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Journal Article

N.B.: When citing this work, cite the original article.

Original Publication:

http://dx.doi.org/10.1037/hop0000040

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Postprint available at: Linköping University Electronic Press
http://urn.kb.se/resolve?urn=urn:nbn:se:liu:diva-132555
Professional Reinvestments: Swedish Psychologists, 1990-2010

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Abstract
Since the early 20th century, the Swedish psychology profession has undergone several changes in its essential tasks, epistemological foundations and social roles. These changes occurred through an ongoing "tuning" with Swedish society where the profession strove to appear relevant to society's concerns and problems as well as enroll others to share the profession's goals and aims. Studying the history of the profession can thus shed light on the changing definitions and contours of the psychology profession itself as well as on the organization of the society in which it acts. This article examines the history of the Swedish psychology profession from 1990 to 2010, through an analysis of the discussions and debates taking place in the Swedish Psychological Association's journal. The analytical framework used draws on work done within actor-network theory and science studies. We argue that the profession's institutional connections, defining tasks, epistemological underpinnings, and social position have changed in major ways during these 2 decades. Overall, as a result of an increasingly felt insecurity, the profession has turned outwards and tried to find new ways to legitimize itself to politicians, the media, patients and customers through means such as a more economized vocabulary and novel forms of empirical research. These changes have led to a more socialized profession, now more closely tuned to other actors in Swedish society, leading to conflicts within the profession over whether this is an opportunity to better control their own destiny or if it will lead to a loss of autonomy.

Keywords: Psychology profession; Actor-network Theory; Sweden; History of Psychology; Experts
Professional Reinventions: Swedish Psychologists, 1990-2010

The profession of psychology in Sweden has, like its counterparts in other Western countries (see e.g. Ash, 2003; Capshew, 1999; Herman, 1995; Jansz & Drunen, 2004; Richards, 2002), developed in interaction with political, social, scientific, and cultural conditions and vicissitudes. Swedish psychologists have had to navigate Swedish society in order to demarcate areas of expertise, get funding for their services, establish a foothold in institutions and organizations, and make their perspectives and interventions indispensable to the everyday lives of Swedes. But in order to succeed in these endeavors they have needed to find trustworthy allies to rely upon for support and recognition, to refer to social and cultural norms and ideals in whose name they claim to work, and to develop their practices, instruments, and techniques in a manner deemed suitable to the time and situation. The Swedish psychology profession’s establishment and successive transformations have thus involved a continuous “tuning,” to borrow Andrew Pickering’s (2005) concept, between the profession and Swedish society. The profession has striven to reorder “the world in conformity with their perspective” and create “a world-for-others” (Latour, 1996, pp. 194–195) that seems indisputable to outsiders and competing groups, compelling them to accept the profession’s assumptions, ideals, and aims.

Taking the notion of an ongoing tuning between the Swedish psychology profession and society as our starting point, we have examined how Swedish psychologists have conceptualized and acted on their profession and position in Swedish society during the years 1990 to 2010. During these two decades, Sweden is commonly understood to have undergone several major political, social, and cultural changes, for example, an economic crisis (Bergmark & Palme, 2003) and the implementation of new forms of political reasoning.
and governing in several areas (e.g. Baccaro & Howell, 2011; Dahlgren, 2008; Fejes, 2008; Hedin, Clark, Lundholm, & Malmberg, 2012). Events such as these have reshaped Swedish society and thereby also transformed the conditions and possibilities for Swedish psychologists and their professional practice. By considering how the profession has understood, discussed and tried to contend with these changes, we can better comprehend its development and its situatedness in specific historical contexts.

In order to trace how Swedish psychologists thought and acted during these years, we have focused on the discussions and articles published in the Psychologist Journal [Psykologtidningen; henceforth abbreviated PT], the official journal of the Swedish Psychological Association [Sveriges Psykologförbund]. The journal encompasses editorials, articles concerning theory and method, letters sent in by readers, summaries of conferences, reviews of recently published books, and so on, written either by the journal’s staff or members of the Swedish Psychological Association.¹ Every issue was read and any content deemed relevant to the study – for example, discussions, definitions or

¹ Altogether 425 issues were published during the years 1990 to 2010. The number of issues published each year varied, with 24 issues per year during 1990 to 2003, 20 issues in 2004, 15 issues per year during 2005 to 2008, 14 issues in 2009, and 10 issues in 2010. The authors have unfortunately not been able to acquire two of these (issue 4, 1990 and issue 6, 1993). Subsequently, the issue and year will simply be referenced in the form of (no/19xx) while direct quotes also contain a page attribution. All quotes are translated from Swedish by the authors with the aim to preserve as much as possible of their original grammar and characteristics. In the case of any Swedish idioms, an effort has been made to find a corresponding English counterpart. If this has not been possible then the quote has been slightly rephrased so that the general meaning still can be grasped.
representations of what a psychologist is, what tasks are important to or characteristic of the profession, and what forms of knowledge underlie psychologists’ practices – was noted and indexed. Content containing conflicts or heated arguments were considered especially interesting since they often indicate that previously stable assumptions and definitions are being challenged. Central questions guiding the study were what kinds of worlds the profession has sought to establish, and the norms, ideals, and practices these have encompassed; what advances and developments have been posited as desirable to the profession; and what groups and institutions have been seen as reliable, powerful or strategically important allies.

The material was analyzed through a framework drawing on actor-network theory (ANT), an approach originating in the field of science and technology studies (e.g. Callon, 1986a, 1986b; Latour & Woolgar, 1979; Law, 1986). ANT fundamentally considers everything to be an effect of patterned relations (Law, 1992), that is to say, what something is and can do depends entirely on the web of relations – the network – in which it is embedded. Such diverse actors such as “objects, subjects, human beings, machines, animals, ‘nature,’ ideas, organizations, inequalities, scale and sizes, and geographical arrangements” (Law, 2008, p. 141) are all constituted through material and discursive relational arrangements. An implication of ANT’s relational outlook is that differences in power, size, reach and influence depend on how well-extended a network is and not on any a priori distinction between micro and macro actors (Callon & Latour, 1981). Notions such as truth and reality are similarly achieved through the enrollment of associates and resources, both “human allies, such as other authors in citations, students in the classroom, or funding support from governmental or corporate agencies” as well as “non-human allies such as charts, graphs, experimental tests, statistical models, microbes, or DNA” (Ward, 1996, p. 6). Another way to
put it is that for ANT reality is not a noun but a verb: It is to make something real, to real-ize it, through associations and enrollments. A journal such as PT can be seen as one of the sites where such an enrollment can take place, as individuals and groups attempt to draw together disparate actors hitherto “distributed around different locations and times” (Law, 1991, p. 184) in one place and at one time.

In the analysis emphasis has been placed on highlighting the role that associations—between diverse elements such as ideological norms, scientific philosophies, social institutions, psychological instruments and objects, and the actors’ sociological analyses of Swedish society—play in constituting a variety of (often conflicting) versions of the world and of the profession. We have followed ANT’s principle of not imposing an ontology on those studied (Callon, 1986a; Latour, 2005; Law, 1992) and instead given them the freedom to decide what a psychologist is, what social and political groups the world contains, how to define truth and efficacy, and so on. Thus we have not assumed that it was possible to decide in advance which ‘voices’ in the material that were more influential or powerful than others – for example, a union representative’s editorial set against a letter written by a clinical psychologist from a small town – and therefore deserved more attention. We have instead taken the problematizations of the psychology profession as our starting point and considered how various individuals and groups have contributed to these and in what ways. The power and influence of particular voices in the journal can therefore only be answered empirically as every statement about the world, say a letter from a single psychologist, begins as “as a fragile assertion” (Ward, 1996, p. 6). It might over time become a world-encompassing truth through enrolling associates and resources, or it might remain a fragile assertion that is never picked up and extended by anyone else. As psychology is a multifaceted and often quite conflictual discipline (see e.g. Brock, 2011; Pickren &
Rutherford, 2010; Ward, 2002), we have striven to highlight the diversity found among Swedish psychologists in how they have reasoned and acted, while also tracing how over time certain views and assumptions became self-evident outlooks shared by a majority of those writing in the journal.

Two terms within the ANT literature (see for example Callon, 1986a; Latour, 1987, 1988) are relevant to mention in relation to power and the strategies actors use to enroll and control others. The term ‘spokesperson’ is used to designate an actor attempting to speak on someone else’s behalf, so that instead of a cacophony of voices we now have a single clear voice. But such speaking never actually involves a straightforward representation of the others. The spokesperson translates, and hence also displaces (Law, 2006), those now muted through supplying roles, opinions, and attributes. A profession can try to speak for those deemed too weak to speak for themselves (a patient group, for example) and can in the process increase their own legitimacy and clout, as they now have a mass of actors behind them. Yet this is a precarious position as it demands that everyone accept and play their roles, the enlightened professionals as well as the grateful (and quiet) patients. There is thus always a risk that the spokesperson is disbelieved, their claim to speak on others’ behalf questioned. Additionally, the concept of an ‘obligatory passage point’ should be mentioned; that is, an actor that must be engaged with or considered in order for a particular task to be done or a particular result achieved. For example, the goal of most health professions is to become indispensable to society so that everyone must take them into account in order to, say, better the population’s health. Such a societal project then has to be ‘routed’ through the professional network if it is to succeed, enhancing the profession’s status and its capacity to intervene and control the course of events.
It is important to note that these two terms can help us analyze the how of power – meaning how actors are positioned as spokespersons and obligatory points of passage and thus become able to exercise power as they become strategically situated – without prescribing the what. ‘The State’ can become an obligatory passage point, but so can microbes, electric power lines or the psychoanalytical concept of the unconscious. Every actor can (and many hope to) become a spokesperson or an obligatory passage point and may in this manner interfere with the realities fought for by, say, psychologists, but they may equally well fit together and strengthen each other (see Law & Singleton, 2014). This analysis further complicates any attempt to determine beforehand who has the capacity to act, influence or impose their will. It underlines the need to trace power as an effect of linkages and strategies instead of something possessed (Latour, 1986; see also Foucault, 1991).

The History of the Swedish Psychology Profession and Swedish Psychology

While recent decades have seen an increasing interest in the history of Swedish psychology and the psychology profession, there is still a general lack of research on the Swedish profession of psychology. In this section we start by chronicling the history of the Swedish psychology profession up until 1990 and draw out some general points regarding its development; this is followed by a short overview of the diverse body of scholarship that has addressed the history and sociology of Swedish psychology in order to sketch a background to the present study.

As in other Central European countries around the start of the 20th century (see Danziger, 1994; Mandler, 2007), Swedish psychology was initially an academic and experimental subject that had close institutional ties to university philosophy departments, and psychologists mainly occupied themselves with psychophysiological experiments (Nilsson,
1978). But during subsequent decades psychology came to position itself nearer to the field of pedagogy and reframed itself as a valuable supplier of basic research and services to teachers and pedagogues. The task of testing individuals became psychologists’ most important role and led to an increase of the profession’s influence. As shown by Thom Axelsson (2007), psychologists came to play a central part in introducing the intelligence test to the Swedish school, thus contributing new forms of classification of and differentiation between pupils, and new ways to organize the educational system, and offering ostensibly more democratic and scientific means to govern Swedish citizens in the budding welfare state. Psychologists also started to participate in the conscription process of young adults through aptitude testing (Teigen, 2006). These moves entailed using pedagogy’s institutional weight in the Swedish universities to enhance psychology’s status, to reposition the profession into more practically oriented areas, and to align the profession more directly with the Swedish state and its ambitions by highlighting the profession’s social utility. But there were other tasks besides testing that were deemed legitimate, seen in political proposals from this time that suggested that school psychologists should assist pupils who were deemed ‘problematic’ – understood as those children who could not function well in school but who did not meet the requirements for remedial classes (Larsson, 2013). Nevertheless, the testing of individuals remained the essential task of the psychology profession and underlay its possibilities to secure social influence. Eriksson (1999) has examined how ‘psychotechnics’ – a term representing psychological techniques such as aptitude and disposition tests – was used by psychologists from the 1940s up until the 1960s to place ‘the right man in the right place.’ The ‘correct’ placement of individuals was seen as necessary to preserve social harmony, and in this manner psychologists came to be part of the post-World War II project of modernizing Sweden through ostensibly ‘objective’ and
depoliticized means. There was furthermore a push during these decades to standardize and unify the psychology profession (Göransson, 1997). For instance, the 1950s saw the formation of the Swedish Psychological Association through the merger of two smaller associations and the publication of a governmental report suggesting that a comprehensive program for psychology students was to be instituted so as to better streamline their education.

The 1960s brought about a reaction toward the professed natural scientific methodology that underpinned the profession’s identity. A vocal contingent of psychologists started to question the profession’s obedience to the so-called oppressive state and argued for a more politically oriented professional role (Rigné, 2002). They argued that the ‘individualization’ of social problems through testing should be replaced with a more socially and politically oriented work that encompassed the entire milieu in which individuals were situated and that could further the creation of a radically democratic society. A similar, although less radical, shift also occurred in relation to the school psychologist’s role during the 1970s (Larsson, 2013). They were now to work with the entire school environment in which the pupil was situated, as school problems were no longer conceptualized in terms of the pupil’s deficits alone, but rather of the interaction between the pupil and the way the school was organized. The psychologists’ critique in many ways resembled the Swedish public debate in general (see Ohlsson, 2008) and its quarrels over what mental illness really was – was it perhaps only an ideological myth? – and whether psychiatry was fundamentally about social control, instead of helping people. At stake was the nature of society, the state and, by extension, the profession, as it had become so closely associated with the Swedish welfare state. Together the studies cited show how these years entailed a reorientation of the profession toward a more active, social and clinical (although politically infused) role, which
distanced itself from the notion that a natural scientific methodology was to be the given foundation of the profession.

Toward the second half of the 1970s, the animated debates started to simmer down and the political aspects of the profession were downplayed in favor of the creation of a more professionalized role that covered a wider range of tasks than the 1950s psychology profession encompassed (Rigné, 2002). But there was above all a call for a return to a ‘pure’ psychology, defined as psychodynamic psychotherapy, and the profession once again took up – or at least so it hoped – the role of the expert, although this time in the form of a psychotherapeutic specialist. Yet not every psychologist was satisfied with the new orientation and there were debates concerning the perceived gap between practice and research; for instance, the lack of systematic evaluations of psychodynamic therapy as compared to behavior therapy. Despite this lack of consensus, the debates did not seem to have had any long-lasting influence on the profession’s self-image.

In summary, three general points can be made regarding the history of the Swedish psychology profession up until the 1990s. First, it has since its early years been a close associate of the Swedish state and thus gained legitimacy, access to resources, opportunities to expand, and social and cognitive influence in Swedish society. Second, its growth has historically been highly dependent on its claims to practical expertise and its ability to intervene so that individuals can function better, become healthier, or – if needed – be classified as lacking the capacity to live up to societal ideals and norms. Third, the definition of the profession’s core tasks and methodology has shifted in major ways over the decades – from natural-scientifically-based testing to politically flavored activism and, after that, to professionalized psychodynamic therapy. These shifts have been related to societal
pressures and opportunities as well as struggles and long-term undertakings within the profession to reframe and reposition itself.

Concerning the history of psychology in Sweden, a diverse collection of studies indicate how psychological theories, concepts, explanatory frameworks, and practices have come to reshape many areas of Swedish society. In this regard it has truly been “a ‘generous’ discipline” (Rose, 1991, p. 92) that has offered other professions, lay persons, and authorities new ways to conceptualize and act in and on the world.

As an illustrative example, the influence of child psychological theories, perspectives, and movements on how Swedes have understood childhood and children has been one of the most extensively studied fields. Scholars (e.g. Bergenheim, 2013; Qvarsell, 1985, 1993) have shown how psychological movements and theories have reshaped how Swedes view what should be considered a good upbringing, how to promote the best development – and what development actually encompasses – as well as what mental and psychological problems and issues may occur and how to remedy these. Such theories and perspectives have also been associated with political visions and policies concerning, for instance, how to organize society so as to abolish authoritarian child-rearing and its supposedly detrimental effects (Zetterqvist Nelson & Sandin, 2013). Similarly, a psychological interpretation of children’s health became a mainstay in the child health care services after World War II, supplementing the previously predominant somatic focus and leading to new ways to understand, normalize, and care for children so as to foster a strong Swedish population (Hörnfeldt, 2009). Related notions have also been shown to circulate in the contemporary Swedish school, as illustrated by studies focusing on the implementation of so-called psycho-educational programs drawing on psychotherapeutic methods (e.g. Dahlstedt, Fejes, & Schöning, 2011; Kvist Lindholm & Zetterqvist Nelson, 2014). These historical and
present-day studies show how a psychological sensibility has permeated our understanding of childhood and development, how to evaluate what is normal and abnormal and in what ways we should care for children. They additionally reveal how psychological concepts, frameworks, and practices have repeatedly been associated with political groups and projects, indicating how porous the borders have been between psychology and society.

Other studies focus more generally on different aspects of diagnoses and specific illnesses, such as the historical changes in the classificatory systems and what they have implied for psychiatric care (Hildrebrand Karlén, 2013); how diagnoses have become a vital part of how Swedes understand themselves and their suffering (Svenaeus, 2013); and how some diagnoses seem to encapsulate and express an entire cultural period. As an example of the latter, Petteri Pietikäinen’s (2007) study describes how neurosis became a ‘contagious diagnosis’ in Sweden for almost a century, beginning in the late 19th century and stretching into the post-WWII period, and how a particular ‘neurotic’ vocabulary was picked up by large sections of the Swedish population.

Finally, scholars have examined the history of Swedish psychology on a more biographical and institutional level, in particular the history of psychoanalysis. Åsa Bergenheim (2013) has detailed the establishment of the child psychoanalytical institute The Erica Foundation (Ericastiftelsen), while Per Magnus Johansson has written several books (e.g. 1999, 2009) concerning the history of psychoanalysis and significant psychoanalysts in Sweden. Franz Luttenberger (1989) has in a similar manner studied the reception of Freud’s ideas in Sweden, whereas Suzanne Gieser (2009) has chronicled the work of ‘pioneering’ Swedish psychotherapists.

As this rudimentary presentation shows, research on the history of Swedish psychology and the profession of psychology has varied in both focus and methodology. Our study aims
to complement the findings of this body of scholarship as well as diverge from it in some significant aspects. Perhaps most importantly, we consider the Swedish psychology profession itself, setting this study apart from most of those mentioned. This is a relatively neglected field and in dire need of studies that consider how transformations of the profession are related to changes in Swedish society, professional strategies, and theoretical underpinnings. We therefore in large part seek to build upon and add to the work of Eva-Marie Rigné (2002) by analyzing the transformation of the Swedish profession of psychology in the decades 1990–2010. In this manner we also hope to add to the scholarship on psychology to this point, both historical and current, as psychologists have been among the actors that have promoted and helped expand psychology’s reach and influence. There is thus much to gain by exploring the relationship between the psychology profession and psychology as a field of knowledge. Finally, the article makes use of ANT as its analytical tool, a novel methodological approach within the field and which, in our opinion, has great potential to highlight new and previously unseen aspects of both the history of psychology and the profession of psychology.

The Swedish Psychologist During the Tumultuous 1990s
The Crisis in the Public Sector

Sweden was shaken by an economic crisis during the early 1990s. The public sector came under great pressure with demands to cut back and save money whilst increasing productivity. The effects of the crisis on the status and position of the profession of psychology were hotly debated (e.g. 14/1990, 20/1990) and several approaches were suggested by psychologists during these years. A majority contended that the crisis would have negative consequences for the vocation and that psychologists had to take an active role in countering the perceived dismantling of the public sector. Two separate reasons
were given for the need to come to its defense. The first reason was that the public sector had to be defended since letting other professional or political groups control the course of events would affect the profession negatively. The second reason asserted that the cutbacks would primarily have an effect on the poor and disabled, groups that psychologists have a responsibility to protect and help. But regardless of the reason, the public sector was in many of these discussions presented as, or implicitly presumed to be, the natural and only logical place for psychologists to work, and the profession could therefore not stand by and ignore what was happening.

Yet alongside the defenders of the public sector, there was a small minority of psychologists who asserted that the crisis was actually a blessing in disguise because it was an opportunity to reorganize the workplaces, experiment with a freer professional role and give psychologists more responsibility in the health care sector (1/1991; 11/1991; 12/1992). Nonetheless, they never achieved any major influence in the debate and seem to have had difficulties enrolling allies to their cause.

Furthermore, there were some who advocated a ‘compromise approach.’ They agreed with the need to restructure the public sector but also worried that the reforms would be implemented in accordance with the logic of economists and bureaucrats who, many believed, had uncritically imported the thinking of the private sector. These self-proclaimed experts were said to lack the necessary knowledge of human functioning and have an obsession with saving money – perhaps even a form of “economia nervosa” (16/1991, p. 17) – instead of having a healthy awareness of the costs and benefits of reforms. Another possible problem with carrying out reckless reforms of the public sector was held to be the pitting of psychologists against each other in the pursuit of profit. An editorialist hoped that politicians and decision makers would realize that psychologists possessed a unique and
holistic framework that incorporated knowledge of the individual, the group, the organization, and society. The inclusion of psychologists and their comprehensive knowledge was therefore deemed vital for reconciling the need for cutbacks and rationalizations with the increasing plight of the weak in society (23-24/1991).

From the end of 1992 and into the following year, the discussion started to shift. There were fewer all-out defenses of the public sector while the actual economic crisis mostly loomed in the background. Instead other topics cropped up, often in relation to professional issues. Some psychologists asserted that there had been a major transformation in the fundamental structure of the Swedish welfare system, for example through the introduction of a target-based management of public services (21/1993) and the adoption of a business-influenced vocabulary (2/1993). The changed situation was believed to put new demands on the individual psychologist and they could no longer take their position for granted. Now they would have to sing their own praises and enlighten employers about their competence and knowledge (15/1994). Another, somewhat later, example mentioned the need for a general improvement of competence among Swedish workers—a task thought suitable to be carried out by psychologists (21/1994). The members of the Swedish Psychological Association were further reminded to demand a decent raise and reasonable employment benefits despite the precarious state of affairs (17/1994).

The relation posited between the psychology profession and the public sector seemed to be slowly changing and the very close connection between the two, discernable in early stages of the crisis, was seldom articulated. During the latter half of 1994 the Swedish Psychological Association published a pamphlet about working as a psychologist in the private sector, and later an editorial proclaimed that there were
today clear signals that indicate an increasing interest in psychological competence within different sectors of the private labor market. At the same time ... there will probably be an increase in the number of psychologists who become self-employed. The fashioning of an ever more distinct professional role points toward this kind of development. (12-12/1995, p. 3)

A newly graduated psychologist noted that it was no longer possible to “bury one’s head in the sand” (12-13/1995, p. 18) and ignore reality, hoping everything would stay the same. It was time, he argued, to allow the psychologist-in-training to do the obligatory post-graduation year of clinical training under supervision in the private sector. And he was not alone in encouraging psychologists to reconsider the public sector. The Swedish Psychological Association’s president doubted that public employers could risk not paying psychologists a decent wage, since “the monopoly position that the public employers have had this far ... is slowly disappearing” (18/1995, p.3).

As these quotes show, there was quite a shift from 1990 in how psychologists’ relationship to the public sector was typically described and defined. In the beginning of the crisis, the relationship was articulated as being very reciprocal: a strong public sector meant a strong profession. Thus there was a perceived need for psychologists to position themselves as spokespersons for the public welfare system, either to safeguard the psychologists’ professional position or to act as a defender of the weak, poor, and disabled. Some dissenters tried to argue for a different reality where the transformations of the public sector were an occasion to experiment with the professional role and to expand the psychologist’s responsibilities and tasks. These, however, represented a minority and were most noticeable in the earliest years of the crisis. In the end, the prevailing view had distanced itself from the initial fervor, adopted parts of the ‘compromise’ approach, and
instead portrayed the psychologists’ relation to the public sector as one marked by choice, flexibility, and a utilitarian quid pro quo. The profession should not abandon the public sector – psychological knowledge was absolutely necessary in order to reform it humanely – but it was no longer the only legitimate employer. The private sector became equally plausible, especially if public employers did not start to realize the value of the psychologist’s work. The public sector, which for a long time had been held as a necessary component of the professional network, was no longer an obligatory passage point for the profession’s plans for the future and could now be bypassed, if required.

The Decline of Psychodynamic Therapy

Claiming to possess unique knowledge is a fundamental part of a profession (Brante, 2010; MacDonald, 1995). As such, it is not surprising that discussions regarding what kinds of knowledge are vital to the profession are a recurring feature of the journal. During the latter half of the 1990s there were intense debates over the scientific status of various psychological schools and the relation between researchers and practitioners, debates that ended with the dethroning of the psychodynamic framework as the hitherto undisputable perspective on psychological health and functioning. These discussions offer an opportunity to observe how Swedish psychologists did “boundary-work” (Gieryn, 1983) where they strove to demarcate the scientific from the non-scientific, the efficient treatments from the useless, and the modern ways of thinking from the obsolete. Such boundaries are not given in the order of nature, but made and re-made on the basis of continuous struggles and compromises (Latour, 1988).

It is possible to identify two distinct theoretical traditions in the articles and discussions of the journal during these years: a cognitive and behavioral, and a psychodynamic and psychoanalytical. Often, the cognitive and behavioral therapies were described as being on
the advance both in Sweden and internationally. In the summer of 1995 the first World Congress of Behavioural and Cognitive Therapies was held in Copenhagen, “a desirable development” (12-13/1995, p.8) for the field, according to a Swedish professor of psychology. Cognitive and behavioral therapies were said to have grown in influence in the last eight to ten years and were becoming “more and more recognized among the public as well as in the psychiatric sector” (9/1996, p. 14). A general theme at this time was that the expansion of cognitive-behavioral therapy (CBT) could partly be attributed to research showing its efficacy. The necessity of grounding CBT in empirical research seems to have been an unspoken, and undisputed, assumption among those calling themselves cognitive-behavioral therapists.

Meanwhile, there were intense debates concerning the status of psychodynamic therapy and its standpoint on forms of research. One of the psychologists participating in the discussion (14/1995) questioned the effort even to try to establish psychoanalysis as a science, especially since science is characterized by intersubjectivity: different individuals have the same understanding of a phenomena. But the essence of psychoanalytical theory is that such a correspondence between individuals’ subjective experiences of the world does not exist, at least not in any profound sense. If the current ideal of science demanded correspondence between individuals’ perceptions then, he argued, perhaps it was the ideal that was inadequate; psychoanalysis should, then, be content with being ‘unscientific’ and relying on proven clinical experience. The discussion became more animated in one of the last issues of the year (19/1995) with the contention that it was more important to go on the offensive and uphold the value of a humanistic ideal of science than to spend time dissecting your own position. Besides, claimed the author, the debate over psychotherapy was simply part of a larger and far-reaching positivistic critique against the humanities,
conducted by positivistic believers obsessed with the notion of measuring everything in “kilos, meters, or some other physical unit of measurement” (19/1995, p. 9). The stress on measurement led to an impossible situation for those scientific disciplines that took the experiences of man as their field of study, misleading psychodynamic practitioners to “futile efforts in their attempts to prove the positive effects of psychotherapy” since they had to comply with “a positivistic reductionist verification procedure” (19/1995, p. 10). The same issue contained a response to the aforementioned statements, strongly condemning the notion that psychoanalysis was any kind of science at all. Psychoanalysis had withdrawn into a radical constructivist hermeneutics, where there were only interpretations of reality, and had “freed itself from all tentacles and annoying connections to behavioral science and biology” (19/1995, p. 13). Literary magazines were claimed to be the only appropriate mouthpiece for the psychoanalytical movement.

As illustrated by these quotes, there was a mounting debate concerning the scientificity of the various psychological groups, institutions, and fields. But although the discussions were heated and quarrelsome, there was a peculiar consensus between the parties: psychoanalytical and psychodynamic theory, at least in its current guise, was no longer in tune with the prevailing scientific spirit of the time. Instead the discussion revolved around whether it was because of psychoanalysis being archaic, or to society losing touch with the humanistic tradition and instead turning to a so-called quantified reductionist conception of man.

At the same time as the discussions over psychoanalytical and psychodynamic therapy raged, some psychologists started to question the scientific ideals said to be taught at the universities. An anonymous columnist satirized the purported obsession with experimental psychology at the expense of practitioners’ clinical experience and wondered if a licensed
psychologist who wished to complement his or her education by taking courses at a university would “be forced into a darkroom with rats or psychology students coerced to be there, in order to do a ... pointless perceptual experiment?” (3/1996, p. 11). These assertions were immediately countered by those who felt that psychologists had everything to gain by reducing the perceived gap between researchers and practitioners. The psychologists, a professor of psychology remarked, have historically had a “more ambivalent stance” (6-7/1996, p. 16) toward drawing on empirical research in their work than, for example, doctors. Thankfully, he continued, this attitude seemed to be waning lately as a result of an improved training of psychologists, bringing research and practice closer together. The profession should, however, take note of the many occupations that were already in the process of monopolizing important fields where much psychological research had been done, such as stress management. The resistance to science that some psychologists boasted of might therefore, he warned, come with a large cost and lead to the marginalization of the profession.

While some agreed with the anonymous columnist and advocated for abandoning the perceived scientism on behalf of a “knowledge of man” (9/1996, p. 19), others believed that there was no harm in leaving the results of psychological research in the hands of other professions. A letter to the editor contended that the diffusion of knowledge was not detrimental since it benefited patients but also because of the impossibility of monopolizing psychological knowledge, compared to medical knowledge. Psychological knowledge is always a matter of “non-verifiable processes and emotions that also depend on a person’s interpretation of the processes in another individual” (10/1996, p. 18). The uncertainty inherent in psychological knowledge made it particularly worrisome that some powerful individuals were trying to silence dissenters.
The hostilities did not cease during 1997. The editorial staff of the journal ran a series of articles focusing on both qualitative and quantitative research on psychotherapy, in what can be taken as an attempt to mend fences between the camps. Two topics came especially into focus during that year. The first was a debate stretching over several issues (e.g. 5/1997, 14/1997, 16/1997) that questioned whether the theories of Sigmund Freud were at all reliable and useful in contemporary Sweden. The second discussion took off after a book review and an article (9/1997) advocated the advantages of a psychoanalytical perspective on mental retardation and autism, strongly influenced by the ideas of the French psychoanalyst Jacques Lacan. A number of those participating in the exchange proclaimed that a psychoanalytical framework was the only viable option to avoid reducing man to merely a biological being, whereas those skeptical of psychoanalysis found it demeaning not to admit that there are biological and neurological disabilities beyond the control of man (see, for example, 10/1997, 11/1997, 12-13/1997, 14/1997). Many of the critics were also of the view that the time had come for psychoanalysis to abdicate and allow more ‘modern theories’ to lead the way. Additionally, there were also a number of more conciliatory solutions proposed. One of the letters sent in (1/1998) argued for the need to separate ‘biologism,’ or biological determinism, from biological research: the former being a totalitarian ideology which acknowledged no other dimensions than the purely biological one, while biological research could actually contribute to psychoanalysis and the general knowledge of man.

Similar topics argued over during the final years of the decade were the relevancy of the energy concept in psychoanalysis (18/1998, 1/1999, 3/1999), continued scrutiny of Freud (6/2000, 9/2000, 10/2000, 11/2000), and whether the psychoanalytical conversation still had a place in contemporary society (14/2000). The attitude among psychologists
identifying as psychoanalysts and psychodynamic therapists was by now quite gloomy and many believed that psychoanalysis was about to be dethroned from its natural standing as an, if not the most, important psychological and psychotherapeutic tradition. One psychologist hoped for the return of psychoanalytical therapy “once cognitive therapy is through” (14/2000, p. 19), while another colleague believed that psychoanalysis would continue to exist independently of the Swedish health care and insurance system. During the final stretch of 2000 (22/2000) a columnist sympathetic to psychoanalysis remarked that many no longer considered the psychodynamic perspective relevant to modern psychology, as it had been pushed aside by theories defining psychology as the study of behavior – the antithesis of everything psychoanalysis stood for.

Between 1995 and 2001, there was a long-running debate regarding psychoanalysis, science and the relationship between practitioners and researchers. Psychoanalysis was portrayed by its critics as antiquated, non-empirical, lacking efficacy, and lost in its own theoretical reveries. Often it was announced that it was time for psychoanalysis to pack up – but if it had to exist at all then it should seclude itself in the literary salons. And it was not only skeptics that were questioning the proper place of psychoanalysis; even those psychologists who presented themselves as psychoanalysts or psychodynamic therapists were doubtful there was room for psychoanalytically inspired therapy in contemporary Sweden, and their melancholic outlook only increased in strength as the years went by. The hope was that perhaps it could survive outside the health care sector and stage a comeback when the conditions seemed more suitable. Regardless of the fears and hopes for the future, at that moment sceptics and psychodynamic therapists were in agreement that psychoanalysis’ dominance had come to an end. Similar to the public sector before it, the position of psychoanalytical and psychodynamic theory as the obligatory and natural
framework was thus deconstructed during these discussions and even made into a “point of irrelevance” (Galis & Lee, 2014) by some. Now, the question was what should take its place.

**Where to Now? - The Swedish Psychologist At the Turn of the Millennium**

The experiences of the public sector’s crisis and the overthrow of the psychoanalytical framework seemed to make the profession lose its moorings and led to a search for new ground to stand on. Around the turn of the millennium, the descriptions of the psychology profession became more heterogeneous and disparate. Many appeared to have believed that it was now time to expand into new tasks and areas of expertise.

That psychologists should be the absolute representative of psychological knowledge was a recurring notion, meaning that the profession should be seen as possessing a psychological competence unrivalled by any other occupation. The president of the Swedish Psychological Association clarified in an interview (12-13/1997) that psychologists, as always, had to contribute to the well-being of individuals but that this goal was now to be achieved through different means, such as supervision, consultation, and management. To make such a transition possible, psychologists had to be regarded by both the public and by themselves as experts who functioned as interpreters and scrutinizers of the uses of psychological knowledge. Consequently, many of the tasks being done by psychologists would in the future be handled by other professional groups, under the direction of psychologists (17/1998). One of the arguments given for the need to redefine the professional role was that psychology was so dispersed in Swedish society that the profession could no longer be the sole representative of psychological knowledge; instead psychologists had to be “psychology’s main representative” (5/2000, p. 3, italics in original). As a corollary to the desired transformations in the professional role, the training to become a psychologist would also have to be overhauled. Although every psychologist-in-training
needed to know the basics of therapy and psychological treatment, it was not self-evident anymore that “everyone will have this [therapy] as their main task in their future line of work. Training in leadership, organizational development, and research might be as natural” (10/2000, p. 20) as therapy for the future psychologist.

The purported return of psychological testing was another important topic during these years. An article from 1994 (18/1994) announced that it was time to reclaim intelligence and personality testing, following the rejection of the practice in the 1960s and 70s as a result of unfavorable political conditions. The times were held to have changed and the previously familiar accusation that testing obscured the social character of individuals’ problems was now seldom seen within the profession (18/1995). The project of restoring testing to its supposedly rightful place was taken up by the Swedish Psychological Association, which in 1996 launched the Foundation for Applied Psychology [Stiftelsen för Tillämpad Psykologi] (6-7/1996), partly to be an institution responsible for keeping Swedish tests up to date since, as an editorial phrased it a year earlier, the Swedish “psychologists’ ‘x-ray machines’” (3/1995, p. 3) were in dire need of new statistical norms and translations of foreign tests. Without adequate control over the construction and dissemination of test materials, the profession ran the risk of letting any “irresponsible test producer and test user” operate freely and without oversight. The situation was seen as especially dangerous since an assessment could not simply be based on the administration of a test; the psychologist had to “interpret and evaluate information from many different sources, tests being only one of those” (18/1995, p. 16). The profession should not return to the naïve and mechanized form of testing that characterized the 1960s – these days the leading principle should be to show respect for the individual (11/1996). With time, testing was increasingly described as having returned as an essential tool in the psychologist’s arsenal, almost enjoying a “renaissance in
the work of psychologists” (21/1998, p. 3). There were even some who feared that it might displace the psychologist’s primary role as a psychotherapist, “reducing the psychologist to an assessor/tester” (5/1999, p. 17).

While psychoanalytical theory was being heavily questioned, other fields were pronounced to be the future of psychology. One frequently mentioned field – whose potential was sometimes described as almost revolutionary – was health psychology. In 2000, the International Congress of Psychology was to be arranged in Stockholm and health psychology was chosen to be one of the main themes of the conference. A reason given for the selection was that “the role of psychology in relation to health in a broad sense has undergone a far-reaching transformation” (10/1998, p. 11). While psychology had always focused on mental health, the somatic counterpart was now declared as becoming ever more relevant as a consequence of several theoretical, social and political developments: the rise of behavioral medicine, health psychology, and neuropsychology; substantial changes in the disease landscape over the course of the 20th century; and shifts in views of health, such as World Health Organization’s notion of health as not simply the absence of ill-health but also the capacity to achieve self-realization. For these reasons new forms of intervention were needed that broadened the aim of the profession beyond that of solely working with illnesses. The significance of health psychology was further stressed by the Swedish Psychological Association, which believed that one of the most important questions for the future was how psychologists may “contribute to analyzing and solving problems that up until now – completely or to a large degree – have been defined as medical” (12-13/1998, p. 12).

In the wake of the theoretical expansion offered by the rise of health psychology, there was an additional push from the Swedish Psychological Association to reform Swedish
health care to more closely resemble that of Norway, described as a “utopia” (7/2004, p. 3) of psychic health care as a result of several reforms of the psychiatric sector – and, it was added, in the process giving psychologists more autonomy, influence, and responsibility. Psychic ill-health was said to be one of the major problems confronting the Swedish public, and many children, youths, and adults were in need of help without receiving any assistance from public psychiatric clinics (4/2005). Hence more emphasis had to be put on preventing mental ill-health, instead of reacting when it was too late, and primary care centers, schools, occupational health services, and child and maternal clinics were labelled as the principal sites for such preventive work. The psychiatric services, described as the traditional site for psychological treatment, were to be abandoned, since “psychic health is too important to leave the ultimate responsibility in the hands of the psychiatry” (4/2005, p. 4). Of course, this involved placing more psychologists in primary care (9/2006), schools (1/2008), and occupational health services (15/2008), but also recognizing that training to become a psychologist encompassed knowledge of “the psychological development of man in all its facets” (15/2007, p. 3). The profession should therefore remember that it was capable of doing more than exclusively treating ill-health. This line of reasoning was shared by others, for example by a letter writer who felt that it was time to “stop regarding the psychiatric services as the most important place to work for psychologists. Let the doctors deal with the organizationally sinking ship … Focus instead on lobbying for psychologists in primary care clinics, schools, companies, and work places” (2/2010, p. 28).

All the changes seemed to destabilize the hitherto commonly held view of the profession, and there were many articles, editorials, and letters that commented on the strange and interesting situation. A member of the Swedish Psychological Association’s board observed that “psychology as an academic discipline is undergoing radical changes … When I was in
training to become a psychologist an overwhelming majority wanted to be practitioners and work in the public sector. Now more and more [people] want to be consultants and work in the private sector. Previously everyone was going to be psychodynamic [therapists] and now it is CBT that is in vogue” (1/2002, p. 7). Some years later, a psychologist proclaimed that “we might be facing the change of a generation within Swedish psychology. Psychology as a science has become, if that’s at all possible, even stronger and our profession has become more specialized and heterogeneous” (15/2005, p. 14). This opinion was shared by the Swedish Psychological Association, which noted that the recent years had led to a “significantly more heterogeneous profession than before. Today’s psychology has points of contact with ... medicine, technology, the occupational sciences, the judicial system, the humanities, and whatever you might care to mention” (9/2003, p. 3). Rather than “nostalgically lament” the developments, one should “greet [them] with joy” and maintain a professional, tolerant, and curious attitude, since the heterogeneity and diversity might otherwise lead to an increasing number of intra-professional conflicts.

The events that occurred during the turn of the millennium all highlight the turmoil and disorientation that followed the 1990s. The discussions often revolved around the need of – and search for – a new professional role, whether it involved testing, focusing on promoting health and preventing ill-health, or occupying a supervisory position vis-à-vis the use of psychological knowledge by other professions. While some seemed lost in the new surroundings, others took it as an opportunity to finally leave the traditional psychologist position of treating psychological illnesses at a psychiatric clinic while working in the shadow of the medical profession behind. For them the time had come to step out into the light and actively shape the psychologist of the future. In the coming decade, three areas came into
focus: how the profession should manage the media, how to best influence politicians and
decision makers, and how to evaluate psychological treatments.

Media, Money and Manuals – the Swedish Psychologist During the Early 2000s

Interacting With the Media

Some years into the new millennium, the matter of participating in the media had
become more pressing for the profession. The Swedish Psychological Association in
particular argued that an increased involvement with the media was required if
psychologists were to have an effect on public debate. One of the long-term goals was to
exploit “the power of the media to make our issues into societal issues that must be solved”
(7/2007, p. 10) and position the profession as the obvious party for politicians and the
media to consult on questions concerning psychology. However, caution had be exercised as
the profession would have to adapt to the logic of the media if the venture was to succeed,
for instance, advancing opinions and arguments in a “succinct and simplified way” (18/2002,
p. 8) and using “‘uncomplicated one-liners’ and ... numbers” (19/2002, p. 7). A contrast was
drawn to the propensity of psychologists for delivering longwinded speeches lacking a
distinct answer or to their love of complaining about how unfairly they are treated, for
example how low their wages are. The latter complaint, the author contended, was
completely pointless since “no one will feel sorry for you” (18/2002, p. 9). The only
alternative was to avoid negative arguments and emphasize the contributions the
profession could make to society. The Swedish Psychological Association was not alone in
arguing for the need to position the profession better in the media. One letter writer agreed
and believed that it could be productive to “define the ‘product’ psychologist, what is our
functional value ... and what is the functional surplus value?” (12/2004, p. 16). The writer
encouraged psychologists to associate themselves with values that are deemed to be
desirable for the profession, since “success comes, as we all know, to those who give the impression of being successful.”

There were, however, also those more skeptical of the endeavor. The risk of diluting psychology was brought up and some negative consequences of the increased intermingling of the media and the discipline were said to be the manifestation of “revival elements and cheap quick-fixes” (17/2003, p. 3). A psychology recast into a shape attractive to the media could lead people to believe in something that lacked the depth and complexity characterizing a true psychotherapeutic relationship. There was also some confusion expressed by psychology students as to the demands of clarity and confidence (14/2005). They wondered how they were going to be able to tell the public in certain terms what a psychologist was and could do if they were not told the answer even during their own training. The absence of any discussion surrounding these issues led to a distinct lack of a definite professional identity for the students.

A third version of the relation between psychology and media was provided by those who rejected any strict dichotomization and instead argued that psychology had nothing to lose and everything to gain by engaging more intensively with the media actors and arenas. Psychologists had to stop belittling the popularized versions of psychology and “get down from [their] high horses” (12/2008, p. 22) so that they could take advantage of the situation and reach those otherwise uninterested in or too distant from psychology. The author stated that psychology had become a public matter and it was no longer shameful or stigmatized to see a psychologist. Improved media participation could therefore have only positive consequences for the profession.

In the latter half of the decade, several Swedish journals and magazines with a special focus on psychology were launched. An editor commented that many “today interpret their
own and others’ lives through psychological frameworks” (14/2009, p. 12) and therefore want to read magazines that present psychological perspectives on issues. Additionally, the Swedish Psychology Association started a website aimed at providing the public with psychological knowledge written by psychologists (6/2009).

One way to frame these discussions is to see them as revolving around strategies to secure the psychology profession as the spokesperson for psychology in general and the primary actor to consult in these matters. It seemed obvious to many of the discussants that if they were to achieve this goal then the profession had to find ways to link up with the media, as it already had channels in place through which to reach the rest of society, thus offering the profession an easy way to extend its influence. Yet some doubted that it was worth the price to link the profession closer to the media since this also meant that the profession had to accept a certain way of presenting itself, of disseminating knowledge and of deferring to the media’s logic instead of relying on the authority conferred on the profession by its state-issued license and scientific knowledge base. Instead, they wanted to find alternative ways that did not strengthen the media’s position as an obligatory passage point to the rest of Swedish society. Yet with time the notion that media represented something potentially dangerous to the profession’s autonomy seemed to have all but disappeared. It no longer appeared controversial or risky to spread psychological knowledge through popularized channels and there was hardly any mention of a dichotomization between the discipline and the media. Instead, the collaboration was understood as a way to help an increasing amount of people better understand themselves, their lives, and their problems (while, although not always mentioned, also promoting the psychology profession). What had earlier been viewed by some as a professional strategy that might constrain the profession was now presented solely in positive and enhancing terms. And so,
alongside an ever intensifying media participation, we can see the reconfiguration of the profession of psychology.

**Getting the Ear of Politicians**

It was not only the relationship to the media that Swedish psychologists attempted to redefine during this period. They also tried to find new ways to communicate with and influence politicians and decision makers. An illuminating example of this endeavor can be found in the 2004 election of a new president of the Swedish Psychological Association. The two candidates, Lars Ahlin and Torgny Danielsson, proposed rather different ways of strengthening the profession’s position in society.

In the buildup to the election, Ahlin discussed “the need to be offensive in the debate, to highlight an economic perspective on the work done by psychologists, to concretely explain in economic terms what psychologists are doing today and describe the needs of the customers” (2/2004, p. 8). Later on, he explained that it was not enough to emphasize humanistic values, “it is also a matter of systematically underlining the economic values that psychologists contribute to ... You have to be able to show society, tax payers and corporations that the work is valuable” (5/2004, p. 11). An instance of such values was said to be lower health care costs. Meanwhile Danielsson, the sitting president, focused less on the purely economic aspects and put greater stress on raising the legitimacy and influence of the profession by highlighting its professional knowledge. Psychologists had to become better at establishing themselves as the preeminent representatives of academic and applied psychology so that they could “stand united, active, and available” (4/2004, p. 7). Moreover, they would have to strive to take up positions within governmental agencies, departments, and politically important fields in order to better influence the future of policy and public debate.
The election ended with Ahlin winning and shortly thereafter he clarified his plan for the coming term by specifying three keywords that should guide psychologists: humanism, knowledge, and utility (9/2004). Psychologists, Ahlin maintained, were already strongly associated with the first two keywords, while there was a lot to be done concerning the promotion of the profession’s utility. The goal was to be able to demonstrate its utility to clients by evaluating psychologists’ interventions and showing that they are efficacious, to employers by pointing out how psychological competence may help them reach their companies’ goals, and to society at large by showing how psychology can reduce costs to taxpayers. It was time to “translate software to hardware. That is what politicians take note of” (9/2004, p. 3).

The economization of psychology can be seen in other articles and features as well during this time. One example is a seminar titled “Can psychology be profitable?” (14/2005, p. 12). Through the use of economic models the cost of an intervention could be compared to the future costs to which the lack of intervention might contribute, assisting decision makers and therapists in choosing when and how to intervene. Similar arguments were found in a discussion regarding the financing of psychiatric care (6/2006). Politicians were criticized for increasing funding for pharmacological treatments while reducing it for psychological therapies, despite research showing that the cost of two years of psychiatric medication was 300 percent higher than two years of CBT. This discrepancy was thought outrageous since any Swedish company would fire a CEO who continued to produce a commodity that costs three times more and still was of the same quality as its cheaper competitor.

But the use of an economic vocabulary was not always presented as an easy, or even morally correct, choice. It was often claimed to be necessary as a result of the prevailing social and political circumstances. Lars Ahlin remarked in an editorial that it might seem
inhumane to discuss economic utility in relation to psychological research, assessment, and treatment, and wondered rhetorically if not the purpose of “helping and supporting people ... should be enough” (14/2008, p. 3). “It should be,” he continued, but unfortunately the economic aspects had to be highlighted if the arguments were to be persuasive. Psychologists would thus benefit if they “pedagogically exemplify the utility, in the decision makers’ court, and using their language.”

There were also further advantages mentioned in relation to using a vocabulary infused with economic terms, but this time from the perspective of patients and users. In a society based on “concepts such as patient rights, diversity, competition, patient safety, consumer power, durable solutions, quality, public comparisons, and freedom of choice” (1/2010, p. 3), the increasing multitude of choices led to a difficult situation where the individual might not know whether or not they were making a good decision. Consumers needed information about the available commodities and services so that they were able to make the best choice, while also removing the possibility of inferior goods thriving at the expense of high quality ones. The demand for transparency should not be restricted to material production but should also encompass psychology, as a way of certifying the best psychological goods.

As in the case of psychologists’ relations with the media, there was a slow but noticeable shift toward an acceptance of the need to promote the economic benefits of psychologists and their interventions. The professed need for change was frequently hedged with acknowledgments that this had to be done not because psychologists necessarily believed it to be the right choice, but because Swedish society had undergone major changes and that only economic arguments were now able to sway those with power and money. Thus it was presented an undesirable but unavoidable development if the profession wanted to be
heard. Of particular interest is the fact that the move toward discussing the economic value of psychological services and interventions was quite unopposed at this time. The harsher resistance to an economized vocabulary visible during the economic crisis in the early 1990s was nowhere to be seen and there were no accusations of having ‘economia nervosa’ or the like. While the previous president, Torgny Danielsson, did not emphasize economic analyses in his policy outlines, neither did he take an active stance against them or proclaim them to be, say, unnecessary or ideological. Everyone instead seemed more-or-less in agreement that if the profession was to survive in the allegedly ‘marketized’ Swedish society then there really wasn’t any alternative. The completely naturalized role the public sector had in the early 1990s was replaced with an equally naturalized and obligatory market economy.

**What Works and by Whom?**

The third significant episode was the debate over evidence-based psychology, which raged on for several years, although primarily during the latter half of the decade. Internationally, discussions over evidence-based psychology began in earnest after the Division 12 Task Force on the Promotion and Dissemination of Psychological Procedures published articles purportedly “identifying treatments with a scientific basis” (Chambless et al., 1996, 1998). The task force’s notion of what should be defined as a scientifically based treatment and its consequences for the field of psychology has since then been met with everything from praise to extreme criticism (see, for example, Cushman & Gilford, 2000 and Wachtel, 2010). There is, however, no need to repeat the international disputes here in any great detail as they have little direct impact on the Swedish debate. Instead, they should primarily be seen as a backdrop to the quarrels taking place in the pages of the PT.

Some of the arguments and viewpoints offered during the discussions are similar to those seen during the conflict in the 1990s over psychology, science, and research. Yet what
makes the episode noteworthy is that the various ways to define and evaluate research are starting to be institutionalized in governmental reports that rank psychological treatments based on their perceived efficacy as measured on the basis of a specific set of criteria. These rankings then underlie the reimbursement given to county councils and private health care companies. There is thus a closer – and more explicit – relationship between the valorization and evaluation of psychological research and the social and economic standing of the various psychological traditions than was the case in the late 1990s. So while certain arguments are rehashed from the 1990s – and even earlier – the stakes are a lot higher this time as the linkages to other actors have multiplied.

The precipitating event for the first round of discussions and conflicts was the report “Treatment of Depression” [*Behandling av depressionssjukdomar*], published in 2004 by the Swedish Council on Health Technology Assessment [*Statens beredning för medicinsk utvärdering*]. An editorial written just after the report was released (4/2004) triumphantly proclaimed that psychotherapy was now proven to be at least as effective as antidepressants and with longer-lasting results. Finally, it continued, a Swedish institution officially endorsed psychotherapy as a legitimate treatment for depression. The joy expressed in the editorial was, however, not shared by all. Criticism was aimed at the report’s conclusions (13/2004), specifically the classification of cognitive-behavioral therapy (CBT) and interpersonal therapy (IPT) as being more effective than psychodynamic therapy. The conclusions drawn indicated, according to the critic, that the authors of the report made an unfair selection of studies to include and demonstrated a bias toward CBT and IPT. This instance of harsh criticism aside, the following months were quite calm. Only a few articles and letters discussed such disparate issues as whether curative factors were too static a concept (1/2005), the assimilation of psychodynamic techniques into cognitive
therapy (10/2005, 12/2005, 14/2005), and the increasing emphasis on empirical research in psychological practice (15/2005).

During 2006 the momentum picked up and the debate quickly narrowed to being almost exclusively about the notion of evidence-based therapy. A psychologist questioned the seemingly experimentally influenced philosophy of science underlying the predominant conceptualization of evidence-based therapy and suggested that everyone should realize “that evidence is so much more” (9/2006, p. 25). The experimental paradigm, considered obsessed with controlling as many variables as possible, only benefited “the researchers who wish to create generalizable manuals, and psychotherapists who feel safe being ... dogmatically faithful to their authority.” Hence the experimental paradigm lacked value for the client who was looking for an intuitive, creative, and relationally competent therapist. Several psychologists expressed hope that the strict emphasis on randomized, controlled studies could be supplemented by other factors, for example integrating research with clinical experience (13/2006) and acknowledging the role that placebo, in the form of expectations, motivation, and trust, might have (10/2006). There were also those who feared that the debate over evidence-based therapy might create ruptures in the profession and stressed the need to remember the sense of community provided by the psychologist license everyone held in common (14/2006).

The debates continued the following year, with an increase in the number of writers alarmed over the situation. The profession was described as engaged in a struggle between various psychological schools, forcing every therapist to confess to a single method instead of allowing each psychologist to make use of their entire methodological and theoretical arsenal (1/2007). By overemphasizing psychotherapy at the expense of integrating it with assessment and diagnosis psychologists were said to have forgotten their common
professional identity. But while some were eager to downplay the question of any possible differences in effectiveness between psychotherapies, other felt that it was the paramount issue. Avoiding the subject matter or, even worse, claiming that it was not possible to create an evidence-based psychotherapy at all, might “make psychologists as a professional group appear as opponents to the principle that care and treatment in the public sector should rest on adequate evidence” (3/2007, p. 23).

At the center of the debate was the so-called ‘dodo bird verdict’. The ‘verdict’ was challenged in several articles and letters as it was asserted to lead “to quite absurd consequences for both the training of psychologists and for the psychologist’s professional practice” (4/2007, p. 28). What was there to learn if every method was equally effective? The author of the letter instead hoped that the proponents of the dodo bird verdict would diminish in numbers as psychotherapy research progressed. The argument was countered by those who maintained that research on psychotherapy actually showed that the common factors in psychotherapy were the most important, making it impossible to declare one kind of therapy better than any other. Thus it was “misleading to, as for example the Swedish Council on Health Technology Assessment did, create guidelines for treatment that are solely based upon research on specific methods aimed at specific diagnoses and disregard

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2 Named after the dodo bird in Alice in Wonderland who pronounces every participant a winner. Briefly summarized ‘the dodo bird verdict’ is the notion that every bona fide therapy is equally effective and that the effective components are those that are common to all therapies, for example trust in the method and a good working alliance. As it is impossible to fairly summarize the discussions over the ‘verdict’ in this article, see Budd & Hughes (2009), Chambless (2002), Luborsky et al. (2002) and Westmacott & Hunsley (2007) for some illustrative examples.
any other psychotherapy research” (6/2007, p. 23). Since the dodo bird was considered still to be figuratively alive, any future guidelines should consider incorporating contextual psychotherapeutic variables so that “facts and not faith will guide our future work, regardless how challenging the facts may be” (6/2007, p. 25).

The Swedish Psychological Association also intervened in the debate by declaring that the traditional understanding of evidence-based psychology should be replaced with “evidence-based psychological practice” (14/2007, p. 3) that to a larger extent espoused the value of psychological expertise. An effective method had to be accompanied by psychological competence, embodied in the psychologist. There were “tendencies to undervalue professional psychological competence and a corresponding overvaluation of method of treatment” and these allowed unserious and incompetent actors to misuse validated methods, harming both clients and the profession. Later that year a seminar was held in which aspects of the concept of evidence were discussed (15/2007). Evidence, a participant suggested, presented an opportunity to distance the profession from the speculation and conjecture of laypersons, but if this was to succeed then the notion of evidence had to be broadened to include research, clinical experience, and the patient’s wishes and expectations. In addition, the summary of the seminar voiced again the hope that grounding psychological practice in empirical research would strengthen the profession’s standing. Some believed that it also could be a way to encourage public employers and institutions to increase their funding of psychological services.

While the discussions heated up during 2007, the following year marked the pinnacle. Almost every issue contained debates and letters arguing over and reflecting on what an evidence-based psychology actually meant and whether it was at all desirable. In early 2008 (2/2008) a professor of psychology noted the incendiary effect that the debate over
evidence-based psychology had had on the profession. He dreaded that it might bring about a split with “evidence fundamentalists” on one side and “evidence analphabets” (2/2008, p. 11) on the other. He went on to express the hope that this could be avoided and that a fair balance between evidence and clinical reality could be reached. Another reconciliatory attempt was proposed by a columnist who reminded people that the fault line was not between psychodynamic therapy and CBT, but between “on the one hand a psychological perspective on problematic behaviors, on the other an illness perspective” (13/2008, p. 17). The main enemy was, so to speak, the medicalization of individuals’ problems, not any opposing psychological theory.

Also present in the debate at this time was a vocal minority who were against any effort to evaluate psychotherapy through a standardized framework. Generally they offered two forms of criticism. The first form stated that the adaptation of today’s training of psychologists to the contemporary “trend of manualized and simplified psychotherapy with a natural scientific angle” (5/2008, p. 23) weakened the profession by reducing the complexity of psychotherapy and allowing other occupations to usurp psychologists’ position in the psychotherapeutic arena. The second, and often more acerbic, form of criticism was aimed at the alleged take-over of psychological practice by economists and bureaucrats where “quality is mistaken for, and often measured by, quantity or uniformity” (5/2008, p. 24). What remained, according to the critics, was a dehumanized outlook in which human beings turn into manipulable machines and psychotherapy becomes technologized and neglectful of the dimensions unique to mankind. The emphasis on measurement present in the endeavor to create an evidence-based form of psychotherapy was characterized as originating from the field of physics and not at all applicable to psychology. Perhaps it was even borrowed “with the purpose of raising psychology’s status
or possibly to turn psychology into a form of engineering with designed or functional humans as the goal” (6/2008, p. 20). As if this were not enough, the uncompromising critics condemned the diagnostic system used in much evidence-based research, as its focus on symptoms ignored the fact that those very symptoms had meaning as unconscious signs in a person’s life (9/2008).

Although not everyone shared the radical spirit of the aforementioned critics, many did feel that the concept of evidence-based practice had been accepted too hastily and unreflectively. The notion of evidence was often viewed as part of a medical practice that could not be equated to the work done by psychologists. Evidence had to be situated in relation to the actual discipline and field of work. Otherwise, you would get a situation in which “many psychologists . . . mutter excuses for their lack of evidence.” They, it is sarcastically remarked, “might as well apologize for [their] lack of stethoscopes” (7/2008, p. 13). Evidence-based research could be an excellent tool for medicine and even for evaluating some psychological treatments, but it was considered wrong to believe that it was adequate for all forms of psychological research. Right now, the psychologist proposed, the important thing was to develop new methods and criteria that fit the nature of psychology to a greater degree, and that medical representatives had not monopolized. An additional proposal was to put less emphasis on university-based evaluations and instead systematically evaluate psychological treatments at specific sites and clinics, as this could allow clinics to use treatments not yet proven to work according to traditional evidence-based criteria but which nonetheless seemed to work in clinical practice (13/2008, 14/2008).

The dynamic and multifaceted nature of the notion of evidence can further be seen in an issue dedicated to the question of evidence-based psychology (7/2008). Here several
psychologists and researchers were asked to give their views on what it meant to base psychology on evidence. One of the most discussed topics was exactly what was encompassed by the idea of evidence. Were only randomized controlled studies good enough to be included in the definition or could, for example, a patient’s replies in an psychoanalytical therapy be considered a form of evidence that proved the therapy was moving in the right direction? Additionally, some stressed that the benefits of evidence-based therapy went beyond guiding the individual therapist in knowing what works. Public institutions and governmental departments demanded cost-effective interventions and to meet their requirements psychologists had to above all demonstrate that their techniques and interventions were efficacious. But the same held for patients, since the stamp of evidence-based therapy might help them orient themselves in the current “jungle of therapeutic methods” (7/2008, p. 6). Another interviewee suggested the implementation of a “therapist driver’s license” (7/2008, p. 9) on the basis of psychotherapy research showing the importance of therapist variables.

In 2009 the release of the preliminary report National Guidelines for Depression and Anxiety Syndromes [Nationella riktlinjer för vård vid depression och ångestsyndrom] by the National Board of Health and Welfare [Socialstyrelsen] provoked a heated debate. The guidelines’ endorsement of psychological treatment over psychopharmacological drugs was seen by many to be a very positive development – even “[a] paradigm shift in psychiatric care” (5/2009, p. 4). However, not all celebrated the report’s conclusions. Some thought that it was a “complete disaster” (5/2009, p. 4) that CBT was recommended as the first-choice of treatment in almost every situation, and also considered the board’s recommended range of viable treatments as too narrow. A more general notion of treatment was suggested to be more beneficial as only such a broad approach would be
useful in actual practice, for example in primary care and geriatric care. Elderly patients “primarily need someone to talk to about dying, letting go of life, and, as in our society, to no longer be seen as useful. They do not need a to-do list in their hand” (5/2009, p. 5). An additional posited problem with the board’s guidelines was that it could lead to a situation where only CBT was viewed as profitable for employers and public agencies. In the long haul, this could completely eliminate the presence of psychodynamic therapists in Swedish psychiatric care and “amount to a homogenization which is not constructive going forward” (5/2009, p. 5). Besides the fact that patients would, according to the author, like to be able to choose between several therapeutic methods, there was an added value in allowing numerous therapeutic frameworks to co-exist since they cross-fertilized and encouraged each other to make theoretical and methodological progress.

The Swedish Psychological Association also commented on the proposed guidelines and asserted that it was of utmost importance that the guidelines incorporated two keywords: competence and diversity. It was “obvious that psychologists are to have a prominent position as experts on psychology” (9/2009, p. 9) and that the choice of a suitable treatment should be in the hands of the individual psychologist and tailored to the specific time and situation of the client. The lack of diversity of treatments and the guidelines’ “fixation on method” hindered psychologists from helping as many clients as possible.

Faced with strong resistance – and not only from psychologists – the National Board of Health and Welfare redrafted its guidelines to, among other revisions, include psychodynamic therapy as a recommended form of treatment for moderate depression while adding interpersonal therapy as a possible treatment in cases of mild and moderate depression (4/2010). CBT was nonetheless the primary psychological recommendation for almost any other condition. Although the revisions were seen as an improvement, they
were still met with some criticism. The national board’s alleged appropriation of the framework of evidence-based medicine was questioned and an “evidence-based practice” (4/2010, p. 11) model was deemed to be a more appropriate form of evaluation for psychological research as it encompassed a wider range of acceptable research methods and designs. The critic ventured that the group selected to compile the report was “a narrow group of experts, with an obvious stake in the results” (4/2010, p. 12).

Later, the Swedish Psychological Association made an attempt to formulate its own policy concerning evidence-based practice, borrowing partly from the American Psychological Association’s original evidence-based policy. The alterations made were motivated by the original document “being orientated too much toward the clinical field” (2/2010, p. 21), overlooking other important areas of work. Psychological practice should stand on a scientific foundation, with evidence being defined as “an integration of the best available research, situated within the individual’s/group’s/organization’s ... characteristics, culture, and wishes as well as the professional psychologist’s experience-based judgment” (2/2010, p. 22). Evidence might be based on research and/or practical knowledge and the methods could be “experimental and non-experimental, quantitative and qualitative.” Furthermore, they believed it vital to remember the role played by the psychologist’s own expertise and self-reflection.

The proposal was severely criticized at its presentation to the association’s members at the annual congress. Some wondered why essential parts of the American Psychological Association’s policy had been removed and replaced with what were described as perplexing formulations, such as the endorsement of qualitative research as a legitimate way of evaluating psychological practice and the absence of any mention of the very high trustworthiness of randomized controlled studies. The definition of evidence as “being both
scientific and generated in practice” (5/2010, p. 10) was also questioned since it seemed too ambiguous and open to conflicting interpretations. The board of the Swedish Psychological Association defended their proposal and maintained that a broad approach was needed if the policy was to be useful for more than purely clinical areas. The four hour long discussion ended in a vote that referred the proposal back to the task force to be presented again at the 2011 congress.

The debate over evidence-based psychology stretched over the better part of the decade and was probably one of the most incendiary discussions conducted in the journal to date. The viewpoints advocated spanned the entire range from revulsion and rejection of the entire notion of measuring anything concerning humans to beliefs that this was the point where psychology finally departed from speculation and truly become a science. While, as we have seen, there were those who were immensely critical of the project, in the end they remained a relatively powerless, though vocal, minority that failed to make their viewpoints established. Instead, the majority did agree that it could be useful to better align psychological treatments and practices with the findings of research and to create stronger linkages between studies, manuals and reports and the daily practice of psychologists. In the end the question came to revolve around what forms of research should matter, and how they actually related to what psychologists did – and should do.

But there was another, more implicit, dimension to these discussions. Fundamentally they also involved negotiations over how to arrange actors such as the profession, universities, empirical studies, therapeutic practice, and governmental institutions. Evidence-based psychology implied a reconfigured network where psychological practice became ‘routed’ through actors far away from the local interaction between psychologist and patient. The question did not simply concern what forms of research were valid, but
whether this rerouting brought with it an intensification of the profession’s reach and power – as it was now entwined with more actors – or if it amounted to the subjection of the profession to outside interests and goals.

**Concluding discussion**

During the two decades covered in this article, the world inhabited by psychologists shifted in major ways and numerous alternative realities were proposed and argued over. At the onset of the 1990s, to be a psychologist was to be a publicly employed clinical psychologist, primarily at a psychiatric clinic, whose main task was to conduct psychodynamic psychotherapy. Over the course of the decade the conception of the profession underwent several transformations, above all a loosening of the formerly very strong connection to the public sector and the overthrow of psychodynamic theory as the indisputable framework within which to work and think. In the wake of these shifts, a more heterogeneous portrayal of the psychologist followed, with an interrelated expansion of possible employers to work for, tasks to do, and positions to hold. The (re)introduction of testing, the increasing importance of somatic and health psychology, and the emphasis on supervising and consulting other professions in their use of psychology were all areas that were highlighted by psychologists.

The first decade of the 2000s brought with it even more changes. Psychologists turned outward and tried to find new – and hopefully better – ways to connect with the media, the general public, and politicians and policymakers. A recurring theme was the need to become more adept at specifying what psychologists were capable of contributing, to use numbers and quick one-liners to grab attention and persuade, and to emphasize how research now supported the interventions and treatments offered by psychologists. Often there were also assertions that Swedish society had changed and that the profession had to learn how to
survive, and thrive, in a society increasingly marked by an individualized market economy where the inherent legitimacy of a profession was no longer a given.

A multitude of worlds have been offered by debaters, writers, and editors, but some of these over time became more stable than others, congealing into more or less self-evident realities that formed the obligatory passage points for the development of future professional strategies and plans. These now had to be taken into account if any proposal, idea, or goal for the profession was to be taken seriously and seen as realistic. This is not to say that they may not be de-realized and deconstructed – something that continuously happens, as we saw in the case of psychoanalytical therapy – but that will take time, require much work, and necessitate the enrollment of a variety of allies and resources (Latour, 1987).

And while there are always a multitude of stories to tell about events (Law, 1994), one story in particular catches our attention. It is possible, we think, to reframe many of the debates that occurred during these twenty years as being about the increased socialization – that is, a multiplication of the associations between actors (see Latour, 2005) – of the profession, both as an effect of and a response to a felt insecurity. As noted in the introduction, the profession’s history is filled with fluctuating alliances and interactions with Swedish society. But, we argue, there has been a change both in how these relations were configured and the closeness they involved. The profession’s inherent legitimacy—historically conferred upon it by its license, knowledge monopoly, and close connection to the Swedish public sector—was seen as becoming less authoritative as a result of changes in Swedish society. The need to acquire a new vocabulary to attract the media’s attention, convince politicians of the economic advantages of employing psychologists, and persuade patients and institutions that psychotherapy was efficacious, are all examples of attempts to
enroll allies in an uncertain world where the profession’s old ways are thought to be obsolete and out of tune with its surroundings.

It is, of course, not a matter of a complete break with the past and there were several overlaps with the professional discussions and struggles occurring during the 1960s, ‘70s and ‘80s (see Rigné, 2002). For example, the debate over psychodynamic therapy in the 1990s mirrored in part those taking place a decade earlier, in which psychodynamic therapy was criticized for having no grounding in empirical research and clinicians were said to be too distant from researchers. Likewise, some of the professional ideals promoted during the first years of the new millennium were similar to those that came into focus during the 1970s when the profession reframed itself into a psychotherapeutic specialty, for instance the notion that psychologists had to expand their professional domain and retake the initiative concerning psychology. Yet we should be cautious of too quickly asserting that these episodes are identical to the recent ones. The persuasiveness of one’s arguments depends on which allies one is able to assemble in one place and at one time, and how powerful they are (see Latour, 1987; 1988). Since the 1970s psychologists have become positioned in a new context that has changed what allies are possible to invoke alongside, say, professional ideals and how persuasive those allies are taken to be. Historical change thus opens up the possibility to construct new networks. This means that it is now possible to upset the balance of forces, with previously indubitable truths becoming unsettled and even sometimes replaced. So while psychodynamic and psychoanalytical therapy weathered the critical discussions during the earlier decades, this time around psychoanalysis was actually dethroned. In a similar manner the discussions at the turn of the millennium regarding professional ideals and tasks did not narrow down to a single practice being labelled the most important, as they did in the 1970s. Instead the psychology profession
was described as heterogeneous, broad, and malleable, with many different tasks and skills viewed as equally legitimate. So although some arguments of the 1970s and 1990s seem similar on the surface they actually involve and relate to new actors that modify the arguments’ power and capacity to convince and enroll others. The findings of our study therefore complement Rigné’s (2002) study of the profession at a time when the Swedish welfare state was commonly seen as extremely robust and expansive, in contrast with the perceived economic insecurity of the 1990s and 2000s.

We can further elaborate this methodological point by considering that although matters such as the efficacy of treatments, what theories to use, and the proper places to work were intensely debated during the 1990s, they still mainly concerned those within the profession. During the following decade those topics started to entangle more actors than simply psychologists. Which therapy to conduct, to name one example, was now an issue that was interwoven with foreign universities, Swedish politicians, manuals, standardized research designs and economic incentives. The result of all these events and discussions was a solidification and multiplication of relations between psychological practice, psychologists, institutions, patients and clients, media, and other occupations; drawing these previously more distant worlds closer together and “tuning” (Pickering, 2005) the profession to the concerns and aims of a diverse collection of actors. If psychologists were to succeed in compelling, convincing, luring, and persuading these actors into sharing and enacting a reality beneficial to psychologists’ interests, the profession would be immensely strengthened. But these relations also seemed to open up the possibility for others to regulate psychologists more easily, perhaps relocating important professional decisions further away from the direct control of psychologists. Alongside the possible benefits of
enrolling others, there is thus always a possibility for exclusion and marginalization (see Galis & Lee, 2014).

The conflicts and debates were therefore fundamentally between those who believed that isolationism was the best strategy, that closer interaction with non-psychologists would lead to a dilution of scientific trustworthiness and diminished control over the profession, and those who wanted to go on the offensive, having confidence that such an approach would result in heightened professional legitimacy and influence. At stake were questions about the composition and power of the profession as well as Swedish society in general: Who should control whom? What were the goals of other actors? Who would help further the profession’s position and who simply wanted to bring it under control? Those who argued for isolationism presumed different answers to these questions from those who believed they could dictate the course of events, or at least felt it was worth trying to. These diverging answers thus implied very different realities and entailed differing professional strategies and plans. They also involved the articulation of distinctive sets of actors and relations. Which side that will prevail in the long-run remains to be seen.
References


