of this situation. Over the course of the day, it seemed that Amina might experience many such disruptions of her engagements that would work

against her understanding of herself as a competent and orienting subject (Dreier, 2003a).

Interestingly, in contrast to the restricted action-possibilities that Amina often had, I observed something quite different when a professional engaged in playing “music” with her on the playground’s outdoor instruments (a big wooden xylophone and hanging metal rods), especially when the other children assembled around them and took part in the music-making. In situations such as these, Amina was happy, as indicated by her bodily gestures signalling joy. When the professional actively engaged with the children in less structured and rule-based play, s/he helped create a social oasis for Amina (see Luttrup & Granlund, 2010 and Theodorou & Nind, 2010 for studies exploring adult-supported interaction in play situations in the day care settings).

The new age level seemed to present many socio-material barriers to Amina’s inclusion, but as shown, not in every situation. The materiality also “welcomed” and engaged her. The professionals also seemed to provide opportunities that could expand Amina’s action-possibilities when they collaborated in activities where materiality and social practice invited children and adults to explore and experiment creatively together. When they did so, they were taking part in communal world-making processes where Amina was included more fully as an equal and contributing participant (Garland-Thomson, 2011). However, these situations were infrequent during my observations.

Amina stayed in the group for 14 months until it was time for the next transition into the group of the oldest children. The upcoming transition she was expected not to be able to manage as the staff ratio was even lower in comparison to the middle-group. Therefore, she was transferred in a special day care centre for children with “more severe needs.” As a professional said in an interview after Amina was moved out of the middle group: “Seen from Amina’s needs, it was better for her to be placed in the special day care”. The professional’s words illustrate that the “needs” and opportunities of transitioning children with disabilities correlate with the possibilities open to them to become fully participatory and legitimate members of an age based institutional arrangement and community of practice.

## **Conclusion**

The article has presented a social psychological exploration of how the transitioning process for a child with disabilities relates to specific institutional arrangements and socio-material configurations of everyday life. When exploring children’s participation from a social relational view of disability, an

individualized focus on impairment, abilities and development can be transcended. This is helpful, when we want to investigate what it takes for all acting subjects to develop their local conditions for inclusion in general day care.

I have analysed how inclusion-barriers for children with disabilities may occur when interventions are targeting individual children's "impairment" and "special needs" and not their participation rights as contributing members of the day care community.

The analysis suggests that the inclusion of transitioning children with disabilities depends on building up common engagements that support the child's development of action potency in expansive and transformative ways within the activities of the receiving community of practice. The analysis further reveals that it is productive to understand social marginalization as limited access to common engagements over time.

I have used the question that initially triggered this study – "I wonder what she is investigating?" – as a starting point to explore how the access-and-inclusion-problematic unfolds for a transitioning child with "Down syndrome". The question has potentials to be a productive, i.e. a critical inclusion-question if it leads to additional decentred investigations of children's conditions for conducting a coherent everyday life with others. Children with disabilities become vulnerable participants if their engagements and perspectives do not inform the development of social practice in ways that accommodate more diverse action possibilities, both materially and socially. In order to transform and develop existing day care practices, professionals must experiment with their practice in dialogical and responsive ways that include all children as co-participants, and without neglecting other obligations within the institution. In this way, local attempts to develop more inclusive practices connects to wider political struggles of how to care and how to educate small children without spending unnecessary economic means. Caring for all children as vulnerable and interdependent beings in a state supported system where economic accountability and cost effectiveness is also structuring day care practice, seems to put contradictory demands on the professionals responsibilities, possibilities, and choices of when, how and whom to include. Thus, the segregated system still exists and, paradoxically, is perpetuated within the general education system, including resource day care centres. This will likely be the case as long as children's development is understood in individualized and decontextualized terms of ability and disability – valued and measured up against an abstracted and generic understanding of the human body.

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