Kriminologiska institutionen

Stockholms universitet

On the Right Side of Wrong?

Viewing 'The other' through a Lens of Normalcy, Respectability and Functionality

Preface

"What's wrong with her?"

I can almost sense it, those words running through everyone's minds. It is a sensation which rushes through my body. "What's wrong with her?" It cannot be seen but it is there, and I know what the talk will be about, once I leave the room. And at that moment I feel that there is indeed something inherently very wrong with me, as if my 'otherness' ran through my veins and, like a poison, polluted my blood, my soul and my mind. It is only thought but has become my own reality. When repeated too many times, anything can become real. It is this sensation of not being normal, proper and, indeed, functional that first made me interested in issues concerning 'the other'.

From here it all started. It was as much about learning about them and 'the other', as it was about learning myself. None of this would be possible if it were not for the persons who choose to sit themselves down with me to tell their life histories. I would like to give my sincerest thanks to these individuals, who allowed me to listen to their accounts, echoing their pains, sorrows, destitute, but also brimming with joy, hope and – perhaps most importantly – their anger and defiance. And indeed, for that, these individuals and their life histories are deserving of the deepest respect. Immersing into their faiths have also changed my own perceptions about myself. I can now see clearer how my own 'dysfunctional' identity has locked me into 'the other'. Seeing their resistance has forced me to challenge these sentiments and to view my otherness through a new lens, one which sheds away the normative notions of how I am supposed to be and behave. Such demonstrations of bravery can only instill me with hope and gratitude.

But above all I am forever grateful towards my mother, for her unyielding support and love. Thank you, mum, for being the rock in the tempest of my life, and without you I, surely and indubitable, would not be alive to see this day, or the days to come. And thank you mum, for seeing past all things that is 'other' – for seeing me for me.

Abstract

Seeking a more nuanced and reflexive treatment of criminality and deviance, this paper's aim has been to demonstrate how 'the other' and 'the other life' is constituted discursively and how such constituting can be conceptualized in relation to the constructs of normalcy, respectability and functionality. The material consists of 8 life history interviews, from a total of 5 participants, who have all lived 'the other life'. Employing a narrative analysis, it was examined how the narrators positioned themselves in their biographies in relation to the discursive conceptions surrounding the desired life and 'the other (life)'. The findings demonstrate how their narratives unfold against the backdrop of middle-class and normative conceptions of how life should be lived. When positioned as 'the other', the narrators could be discursively rendered as abnormal and pathological, inappropriate, unworthy and abject, dysfunctional and 'un-abled'. While such notions were oftentimes internalized in the narratives, the narrators also negotiated and resisted these connotations. Thus, through rejecting normativity, 'the other (life)' could be 'queered', and in so doing, chisel out new avenues of knowledge.

Key words: The other, The other life, Normalcy, Respectability, Functionality, Queer theory, Life schedules, Life course criminology

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Introduction, purpose and research questions

> We are looking for you who are service-minded, happy and driven. You need to be flexible and good at establishing relations with customers. As a person, you are a team-player with good collaborative skills. You are driven by giving good service and you are professional in your treatment.

The quotation above is the translation of an excerpt from a job advertisement published in March 2017 on the webpage of Arbetsförmedlingen (the Swedish labour exchange office). The job in question? A store clerk for a bread shop. I have chosen to include this as a typical example of contemporary images of how we as working subjects are expected to be. Built into this picture of the 'employable' and 'work-abled' subject are notions of the functional self, which is productive, healthy, adaptable and sociable. But in itself, this advertisement tells a story of functionality and is a typical example of the increasing normative expectations placed on the subject in order to pass as employable. In a society were productivity is lauded as the imperative to which all should aspire, it also demarcates desirability from the abject, health from pathology and normal from 'the other'. It maps out which subjects can be held as desired, appropriate, intelligible, legitimate, acceptable, worthy, employable, healthy – and, indeed, normal, respectable and functional – and, in so doing, effectively closes the door on those who fail to live up to these standards. It is also signifying of a change which has taken place in Sweden and other Western countries the last decades where the frames of normalcy are constantly narrowing (Lander 2017). We live in a society that leaves little room for 'the other' while it consigns increasingly more subjects as 'other'.

These notions assemble and constitute the normative frames which supplies us with a template for how we are supposed to be if we wish to be rendered as worthy subjects in a postmodern society. The job advertisement in this example builds on and is structured by this framework – and at the same time is complicit in the reproduction of these very frames. This paper is interested in these frames of normativity, how they are constructed and reconstituted through discursive practices. It pertains to the subjects whose lives these frames render inappropriate and undesired, unproductive and unfunctional, immature and unintelligible, unrespectable, abject and unworthy.

This paper is rooted in two lines of critique raised against (life course) criminology. Firstly, the field has been rightly criticized for its individualistic approach to criminality and deviance. Guided by a middle-class perspective, scholars have falsely ascribed potential

desisters a range of freedom of choice and have failed to consider how the road to desistance is impeded by the structural reality conditioned by contemporary late-modern society (King 2012: 331). From a poststructuralist standpoint, life course criminology has also garnered critique for its normative and essentialist handling of the life course, aging and desistance. As Lander (2017) remarks, life course criminology is at fault for ascribing desistance to a commitment to a conventional, 'adult' lifestyle (*cf.* Sampson & Laub 2003: 147) and/or a maturation process which supposedly increases the individual's self-control (*cf.* Hirschi & Gottfredson 2000: 56). Interrelated to this critique, discussions of aging, desisting and 'settling down' is embedded with normative understandings of how life *should* be lived. Such conceptions of the 'right' way of life is grounded in, and reinforced by, a matrix of respectability, normalcy and functionality, a matrix which is ultimately located within a middle-class framework. *'The other life'* is askew by chafing against this template (Lander 2015: 273f).

Concurring with this critique, it is in the interest of the present paper to provide life course criminology with a more nuanced, critical and reflexive view of 'the other' and 'the other life', one which shields its gaze away from the normative spectacles which has currently permeated the field. This paper seeks a critical examination of how 'the other (life)' is discursively configured and constituted, with the goal of mapping the gap between normativity and deviance. For this purpose, the narratives of five individuals have been considered. These have in common that they have lived a life which is 'other', meaning that their lives chafe with the normative conceptions which exists in society of how we are supposed to life and be. The analysis of their biographies focuses on how the narrators become *discursively* known as 'the other', by chafing with notions of normativity. This is achieved by examining how they become positioned[1] (as 'others') in their narrative, and how these positionings unfold against a backdrop of the societally embedded and normative conceptions surrounding the desired, 'straight' mode of living and 'the other life'. These conceptions become known through discourse and thus constitute *discursive conceptions* of the desired, 'right' and 'correct' life (*cf.* Lander 2015: 275).

As a second step, this paper moves to a theoretical level, by considering how the constituting of 'the other' and 'the other life' can be *theoretically* (re)conceptualized in relation to the theoretical constructs of normalcy, respectability and functionality, which together form the

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[1] To 'be positioned' designates that the narrators do not always actively, consciously or willingly make or perceive themselves as 'the other', or understand themselves in relation to this position, in their narratives.

basis of normativity. In that regard, 'the other (life)' is chiselled out by delving into the schism that arises between respectability and abjection, normalcy and abnormality, functionality and pathology – and how these notions make up and shape the *discursive conceptions* surrounding 'the other (life)'. It is, as will be argued in the following paper, through the lenses of normalcy, functionality and respectability that 'the other' is known and constituted.

- How do the interviewees, through their narrative positionings, become discursively constituted as 'others' in their narratives?
- How does the positioning, and, hence, the constituting of, 'the other' and 'the other life', unfold against the backdrop of discursive conceptions of the desired life?
- How can 'the other (life)' be theoretically conceptualized in relation to the concepts of normalcy, respectability and functionality?

Immersing into these inquiries is of essence as the process of knowledge production is implicit in the (re)production of power and legitimacy – particularly so given criminology's historical tradition of being complicit in producing knowledge *of* the marginalized and *for* the powerful, which has entailed the construction and application of stigmatizing labels onto already powerless subjects (Lumsden & Winter 2014: 4). It is through "seeking out the creaks in the discourse of normalcy" (Lander 2017, my translation) that the discursive conceptions surrounding 'the other' can be deconstrued and broken down.

Perspective and position

The theoretical frame of reference which I adopt to conceptualize the narratives draws on a mosaic of various theoretical perspectives. Adhering to a social constructivist standpoint I view the subject as constantly *becoming* discursively. How we are conceived through the lens of others is in turned informed by the normative conceptualizations relating to our social position, which holds an array of discursive understandings (Lander 2017). As subjects, we are constantly being 'made' and constituted from the outside through discursive power relations (Mattson 2005: 25f), at the same time as we actively create ourselves in relation to various discursive conceptions (Lander 2017).

The usage of the term *'the other'* is informed by social constructivism where conceptions of otherness and deviance is always identified and defined in relation to conventionality and normalcy. 'The other' is deviant by being the inversed to the normative (Lander 2003: 2).

This understanding converges with a poststructuralist frame of reference where we rely on distinction to create meaning (Ambjörnsson 2005: 44f). It is through the establishing of the 'straight line' that 'the other life' is constituted (Lander 2017). 'The other' and 'the other life' is chiselled out of the normative conceptions which exists in society which forms a template of how we are supposed to be and live – conceptions built around normalcy, maturity, respectability, functionality, health, etc. It is through (chafing with) these constructions of normativity that 'the other' can be discerned. Being align with these normative notions is constitutive of the 'appropriate subject' and 'the desired life', whereas 'the other' and 'the other life' become known and identified by being *discursively* placed in polar opposition. Thus, it is through notions of normativity that 'the other' becomes known as abnormal, immature, un-respectable, pathological and dysfunctional (*cf.* Lander 2015: 274), and hence can be said to be *discursively constituted*. To break down these discursive (and normative) conceptions of 'the other', this paper turns to queer theory, as it recognizes how processes of normalization are interlinked to power, and how this in turn shapes our identities (Ambjörnsson 2005: 47). For this paper, queer theory appear as especially suitable as its predominant strength lies in its acknowledging of multiple subjectivities and the engagement with 'unliveable lives', lives which have been deemed to not matter (*cf.* Ball 2013: 30f).

My own contribution can be rendered as a critique against the positivism and normative thinking which has permeated today's criminology anew (Lumsden & Winter 2014: 2). As criminological theory building is built around "a façade of normalcy", there is something very feasible in seeking out the cracks in the wall (Lander 2017). Hence, it is neither the aim nor in the interest of this paper to explain deviance, but rather that of "breaking down and analysing the normative conceptual frames" which circumscribe much contemporary (life course) criminology theorizing (Lander 2015: 272). It does so by moving away from the positivistic, empirical, modernist and individual-oriented tradition, which is *explanatory* and serves to reproduce conceptions of 'the other' (Ball 2013: 27; Lander 2015: 272). Such an approach calls for the disentanglement of oneself from the parameters, standards and value system of the dominant framework when conceiving 'the other', or, as Ball contends (2013: 310f), to '*not* be governed'. By refusing to include the 'queer' into life course criminology, 'the other life' becomes emancipated, thereby creating new possibilities for knowledge.

Theoretical & empirical underpinnings

Queering the life course

Organized around a normative template, by determining what, how and when specific transitions should occur, the life course functions as a "prescriptive timetable for the ordering of major life events" (Neugarten et al. 1965: 711; Hogan & Astone 1986: 116f). While we as young adults are to enter higher education and/or the labour market and move out of our family homes, we are expected to be enrolled in employment, marriage and family formation in middle adulthood, to, finally, retire in late adulthood (Carlsson 2013: 663). In life course criminology, deviance and criminality is commonly associated with adolescence, a period typically delineated as unruly and permeated with rebellion and boundary-transgressions (Lander 2017). The 'appropriate' delinquent subject in life course criminology makes the desired transitions towards a more settled down lifestyle, popularly associated with the process of 'knifing off' from antisocial activities and network, and to enrol in typical 'adult' institutions, with a re-channelling of energies towards spouse, employment and family formation (see e.g. Glueck & Glueck 1937: 122f; 1946: 84ff; Sampson & Laub 2003: 145; Rocque 2015: 341). Thus, whereas persisting in criminality or drug use thus constitute a mode of living askew with the normative guidelines, desistance, on the other hand, becomes articulated as doing normalcy by following the desired temporality (i.e. leaving the 'other life').

To capture the desired temporalities to which we are expected to live, Halberstam (2005) introduces the concept *life schedules*. These socially constructed guidelines serve as a template for how life 'should' be lived. Coded from a middle-age, middle-class position, these life schedules are embedded by conceptions revolving of what constitutes an appropriate and desirable way of life. To live a 'coherent' life means going through various events and transitions, and that these occur at the right place and time. Thus, we chart the 'real' and proper life through a line development, with the self as successively maturing, and centred around longevity and generativity (Halberstam 2005: 4). This prescribed logic of heteronormative temporality is the emblem of respectability and normality, and, as a consequence, determines who can become proper and respectable subjects (Sandberg 2008: 134). Lives which do not follow the guidelines of bourgeois respectability, on the other hand, become labelled as immature, problematic and/or pathological (Halberstam 2005: 4f). This *other life* is "askew and does not follow the straight line of normality and progression"

(Lander 2015: 274) and falls outside of the boundaries of desirable temporality and is contrasted with a 'right way' of living and being. Viewed from a queer perspective, such lifestyles represent the antithesis of bourgeois respectability, by not adhering to its central tenets of longevity, stability, production and reproduction (Halberstam 2005: 4). Instead, these subjects:

> "live outside of reproductive and familial time as well as on the edges of logics of labor and production. By doing so, they also often live outside the logic of capital accumulation" (Halberstam 2005: 10).

Such individuals are antagonistic to a heteronormative temporality by opposing the desirable modules of living (e.g. generativity, stability, longevity and inheritance) (ibid: 10, 6). In that sense, they are 'queer' by straying from the course, the 'straight line' which we are expected to follow (Ahmed 2006: 16f). In this context, 'queer' does not designate an identity category, but instead refers a position or an attitude in relation to what is conceived of as 'normal'. Thus, 'queer' should be conceptualized as oppositional, as being at odds with the normal, normative, dominant and taken-for-granted (Ball 2013: 25f).[2] What is normal is always understood in relation to a designated opposite – the prerequisite for normality is abnormality (or deviance) (Ambjörnsson 2005: 114). My own usage of 'queer' needs therefore be viewed as *uncoupled* from gender and sexuality, and adopted with the primary aim to deconstruct and unpack notions of normality and normativity (*cf.* Ball 2013: 23). Similarly, although 'straight' often refers to a heteronormative sexual orientation, the term can also be used to signal the 'right' way of living and being (Ahmed 2006: 16).

Respectability, legitimacy and worth

Respectability is a concept employed by Beverley Skeggs (1997) in their study of working-class women on caring courses in the UK. In her view, respectability is inexorably linked to class as it is the insignia of the bourgeois, placed in relation – and opposition – to the working class who, by comparison, was depicted as dirty, pathological, morally corrupt, sexually outgoing and dangerous. As a group, the working class has been outlined as a threat to society and its social, and moral, order. As the embodiment of moral authority, respectability is differently allocated, with only some groups deemed as having to capacity to be moral. It is furthermore intimately linked to the notion of worth, where "[t]o not be respectable is to have

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[2] 'Queer' will be employed here in its verb-form to denote the active resistance against the (hetero)normative (i.e. 'to queer'). 'The other life', on the other hand, designate a lifestyle which chafes against normative notions, whether or not this is the result of an active choice.

little social value or legitimacy" (Skeggs 1997: 3). Respectability is interwoven with a bourgeois mentality and centres around traditional adult institutions. As Hall and colleagues note, respectability is interwoven with work, discipline and family. In contrast, crime or 'moral misconduct' functions as an avenue out of respectability (Hall et al. 2013: 140). Drug use, in particular, is conceived as an un-respectable activity (Lander 2017) and is interlinked with notions of the un-abled citizen as disconnected from economic life (Smith & Riach 2016: 33).

Functionality and pathology in a neurobiological discourse

Rather than viewing disability as a quality inherent in the individual, critical theorists argue that disability should be located to the social context. Constructions of normalcy and health is thus informed by societal expectations and normative assumptions of the subject's functionality (Burr 2015: 43), and is furthermore framed in relation to conceptions of the 'good' life (Lander 2017). The field of medicine is collaborative in identifying, naming and reproducing normative conceptions of the appropriate, normal and healthy. These conceptions can be linked to socially embedded notions of how life should be lived, and are informed by a template of middle-class norms (Fraser et al. 2014: 41; Mattson 2005: 19). One way of defining health and pathology is through the practice of diagnostics, where pathology is 'given a name' and, thus, "locates the parameters of normality and abnormality" (Brown 1995: 39). In this process of 'naming and framing', individuals classified as 'troubled' are conflated and merged into one presupposed homogenous category which is 'essentially different' from the non-troubled (Järvinen & Andersen 2009: 867).

This turn to medicalization occurs in a society where neuroscience has become the dominating rationale. Here, various 'pathologies' are placed within an individualized discourse held as objective, a-political, scientific and, hence, natural (Lander 2017). This *biomedical self* is positioned as devoid of, and decoupled from, a socio-structural context (Esposito & Perez 2014: 422), where impersonal biological forces acting upon the individual become the reference point for understanding mental distress (Brown 1995: 46) or drug use (Vrecko 2010: 53). As individualized, de-politicized and naturalized, social inequalities are turned into shortcomings within the individual – rendered as an insignia of 'otherness' rather than a response to external circumstances (Rosenfeld & Gallagher 2002: 358; Fraser et al. 2014: 41, 56). As Lander argues, when neuroscience is the dominating narrative, the normative frames sharpens and tightens, leading to a delimitation of normalcy. Social

problems are generally understood as stemming from an incapacity within the individual to adequately adapt to the demands and expectations surrounding the *functional* life (Lander 2017). This turn to responsibilization and self-governing can also be spotted in the current approaches in psychiatry (Esposito & Perez 2014: 417), drug dependency treatment (Roumeliotis 2014: 344), and correctional facilities (Pollack 2010: 1271; Nilsson 2013b: 33).

This shift is in line with a neoliberal sentimentality, as dictated by a market rationality (Larner 2000: 6f), where productivity and the ability to work become quintessential and indicative for the healthy and normal individual (Rosenfeld & Gallagher 2002: 357; Smith & Riach 2016: 27, 33). Behaviour not align with this paradigm (not consuming and producing) becomes characteristic of sickness (Crowe 2000: 73; Fraser et al. 2014: 15), and is resolved with medical practices of diagnostics and medicalization (Esposito & Perez 2014: 416). Such tendencies can be discerned in the Diagnostic Statistics Manual (DSM), where, in line with middle-class ideals, medical models are permeated by normative assertions of what constitutes a meaningful and productive lifestyle – namely a life centring around, and structured by, employment, family life and 'healthy' pursuits, where time is used in a culturally sanctioned way (Fraser et al. 2014: 41ff). Similarly, Crowe charts how the construction of normality in the DSM centres around the healthy subject as productive (functional) and self-autonomous, with the capacity to moderation (self-control and predictability) and rationality (Crowe 2000: 72ff; see also Roumeliotis 2016: 11ff). The juxtaposition of individualization, biomedicine and bourgeois sensibilities in constituting 'the appropriate life' is encapsulated in Fraser's, Moore's and Keane's remark: "a disordered brain equals a disordered self and a disordered life" (Fraser et al. 2014: 2014: 55).

Undesirable and excluded

In the wake of a neoliberal rationale, the ambit of the welfare state has substantially narrowed and changed (Mattson 2014: 9). Accordingly, notable shifts can be discerned in the governing of social marginality, particularly those subjected to government intervention (e.g. welfare recipients, prisoners and parolees, substance users, mental health patients). This has profoundly re-shaped the sphere of social work which now increasingly engages in regulatory practices directed against marginalized people – i.e. individuals deemed incapable of exercising responsible self-regulation (Pollack 2010: 1264ff; see also Garland 2001: 175). As a result, treatments directed at these groups take on a significantly harsher and more conditional form (Stepney 2006: 1294). Amidst these changes, we are pressured to compete in

an increasingly tougher (and specialized) labour market. Subjects who cannot match employer's expectations, who fail to find a marketable 'niche', or have a history of drug use or prison stays are effectively closed off from the employment sphere (Nilsson et al. 2013a: 299f; Bäckman et al. 2014: 394, 396).

Whereas productivity is a highly-valued quality ascribed to some, it is assumed to lie outside the reach of others (Crowe 2000: 73), with the drug user serving as one such contemporary example (Smith & Riach 2016: 28, 31). Groups who are not included in the working populace become viewed as unproductive and as a burden to society (Heikkinen & Krekula 2008: 27). By being barred off from work and consumption, two of the most univocal markers for social inclusion, these individuals are locked out from conventional ways of living and being (Nilsson & Estrada 2011: 243). It follows that these individuals run the risk of being coded as unwanted, non-functional, pathological, deviant and, as a result, unworthy, abject and unrespectable subjects (Lander 2017), labels which legitimize their marginalization (Farrugia 2010: 74f).

Constituting the self

Rather than there being one self, there exists a myriad of different selves to which the interview subject always relates and draws on (Holstein & Gubrium 2000: 105). Always grounded in social positions, identities emerge in "the subtle interweaving of different threads" which form the fabric of a person's identity. Identities are construed out of the raw materials of various discourses which surround these threads (Burr 2015: 123). These various identities form *subject positions*, by shaping how we become positioned, or 'hailed', as subjects within the discourse. Inherent in discourses are implicit positions that a person can plausibly take up and become (Burr 2015: 130; Skeggs 1997: 12). The possible array of selves is therefore limited to "only those selves the social order and culture make available" (Presser 2009: 185). Accordingly, only *some* discursive practices may become conceivable, for which reason the self can be viewed as a practical discursive accomplishment (Holstein & Gubrium 2000: 70), or a "discursively conceivable identity" (Lander 2015: 275). The interviewee narrates *in relation to* the social positions she inhabits (e.g. drug user, mother, ex-convict) and the discursive conceptions which these social positions give rise to (ibid: 273).

The discursively conceivable identities which arise in the narrators' stories about themselves, are also informed by, and shaped in relation to, dominant frameworks and culturally available,

and institutionally embedded, discourses (*cf.* Burr 2015: 87). Institutions 'make up' their clients by transforming their identities into 'troubled identities', and in so doing also establishes what categorizations are possible and plausible (Järvinen & Andersen 2009: 867). Governmental officials (e.g. doctors, psychiatrists, social service workers, prison officers) and other agents also have the power and legitimacy to define their clients (Lander 2003: 289f), and to make such labels appear natural or self-given. This illustrates how we as subjects cannot live outside the discursive frames as these determine what kinds of subjectivities are at our disposal.

Description of material and method

Producing knowledge about 'the other'

Any discussion of producing knowledge must consider how power informs what forms of knowledge will be normalized and legitimized, by determining which groups will be constituted as worthy subjects – and objects – of knowledge, and this is in turn contingent on our locations (Skeggs 1997: 18). When assigning labels, we also come to deem some accounts to be significant while dismissing other voices as incapable of telling us anything. Thus, power and legitimacy becomes the site of assigning and withholding competence (Holstein & Gubrium 1995: 19). 'Giving voice' to 'otherfied' subjects whose accounts and competence may elsewhere have been de-legitimized thus appeared especially important here. In the present study, I sought to constitute the participants as competent storytellers by receiving and treating them as experts in the issue under study (i.e. 'the other life') – and thus to make the them as *subjects* of knowledge rather than *objects* to my inquiries.

The institutional practices which shape knowledge production also entail that one cannot speak of deviance and 'the other' without recognizing the middle-*classed* contingencies of such practices. 'The other' becomes 'known' through the normalized knowledge produced from the position of the middle-class 'knower' (Lumsden & Winter 2014: 4; Skeggs 1997: 18f). Reflexivity entails adhering to the unequal distribution of power between the 'knower' and the 'known' (Lander 2003: 105f) – as the observer is accorder a greater claim to the truth than those being observed (Burr 2015: 173) – and how this power dynamics bear effect on the knowledge that is produced (Lumsden & Winter 2014: 2). Thus, reflexivity can be translated into me being transparent about *who I am* as a 'knower'. With my middle-class up-bringing I

inarguably share little of the background characteristics which I presuppose the research subjects to have. I know little of the pains of economic, social and psychosocial insecurities. Nor have I experienced the shame and stigma which often accompanies a working-class position (*cf.* Skeggs 1997: 90ff). Given my academic capital, I also possess a theoretical knowledge of 'the other (life)' and the discursive conceptions surrounding through this construct, through which the research subjects become 'known'. It is from this social position that my conclusions are drawn and legitimized.

With that said, having an autism spectrum disorder, I have my own biography permeated with an omnipresent sensation of deviation, grounded in painful experiences of not 'fitting in' adequately, of not being normal and intelligible, functional and 'apt', appropriate and worthy. These experiences have profoundly informed my theoretical interest, the questions asked, the conditions of the interview conversations, the interpretations made and the conclusions drawn. This 'sensitivity' to the subject matter, however, proved to be a resource in the field work, as it allowed me to identity and understand the aspects of 'othering' in the narratives. It is *because* of the position where my own 'otherness' is confirmed and reproduced in social interaction that I have become so sensitized to these experiences. Through this common denominator our 'horizons of meaning' appeared tinted with colours of similar hue. It was a lens of understanding through which their experiences were filtered and taken-up. Being open about my condition towards the participants may have served to abridge at least a part of the otherwise rather large divide between us by achieving a more trustful relation with the participants.

Finding the 'right' (kind of 'wrong') people

The intended target group was individuals who have *prior* experiences of living 'in the margins' (social marginalization), which meant having had a history of drug use, homelessness, mental illness, criminality, etc. The aim of this delimitation was to find participants who had lived a life incongruent with the discursive conceptions of the desired life, hence meaning that they had lived a 'other life'. This procedure was facilitated by primarily ethical concerns. Given my own inexperience with ethnographic fieldwork, I found it best to not interview people who were still enveloped in the 'other life', e.g. still using drugs as this poses a set of various challenges, practical as well as ethical (see e.g. Lander 2003: 109ff).

I reached out to three different organisations[3] whose common denominators were that 1) they are founded and operated by individuals who had lived the 'other life' in the sense that they had experiences of marginalization, social exclusion, drug use, homelessness, etc. and 2) their said aim was to help people out of social marginalization[4], and without demanding drug freeness as a prerequisite. The pool of participants figuring here are involved in either of these organizations. During the selection of participants, I opted for a simple convenience sampling, meaning that the interviewees figuring here constitute the first people that I came in contact with and who agreed to be interviewed. A total of seven persons were interviewed, however, in the analysis, only interviews from five of these are included.[5] These choices highlight the power inherent in me as a researcher to choose which stories are worthy of analysis and, thus, who becomes competent knowers. All the names used are fictional.

The participants

Of the five participants figuring in the analysis, three of these are men, two are women, aged between 49 and 60 years old. All were born in Sweden and were to be considered White. Three of the interviewees' life histories include instances of violence in their childhoods. Four of the five participants have been diagnosed with ADHD. Three of the five participants identify themselves as *former* drug (ab)users, in the sense that they previously used drugs in a way considered problematic by themselves and by their surroundings. In these three cases, the drug use is referred to as the main cause for their health problems and subsequent hospital stays. For one interviewee, alcohol was identified as the main drug. Another had tried drugs but argued that the drug use was never problematic. Three of the interviewees have served time in prison but also here extensive variation is to be found. While one subject had served one short prison sentence (approx. 3 months), another had served many, albeit short, sentences, and one subject had spent the major part of his adult life imprisoned. These differences aside, the narrators can be unified in their experiences of being socially excluded, meaning that they have lived a life outside the conventional spheres of labor, consumption, family formation and housing. They had all once turned to the organization, where they now worked, for help. Given the discourses which shape the conceptions of how they are supposed

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[3] Among these, two of these organizations are affiliated with each other.
[4] This could be conceived of as homelessness or drug use. The organizations could also assist their clients in their social service contacts.
[5] In one of these cases the interviewee had not lived the 'other life' and was hence not relevant for the analysis. In the other case, the interview situation made me as a researcher uncomfortable to the degree that a subsequent interview appeared unfeasible.

to live, their marginalization can also be conceived as *discursively* made. From a bourgeois point of view, they are located outside the parameters of a (hetero)normative temporality. Thus, they had all strayed from the 'straight line' and, in that sense, lived a life which was 'other'.

Material & Interview procedure

The material employed here consists of a total of 8 different life history interviews. Of the five interviewees included in the analysis, three were interviewed on two occasions.[6] All interviews were recorded, and varied from approximately 45 minutes to a little bit over 1 hour 40 minutes. Each participant was interviewed following an unstructured interview approach, for which reason no interview guide was used. Using a life history method served the purpose of capturing the lived experiences of the subject, *as they are narrated*. Thus, instead of being an accurate record or an interpretation of past events, the narrative *constitutes* reality (Presser 2009: 184). Rather than aspiring for an exhaustive or 'accurate' record of the interviewee's life, the aim is to encourage the interviewee to reflect and position herself in the narrative. This approach acknowledges the contextual and local contingencies of story-telling and knowledge production (Holstein & Gubrium 2000: 104). What aspects of the interviewee's stock of knowledge that are being *activated at the moment* is conditioned by the narrative position assumed by the narrator when lived experiences are recounted (Holstein & Gubirum 1995: 30ff, 37). The role of the interviewer is to stimulate the interviewees to reflect on their lives from different vantage points (*cf.* Lander 2003: 127), and to encourage her to situate and position herself differently in the narrative, and to shift locations, temporally and spatially (Holstein & Gubrium 1995: 55). In practice, the interviewees were asked to reflect on what had been said, or I would offer alternative perspectives, or ask questions which sometimes challenged their prior positions and conceptions, with the aim of producing other kinds of situated knowledge. That is not to say that these interviews were unorganized. Instead, as a meaning-making occasions, interviews are always guided by me as an interviewer and my research agenda (ibid: 76). After the first interview, I came up with the idea of mapping out time-lines during the interview. From then-on, I conducted each interview where the events mentioned by the interviewee as important for her life history was mapped out on a piece of

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[6] The remainder two were interviewed on one occasion only. In both of these cases, the subject could not be reached.

paper. This was helpful for both parties as it provided the interviews with some structure and orientation by helping us keep track of the events.

The follow-up interview which I conducted with three of the participants (Elisabeth, Mattias and Henrik) took on a more structured form, in that I choose themes which had emerged in the previous interview and had formulated questions before-hand. The themes were chosen if they appeared significant either for the narrator (and her life history) or for my theoretical focus. Thus, these subsequent interviews were much more structured and closely resembled a thematic open form. The main objective of these interviews was to activate the narrator to reflect on the narrative positions she had assumed on the prior interview occasion. Thus, this interview form sought to These subsequent interviews allowed me to clarify some issues discussed in the previous interview, and to ask the interviewees how they perceived of and related to these issues (this could sometimes be done by me actively challenging their previous positions/statements). It also allowed for the interviewees to more actively position themselves in relation to the themes I had chosen, which also gave them more space to re-position themselves and to resist and re-negotiate the discursive conceptions of the desired life (although this was not always done wilfully or intentionally by the narrators). As a result, the biographies from these three narrators became more nuanced and complex.

Nevertheless, the material is limited by the short time-frame of this project. The small number of interviews conducted with each participant and the resulting difficulties building up a higher level of trust have entailed that I have not been able to get as closed to their stories and to them as I could have wished. Specifically, we did not touch on as many subjects as would be necessary to get a more inclusive account. As an implication, the narratives are fragmented and do not give a full picture of their lived experiences of marginalization. With my own theoretical interest, some issues have also been highlighted at the expense of others. Likewise, although the interviews occasionally (and briefly) touched on the discursive conceptions of how we are supposed to live, I refrained from asking the interviewees how they perceived themselves and their lives according to these conceptions. Thus, the material cannot be employed to establish how the interviewees view themselves as 'other' in relation to these discursive conceptions. Instead, these interviews only allow for an examination of how their narrative positionings as 'other' evolves in relation to these conceptions – whether these were internalized by the narrators.

Analytic procedure

During the transcription, I choose to only transcribe the elements in the narratives that appeared relevant for the analysis. Because the interviews were conducted in Swedish, the quotations featuring here have been translated by me into English. I opted for a line-by-line coding where I sought to break the material down into categories. As a first step in the coding process, I began loosely sorting out segments from the interviews which appeared interesting by relating to drug use, marginalization, (un)employment, housing, governmental agencies contacts, etc. After a while, the coded material could be assigned to the three different theoretical concepts previously identified through perusing through the literature (normalcy, respectability and functionality). During the transcribing and coding, I took side-notes, made comments and conducted smaller analyses. These 'pre-analyses' aided me in the analytical as much as in the interview procedure, by fixing my attention to the issues which appeared noteworthy in the constituting of 'the other'. Thus, in this iterative process, the analytical procedure and the interviewing process informed each other. While the themes derived from the transcriptions (the empirics), the coding was still heavily informed by the theoretical constructs. Such process allowed me to rather easily discern how the theoretical concepts could be applied to the material. While such theory-driven process made the coding more focused, it also meant that flexibility was lost in the process as other issues in the material were effectively marginalized in the process. Because I conducted these interviews myself (a process which spanned for sex weeks), this also guided my theoretical focus and the on-going analysis, making the analysis an always continuing process. While the coding and analysis was too entrenched in existing theory to resemble the 'grounded theory'- approach, this process can still be said to be dynamic as there was an openness for changes in the application of the theoretical framework.

Informed by a poststructuralist view on language as a site for meaning-making (Ambjörnsson 2005: 44f), the analysis has sought to chisel out *how* the narrators (and their lives) name themselves through language – or, how they discursively become 'other'. This was examined by being attentive to how they became positioned, or how they came to 'know' themselves, (as 'other'). This meant adhering to which identities, subjectivities and subject positions was crafted out in their narratives, from which narrative position this was done (and how they were spatially and temporally located), and, finally, how such 'positionings' were they became 'other' related to the theoretical constructs.

As a second step, I examined how their narrative positionings was done in relation to the discursive conceptions of the desired life, with the aim to uncover the schisms that arose in their stories about how they *are* (which is 'wrong', 'other' and awry) and how they *should* be and do (to be 'right' and 'straight'). This meant being attentive to how their stories about themselves (as 'other') related to, and evolved against the backdrop of, the dominant, socially embedded and institutionalized discourses surrounding 'the other' and 'the other life' – whether they were aware of these or not. These discursive conceptions were oftentimes already internalized by the narrators, although resistance was also made. Such an approach acknowledges the power of culturally available discourses in the framing of narrator's experiences, while also leaving room for the capacity to actively engage with the discourses, to re-negotiate and to resist them (see Burr 2015: 132f). It is when narratively positioned (as 'other') in relation to these discursive conceptions that some identities can became *discursively possible*.

As a final step, the material was approached from a theoretical angle by examining how the narrators' discursive constituting of themselves as 'other' could be *theoretically* conceived of in relation to the constructs of normalcy, respectability and functionality. I considered how these notions constituted 'the other' by looking at the binary opposites which arose in the narratives (the normal/healthy – the abnormal/sickly, the respectable/worthy – the abject/unworthy, the functional/abled – the dysfunctional/un-abled). It is through considering these schisms that I theoretically built 'the other' and 'the other life' as the final step of the analysis.

One evident shortcoming in the analytical approach relates to issues of validity. I never theoretically engaged the participants, in the sense that the theoretical concepts such as 'the other', normalcy, respectability and functionality was not invoked in the interview setting. For this reason, the concepts are not used by the participants when they position themselves. This makes it impossible to establish how the narrators position themselves in relation to the conceptions surrounding these theoretical constructs. Instead, the conclusions drawn are always contingent on my own readings of their accounts, and is ultimately informed by my theoretical framework, with the risk that the conclusions drawn will not be perceived as valid for the participants. This reveals a weakness in the method deriving from not including the participants properly in the research procedure. Instead, the results reflect of how their positionings can be conceptualized in relation to these theoretical constructions.

Results & analysis

The analysis' first section is devoted to how the narrators understand themselves as 'others' and how they 'explain' or 'account' their 'otherness' and their 'other lives'. The next segment will consider how 'the other' is constituted along-side notions of respectability (worth, value and legitimacy) and how such conceptions evolve in an institutional setting. The third section ties in with the two above by examining how the narrators understand -themselves in relation to functionality. The segment also examines how the narrators re-negotiate or 'queer' their 'dysfunctional' or 'troubled' identity.

The 'otherness' identified and explained

> There's got to be something wrong in my head.

Among the five interviewees, four been diagnosed with ADHD and, among these four, three interviewees implicate ADHD to explain their substance use, as in the quotation above from an interview with Mattias.

> I said to the nurses and the doctors there that "there's got to be something wrong in the head", that does these things, and goes around all the time, wanting nothing else, it's the power of the drugs so to speak.

When providing accounts for his 'problematic' behavior, Mattias articulates his 'otherness' in relation to his ADHD. This perception of himself as 'other' unfolds next to neuropsychiatric conceptions of normalcy (a person with a 'normal' brain wouldn't act the way he does). This 'othering' is also illustrative of how the narrator's subjectivity is discursively constituted by an individualized and biomedical mode of explanation which seeks to 'explain' why there is something inherently wrong with him. When 'naming and framing' himself along these lines where, he derives his subjectivity from the distinctions drawn between him (the troubled) and others (the 'non-troubled'), a *dysfunctional identity* arises in his narrative. It is through this distinction that Mattias can be discursively known as problematic and 'troubled' (*cf.* Järvinen & Andersen 2009: 867).It is within this neuropsychiatric explanatory discourse that Mattias also come to conceptualize early academic failures and substance use. The tendency is likewise found in Sofia's narrative as the 'why' to her deviance:

> I had difficulties learning and at that point it was called that you were stupid. Then I got
> to learn that they changed the name to dyslexia and then in 2010 I got to learn that I had
> ADHD and ADD.

In Sofia's case, and especially when narratively located back to her childhood, her 'otherness' can be conceptualized as being stupid and incompetent. In this narrative setting, her troubled identity is placed within a neuropsychiatric discourse where the ADHD becomes the main frame of reference for her early academic failings and marginalization, rather than childhood traumas and sexual abuse.

For both Mattias and Sofia, the problematic, unorderly and stupid child becomes the (perhaps only) discursively conceivable identity, a position which has inherent normative assumptions of how they are to function – and how they are 'wrong' and awry by failing in this project. As a result, setbacks in childhood *and* adulthood are framed by an explanatory model grounded in individual shortcomings and maladaptation rather than the external circumstances which have shaped their lives (e.g. the school's lack of knowledge of their needs, childhood trauma, social marginalization). It is through adopting this individualized discourse that Mattias and Sofia can sensibly be discursively constituted as inherently different, or "as permanent outsiders in a way that ignores structural, societal explanations" for their marginalization and drug use (Lander 2015: 283). The link between ADHD (inherent dysfunction) and 'the other' is further evinced by Mattias when he delineates himself as someone who takes the "destructive decisions that destroys your whole existence". This 'inner destructiveness' he *actively* ascribes to the ADHD, illustrating how the individualized explanatory discourse becomes internalized in the biography and accepted as a truth about the self.

Next, we will turn to Henrik, who, unlike our previous narrators, perceives his 'otherness' in relation to his ADHD rather than his amphetamine use. Like Mattias, however, he deduces his amphetamine use from his ADHD. Amphetamine becomes as a self-medication, something which he needed to function in society. In Henrik's narrative, it is not, however, his amphetamine use which positions him as 'other'. To the contrary, as Henrik explains, he has always been able to hide his amphetamine use from employers, family, friends, etc. and has served but one short prison sentence. Instead, Henrik understands the 'otherness' – ADHD matrix in relation to his difficulties with 'settling down'. Instead, he always favored a 'rootless' lifestyle (which meant travelling to and living sporadically at different places). This tension between who he is and how he should be becomes illustrated when narrative positioned back to his mid-30s, when

Henrik left his old life of partying and drug using in favor of a 'settled down' life as a married family man – a lifestyle which did not 'work' for him.

> But then, by some damn weird way, I go back to my amphetamine use. So, I tell my girl, who I had a child with then, that it was over, I can't live together with you because, ah. So, we had to get divorced, she and I, we were married, and I moved up here to [larger city], lost contact with my children and started using again like there was no freaking tomorrow.

When discussing his attempt to 'settle down' with a family, Henrik's narrative appears molded by normative and discursive conceptions surrounding the adult man and father, who is "located within the domestic triangle" and the institution of marriage (Morgan 2002: 273), and clearly informed by middle-class notions of respectability: "It wasn't possible to live with a family when you are on amphetamine." Such statements reveal how drug use cannot be conceived along the lines of family formation. It is through failing the family father-project, which is interlinked with normalcy, maturity and respectability (see Morgan 2002: 280f), that Henrik can be discursively construed as dysfunctional, immature and 'other'. It is through this normative framework that Henrik's identity as a 'dysfunctional father' becomes discursively conceivable.

Henrik's chafing with normalcy and his 'otherness' can be theoretically conceived next to the heteronormative life schedule, structured around family and reproduction, and characterized by stability and longevity (*cf.* Halberstam 2005: 4). Henrik understands his 'failure' to adapt to the desired temporality as rooted in his personality which he conceives of in relation to his ADHD: "I made a go for it but I just couldn't handle it. […] I can't stand when the days look the same." The 'otherness', rooted in being inherently different of the 'untroubled' and normal. Thus, Henrik's 'otherness' is construed with reference to discursive conceptions of the responsible and mature adult family-man who is 'settled' stay. Henrik's 'troubled identity' evolves from diverging from this 'straight line' (*cf.* Ahmed 2006: 16).

> **Henrik:** … I wasn't like everybody else, that's the truth.
>
> **Lily:** What do you mean with you are not like everybody else?
>
> **Henrik:** Well I wasn't like. Let's say you were 15 boys in a class and 10, 12 of those were ordinary people that didn't go down the same road. The rest, I went for it from the start, went on the wrong track so to say.

At the same time, there is also room for resistance against the subject position of the dysfunctional father when Henrik depicts himself as a father devoted to his children and actively involved in their up-bringing. This reflexivity with which Henrik approaches his 'otherness' illustrates how the troubled identity of the drug using father is both accepted and rejected.

> I had a well-functioned life while at the same time… I was living double roles in many years, active partying, abusing really while also a family father, provider, driver's license and that whole thing. I was a double failure so to speak. You feel judged in some way because I had a bigger package to, to repair, or something like that, since like: "why the hell was that about, why did you do that? Stupid you."

As demonstrated above, Mattias, like Henrik, understands his dysfunctionality in terms of having failed the family man-project. Mattias' biography is illustrative of instances where the 'otherness' is constituted in relation to a heteronormative life schedule which dictates the appropriate temporality (*cf.* Halberstam 2005: 5). His 'troubled identity' is discursively constituted through the subject position of the 'dead-beat dad' (Reich 2008: 5). Embedded in his narrative are age-, gender- and (middle)class-coded notions of what constitutes an appropriate set of behaviors for the respectable adult man and father, who is expected to competently assume responsibility over his off-spring (Morgan 2002: 280f; Reich 2008: 13). Unlike in Henrik's narrative, where the heteronormative life schedule is both accepted and resisted, Mattias always accepts the 'troubled identity' by constituting himself as a failure. His biography is suffused by a prominent awareness of *who he should be* which is placed against *how he is*, where he as 'other' and his 'other life' becomes discursively known through drawing a contrast between the two. It is by being askew with the discursive notions of fatherhood that Mattias can sensibly be positioned as 'wrong' by being incompetent and immature, thus delimiting his possibilities to become rendered as a proper and respectable subject (Sandberg 2008: 134).

Unlike the other three interviewees, Elisabeth was, as she claims, "too orderly" to have ADHD. Although she "knows" that she has ADHD, this 'knowing' is not taken up in her own explanatory model. Instead, the drug use is conceptualized within the framework of the 12-step program where the drug use, or addiction, is permeated by 'the disease model' (see Room 2003: 225). By locating her drug abuse in a disease discourse, where the drug use is an inherent and omni-present force, of which she has

no control, Elisabeth assumes a position resembling the 'chronic addict', one which cannot be blamed her use of illicit drugs (*cf.* Järvinen & Andersen 2009: 881). This tendency is neatly encapsulated as a 'moment of epiphany' when learning the first step that claims that the addiction is a disease, beyond the actor's own control:

> The pieces fell to place when I understood that I was sick. That I had a disease and that I couldn't help my obsession. I have used for 30 years, like just getting drugs, selling drugs, drugs, drugs, drugs. I haven't had a job or anything, I don't have any kids or anything. My life has just been about that.

By adopting 'the disease model' as the frame of reference, Elisabeth can provide a plausible explanation to not only why she has acted a certain way, but more fundamentally, what separates her from others (who are not 'obsessed'). It both establishes that there is something 'awry' or 'wrong' with her, as much as serving as an answer to the why – "why I had carried on and abused for thirty years of my life, been completely obsessed with using my whole life." The 'problematic' habit constitutes her life as the antithesis of the desired and healthy (normal) way of living and being, where the 'disordered life' is understood with reference to a disordered brain (Fraser et al. 2014: 55).

Despite that Elisabeth describes her childhood as suffused with violence and the feeling of being unloved and unwanted by her mother (she was always "the black sheep"), her drug abuse is always attributed to individualized explanations, and not the contingencies which were clearly beyond her own control (i.e. an abusive mother). Similarly, she infers her drug addiction to her genetic make-up.

> **Lily:** But what is it, why do you think that *you* are a drug abuser?
> **Elisabeth:** It's genetics, above all. I've had inherited it from by mom, really. My mom was an alcoholic. And that's researched, proved that it's genetics.

As an effect of this framing, alternative understandings for her marginalization are circumscribed and denied legitimacy (*cf.* Rosenfeld & Gallagher 2002: 358; Fraser et al. 2014: 41ff). Grounding her marginalization and drug use in neurobiology also serve to dislodge focus from the contextual (external) contingencies of her childhood and her social position. This tendency is likewise evinced by Mattias when he speaks of a "latent addiction personality" and a "sensitivity". Such focus on genetics displaces attention away from forces working on a macro and meso- level. Mattias and Elisabeth

become placed in the position of 'the biomedical self' (see Esposito & Perez 2014: 422), where marginalization and drug use are located within the parameters of the neurobiological subject (Reinarman 2005: 308; Vrecko 2010: 53).

Such conceptions can however also be challenged. This is done in Sofia's narrative, when she places locates herself to the time when she was hospitalized in a psychiatric clinic. Here, she is presented with an explanatory discourse is *not* grounded in something within her:

> **Sofia:** I have a whole folder about my life […] And when I went in the first time he said that: "I can't understand that you're alive! I understand that you…"
> **Lily:** The doctor?
> **Sofia:** Yeah, the psych-doctor, he said that: "I can't understand that you are alive, I understand that you try to commit suicide, because like after all this that I've read…"

Unlike other 'legitimate authorities' (e.g. teachers, the social service), the psychiatrist offers an alternative explanation for Sofia's mental distress which is not positioning her and her ills in an individualized or neuropsychiatric discourse, but rather locates her and her ills in her lived experiences and childhood traumas.

> Given how the history has looked, I view as rather impossible that it shouldn't have given these consequences. That I shouldn't have gotten these injuries. […] I have been wrestling with that my whole adulthood. I have been sitting looked in for 35 years of my life.

Finally, we turn to Tor, whose narrative, like Sofia and Elisabeth, is suffused with childhood traumas. Tor differs from the other narrators by having spent the majority of his adulthood years imprisoned, resulting from a series of violent acts. Tor predominantly understands his dysfunctionality and 'otherness' as the result of him having "instinctively acted with violence" and "reacted impulsively instead of thoughtfully." Unlike the other narrators who locate their 'otherness' in an individualized explanatory model, Tor conceives this troubled identity in relation to his violent upbringing, and which he now understands in terms of posttraumatic stress disorder (PTSD). According to Tor, his 'aggressive' behaviour has resulted in him being confined in max-security prison institutions and having spent considerable time in solitary confinement, with very little elements of treatment and guidance.

> I've never had a job my whole life. […] I have never gotten myself into employment, I have never gotten myself into the social community, I have never participated in society in any way, I have seen it as, as a… as my self-evident position that I'm standing outside.

As illustrates above, Tor also conceives himself as other by never having been included in society – or, by having lived a life located outside the logics of labour and production, and thus of capital accumulation (*cf.* Halberstam 2005: 10). He has, by his own accounts, never entered "the adult society" because he "never had social competence to function in harmony with the rest of society." Because Tor has never 'learned' normalcy, he is, whether in prison or in the outside world, and whether accepting it or not, consigned to a dysfunctional, troubled identity. Thus, the 'otherness' becomes located in his personal characteristics (proneness to violence) and in his position as a 'prison inmate', and not in society's failure to integrate him into society. This is also illustrative of how 'the other' can be theoretically conceived through the constructs of normalcy and functionality – Tor is abnormal and askew due to his inability to function properly with other members of society and to adapt to societal norms.

> **Lily:** Did you feel that it [becoming a father] affected you in some way?
>
> **Tor:** No, unfortunately it did not. That immaturity towards that responsibility, it was so noticeable. I couldn't handle my own life situation, little less a child.

In his mid-20s, Tor became a father of two. Because he spent the majority of his time in prison, Tor positions himself as a 'dead beat dad' (*cf.* Riach 2008: 5), a subject position which ties into discursive conceptions of the responsible father. As the above quotation suggests, Tor 'problematic' identity is conceived along the lines of immaturity. When positioning himself as immature, Tor also expresses the age-specific notions of how the adult is supposed to be and act. Although he acknowledges that he "had never had a present family and never learn to act like such", Tor understands his 'otherness' (not being a present father) within an individualized discourse, one which assumes the individual to be autonomous and in charge of her own actions: "It's easy to slap me on the fingers. Because I have been honest to myself and I'm aware that my effort is catastrophically bad." Thus, his 'failure' in fatherhood (and adulthood) lies in him and not in the several prison-stays which made it *physically* impossible for him to be a present father, and thus circumscribed the available courses for action. The possibilities to assume a subject position of the responsible adult man/father is here effectively marginalized.

The inappropriate, unworthy and abject

> My heart specialist told me when I was in my drug abuse "if you arrive here and there's
> an emergency they won't do anything for you."

This section will begin by turning to Elisabeth and how her subjectivity as 'the drug abusing other' evolves in an institutional setting. At this point in her narrative, when Elisabeth is in her mid-20s and homeless, she had contracted staphylococcus and pneumonia, which attacked one of her heart valves. When narratively positioned as a drug user who, when located in front of her heart specialist, will not receive standard health care, Elisabeth becomes, in the eyes of medicine, and despite her young age, discursively known as an unworthy subject (and not worthy of saving). It illustrates how the legitimacy of a drug using life can be negotiated and re-considered when placed in relation to the assumed 'unrespectability' of her drug using habits. Such a rationale can be theoretically conceptualized with reference to discursive conceptions of the drug using 'other life' as pathological, unworthy, undesirable, unintelligible and unimaginable (see Lander 2017). From the subject position of the 'drug (ab)user', Elisabeth's life becomes constituted as the anathema to a worthy and healthy life which, according to the normative, middle-class notions inherent in the field of medicine, cannot be considered a dignified way of living (Fraser et al. 2014: 41ff).

> There was a nurse there who had worked at [hospital] for 23 years who, they weren't
> going to do the surgery on me because I was a drug user, even though I was so young. So,
> she just fought for my life like "you have to do the surgery, she is young, that girl, she has
> her whole life ahead of her." So, thanks to her they did the surgery on me. They weren't
> going to do it. […] So, it would be very destructive to keep on using and knowing that."

The quotation above illustrates how Elisabeth's 'destructive habits' can be positioned in the narrative to confirm and constitute her dysfunctionality *as a 'drug abuser'*, a subject position she is placed in by the functional, non-drug using doctors who assume that Elisabeth both *should* and *can* rid her substance use habits. Furthermore, as the consequences of her drug use are placed on her only, Elisabeth can be said to be 'responsibilized'. When arguing that it "would be very destructing to keep on using", Elisabeth also (unknowingly or not) frames her drug use as an activity which she, as a presumed self-autonomous subject, is in charge of (Crowe 2000: 72ff, Roumeliotis 2014: 344). It could be argued that when failing in this project of normalcy and functionality, she is discursively marked as dysfunctional, 'troubled' and, hence, 'other'. This account can also be read as an exposé of institutionalized, symbolic violence exerted by where agents from a middle-class*ed* medical profession 'lectures' the

underclass (and socially marginalized) patient of how her life is supposed to be lived, without any knowledge of, or sensitivity to, her lived experiences (*cf.* Lander 2015: 276).

For Elisabeth to get a new heart valve, she had to produce 'clean' urine samples for ten consecutive years. Such an accomplishment can be read as Elisabeth 'proving her worth' in the eyes of the medical profession and, in so doing, discard the 'abject' drug abusing subject position.

> **Lily:** If you wouldn't have clean samples, you wouldn't get a new heart valve?
>
> **Elisabeth:** No, because they [the hospital/the medical profession] don't have the sense to understand that it's an illness you're dealing with. Instead, they mean that there are so many people in the heart valve queue that aren't drug abusers, and of course they will go ahead of someone who is in a drug abuse.

In the above quotation, Elisabeth's needs and life become framed as are placed against, and in polar opposition to, the non-drug using health care recipient. It illustrates how 'the other', through the subject position of 'the drug abuser', is discursively constituted by creating a schism were the healthy, respectable and legitimate non-drug user becomes discursively known next to the pathological, unrespectable and illegitimate drug user. It is the non-drug using who is ascribed legitimacy and hence can be considered (more) worthy of saving, while the life of the drug user is rendered obsolete. Her biography thus demonstrates how 'the drug abusing other' is constituted against the backdrop of discursive conceptions of the desired temporality, which charts the respectable, mature and worthy life, and is reproduced in the field of medicine. In contrast, the drug using life entails spending time and resources in an activity which is considered illegitimate and pathological in the eyes of the middle-class (Fraser et al. 2014: 39ff). It is by chafing with these notions of the normative and respectable that Elisabeth and her life can be sensible rendered as 'pathological', unrespectable and 'other' in an institutional setting – and hence, unworthy of saving. At the same time, her account expresses defiance by depicting the medical professionals as unknowing and unreasonable, illustrating how the discursive conceptions of 'the drug abusing other' can be rejected. However, it is when making the narrative shift to her present self that Elisabeth can be constituted as a sensible, healthy and worthy subject:

> I have an obsession which is just getting triggered. And that means that I don't drink alcohol, I don't eat pills or anything because then I would trigger my disease. I have to think about it constantly. I can't have a Baileys because then I would be sitting with the needle in my arm in no time.

Framing her drug use as something that demands constant awareness and abstinence from all forms of "mind-altering substances", Elisabeth locates herself within a discourse of self-discipline, where the monitoring and control of one's behavior is done in relation to prevailing standards of normalcy (Burr 2015: 83). Such discursive practices illustrate how the subject position of 'the drug abuser' evolves in relation to the dominant frameworks of modern medicine and psychiatry were normalcy and rationality are the expected pursuits (Crowe 2000: 72ff). As she claims, her path towards sobriety was achieved through a conscious and willing decision to get treatment for her drug (ab)use, thereby casting herself as a rational subject. It is from the subject position of the '*former* drug abuser' Elisabeth can discursively become a subject of moderation, self-control and predictability (Fraser et al. 2014: 39; Roumeliotis 2016: 10f) – as healthy and functional. Unlike the drug abuser, Elisabeth, from the subject position of 'the *former* drug abuser', has curtailed her problematic drug use and is aware of her own shortcomings. Through this narrative shift where she re-positions herself, Elisabeth can discursively *become* a subject with moral authority, worth and legitimacy – the hallmark of respectability (Skeggs 1997: 3).

> There is nothing worse than getting the confirmation that you are good-for-nothing, you have failed, you don't know anything and you're worthless. There is nothing worse when coming from authority. That's the worst. You get it in black-and-white. I'm a failure because I have to go and seek help. Everyone wants to manage on their own, that's the norm.

As the excerpt from an interview with Mattias suggests, the troubled identity is intertwined with notions of respectability. Mattias's conception of himself as 'unworthy' is consolidated when located in the position of the help-seeking adult man and father who cannot cope on his own. His positioning is grounded in middle-class notions of the abled, legitimate and respectable subject. Thus, Mattias' account can be located within a neoliberal discourse, which is rife with normative maxims of how he is supposed to be in order to be constituted as the functional, productive and abled subject (see Esposito & Perez 2014: 416; Smith & Riach 2016: 27). Failing in this project becomes the emblem of unrespectability, and discursively constitutes the subject as 'other'.

> It's a shame in going to the social services, living of the social service, not being able to take care of yourself, not being able to support oneself. You're good-for-nothing. Many times, they're maybe saying: "but you don't want to, you're lazy, you don't want to

work" and all that classic stuff. All of these things are inside of yourself. You don't need to hear or sense that feeling, you have it inside of you anyways.

Despite having, as he claims, good experiences with the social services, the sense of worthlessness is prevalent. Thus, the symbolic violence of being constituted without worth and legitimacy doesn't need an external source to be directed towards the marginalized body. Instead of being subject to symbolic violence in an institutional setting, Mattias subjects himself to it by internalizing and normalizing the sense of worthlessness into a truth about himself. Located in dysfunctionality, the symbolic violence is the embodiment of middle-class notions of what constitutes respectability and normalcy for the adult subject and who can become an intelligible and appropriate subject (*cf.* Sandberg 2008: 134). It is through the position of the normal, productive and 'abled' working adult, father that Mattias can be rendered as unrespectable, abject and, hence, 'other'.

Next, we will turn to Sofia's narrative, which is emblematic of how violence, physical, structural as well as symbolic, becomes a vehicle for constituting her as a subject without respectability, worth and legitimacy. When describing her life, Sofia appears to have lived a fairly structured and 'settled' life, meaning that she has worked for much of her life and has not been involved in illegal activities. Sofia's substance is, unlike the others, legal, namely alcohol. She has been homeless only sporadically. The defining mark of her biography is instead the many accounts of victimization and marginalization. Born into a violent household, with an abusive and mentally unstable father, Sofia was placed in a foster home at an early age. At ten years old, she was sexually abused by her foster father, which continued until the age of 20. Finally, she filed a report at the police or, rather, *attempted* to do so:

> **Sofia:** I went to the police, by myself, had no one to back me up. Uhm… and they all said that I was just making things up, that I was lying, and that it wasn't true and all that.
>
> **Lily:** The police said that?!
>
> **Sofia:** Yeah, yeah! And the doctor and all that.

This quotation reveals the institutionalized violence of being casted as pathological and dysfunctional, where, as the result of which, her accounts – and her lived experiences – are held as untruthful and unimaginable. When positioned as a 'pathological liar' in the eyes of the authority (i.e. the police), Sofia is not only denied her victim status but also becomes constituted as an unworthy, illegitimate and unintelligible subject. This tendency becomes especially salient when the intersection of age is thrown into the mix, which the following

section will illustrate. In the citation below, Sofia is temporally located back to her childhood, when the social services visited her in her foster home. But, as she reports, rather than being allowed to sit down with the social service agents alone to talk about her situation, Sofia was sent to her bedroom.

> **Sofia:** Yeah, in my room. […] Uhm, so that they could talk alone, in the kitchen. So, when they had drank coffee and all that they said: ”Yeah, but you are doing so fine” and all that. Hadn't a chance to say anything, hadn't a chance!
>
> **Lily:** Uhm… no? No?!
>
> **Sofia:** And they took, they took no contact. Didn't sit down with me alone. They talked to my foster parents. And my dad was a social service worked. It was he who had picked me up from my home with the fights, so he knew what I had been through. That is why he could do that thing.

As a child, the 'young Sofia, is rendered as incapable of telling her own story in front of the social service agency.[7] By being placed in the subject position of a child, her voice is deemed unworthy of listening to, and, as such, the past 'young self' become hailed as incompetent of giving an accurate account. It is illustrative how this subject position circumscribes the subject's possibilities to be rendered a competent and intelligible subject. Sofia's incompetence is consolidated even further due to her own location in relation to her foster father and abuser, who appears as diametrically different with respect to age, gender and occupational statue, and whose account is thus assigned considerably more competence and legitimacy. It is through this stark contrast that Sofia is discursively made into an illegitimate subject.

Queering the (un)abled, (un)productive and (mal)adaptive

> You never thought that you would be one experience richer because you have been doing drugs.

The above quotation from Elisabeth's narrative exemplifies a narrative shift in the biography when the internalized troubled identity, which was first accepted, now becomes subject for re-negotiation and resistance. It delineates how her lived experiences can be re-positioned as functional. The 'other life' is 'queered', by being re-conceptualized as something positive, functional and valuable, which is epitomized in Elisabeth's re-construing of her lived

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[7] A similar example can be traced in Elisabeth's narrative.

experiences of marginalization, victimization, drug (ab)use and homelessness into an asset: "this experience that I'm sitting on, you cannot read yourself to that." Elisabeth, who through her occupation others in social exclusion, argues that she, thanks to her own experiences, can understand and empathize with them in a way which others cannot. It is through this new position that Elisabeth, and her lived experiences, can be discursively re-made as legitimate and worthy. Such 'queering' is also pertained in an institutional setting:

> **Lily:** But now when you're clean, do you feel that you have been differently received by the health care?
>
> **Elisabeth:** Yeah. When I say that I have thirty years of drug abuse behind me and have been clean for eight years, they just like "wow" and get a lot of positive feedback. So, to some extent they get what kind of change you've accomplished.

When framed as having accomplished something, Elisabeth can pass as someone who is strong and able, as well as become positioned as a respectable, legitimate and worthy subject in the eyes of authority (here, the medical staff), and illustrates the dynamic inherent in the discursively conceivable identity. Such narrative shifts also testify to the tension that evolves in the narratives in relation to the dysfunctional, troubled identity – and how discursive conceptions of 'the other' is first internalized when narrative located an institutional setting, only to be negotiated and resisted, a theme which will be further investigated below:

> **Sofia:** "Yeah but Sofia, you can handle this, you aren't that stupid." From being "but I don't get this, I can't understand that." […]
>
> **Lily:** But when you say: "you're so stupid", who have told you that you're stupid?
>
> **Sofia:** Yeah but it's from school that you're stupid.

While the dysfunctional identity which arose in relation to authority figures and governmental agents and became internalized by the narrator, resistance is also made against this position. This shift is neatly illustrated in Sofia's biography when she is narratively located to her school years. Sofia's position as 'the other' is chiseled out amidst a background of normative notions surrounding normalcy and functionality: "That was the explanation, that you were stupid, and retarded and I don't know what they called you." Her position as dysfunctional ties into discursive conceptions of 'the problematic child' who is maladjusted, which reveals the school's assumption about the subject's functionality. Even when placing herself in the temporal position of a 20-year-old who lives by herself, Sofia is constituted as dysfunctional. This is articulated in the narrative setting when from she moved to her first apartment.

And then he [the foster father] continued, then he took a key. Because he said that: "Yeah, but it's good to have a key if you were to lose it, because you don't know what you're doing." So, he took a key and then he could continue [with the sexual assaults] in my apartment and I couldn't say anything.

In the eyes of her abusive foster father, Sofia is casted as stupid and unorderly, as someone who, due to her dysfunction, cannot take care of herself. Such practices can be tied to an infantilized discourse where she is robbed of her position as capable and self-autonomous, and thus the subject position of 'the adult'. Such conceptions, however, become resisted once Sofia makes a narrative shift to herself in her occupational role:

> **Sofia:** "And since I have come here, from having been on the bottom, I have risen up step by steg, and I have gotten to learn new things, I have gotten to take responsibility, as all have said that "ah, but you don't get anything, you're a loser, du can't handle this." It's been about…
>
> **Lily:** …Proving them wrong.
>
> **Sofia:** Yeah, I have gotten to learn new things. So, now I'm charge of the staff, I'm managing the store up there, make sure it's neat and clean and all that.

This shift demonstrates how the new temporal position give rise to negotiation and resistance. By depicting herself as high-energic and productive, Sofia ascribes her ADHD with a new (positive) meaning. The troubled identity once inherent in her dysfunction (the ADHD) is discarded and replaced by a new subjectivity which allows for a new discursively conceivable identity of the subject as the functional, productive and 'abled' worker. It is, importantly, when re-negotiating the terms of her own 'otherness' that Sofia can 'queer' the dysfunction which once made the 'troubled identity' discursively conceivable.

Whereas these two examples above have served to illustrate how the troubled, dysfunctional identity can be resisted, the narratives are also rife with examples of how this identity becomes internalized in the story about the self, to be accepted as truth:

> The systems are build up that way, there are so much that's demanded of you as an individual, that you are to perform [in a way] that you might not be used to because you have lived and have that up-bringing so that you can't handle it any more.

Expressed by Mattias in the excerpt above is a frustration, as much as negotiation, of the high demands placed on the help-seeking individual, while it also serves to highlight how a 'dysfunctional me' becomes discursively constituted in the meeting between

social service agent and the welfare recipient. To be able "to perform" in a certain way harkens the expectations on the subject's adaptability and functionality, and locates the individual as solely responsible for taking actions necessary to be worthy of society's help (Stepney 2006: 1294; Pollack 2010: 1264ff). In the eyes of the social services, social problems (e.g. homelessness, drug use) are conceived of as an 'otherness', discursively located in the dysfunction which is the individual's 'inherent inability' to adapt and perform (*cf.* Lander 2017). Further examples of how the internalized dysfunctional identity is discursively constituted in an institutional setting can be traced in Tor's narrative when asked if the roots for his marginalization could be located outside of him, in society's failure to integrate him. Tor agrees but adds:

> But I don't know if I would be, if it were possible, like I've been obnoxious. Like, not only that you've been sitting in the penitentiary, but they haven't been able to have you in the ward. Instead you've been sitting in solitary confinement the mayor part of your time. So, you haven't been that freaking easy to handle.

When located back to his years in prison, Tor's dysfunctionality evolves next to normative conceptions of normalcy and functionality, illustrating how the problematic identity become internalized in the narrative (*cf.* Lander 2015: 277). He is discursively made troubled and 'other' by having his subjectivity crafted out within a risk/security discourse. When narratively located to prison, Tor becomes discursively known as a risk and a safety hazard, and this is done along-side discursive conceptions of the pathological prison client who is, by virtue of his 'psychopathy', dangerous, unmanageable, lacking self- control and unable to function properly in society (Hörnqvist 2007: 126ff; Nilsson 2013 2013: 33, 36). It is in this institutionalized setting and with reference to normative conceptions of functionality (and of normalcy) that the violent inmate, who lacks impulse control and the capacity of responsible self-regulation (*cf.* Pollack 2010: 1264ff), becomes the discursively conceivable identity available for Tor. Such identity can be discarded when Tor depicts prison as an institution that "handles the hard-manageable, hard-motivated group", a group which he claims that he once belonged (but does not anymore). Because the otherness is inherent, it can only be re-conceptualized when positioning himself as changed, as now not so hard to manage. How the 'unmanageable subject' is constituted within an institutional setting will be further illuminated through Elisabeth's biography:

> I had such a temper in the drug abuse and also when I had just stopped, so they wanted to give me pills for personality disorder.

This part of her narrative unfolds when narratively located back to a period in her life when she was hospitalized, at which point she was still in a drug use. As she claims, her poor mental health, or "bad feelings stored layer upon layer", during this period resulted in her behaved badly towards the staff. Her bad behavior and 'not feeling good' was, as she argues, due to being in a drug abuse, which the doctors wanted to 'cure' by prescribing her medicine against an illness which she did not have. Instead of locating Elisabeth's mental health in the social circumstances embedding her behavior (drug use and marginalization), her 'unmanageability' is to be conceived, and resolved, within a neurobiological discourse. It is within this discursive framework that Elisabeth, from the subject position of 'the drug user', is constituted as the troubled and (mentally) sick addict. Her narrative can also be theoretically rendered in relation to the discursive conceptions surrounding the 'healthy' subject as having the capacity to rationality, moderation, and self-control (Crowe 2000: 72ff; Roumeliotis 2016: 11ff). It is through chafing with this aspect of functionality centering around responsible self-regulation (*cf.* Pollack 2010: 1264ff) that Elisabeth becomes discursively known as 'other' – and her social marginalization is governed accordingly.

Unlike the rest of the participants, Henrik's narrative bears few traces of marginalization, by having worked for much of his adult years, having a family (two sons with whom he had contact) and no experiences of homelessness. At the same time, Henrik used and sold amphetamine on a regular basis and, in that sense, he "kept a foot in both camps". When reading his narrative, Henrik stands out from the other narrators by appearing to be a well-integrated member of society.

> **Henrik:** I've never had any problems fixing cash to live [somewhere].
> **Lily:** And also, given that you had drugs, then you had easier getting friends?
> Henrik: You said it yourself. (laughs)
> **Lily:** So, then you have always had a social web to catch you up.
> **Henrik:** Always had somewhere to put the bag.

When compared to Mattias' and Elisabeth's narratives, where the amphetamine (ab)use is portrayed as the main reason for their social exclusion, the amphetamine appears as Henrik's safe-guard against social exclusion: "It was a way for me to survive, I wouldn't have handled

it otherwise." And, whereas the amphetamine use became the hallmark of the dysfunctional identity in Mattias' and Elisabeth's narratives, in Henrik's narrative, it is ascribed as the main reason for his high productivity and energy. The amphetamine, and hence 'the other life', can thus be re-imagined in relation to conceptions of functionality and 'abled-ness'. Such configurations 'queer' with middle-class preconceptions of the right and appropriate life where the drug using life is rendered unimaginable and unintelligible (Halberstam 2005: 4f). It is illustrative of how 'the good life' can be re-negotiated, as much as it is a repudiation of 'the drug (ab)user' as unproductive and unable to work (*cf.* Smith & Riach 2016: 31).

Concluding remarks

Summary

This paper has sought to contribute to life course criminology by demonstrating how the other and the other life can be re-imagined employing a queer-theory framework. This has been done on an empirical level by showing the cracks in the façade of normativity and, on a theoretical level by grounding the concepts of normalcy, respectability and functionality in life course criminology. It delineates how 'the other' and the 'other life' is constituted and rendered through the normative notions which exists in relation to these constructs.

The first segment of the analysis concerned itself with examining how the 'otherness' was identified and explained in the narratives – the 'how' and the 'why' behind their 'other life'. Unwittingly or not, their biographies unfolded against a backdrop of a heteronormative life schedule suffused by discursive conceptions of the 'straight' and 'correct' life, where normalcy is a pre-requisite (*cf.* Lander 2017). It is in relation to these discursive (and normative) conceptions of the 'right' way of living that 'the other' becomes a discursively conceivable identity. The narrators were also made 'other' with reference to the self as 'troubled', which delineates how the other becomes discursively known when viewed through the lens of normalcy. This 'otherness' and 'troubled-ness' was virtually always conceptualized through an individualized explanatory discourse. When internalizing this institutionalized identity, 'the other' is made into a truth about the self, which is troubled and dysfunctional. It is with this frame of reference that the marginalization can be made sensible, which is illuminating how the act of narrating shapes and circumscribes available avenues for interpretations and actions (Presser 2009: 185).

The second part of the analysis immersed into how 'the other' was discursively constituted with reference to notions of respectability. Of primary interest was how the institutionalized troubled 'other' was rendered as unrespectable, unworthy, incompetent and unintelligible. This segment demonstrated how the narrators and their lives became rendered from the middle-class professional agent where (hetero)normative conceptions surrounding respectability and normativity was dormant. Their 'otherness' is constituted amidst discursive conceptions of who they are (as 'the troubled other') and how they should live their lives to be rendered as legitimate and appropriate subjects (Sandberg 2008: 134).

Finally, the analysis pertained to notions of functionality – or, of the productive, abled and manageable subject. The section sought to examine how the narrators positioned themselves against the normative stories where they became hailed as dysfunctional, unproductive and 'un-abled'. While the dysfunctional, troubled identity is usually accepted and internalized, the analysis also demonstrates room for re-negotiation and resistance. This was done by queering 'the other life', which also allowed for a re-positioning for the narrators so to discursively become subjects of respect, worth, legitimacy, productiveness and 'able-ness'. Such examples demonstrate how a repudiation of the heteronormative life schedule – and the normative constructs of normalcy, respectability and functionality ingrained in this framework – becomes a vehicle for new, more positive, subjectivities. It is through the queering of 'the other' – through asserting oneself as *not* 'normal' and normative, through embracing their 'otherness' – that the narrators can resist stigmatizing labels and fill 'the other life' with new meanings.

Together, these three sections demonstrate how 'the other' evolves within a framework of normative conceptions surrounding normalcy, respectability and functionality. It is through positioning the subject as abnormal, abject and dysfunctional that 'the normative' – i.e. the normal, respectable and the functional – emerged. The narratives have also illuminated how 'the other life' is discursively made when casted against middle-class and (hetero)normative conceptions dictating how life should be lived. It is with reference to the 'right' and correct way of living and going through the life course (*cf.* Halberstam 2005: 4f) – or walking 'the straight line' (*cf.* Ahmed 2006: 16) – that the 'other life' is rendered and made sensible as 'wrong'. The narrators become constituted, and positioned, as 'other' through the schism that exists between dominant conceptions of how they should be, on the one side, and how they are, on the other. This demarcates how 'the other', or the 'awry', is always contingent on

notions of the normative, the 'normal' and the 'correct'. They are, always, on the right side of wrong.

Suggestions for future research

This paper has only focused on how the other is constituted through the intersections of class and functionality. As issues pertaining to gender was not a re-occurring theme in the narratives, the analysis has not considered how 'the other' may be constituted differently depending on the subject's gendered location. Whereas Lander (2003; 2017) and Mattson (2005) have examined how 'the other' is constituted in relation to notions of femininity, the same has not been done for notions of masculinity, and for which reason examining how 'the other' is made up for men, and how this constituting differs from women, may constitute one possible array for future research. It is also to be noted that as the subjects figuring here were born in the 50s and 60s, the conclusions drawn can only be applied to this age-group. Their experiences of marginalization and of being other have unfolded in a specific sociohistorical context. How 'the other' is constituted for subjects temporally located elsewhere in the life course is impossible to say, and is therefore laid out as another suggestion for future research inquiries.

Re-positioning 'the other' in life course criminology

> Why the hell does it have to be so difficult? My God! Now I want to this that everyone wants me to do. Society wants you to change so that it will work out and now you're doing it even harder for me to get in. Why?!

This paper will end with a brief discussion of the faulty assumptions made in mainstream branch of (life course) criminology. It will start with highlighting how the discursive conceptions surrounding 'the other' circumscribe the subject's possibility to be included and get back to a 'normal' life. Whereas the normative conceptions surrounding normalcy, respectability and functionality guides the 'right' and normative life, and frames the 'otherness' and 'the other', these constructs also delimits and constrains the room available for leaving 'the other life'. In the above quotation, Mattias, when positioning himself as a help-seeking client located in the social service agency, pinpoints the problems and contradictions of normativity: To abandon 'the other life', in favour of a (hetero)normative life, normativity is a pre-requisite, while the institutionalized subject position of 'the other' delimits the subject's possibilities to become normative. This delimited space for action

illustrates the power of discursive practices (*cf.* Burr 2015: 73, 80) as it closes off the road to the 'straight line', while it also signifies how tight the frames of normalcy are (*cf.* Lander 2017). Indeed, the path back is narrow(er).

This exemplifies one inherent problem in traditional life course criminology. For, whereas 'the other life' is judged deviant and pathological, the (institutionalized) subject position of 'the other' makes it impossible to live the life which life course criminology assumes and dictates. The field is also at fault by normatively assuming that only one way of living is correct, and, furthermore, that this 'straight life' is the desired way for everyone. This study has pertained to unveil the cracks in these assumptions, by showing how the middle-class heteronormative life schedule can be repudiated, or 'queered'. It is through resisting the straight line, through re-positioning the 'other life', that alternative lives can be made sensible and new forms of knowledge arise (*cf.* Ball 2013: 310f). It demarcates how the other life can be theoretically re-imagined once we refuse to let ourselves be governed by the dominant conceptual frames of human existence, thereby enlightening up new paths on which to wander. Clearly, there is more to 'the other life' than a normative glance will allow. It is when seeing past this framework, that we can start envisioning 'the queer' in a new light. As Elisabeth states, upon asked what she would have done if she could turn back the clock:

> I still would have chosen this path. Because I wouldn't have been sitting here and being who I am today if I hadn't gone through what I've been going through.

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