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## **Social representations of psychology: When paradoxes become a strength**

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### **Abstract**

This paper investigates the understanding by different groups of what psychology is and what psychologists do. We first recall some of the tensions that fuelled the discipline and underpinned its institutionalization in France. Then, drawing on social representations (SR) theory and on the wind-rose model, we explore how SR of psychology and of the psychologist are developed in two different groups and when these groups come together. The first study shows how future psychologists construct, during their studies, a paradoxical understanding of the discipline and of the profession which echoes some historical tensions: they neither abandon common-sense ideas, nor do they integrate the different psychological dimensions to develop a global approach to the person. The second study, conducted in a context of legal innovation faced by multi-professional teams in charge of assessing disabilities, shows how very different representations of the discipline and of the profession are developed in order to serve local power relationships. Finally, the third study looks at SR constructed through psychological practices by analyzing reports written by psychologists and addressed to these teams. Through their writings, psychologists reconstruct historical tensions, but they also strategically emphasize the different facets of the discipline depending on the issue at play. Thus, when they address these teams with various representations of the discipline and diverse expectations of psychologists, the tensions structuring psychology may become a strength and serve their legitimacy. All in all, the social representations of psychology and of the psychologist appears as a dynamic and interactive process.

### **Keywords**

social representations, psychologist, power relationships, professional legitimacy, wind rose model

### **Résumé**

Cet article interroge la compréhension que différents groupes ont de ce qu'est la psychologie et de ce que les psychologues font. Nous rappelons dans un premier temps quelques-unes des tensions qui ont nourri la discipline et qui ont soutenu son institutionnalisation en France. Ensuite, en nous appuyant sur la théorie des représentations sociales et sur le modèle de la rose des vents, nous analysons comment les représentations sociales de la psychologie et des psychologues se forment dans deux groupes différents et comment ces représentations se transforment quand ces deux groupes se rencontrent. Ainsi, la première étude montre que, au cours de leurs études, les futurs psychologues construisent une vision paradoxale de la discipline et de la profession en écho aux tensions historiques : ils n'abandonnent pas leurs idées reçues, et n'intègrent pas les différentes dimensions psychologiques dans une approche globale de l'individu. La deuxième étude, réalisée dans un contexte d'innovation législative avec des équipes pluridisciplinaires en charge d'évaluer le handicap, montre comment des

représentations sociales très différentes de la discipline et de la profession sont construites en fonction des relations de pouvoir locales au sein de ces équipes. Pour finir, la troisième étude se penche sur les représentations sociales qui sont construites à travers la pratique d'écriture des psychologues : l'analyse lexicométrique de comptes-rendus d'examen psychologiques qui sont adressés à ces équipes pluri-disciplinaires montre que, à travers leurs écrits, les psychologues reconstruisent les tensions historiques inhérentes à la discipline, mais qu'ils mobilisent aussi les différentes facettes de la discipline de façon stratégique en fonction du contexte pour renforcer leur légitimité. De cette façon, lorsqu'ils s'adressent à des équipes aux attentes variées envers la profession et aux représentations diverses de la discipline, les tensions qui structurent la psychologie peuvent constituer une force. En définitive, les représentations sociales de la psychologie et des psychologues apparaissent comme un processus dynamique et interactif.

## Mots-clés

légitimité professionnelle, modèle de la rose des vents, psychologue, relations de pouvoir, représentations sociales

## Introduction

Despite the fact that psychologists are trained in both diagnosing and treating many different mental disorders, there is a gap in France between students' motivations and what institutions need from the profession (Le Bianic, 2013). Institutional requirements often focus on diagnosing disorders scientifically, and in the past this has contributed to the growth and recognition of the profession. The motivations of psychology students, however, tend to focus more on treating and supporting people in psychological distress, an activity whose scientific foundation is rarely acknowledged (Freixa i Baqué, 1980). This gap between the public expectations and students' motivations concerning the profession may be a sign of contradictory and complex understandings of what psychology is and what psychologists do. Nearly 10 years after a new disability law was introduced in France, we managed a research project about the role of psychologists and psychological information in the assessment and compensation of children's disabilities. This was an opportunity to analyze the different groups' understandings in an original way. The law in question was passed in 2005, and is inspired by the latest World Health Organization (WHO) directives for viewing disability as a situation resulting from socio-psycho-biomedical factors, i.e. a global approach, moving away from the previous biomedical approach (Winance, Ville & Ravaud, 2007). The multidisciplinary teams in charge of assessing disability, who used to refer to the old approach where the medical point of view was central, have to renegotiate the role of each professional and discipline, notably the role of psychologists and psychology. This is an opportunity to outline how understandings of psychology and psychologists are shaped by the specific professional power relationships operating in these teams. Moreover, while psychologists should be trained to develop a global approach to the person (e.g. Rozencwajg, 2005), and should thus be well placed to sustain the new approach to disability, the fact that psychology is perceived by students in ambiguous and paradoxical ways can minimize their potential contributions in the field. It thus becomes crucial to gain insight into the way future psychologists evolve in their understanding of what psychology is and of what psychologists do during their five years of study, before they address these multidisciplinary teams, in order to grasp which perceptions of psychology they may later pass on to the publics they encounter.

This paper also seeks to investigate the understanding of what psychology is and what psychologists do as a dynamic, interactive process in which different social actors construct, negotiate and reconstruct their representations. Drawing on Social Representations Theory (SRT), and more specifically the wind-rose model (Bauer & Gaskell, 2008), we develop an original methodological design based on a set of three studies and operationalizing the idea that each group develop their own Social Representations (SR) which they may strategically resort to during the groups' encounter. An initial study investigates how SR of psychology and of psychologists evolve in future psychologists during their studies as they gain more expert knowledge. Then we investigate multidisciplinary teams'

representations of psychology and their expectations of psychologists depending on the power relationships at work. Finally, we investigate which representations of the discipline and the profession are reconstructed when psychologists address these multidisciplinary teams in their reports.

### *Tensions structuring the understanding of psychology and psychologists*

The social representations (SR) approach, developed by Serge Moscovici in 1961 to explain how different groups viewed psychoanalysis, offers a promising theoretical framework for analyzing the processes involved in the understanding of science (e.g. Wibeck, 2014). SR are a form of knowledge that is constructed and shared within a group. SR draw on both common sense and scientific knowledge (Flick, 1998), among other sources, to give meaning to the world and guide behavior (Wagner, 2007). Though these two forms of knowledge operate according to their own specific rules, each influences the other. They both shape SR (Farr, 1993) and both are reflected in experts' discourse (e.g. Morant, 2006). It may thus be useful to examine: (1) the most important scientific debates that have contributed to the emergence of psychology as a discipline over time and its heavily institutionalized basis in France; and (2) the main common-sense beliefs about psychology and psychologists, as these can potentially shape the SR held by different groups.

The development of psychology as a science was the primary catalyst for distinguishing between the natural sciences and the humanities as two separate fields of knowledge. This distinction was then overlaid with further dichotomies such as the contrasts between explanation and understanding, quantitative and qualitative methods and the nomothetic and idiographic approaches (Bouterse & Karstens, 2015). Even the status of science, claimed by the first scientific psychologists in order to differentiate their field from philosophy, was heavily criticized by philosophers (Ohayon & Plas, 2011). The position of psychology remains hotly debated even today, with some psychologists declaring allegiance to the natural sciences and others to the humanities. Over time, a number of fundamental debates have thus crystallized the different approaches to psychology: nature/nurture, normal/pathological, introspection/behavior, etc. (Ghiglione & Richard, 1999). In France, meanwhile, the rooting of psychology within institutions reinforced the tensions between sub-disciplines by adding another layer of opposition between research and its applications. By the time experimental psychology was finally adopted by the research-focused CNRS (the French National Centre for Scientific Research), it had been taken over by cognitive psychology and was placed in the 'brain, cognition and behavior' section coordinated by the Institute of Biological Sciences. The term psychology had long disappeared, and clinical psychology was completely absent. In the universities, however, where future psychologists are trained, the subject is classified among the humanities and social sciences, and most postgraduates focus on clinical psychology and psychopathology at master's level (Plas, 2004). The different institutions thus have divergent visions of the discipline. And while there is only one pathway for accessing the professional title of psychologist in France, regulated since 1985, the various professional associations have never been able to agree on a statutory list of treatments or to achieve a monopoly on certain procedures, such as tests (Le Bianic, 2013).

These contrasts remind of non-specialist perceptions of psychology (Lilienfeld, 2011). According to Susan Howard and Martin Bauer (2001), for example, the British press presents psychology simultaneously as a scientific discipline (referring to how the brain works, or to studies demonstrating the existence of neurons for belief in God) and as a practice based on intuition and the occult (with a column called 'Dream Doctor'). These tensions often create a gap between public expectations and how psychologists themselves see their discipline. Psychologists in 42 countries believe that psychology and medicine are closely linked, and that psychology is a healthcare profession (Zych, et al., 2013). But other professionals, at least in France, see a clear distinction between psychiatrists, who are consulted for serious disorders, and psychologists, who help individuals work on their self-awareness (Pomini & Duruz, 1993). Students and other professionals are aware of their support and advice activity, but not their role in diagnosis (Thorndike, 1955; Rosenthal, et al., 2001).

Meanwhile, a typology of SR of the psychologist was first established in interviews with psychologists in Italy, and then confirmed with students in Switzerland (Doise, et al., 1982; Palmonari, et al., 1987). Some see psychologists as 'social workers', political activists who strive to improve

society through their work (the ‘activist’ type). Others, taking psychoanalysis as their frame of reference, consider that psychologists are only interested in individuals, achieving results through force of personality alone (the ‘clinical’ type). Two further types are less black-and-white, defining psychologists’ activities on the basis of a level of professionalism rather than the therapist’s natural ability. Psychologists are seen as having technical skills that enable them to work with individuals, but not to affect social reality (the ‘technical’ type). Finally, a fourth group considers that psychologists can offer social interventions to support individuals in conjunction with other professionals (the ‘multidisciplinary’ type). This typology thus highlights two tensions at the heart of SR about psychologists: natural ability versus professionalism and individual versus collective.

### *Understanding psychology: An interactive, dynamic approach*

While previous studies have shed light on the content of SR about psychology and psychologists, no research to our knowledge has studied their dynamics – how these SR are constructed and evolve through social interaction.

SR are (re-)constructed within an Ego-Alter-Object triangle (Moscovici, 1984): through interactions between an Ego (an individual or group) and an Alter (another individual or group) relating to an object, psychology in this case (Markova, 2005). The wind-rose model (Bauer & Gaskell, 2008) considers that specific SR are constructed simultaneously in multiple triangles. Thus, SR include the group’s project, corresponding to what is at stake for the group. For example, in Switzerland and Italy, doctors and social workers, potentially threatened by the emergence of the psychology profession, construct SR of psychologists that enable them to question the psychologists’ legitimacy. They do not accept that psychologists have empirical or technical knowledge, and consider that, at best, they have natural interpersonal skills that give them insights into people – psychology is a ‘way of being’. The same study shows that teachers, who do not feel threatened by the new profession, acknowledge that psychologists have the capacity to support welfare by promoting the autonomy of the patient, which derives from specific professional ethics guiding the psychologist’s insight (unobtrusive, discreet). Teachers thus describe a professional ‘way of doing’ (De Paolis, 1990). These results clearly illustrate the identity function of SR (Breakwell, 1993) – they are constructed in order to protect the group’s identity (doctors and social workers). Thus, SRs ‘exist only in the in-between space we create in dialogue and negotiation with others’ (Howarth, 2006: 68) and are shaped by the specific power relationships and conflicts in play.

The different Ego-Alter-Object triangles in which SR are formed can encounter each other. For example, after training, psychologists will collaborate with other professionals in multidisciplinary teams. Thus, SR take the form of a wind-rose consisting of multiple Ego-Alter-Object triangles bumping into each other (Bauer & Gaskell, 2008). During these intersections, the different groups’ SR will come into competition with each other, giving rise to a battle of ideas in which each group seeks to impose its own reality (Moscovici, 1998). In order to study the understanding of psychology as a dynamic, interactive process, this article examines how SR about psychology and psychologists are (re)constructed in three in-between spaces (see table 1):

- 1) among future psychologists during their training (study 1);
- 2) among multidisciplinary disability teams that draw on reports written by psychologists (study 2);
- 3) when psychologists address these multidisciplinary teams, in the specific intersection between the two previous in-between spaces (study 3).

### **Study 1: The formation of SR among psychology students**

SRT initially sought to understand how common sense takes ownership of scientific knowledge (Moscovici, 1961), leading to the development of a theory of knowledge that focuses primarily on the relationships between different forms of knowledge (Flick, 1998). The theory thus enables an understanding of how students gradually acquire expert knowledge through their course and through interactions with their peers without ever leaving common-sense knowledge behind (Lac, et al., 2010).



The aim of this first study is to investigate how SR of psychology and psychologists evolve among future psychologists during their studies and how common-sense knowledge and expert knowledge intertwine.

### *Methods*

During the second semester of the academic year, 518 students at the universities of Lyon (N=313) and Paris (N=204) in France were given a questionnaire. The students had reached three different levels in their studies – 189 were in the first year, 228 in the third year and 101 in the fifth year. The questionnaire was divided into three sections:

- the first section, concentrating on representations of psychology, began with an open question about the students' spontaneous associations with psychology: 'In your view, what is psychology?' Next, echoing common-sense debates about the discipline, participants had to evaluate the extent to which psychology is a science on a seven-point scale and then explain their answer.
- the second section covered representations of the profession. The students were first asked to choose which of the four definitions of the psychologist's role in the typology developed by Augusto Palmonari and colleagues (1987) they agreed with most. They then had to say how far certain qualities are required to be a good psychologist, again using a seven-point scale. Three qualities were proposed for each of the four types (see figure 3). A principal component analysis with direct oblimin rotation confirmed the four-factor solution. The various factors of factorability were good. The qualities were grouped into four sub-scales.
- the third section focused on the psychologist's role in the field of disability. The students were asked an open question about what psychologists can do in this area.

All statistical analyses were run in SPSS 25. The answers to the open questions were analyzed using the Alceste method (Flick, et al., 2015). This lexicometric analysis identifies 'lexical universes', or major themes, and the way they are organized in relation to each other. It produces a descending hierarchical classification based on words' co-occurrence in text segments. Once these classes of words have been constructed, the software determines whether they have any significant links with specific variables (here, year of study and university).

### *Results*

For the question 'In your view, what is psychology?', analyzing the answers reveals four word-classes (see figure 1). The first distinction emerges between answers that describe what psychology is for (class 1: understanding in order to help, e.g. 'a way of thinking about and studying human beings, enabling us to understand them and help them resolve certain conflicts') and answers that describe what psychology is interested in (classes 2, 3 and 4). Classes 2 and 3 both define psychology in terms of its scientific purpose: the 'science' of 'human and mental function' and 'reactions', taking into 'account' the 'environment' and 'personality' (class 3), or the 'study' of 'thought', the 'mind' and 'behavior', without mentioning the term 'scientific' (class 2). Class 4, the less important in terms of frequency, defines psychology in terms of its disciplinary content ('social', 'cognitive', 'clinical'...), both basic ('research') and applied ('support'). In other words, linking research and application is based on a description of sub-disciplines rather than psychology as a whole. Neither of the variables is significantly linked with these four classes of words – year of study does not correlate with a shared vision of the discipline. In other words, the dichotomy between a psychology that provides help and support and a more abstract psychology defined by its research goals remains present throughout the degree course, at least for psychology viewed as a whole.

When asked if psychology is a science, students strongly agree ( $M = 5.68$ ,  $SD = 0.56$ ), regardless of their university and year of study –  $F(5, 516) = .406$ ,  $p = .845$ . The analysis highlights four

justifications for this response (figure 1). The first distinction appears between justifications that seek to define what is specific to psychology (classes 2 and 4) and justifications that refer to a particular methodological approach (classes 1 and 3). In the first cluster, class 2 groups together answers that refer to psychology as belonging to the humanities or social sciences ('considering the individual as a unique being', 'drawing on subjectivity') as opposed to the exact sciences, and the Lyon students are overrepresented here. In class 4, the scientific nature of psychology is based on observable, measurable quantities, often related to the body (e.g. 'it is based on neurological data, such as areas of the brain that explain pathologies'), and the concept of treatment appears. First-year students are represented significantly more strongly in this class. In the other cluster, class 3 justifies the scientific character of psychology on the basis of the hypothetico-deductive method, which is associated solely with the experimental method and enables *generalizable* results to be achieved. Students in Paris are overrepresented in this class. Students in class 1 refer more globally to a rigorous methodological approach that is less clearly defined but still quantitative (e.g. experimentation, tests) and research-focused.

Moving on to representations of psychology as a profession, the preferred definition does not depend on the university:  $X^2(3, N=511) = 1.81, p = .612$ . However, there is a clear link with the year of study:  $X^2(2, N=510) = 29.5, p < .001$ . Students gradually move away from the 'clinical' definition of the psychologist towards the 'multidisciplinary' definition (see figure 2).

A MANOVA was run with the qualities as repeated measures to investigate how students evaluated the importance of the different qualities depending on their university and their level of study. Subsequent analysis (using the Bonferroni correction) was conducted in order to follow up significant effects. We report only the significant differences. The analysis reveals a significant main effect of qualities,  $F(3, 501) = 189.72, p < .001$ ; Wilks Lambda = .47, partial  $\eta^2 = .53$ . In order of importance, the qualities seen as important are of the 'multidisciplinary', 'clinical', 'technical' and 'activist' types, all  $ps < .02$ . A significant interaction effect between qualities and the university was observed,  $F(3, 501) = .69, p < .001$ ; Wilks Lambda = .96, partial  $\eta^2 = .03$ . More precisely, students from Lyon scored higher ( $M = 4.35$ ;  $SD = 0.90$ ) than students from Paris ( $M = 4.06$ ;  $SD = 0.97$ ) on the scale of activist qualities,  $F(1, 503) = 12.44, p < .001$ , partial  $\eta^2 = .02$ . Finally, the analysis reveals a significant interaction between qualities and the level of study,  $F(6, 1002) = 5.19, p < .001$ ; Wilks Lambda = .94, partial  $\eta^2 = .03$ : students scored higher on the 'interdisciplinarity' scale in the fifth year ( $M = 5.39$ ;  $SD = 0.78$ ) than in the first year ( $M = 4.90$ ;  $SD = 0.60$ ),  $F(2, 503) = 15.67, p < .001$ , partial  $\eta^2 = .06$ . No other significant effect was found. So, although 'multidisciplinary'-type qualities are increasingly viewed as important, the perception of 'clinical'-type qualities (such as intuition) remains at a stable level. These qualities are always seen as more important than 'technical' and 'activist' qualities (see figure 3).

Finally, in terms of the perceived role of the psychologist in the field of disability (see figure 1), the analysis shows that students in Lyon rely more on the class of words reflecting the idea that psychologists can 'help' the person to 'accept' their 'disability' and 'live' in 'society', while students in Paris emphasize the class of words in which the psychologist's role is to 'listen' to the person, 'support' them and help 'restore their self-confidence'. Fifth-year students, meanwhile, focus on the third class of words, which describe the psychologist's role in more concrete terms ('providing appropriate care', 'support for the family', 'multidisciplinary collaboration'). However, the answers make only marginal references to the role of diagnosis in the area of disability – this aspect was featured in only 15 answers from the 63 fifth-year students whose master's subjects could lead them to work in this field.

In conclusion, the study highlights an initial tension between a definition of psychology in terms of its function (providing help and support), with no reference to the scientific approach, and a definition of psychology in terms of the subject of its scientific study, with no reference to its usefulness. And yet both these dimensions are expressed when the students discuss the sub-disciplines of psychology. A second tension arises between a form of psychology that adopts a scientific approach in order to identify universal laws, and another that rejects the methods of the exact sciences to focus on individual cases, relying on measurable physical realities to guide its treatment practices. With regard to the profession, the representation of the multidisciplinary type of psychologist increases in

importance over the years of study. This is probably due to the students' experience of internships during the final years of the course. The clinical-type qualities, widespread in common-sense perceptions, remain central to the students' views, however contrasting the image of the 'born' psychologist with the image of the professional psychologist. The fact that students place little emphasis on diagnosis in situations of disability echoes the low importance given to technical-type qualities. Finally, if training does not result in a shared definition of psychology, differences emerge in how the profession is viewed between students in Lyon (who favor a social approach to patients) and students in Paris (who focus on a more individual approach).

## **Study 2: Representations of psychologists and psychology among multidisciplinary teams**

This second study aims to identify SR about psychology and psychologists among the multidisciplinary teams responsible for assessing and compensating for disabilities. In France's local offices for people with disabilities (MDPH), introduced by law in 2005, multidisciplinary teams draw on reports prepared by various professionals outside the MDPH, including psychological evaluations, to determine whether a person's situation is covered by the disability provisions and offer assistance where relevant (e.g. specific educational guidance). The composition of these teams varies from one department (local government district) to another, but they generally include a team leader, a doctor, a psychologist, the director of a specialist institution and a teacher. This new legal context has given rise to tensions between the previous biomedical approach, where a single doctor was responsible for deciding what counts as a disability, and the new, more global approach introduced by the 2005 act, with the responsibility transferred to a team of professionals (Winance, et al., 2007). The position and role of the psychologist and psychology are thus challenged and negotiated by the teams, providing an ideal context for studying social representations (Castro, 2012). The relationships at play during these processes, and the way power is negotiated and distributed, will shape SR (Howarth, 2006).

### *Methods*

Eleven focus groups were organized in eleven different departments with multidisciplinary teams working at MDPHs (N=70 participants). This form of group interview has a certain ecological validity in that it reproduces the teams' normal working methods. It also provides an opportunity to observe how the participants' power relationships are associated with different SR through their interactions (Lunt & Livingstone, 1996).

In order to focus on areas relevant to the research, the discussion initially focused on the teams' expectations of the psychological assessment reports. The participants were then presented with a fictional case study based on exploratory observations. The case involved a visually-impaired child who would not be classified as having a disability based on medical information alone. However, the psychological report emphasized a severe level of suffering due to the visual impairment, potentially indicating a disability under the global approach. The fictional case was designed to enable observations of the importance given to the psychologist and psychological information in evaluating the disability, together with the dynamics of the group – how power is distributed between the different professionals. The focus group sessions were transcribed in full (mean duration: 1 hour and 45 minutes) and subjected to thematic analysis (Braun & Clarke, 2006) using the Atlas-ti software (Friese, 2012). More specifically, we developed codes for grasping SR of psychologists and psychology (information expected from the psychologist, perceived functions of the psychological assessment) and the way power is distributed (the contribution of each professional relative to the average contribution in terms of the number of words spoken in the group). Three patterns representing psychologists and psychology were highlighted based on tables of codes' co-occurrences (Patton, 2002), which we present in sequence in the results (see table 2).

### *Results*



Four of the teams correspond to the first pattern (table 2: the psychologist as a technician). These are teams in which the doctor contributes the most to the discussion about the fictional case, followed by the psychologist. The essential function of the psychologist's report is to evaluate cognitive impairments by setting and interpreting tests, and in the case of physical disorders the report is considered unnecessary more often than in the other groups. One of the psychologists makes a distinction between a psychological evaluation report (which includes an IQ test and thus quantitative results) and what she calls an *opinion* (an assessment that does not involve a test):

*Psy8: Well ahem ye ... yes well I put opinion when there's no IQ, I put: 'educational psychologist's opinion' you see*

Thus the psychologist's legitimacy lies solely in evaluating cognitive abilities. At the same time, the credibility and scientific character of the IQ test are discussed most frequently in these groups, based on the variability of the results:

*Chair11a: Because I have discovered the shortcomings of this tool yes. Before I thought it was extremely scientific*

Here the IQ test is considered inadequate, and the psychological report has to describe the context in which the tests were taken to justify the credibility of the results more than in the other teams. Finally, psychologists have no legitimacy at all for mental pathologies, where it is up to psychiatrists to provide information:

*Doc5: That's a school phobia...*

*Chair5: It's in the medical field.*

*Psy5: In any case you can see it based on the reports we are given. I mean there isn't always a child psychiatrist and when there is a child psychiatrist you know there's a psychological problem...*

*Mod: Mm.*

*Psy5: Something more significant that justifies a medical treatment.*

So in this first typology psychologists are reduced to test technicians, and even then their skills are questioned. The way the different professionals express their criticisms, including comments about the tools used by psychologists, also corresponds to a specific power distribution in which the doctor has a central role and the psychologists present, though contributing to the discussion, do not defend their approach.

In three other teams, (an expert in the field, see table 2), the psychologist is given the status of an expert in terms of IQ, comparable to the status of the doctor's expertise:

*Chair 10b: The impairments and disabilities are a given so then there's both the doctor and then I think also there's a role for the psychologist.*

*Psy 10: It's the cognitive aspect.*

*Chair 10b: Well of course.*

The psychologist thus clearly appears as the expert in cognitive impairments, rather than just a simple technician as in the previous group. The psychologist's opinion is also valued in other areas where, despite not being an expert, they are seen as a professional in the field whose view carries as much weight as the school teacher's:

*Psy6b: Let's say that what's interesting in the report from the educational psychologists, I think, is that you – I mean – it gives you a view on the child, the interview with the parents, but there is also the link with the teacher.*

*Chair6b: Yes and then educational psychologists are educational psychologists which means they are specialist teachers too.*

This representation of a professional recognized for their expertise in cognitive impairments and their basic on-the-ground knowledge is also reflected in the participants' respective contributions to the discussion of the fictional case: where the issue is not the cognitive impairment but the sensory disorder, the doctor plays a central role and the psychologist contributes the same amount as the other professionals.

Finally, the other four teams (psychologist developing a global approach, see table 2) have very varied expectations in terms of psychological information (cognitive, socio-emotional etc.). These teams place greater emphasis than the others on how psychologists can help in understanding the repercussions of the disability and make useful contributions in all situations. They define psychologists as having a global approach to the child and the situation, because they are able to take different aspects of reality into account:

*Doc: Yes for the clinical setting and then, ahem, the psychologist can also provide an analysis of behavior, ahem, in class that we don't have*

*Psy 1a: Understanding of the situation as a whole as well because there may equally be elements relating to the school, the family, and the child.*

*Psy 1b: For follow-up there is the history too.*

The teams thus see psychologists as having a specific role due to this global approach to the situation – they are the ones who ‘see’ and who suggest new hypotheses enabling progress to be made. This idea of the psychologist who *sees things* can also be bracketed with the difficulty of precisely understanding the tools they use:

*Doc3: For one thing you have a whole code of figures that is not accessible to us anyway with detailed knowledge, if this is high, if it's uniform, if it's this and if it's that, and in the end well you can read us all the kids' profiles and sometimes even in relation to the people who will provide community care, speech therapists, etc. You manage to see why and come up with a diagnosis that medical staff might not have given because you have seen there was actually a family problem, basically a relationship problem, who knows what, in the end it's ahem an awareness, yes a knowledge and an experience.*

As this quote demonstrates, these teams (a doctor in this case) acknowledge the psychologist's ability to provide a *diagnosis*. This representation of psychologists and psychology, recognized for their global approach, is linked to a specific power distribution: neither the doctor nor the psychologist plays a central role. This indicates that, once a diagnosis has been given in the psychological report, all the professionals have equal legitimacy to discuss the possibility of compensating for the disability, in line with the global approach defined in the 2005 law.

In conclusion, the study highlights three different SRs within the multidisciplinary teams, each associated with a specific power relationship. In some teams, the psychologist is chiefly viewed as a test technician, and the variability in the results prevents their activity being recognized as scientific. The psychologist thus remains subordinate to the doctor. In others, the psychologist is seen as an expert in cognitive impairments, a field in which the doctor has little or no expertise. In the final group of teams, the psychologist is seen as an expert who stands out from the others due to their global approach to the person, able to ‘see things’ and establish a diagnosis.

### Study 3: Psychologists' writing practice

#### *Methods*

As previously mentioned, these multidisciplinary teams rely on written reports submitted by various professionals, including psychologists (educational psychologists, psychologists in private practice and psychologists in institutions). These reports were analysed in order to understand how psychologists' writing practices contribute to representations of psychology at these points of intersection when they are addressing other professionals and their legitimacy cannot be taken for granted. The study collected 263 anonymous child psychology reports (225366 occurrences) averaging 2.7 pages, received and selected at random by 25 different MDPHs. The reports were scanned and analyzed using the Alceste method (see section 2.1). The variables chosen for the analysis were the child's gender (70.7% boys) and age (M=9 years and 5 months), schooling (identifying whether they are already in the disability system or not), the department (location) and institutional status of the psychologist (private practice, education, healthcare institution, other).

## Results

The descending hierarchical classification identifies a total of seven word-classes, classifying 89.25% of text segments (see figure 4). The first factor explains 31.07% variance, and factor 2 explains 19.84%. The first distinction highlighted by the descending hierarchical classification contrasts classes 1, 6 and 7, which refer to quantified data and tests, with classes 2, 3, 4 and 5, which talk more about qualitative data. Most of the reports tend to a greater or lesser extent towards one of these two poles.

On the quantitative side, class 1 contains words describing the results of psychometric tests evaluating logical and deductive reasoning, such as Raven matrices, and is significantly overrepresented in the 12-15 age group. Class 6 contains terms referring to the results of executive function tests such as the Rey complex figure or NEPSY tests. This class is overrepresented among psychologists in private practice and institutions and for the 12-15 age group for children in conventional education. Finally, class 7 (overrepresented for boys and for the 16-18 age group) essentially contains a description of the results of the WISC-IV, including all the subscales, and is mostly mentioned in the report's conclusion. Thus, classes 1 and 6 refer to specific skills while class 7 refers to overall intelligence. In classes 1 and 6, 68.5% of pronouns refer to the child (he/she), compared with only 36.1% in class 7, indicating that the description of intelligence is depersonalized:

*In conclusion, the intellectual abilities analyzed by the WISC-IV lie within the 'Normal-Weak' range and are valid: two indices deviate from the average for the four, but only two standard scores deviate from the average of the ten main subtests. In comparison with the November 2011 psychometric assessment, the Verbal Comprehension index has declined but the Fluid Reasoning and Working Memory indices have both increased.*

At the qualitative pole, the descending hierarchical classification distinguishes between classes 2 and 3, which refer to the socio-emotional dimension, and classes 4 and 5, which describe the child's environment.

Class 2, significantly overrepresented for children aged two to five, contains words referring to the child's behavior during the tests and many subjective adjectives describing the child ('smiling', 'strong-willed', etc.). Here the psychologist refers to their relationship with the child to support socio-emotional observations that are often positive:

*She is a friendly girl who forms relationships with adults easily. She does her best to respond to the needs of the assessment and proves herself to be persistent and motivated throughout the process.*

Conversely, class 3 contains words referring to negative affects and emotions, often associated with projective tests (such as CAT). This class is particularly common among psychologists in private practice and for children whose disability is already recognized. The term 'conclusion' has a significant presence, indicating that these observations are often given in the conclusions of the reports.

Finally, classes 4 and 5 show an overrepresentation of educational psychologists. Class 5 describes both the child's educational and family situation together with the support already in place, and includes a majority of girls. Class 4, meanwhile, refers to the psychologist's recommendations in terms of future educational direction. The pronoun 'I' is frequent here, as in: 'Together with the whole educational community, I call for careers guidance'. The significant presence of the words 'conclusion' and 'summary' suggest that these elements also tend to occur at the end of the report.

In conclusion, psychologists' writing practices reproduce the tension between so-called quantitative psychology, where diagnoses of cognitive impairments are based on numerical data, and more qualitative psychology, which looks in greater depth at the subject's personal history, environment and relationship with the psychologist. This tension between qualitative and quantitative elements can even be found within individual reports, but psychologists make strategic choices to emphasize certain aspects. For example, if a child is already recognized as having a disability, so that

the psychologist has a degree of legitimacy, the report emphasizes the negative emotional elements requiring continued care (class 3). Conversely, for children who do not yet have a diagnosis and are not receiving care, psychologists place greater stress on the total IQ in the conclusion, i.e. the aspects that can be quantified.

## Discussion

This article has questioned the representations of psychology and psychologists held by specific social actors in France in a context defined by two features. University psychology teaching is still marked by the tensions arising from the constitution of the discipline. And the profession still has to prove its legitimacy, particularly in the healthcare sector. One of the main original features of this research is its approach – to account for how SR of psychologists and psychology are constructed, rather than just their content. The study locates this construction in three in-between spaces occupied by future psychologists, multidisciplinary teams in the field of disability and the reports in which psychologists address these teams.

The first study shows that future psychologists (triangle 1) construct and reconstruct, during their studies, SR of psychology and psychologists which includes common-sense knowledge (e.g. being a psychologist is innate, providing help is central and references to diagnosis are rare) and echoes some of the historical tensions of the discipline, contrasting a view of the discipline as scientific, based on experimentation and seeking general laws on one hand, with an applied psychology that provides help and is based on analyses of individual cases on the other. By building on physical realities, however (e.g. the brain; see also Rodriguez, 2006), it can create a care practice based on the medical model. No reference was found to the idea that psychology, and psychologists, can develop a global approach to the person. However, it is important to note that research and application are linked together when students mention sub-disciplines, i.e. locally students are able to link research with practice. Finally, compared to the Swiss psychology students interviewed in the eighties who strongly rejected the clinician type (Doise et al, 1982), the clinical qualities are central for French students even if, during their studies, they slowly attribute more and more importance to the multidisciplinary qualities. This may be explained by the specific role psychoanalysis played in France compared to other European countries (Ohayon, 2006). It also invites to adopt a more historical approach when studying SR.

In the second study, the teams of professionals receiving psychological reports (triangle 2) construct different SR of psychology and psychologists that maintain specific institutionalized power relationships (see De Paolis, 1990; Pomini & Duruz, 1993). For example, they criticize its scientific dimension in order to reaffirm medical supremacy. These results suggest that the way psychologists and psychology are represented depends on the group dynamic of each team (see also Caillaud, Haas & Castro, in press) and only marginally on individual variables (e.g. the profession, Caillaud & Haas, 2017). Finally, it is important to note that psychologists in the different teams never refer to the fact that their profession is regulated in order to gain legitimacy. In the same way, and contrary to results from Paola De Paolis (1990), neither psychologists nor other professionals refer to the code of ethics to justify their legitimacy. And yet when psychologists in France come together with colleagues, they do refer to this code (Gilbert, 2012). Our results thus suggest that psychologists' own fragmented, contradictory representations of their discipline may have curbed their ability to defend their legitimacy when they face other professionals.

When both spheres meet (i.e. when psychologists address their reports to the teams), psychologists reproduce the tensions structuring their representations of their discipline in their practice, and do not achieve a global approach to the person. They thus help to pass on a fragmented view of the discipline and contribute to reconstructing the tensions structuring the discipline in common-sense representations. But at the same time they strategically accentuate some of the dimensions under tension in order to fit the various expectations of their target audience. Contradictory representations of psychology by psychologists themselves can thus become a strength when they strategically emphasize different dimensions in order to construct their legitimacy. They may even appear as more legitimate than if they had used a global approach, which would be

scientifically more appropriate but is little recognized and understood by their public (i.e. the teams of professionals).

To conclude, this research furthers both methodological and theoretical thinking. First, the proposed methodological design operationalized some of the tenets of the wind-rose model, to our knowledge for the first time, and embodies in concrete terms the idea that SR exist only ‘in the in-between space we create in dialogue and negotiation with others’ (Howarth, 2006: 68). Therefore, the different methods investigate SR ‘in the social settings of communication in which they occur’ (Moscovici, 1988). The results clearly highlight the different tensions underpinning the construction of SR of psychology and psychologists in different in-between spaces (study 1 & 2) and how these tensions evolve when the two in-between spaces come together (study 3). The study thus engages with both the content and the dynamic of SR. On a methodological level, this paper also illustrates (1) how SRT can actively contribute to the development of methodological triangulation (resorting to the wind-rose model offers a way to theoretically combine results from different methods); and (2) how methodological triangulation can strengthen SRT (here by articulating the content and the dynamic of SR, Caillaud, et al., 2019).

On a theoretical level, our results provide evidence that social representations, developed in order to protect the group’s identity (Breakwell, 1993), are constructed through a dynamic, interactive process. The tensions structuring SR in one sphere are resorted to strategically when interacting with others. At these points of intersection, SR are adjusted, taking account of others’ supposed representations, in an attempt to impose the group’s own reality and defend its identity (Howarth, 2006). All in all, this paper outlines that the understanding of psychology is a dynamic, interactive process rather than a top-down process, which operates in the different triangles where SR are produced and negotiated and which is shaped by the battle for professional legitimacy.

### Author biographies

**Sabine Caillaud** is Associate Professor in Social Psychology at Lyon 2 University, France. Her work focuses on social knowledge, and how it is produced and transformed in different socio-cultural contexts. As such, her research focus on different societal issues (e.g. ecology, climate change, disabilities, undernutrition). She is also concerned with methodological issues, more specifically with qualitative research, focus groups and triangulation.

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**Ewa Drozda-Senkowska** is Emeritus Professor of Social Psychology in the Paris University where she has been the Director of the Laboratory of Social Psychology and the Director of the Institute of Psychology. She created a laboratory for the study of social threats at this University. She has coordinated several works on collective irrationalities, the pitfalls of reasoning, psychology of anticipation and, the most recent ones, on social threats. She authored several chapters and scientific papers focusing on group behavior.

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	Population	Method	Period of data collection	Analysis
<b>Study 1</b>	Psychology students	Questionnaire survey (N=517)	March 2014	- Lexicometric analysis for each open-ended questions - Means and frequencies'

						comparisons for closed questions
<b>Study 2</b>	Teams of professionals	Focus groups (11 teams, N=70)	from 2013 to April 2014	October to April	Qualitative analysis and distribution of participation	
<b>Study 3</b>	Psychologists	Psychological reports (N=263)	received in January 2014		Lexicometric analysis	

Table 1. Overview of the studies, populations, and methods.

		Psychologist as technician	An expert in the field	Psychologists seeing things
<b>Information expected from the psychologist</b>	Information on cognitive dimensions and tests	20	14	26
	IQ is insufficient	22	7	14
	Information on socio-emotional dimensions	15	18	46
	Information concerning the family	6	6	6
	Information on the context of the evaluation	15	6	10
	Pther (motor skills, resources, etc.)	6	5	11
<b>Function of the psychological assessment report</b>	To determine cognitive deficiencies and the need for educational guidance	13	13	5
	To understand the repercussions of the disability	3	5	14
	To shed light on all situations	0	3	3
	Unnecessary in the case of physical disorders	14	4	6
<b>Contribution to the discussion of the fictional case</b>	Doctor	1.34	1.49	0.94
	Psychologist	1.12	0.96	0.81
	Other professional	0.96	0.92	1.42

Table 2. Main themes and their occurrence in the different groups.

Figure 1. Descending hierarchical classifications of answers to the open questions given to the students.

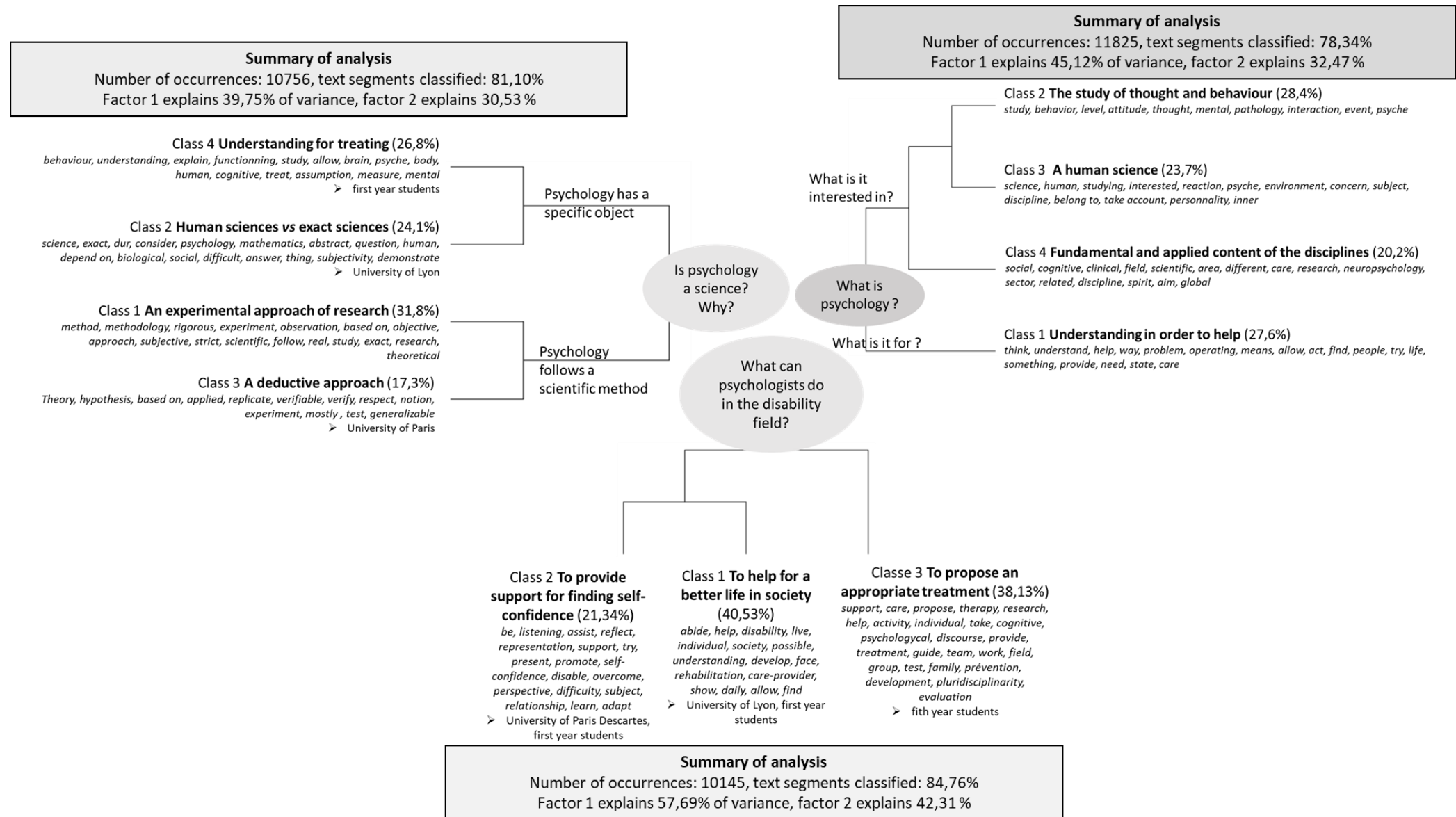


Figure 2. Preferred description of psychologists by year of study (%).

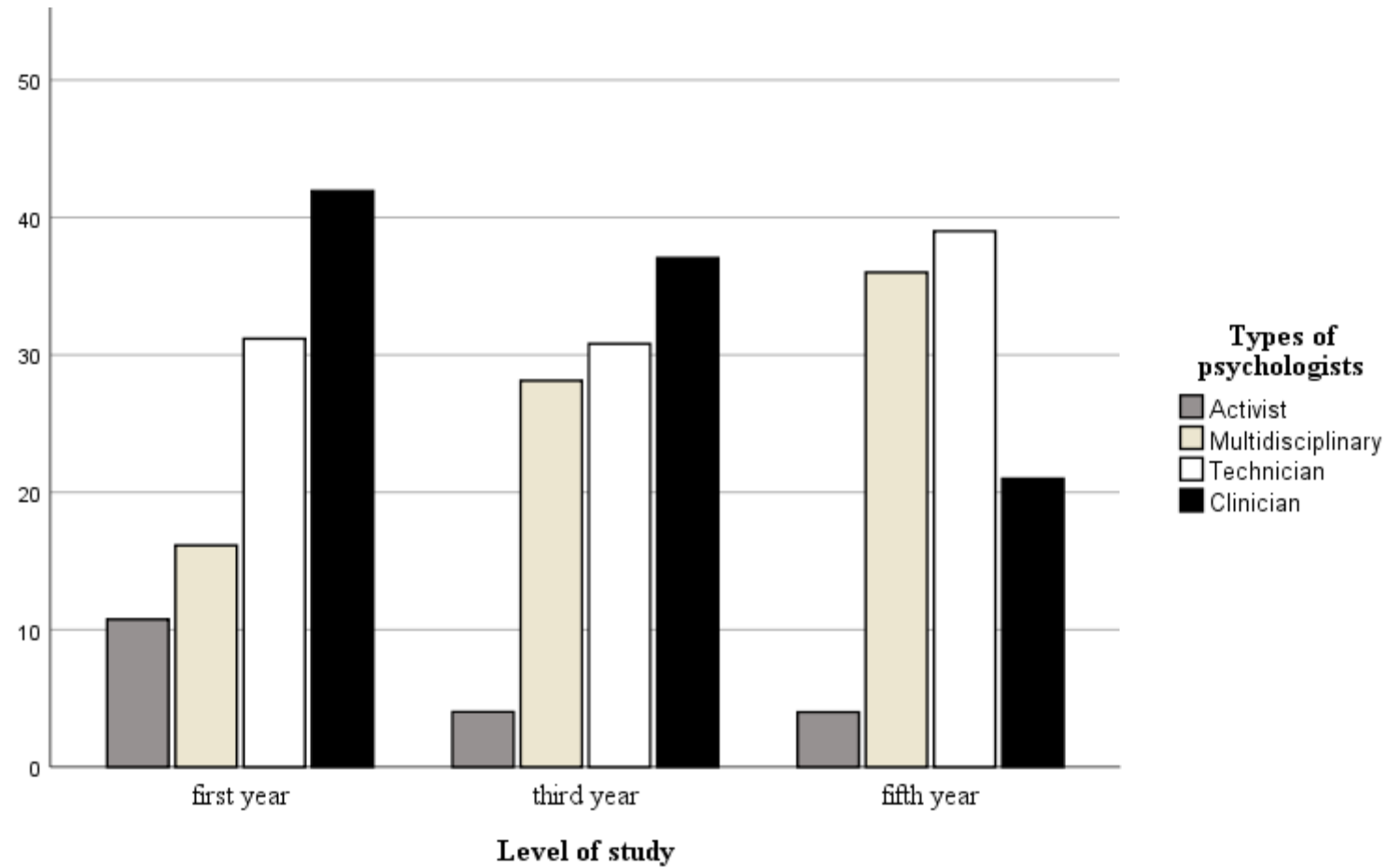




Figure 3. Qualities perceived as important in a psychologist by year of study.

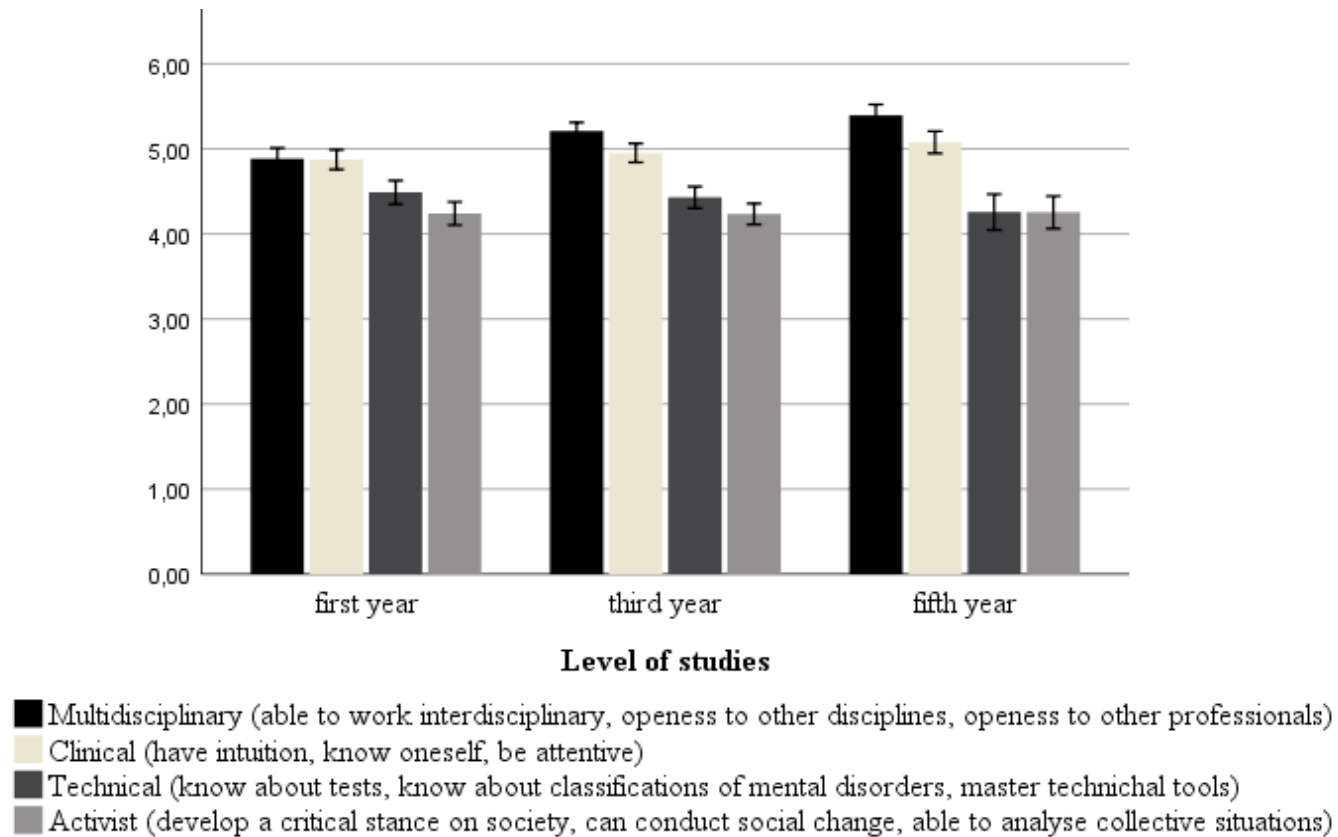
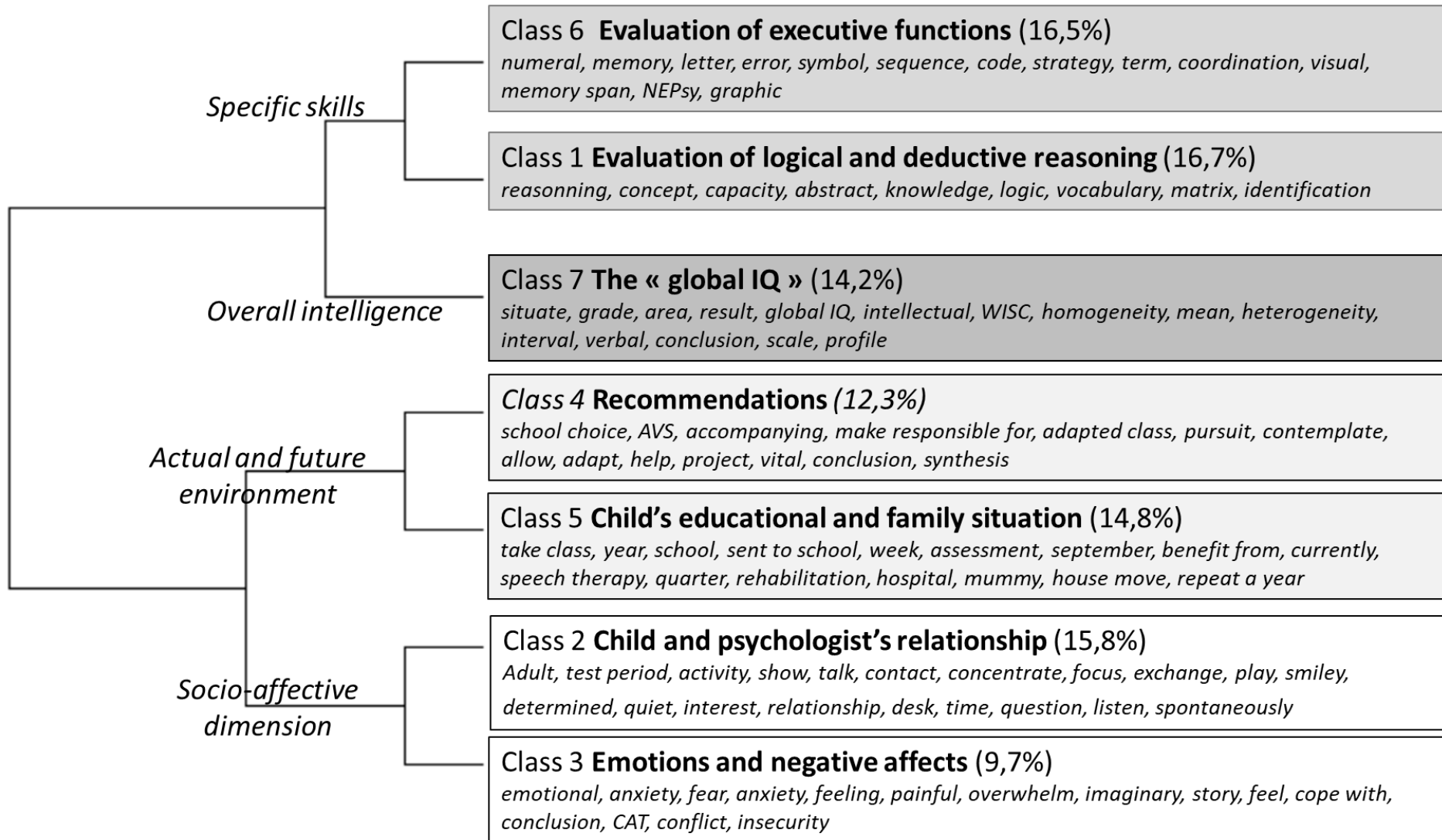


Figure 4. Descending hierarchical classification of 263 psychological assessment reports.



**Appendix 1. English translation of questions asked to psychology students in study 1.**

- 1) In your view, what is psychology?

.....

.....

.....

- 2) According to you, to which extent is psychology a science?

**Psychology is :**

Not a science at all      1      2      3      4      5      6      7      absolutely a science

- 3) Why?

.....

.....

.....

- 4) Which one of the descriptions below best suits what you think a psychologist is?

☐ The psychologist is a professional who is socially involved, who has a reflective stance on societal phenomena. Through his/her practice, he/she is in charge of individuals and society and tries to initiate social change.

☐ The psychologist is a professional who works with other professionals from social sciences on individual and social issues. His/her specific knowledge, combined to that of the other professionals, allows for an efficient intervention.

☐ The psychologist is a professional who has very specific technical and theoretical tools. His/her expertise allows him/her to intervene beside the relationship of an individual facing another individual or relational problems.

☐ The psychologist is a professional who conducts a therapy with individuals facing problems. His/her work tools are, first of all, personal and analytical skills. These skills are implemented in the course of a long-term relationship.

- 5) Below is a list of qualities. To what extent are each of these qualities required in order to be a good psychologist?

<u>In order to be a good psychologist:</u>	
Being attentive to others is	<div>Not required</div> <div>0   1   2   3   4   5   6</div> <div>absolutely required</div>
Knowing about tests is	<div>Not required</div> <div>0   1   2   3   4   5   6</div> <div>absolutely required</div>
Being able to analyze a collective situation is	<div>Not required</div> <div>0   1   2   3   4   5   6</div> <div>absolutely required</div>

Having intuition is	Not required 0 1 2 3 4 5 6	absolutely required
Being able to work interdisciplinary	Not required 0 1 2 3 4 5 6	absolutely required
Developing a critical stance on society is	Not required 0 1 2 3 4 5 6	absolutely required
Knowing about mental disorders classifications is	Not required 0 1 2 3 4 5 6	absolutely required
Openness to other professionals is	Not required 0 1 2 3 4 5 6	absolutely required
Being able to conduct social change is	Not required 0 1 2 3 4 5 6	absolutely required
Knowing oneself is	Not required 0 1 2 3 4 5 6	absolutely required
Mastering technical tools is	Not required 0 1 2 3 4 5 6	absolutely required
Openness to other disciplines is	Not required 0 1 2 3 4 5 6	absolutely required

6) According to you, what can a psychologist do in the field of disabilities?

.....  
 .....  
 .....  
 .....

## Appendix 2. Correlation matrix of the key variables.

Measures	<i>n</i>	<i>M</i>	<i>SD</i>	1	2	3	4	5
1. Scientific level	522	5,68	0,56	-				
2. Multi-disciplinary qualities	514	5,13	0,81	,151**	-			

3. Technical qualities	514	4,41	0,98	,142**	,152**	-	
4. Clinical qualities	514	4,94	0,8	0,013	,247**	,141**	-
5. Activist qualities	514	4,24	0,94	0,050	,362**	,180**	,350** -

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\*\*  $p < .01$