

**Anglo-German Foundation for the
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The Future of Professionalised Work in Britain and Germany

Counselling Psychologists and Psychotherapists

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**Anglo-German Foundation
for the Study of Industrial Society**

THE FUTURE OF PROFESSIONALISED WORK IN BRITAIN AND GERMANY

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Executive summary

Over the past two decades or so the established professions have come under challenge from a number of new developments which simultaneously have given rise to new occupations, the members of which aspire to professional status.

The acceleration of knowledge creation, increased specialisation and more rapid diffusion of information and knowledge are threatening professional exclusivity and have engendered increasing intra- and inter-professional competition. Technological change, EU regulation and internationalisation of business have further intensified competition and have created more demanding clients and new forms of service provision. Concurrently government cost cutting and deregulation of markets for professional services are undermining the security of many professions.

These developments have had different effects in Britain and in Germany because the two countries are mediated by different institutional environments and processes of professional regulation.

The comparative study of these developments in professionalised work reported here was carried out in 2000 and 2001. It covered four professions: well-established legal and pharmacy professions and emerging professions in psychological and business services. The research involved in-depth interviews with relevant British and German professional associations and other interested parties, followed by a postal survey of 9,242 professional workers, with an average response rate of 20 per cent.

This report concentrates on the findings among British counselling psychologists and German psychological psychotherapists. The research focused on how the developments identified above have affected professionalised work and have brought about changes in the market, work and status of professional workers, as well as in their well-being and the nature of service provision. Attention has been centred both on cross-national differences in these aspects of professionalised work and on divergences between professions within each society.

The research revealed extensive change, the pace and scope of which has been greater in Britain than in Germany. The main drivers of change in both countries were, in order of importance, increased demands from consumers, technological change, government policy, regulation, and competition within and between professions. The effect of European policy has been small.

These changes have required improved skill, knowledge and service provision, but they also have intensified work, undermined the financial viability especially of smaller businesses, and reduced the morale, satisfaction and motivation of professional workers.

Overall the level of disaffection was higher in Britain than in Germany, and significantly higher in the established than in the emerging professions. The report concludes that, in both societies, extensive pressures from clients, technology, markets and the state have left the socially privileged professional workers feeling besieged on many fronts. The increased importance of knowledge and skills in contemporary society has in no way

strengthened the position of the occupations providing them. Moreover, the increased demands placed on them have lowered their sense of socio-psychological well-being.

German psychological psychotherapists are the most disaffected of all the professions in both countries. They reacted to the fact that, despite recent state recognition as an independent profession, they still found themselves in a position of dependence and subordination to adjacent healing professions, with adverse consequences both for their autonomy and their economic opportunities. Although state recognition has brought the profession huge advantages historically, at the time of the survey it was perceived to have brought extensive disadvantages that have undermined the position of the professions significantly.

There were fundamental differences in the pattern of change between the two societies. On the whole, German psychological psychotherapists had reacted less frequently to increasing costs by increasing prices, and this, in a significant proportion of cases, had adversely affected their financial prospects. As the German psychological psychotherapists surveyed were predominantly self-employed in very small businesses in close relation with clients, they were more constrained in raising prices and consequently felt less certain about the future prosperity of their businesses.

Reduction of public expenditure and increasing market competition have added to the pressures on professional workers. But the nature and extent of these effects depend on the regulatory framework within which they operate:

- The British system of granting professional status to private interest groups can be described as a regulated monopoly.
- The more legally based occupational jurisdiction, education and training requirements and conditions for practising in Germany are better defined as regulated competition.

The rationale for each is grounded in a different political economy, and each results in a divergent clustering of interests and social and economic outcomes:

- In Britain deregulation and cost cutting have been to the relative advantage of larger firms while the smaller firms have borne much of the cost.
- In Germany the structure of service provision has remained relatively unchanged, and the cost of policy change has been more evenly distributed between providers.

The research therefore raises important questions for the future of professional work. In both countries, but particularly in Britain, more account needs to be taken of the extent to which recent economic, technological and political changes have negatively affected the well-being of this key social group in modern society. The costs of change need to be more equally distributed between different organisational forms of professional practice. The strong concern, in both societies, with improved service delivery has to be more informed by how different organisational forms affect professionals' relations with clients, and a better balance has to be achieved between considerations of cost, quality of service on the one hand and the well-being and economic security of professional service providers on the other.

This report is derived from a larger study which surveyed the four professionalised occupations – the law and pharmacy, and psychology and business services – in both Britain and Germany. This longer study can be downloaded from the Anglo-German Foundation's website at <http://www.agf.org.uk/pubs/publications.shtml>.

1 Introduction

This report offers an examination of the professionalised work of counselling psychologists and psychological psychotherapists in contemporary Britain and Germany. Its findings are derived from a larger study, which surveyed four professionalised occupations in Britain and Germany in the legal, pharmacy, human resource management and psychology services fields. The relatively large and internally diverse sample has yielded rich and comprehensive results, which may be considered unique in the contemporary literature on professions in both scale and scope of findings. The results provide an unprecedented insight into the development of counselling psychology and psychological psychotherapy, and of professionalised occupations more generally during the decade of the 1990s, going far beyond what has been provided by the established literature on professionalised work in either country, let alone in a comparison of the situation in Britain and Germany.

Professionalised work is highly skilled and knowledge-intensive. The educational and training process, the nature of the skill and knowledge acquired and developed, and the legal and organisational framework within which it is carried out define to an important extent the jurisdictions different professional groups are able to establish and protect from competition. The purpose of this 'market sheltering' is variously explained. It is justified as a guarantor of quality and as providing the necessary reward to encourage excellence of service, but it is also criticised as creating opportunities for monopolisation and raising the cost of provision.

In recent decades a number of developments with pervasive effects have significantly affected professionalised work in general, including that of counselling psychology and psychological psychotherapy. Technological change, organisational development, internationalisation of business and new forms of service provision are undermining existing professions, and at the same time are creating new occupational specialisations, the practitioners of which aspire to professional status. The process of knowledge creation, specialisation and more rapid diffusion is threatening professional exclusivity and has engendered increasing intra- and inter-professional competition. Concurrently government cost cutting and deregulation of markets for professional services are undermining the security of many professions. At the same time the single European market and other pressures for internationalisation are leading to greater cross-border co-operation between professional groups and to increased international competition. These progressive trends threaten the market shelters of the professions, which have been increasingly interpreted as constituting obstacles to free trade in services.

These developments have engulfed British and German societies at different times and to varying degrees. The professionalised occupations experienced a very different historical evolution in each society, and – despite some convergent developments during recent decades – these differences endure. They are due to the fact that similar pressures on professionals from markets, technology and clients are mediated by the different institutional environments and the differing processes of professional regulation.

The cross-national study on which this report is based was carried out in 2000 and 2001. It has been concerned with examining the impact of the above developments on the work, employment and the socio-psychological well-being of professionalised occupations, paying attention particularly to changes during the 1990s. The research has focused on the following aspects:

1. How different modes of controlling professional occupations in the two countries have mediated the impact on professional work of changes in technology, regulatory policy, the organisation of public services, competition and the system of education and training
2. The effects of such changes on the market, work and status of professional workers
3. The implications of these changes for performance in the knowledge-intensive sectors of the service economy
4. The policy implications of these developments and the effects of different processes of professionalisation in the two countries.

Although this report concentrates on British counselling psychologists and German psychological psychotherapists, we nevertheless provide the tabulated research findings for all four professions in both countries so as to enable readers to view the psychological professions in a richer and wider context. The report is organised into three parts. Part I provides the context for the discussion of empirical findings, which are set out in Part II, and then conclusions are drawn in Part III. These are followed by Appendix 1, which offers a detailed discussion of our research methods, and Appendix 2, which provides additional data on demographic details, hours worked and earnings of professionals we surveyed.

PART I: CONTEXT AND OVERVIEW

2 The historical evolution of professions in Britain and Germany

2.1 The historical evolution of professionalised occupations

The following overview provides a brief historical perspective on the divergent evolution of knowledge occupations in the two societies. It also points to more recent changes in national trajectories, which have created some convergence. The latter, it is argued, make the broad concept of 'profession' applicable to both societies and render plausible a comparison of professional work between them.

Britain and Germany have had radically different historical trajectories of the evolution of professionalised occupations (Siegrist, 1988), particularly in their interaction with the state and in their own organisation as professional societies and chambers respectively. While in Britain professionalisation of knowledge occupations began several centuries ago, in Germany the professionalised occupations gained their independence from the state only at the end of the 19th century, when they were declared free occupations (*freie Berufe*). Although the German professionalised occupations acquired a significant degree of self-regulation, legal regulation by the state (particularly of professional education) remained much more important than in Britain, where professionalised occupations achieved a high degree of self-regulation and developed a pronounced consciousness of their status as professions.

Historically, therefore, a marked difference exists between what has been termed 'professionalisation from below' in Britain and 'professionalisation from above' in Germany. This difference in the organisation and regulation of comparable knowledge occupations had consequences for social stratification and subjective awareness of social status and group membership, as well as for the development of knowledge and education. Whereas German professionalised occupations were integrated into, and perceived themselves to be members of, the broader stratum of the *Bildungsbürgertum* (educated middle classes), the absence of the latter in Britain increased the social distinctiveness and separateness of professionalised occupations.

The peculiarity of the historical evolution of professionalised occupations in the Anglo-American social context has led some authors (e.g. Larson, 1977; Freidson, 1994) to claim that the concept of profession is only applicable in these societies. But most social scientists now view this stance as too restrictive (Johnson, 1982; Abbott, 1988; Siegrist, 1990; Burrage and Torstendahl, 1990; Light, 1995). In their view relations between state and professions, and the consequent mode of regulation, have changed over time.

Contrasts between societies in the manner of regulation, although significant, are better viewed as dynamically evolving differences of degree, rather than as static and absolute divergences of kind (Johnson, 1993). This is particularly evident in the contrast between British and German knowledge occupations over the past two decades, which show considerable convergence, due mainly to changes in the British model of professions. Additionally, the broader acceptance in Britain of a university education as a necessary foundation for performance in a modern economy, and the creation of a much broader stratum of university-educated citizens from the 1960s onwards, paved the way for changes to the model of professions in the later period.

Despite some remaining differences between the organisation and regulation of professions in the two societies and the continuing low subjective identification with aspects of the concept of profession in Germany, there now exist sufficient similarities to justify the use of the concept of profession in both Britain and Germany. Hence this will be the practice adopted in this report.

2.2 Regulation of the professions in Britain and Germany

Most definitions of the term 'professions' see regulation of professional expertise and hence of professional jurisdiction, as well as of technical and ethical standards of performance, as integral to professionalism (Abbott, 1988). But the form regulation takes and its degree and scope differ significantly between Britain and Germany.

Professions are regulated by the state – usually by laws, statutes and court decisions – and by the binding rules of professional societies in Britain and chambers in Germany. Such regulation covers a variety of professional activities, but the most basic forms are those that recognise and protect a profession's claims to expertise in a given area of knowledge and skills and lay down basic rules for practice. Imposition of technical and ethical standards mainly occurs through professional self-regulation. British professional societies, through the prescription of entry qualifications, may secure a limited monopoly by bestowing chartered status on their members. However, only state regulation – by giving legal protection to a professional title or an area of expertise in exchange for professional self-control over standards of practice – can establish a professional jurisdiction and hence secure full professional status (Abbott, 1988).

It is therefore possible to distinguish between *established professions*, with legally protected titles or areas of expertise, and *emerging professions*, where a degree of exclusivity of expertise short of full market closure has been achieved or is being aspired to. In Britain counselling psychologists fall into this latter category, as in 1994 they finally gained chartered status and have deemed their professional status enhanced. Chartered status may have increased their reputation, but it cannot fully ensure exclusivity. Thus, for example, the Division of Counselling Psychologists of the British Psychological Society cannot exercise full control either over the definition of necessary professional knowledge or over the way it is used, because membership of the Division is not obligatory for all those engaged in psychological counselling. Moreover, among psychologists there exists no agreement over what constitutes legitimate techniques in their work with patients, and there is still an active debate about 'status-seeking professionalisation' (Postle 1998: 2, 4).

The lack of full control by British counselling psychologists means that non-members of professional societies do not have to comply with the standards of technical competence and ethical probity laid down, so that the reputation of the occupation cannot be fully safeguarded. Hence the codes of practice are much less detailed than in the established professions, which are subject to the imposition of an extensive range of performance standards, as well as of stringent monitoring and enforcement mechanisms.

German psychological psychotherapists have recently achieved full state recognition as a subgroup of psychologists, with exclusive jurisdiction. But the very recent nature of their professional recognition leaves unresolved or problematic some dimensions of professional activity. Professional chambers, independent of medical doctors, are still being established. Only two existed at the time of our survey in early 2001, although since then their numbers have grown continuously. More importantly, psychological psychotherapists have yet to achieve access equal to that of medical doctors to the public health insurance funds, which is vital for getting payment for work in the public sector. Widespread dissatisfaction with this state of affairs is evident from the responses to our survey.

In Germany state regulation is almost exclusively legal regulation, whereas in Britain statutory regulation is most common. In Germany the legislative as well as ministerial bureaucracies and courts, mostly at the level of the federal states (*Länder*), are involved in different ways. While legislative bodies define both professional tasks and their distribution between different professions, ministries monitor the application of the law. But it is important to note that chambers have administrative independence and that professions are monitored only in relation to their adherence to due legal process and not to the substance of their activities. Professional freedom is cherished and recognised by both sides. Furthermore legislative bodies engage in extensive consultation with chambers and other organised professional interest groups before formulating and passing laws. Nevertheless, dissatisfaction may also centre on the substance of law, as was evident from psychological psychotherapists' complaints in responses to our survey of an overly narrow definition of their tasks, which limits their professional scope and autonomy.

In summary, there are still fundamental differences between the two societies both in the way in which regulation is distributed between state and professional associations and in the manner of state regulation. Despite recent changes Britain retains a higher degree of self-regulation.

The most notable difference is that in Germany professional education remains fully under the aegis of the state, whereas in Britain established professional societies influence the content of relevant degree courses and retain full control over specialised education and training. However, professional control over training would constitute a radical departure from established practice, requiring a contractual partnership between state and profession.

2.3 British counselling psychologists: a general profile

Counselling psychology can be defined as the application of psychological knowledge to the practice of counselling (Wolfe 1996). Counselling psychologists are employed in a wide range of situations: the National Health Service, occupational, educational and health settings as well as in independent practice.

It is possible to perceive the impetus behind the rise in counselling psychology in Britain as deriving from six major sources, which prompted the description of counselling psychology as “an idea whose time had come” (Wolfe 1990). These sources are elaborated in a key article by Wolfe in 1996 as:

- An awareness among many psychologists of the importance of the *helping relationship* as a significant variable in working with people.
- A growing acceptance of the *humanistic value system* underlying counselling psychology and reflected in the reactions against the medical model of professional-client relationships.
- A move towards focusing on the work of helpers on *facilitating well-being* rather than on responding to sickness and pathology.
- A developing awareness of the need for a more articulated “scientific” basis for counselling.
- A recognition of the value of counselling psychology as a framework for human resource development within organisations.
- An appreciation that at a time of high unemployment, counselling offers an appropriate form of employment for psychology graduates.

In 1992, the British Psychological Society established a Diploma in Counselling Psychology in order to provide a route to chartered status for those psychologists whose professional development and expertise lay in the area of counselling psychology. Full professional status was achieved in 1994 when a Division of Counselling Psychology was established and psychologists who possessed the diploma or *Statement of Equivalence* to it became entitled to use the title “Chartered Counselling Psychologist”. The numbers of Chartered Counselling Psychologists has risen from 200 in 1996 to 412 in 2002 (Annual General Report, 2002).

The routes taken to chartership in the UK for counselling psychologists and clinical psychologists are similar in terms of length and breadth of training. Both also have “top-up” routes to doctoral level training.

Whilst clinical psychologists have largely trained and worked within the NHS, counselling psychologists have increasingly taken up employment within this setting. However “Clinical and counselling psychologists are best regarded not as competitors but as applied psychologists, coming from different traditions, and yet with a great deal in common. If, in the end, there emerges a new category of General health and human services psychologists it will contain elements of both these traditions” (Wolfe 1996, p12). The principal difference between clinical psychologists and counselling psychologists is that clinical psychologists are trained in a medical model of assessment, diagnosis and treatment. In contrast, Wolfe (1996) argues that counselling psychologists are more

concerned with enabling individuals to fulfil their potential rather than curing them of sickness.

The gap between counselling psychologists and other counsellors is also complex, but clearly different in terms of regulation. Counselling in the UK is currently largely unregulated, and practised by a wide range of individuals from non-graduates with minimal training to those with post-graduate qualifications. Some counsellors have argued against moves to regulate and professionalise counselling services (Totton, 1999). In contrast, all chartered counselling psychologists are members of and regulated by the *British Psychological Society* and are qualified to at least the Masters level.

Counselling psychology has from its inception adopted the *scientist-practitioner* model, which has also been widely espoused by clinical psychology as well as counselling psychology in the USA. Thus there is an expectation that counselling psychologists will engage in a structured examination of their work with the aim of generating knowledge for debate through publication.

More recently counselling psychologists are debating ways in which they can make the drive for evidenced-based practice relevant to their core values and clients. As Hart and Hogan (2003; 27) state "We would wish to see counselling psychology and other disciplines involved in the delivery of psychological therapies confront the task of developing an evidence base which privileges the voice of clients".

Chartered counselling psychologists whose work involves client work need practising certificates in the UK. It is likely that all practitioners will come under government statutory regulation after appropriate legislation is passed in 2004/5. This would make it a criminal offence for anyone not on the register to practice as a counselling psychologist in the UK. This also applies to other applied psychologists such as clinical and educational psychologists.

As an emerging profession counselling psychologists present themselves as an interesting case study for an investigation of the future of professional work.

2.4 German psychological psychotherapists: a general profile

Despite attempts by the Association of German Psychologists to create the specialism of counselling psychologist, partially prompted by EU efforts to achieve harmonisation, there is as yet no such grouping in Germany. Hence we have considered psychological psychotherapists who, in several respects, are comparable to counselling psychologists. Psychological psychotherapists diagnose and treat psychological and psychosomatic illnesses and are one of a diverse group of psychologists. They have been legally recognised as a healing profession (*Heilberuf*) since 1999, enjoying parity with medical doctors. They work in independent practices, hospitals and specialist clinics. They have been rewarded for 20 years or so of lobbying by becoming the only group of psychologists to be legally recognised (and regulated), and the only new fully-fledged profession in Germany in recent times. But to many this came as a mixed blessing.

Qualifying as a psychological psychotherapist requires, first, a degree in psychology, which takes an average of five years and leads to a diploma (akin to a British Master's level). Alternatively a medical degree can be a first-stage entry qualification. This is followed by three years of full-time training at a psychotherapy institute, including more than a year of practical clinical experience. Successful completion leads to state-recognised admission to the profession (*Approbation*) and confers the title 'psychological psychotherapist'. However, in order to enable patients to reclaim the fees for treatment from the health funds (*Krankenkassen*), the psychological psychotherapist additionally has to be admitted to the Association of Health Fund Doctors (*Kassenärztliche Vereinigung*). At the end of 1999 just under 28,000 psychological psychotherapists had received recognition, but only 10,000 had been admitted to the Association.

Psychological psychotherapy has traditionally used a very broad range of therapeutic methods and procedures, but admittance to the German profession is dependent on reducing methods to three: psychoanalysis, psychotherapy and behavioural therapy. These were deemed to be scientifically recognised and to lend respectability and enhance professional status. There was a strong feeling among some of our interviewees that such limitation jeopardises effective treatment. Despite the framework of restriction, the boundaries of German psychological psychotherapy thus remain open for dispute in ways reminiscent of the British counselling psychologists.

PART II: EMPIRICAL FINDINGS

3 Professional interests and loyalties

The debate amongst sociologists and economists focuses on whose interest professionals and their associations serve. An idea of a compact between highly qualified occupations and those they serve, mediated in varying degrees by licensed private associations and the state in Britain and Germany, rests on a model of direct service. One extreme view claims that they serve the general interest, which they should be allowed to protect by excluding the unqualified (e.g. Carr-Saunders and Wilson, 1933). A contrasting but also one-sided view contends that they serve their own special interests by exploiting any protection from competition they have been granted (e.g. Larson, 1977).

The compromise position recognises that the professions have the power to serve both their own and the public interest. However, many professional services are no longer provided by independent professional practices, but by organisations which mediate between professional workers and those they serve. Moreover, as organisations grow and become more hierarchical, additional interest groupings develop, including those of managers, employees and colleagues.

To explore the relative importance to our professional respondents of these different interest groupings we asked them where their greatest loyalties lie. The results are given in Tables 3.1a and b.

Table 3.1a
Greatest loyalties: Britain (%)

Most loyal to:	Pharmacists	HR managers	Lawyers	Counselling psychologists	Total
My clients	30.2	22.1	41.5	56.4	37.6
Myself	24.8	31.0	18.0	26.9	24.6
My colleagues	12.6	8.3	16.4	2.6	10.0
The people who work for me	9.4	12.4	9.3	1.0	8.0
My profession	11.9	7.2	3.8	7.2	7.2
My employer	6.8	13.1	7.1	1.3	7.7
My supervisor	1.4	4.5	0.5	3.0	2.3
The organisation which uses my services	2.5	1.4	2.7	0.3	1.3
Others	0.4	0.0	0.5	1.3	1.7

Table 3.1b
Greatest loyalties: Germany (%)

Most loyal to:	Pharmacists	Business and HRM consultants	Lawyers	Psychological psychotherapists	Total
My clients	47.3	69.6	80.0	75.4	66.7
Myself	16.8	12.5	9.4	19.2	17.6
My colleagues	1.8	0.0	3.5	0.4	1.4
My profession	1.8	1.8	1.2	1.2	1.4
The people who work for me	3.0	8.9	1.2	0.0	2.7
My employer	23.4	3.6	1.2	0.4	8.3
My supervisor	1.2	0.0	0.0	0.0	0.3
The organisation which uses my services	1.8	0.0	0.0	0.8	0.8
Others	2.0	3.6	3.5	2.7	0.8

The two most important categories for the psychological professions in both countries were 'clients' and 'myself'. Relatively few ranked first their loyalty to their colleagues, the people who worked for them, employers, supervisors and organisations which used their services. For both British counselling psychologists and German psychological psychotherapists, then, the most important loyalty was to clients but that figure stood at 56.4 per cent of the British and 75.4 per cent of the Germans.

4 Professions and the size of employing organisation

These inter-country differences in the pattern of loyalties can to some degree be related to the differences in the size of organisations employing them and to differing employment status. Table 4.1 shows stark differences in the overall patterns of workplace size at the national level. In Germany 93.5 per cent of psychological psychotherapists worked in organisations with ten or fewer employees, compared with 37 per cent in Britain, a figure reflected in the general trend. At the other end of the scale 49.8 per cent of British counselling psychologists worked in organisations with 500 or more in employment (mainly the National Health Service) compared with 4.3 per cent in Germany.

Table 4.1
Size of employing organisation (%)

Numbers in employment	Pharma- cists		Management services		Lawyers		Psychologists		All	
	B	G	B	G	B	G	B	G	B	G
Less than 10	21.4	65.3	14.1	76.9	37.2	88.4	37.0	93.5	27.3	81.0
10–99	12.7	19.2	5.0	17.5	47.3	8.9	9.4	0.8	18.8	11.6
100–499	7.7	3.2	13.1	1.6	12.2	2.8	3.7	1.5	9.3	2.4
More than 500	58.1	12.3	68.0	4.0	3.2	0.0	49.8	4.3	44.5	5.1

5 Changes in professional work

5.1 The degree of change

In most professions the degree of change perceived to have taken place in professional work differed significantly between the two societies. Of the British professionals, 75 per cent judged the preceding ten years (the 1990s) to have been a time when they had experienced a large amount of change in their work, whereas among their German counterparts a more moderate 45 per cent reported this degree of change. This difference was noted among psychologists and psychotherapists, but to a far less dramatic extent, with 58 per cent in Britain and 55 per cent in Germany (Figure 5.1).

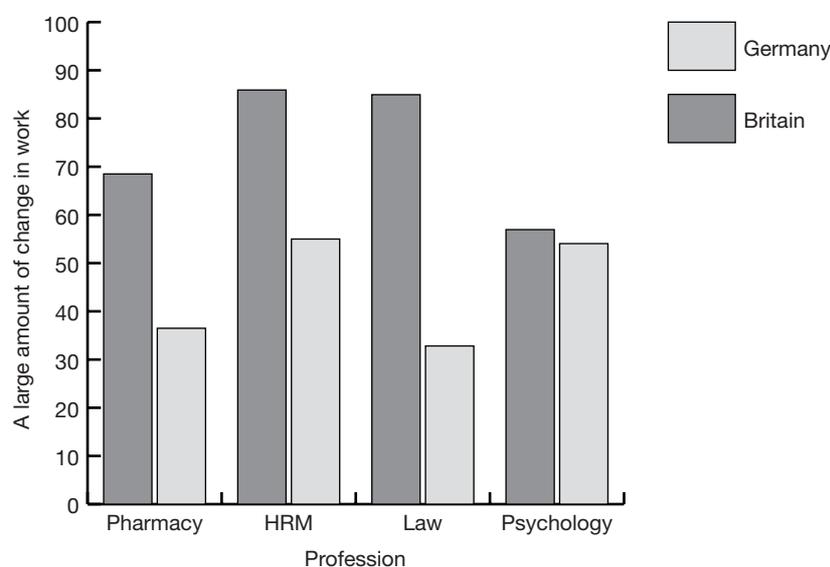


Figure 5.1
Changes in professional work

5.2 The drivers of change

To identify the sources for the perceived levels of change, we asked questions about the impact on their work of possible causal factors (Tables 5.1a and b). The British professions saw the following four, in descending order, to have had a large impact on work: increased demands from consumers, increasing competition from other professions, increasing competition within the profession and technological change. For the German professions the ordering was: regulation, government policy, increasing competition from other professions and increased demands from consumers.

Table 5.1a
Impact on professional work of drivers of change: Britain (%)

	All	Pharmacists	HR managers	Lawyers	Counselling psychologists
Large impact^a from:					
Increased demands from consumers	63.7	71.2	76.2	71.3	35.4
Technological change	57.2	57.4	73.8	70.3	26.1
Changes targeted at profession in:					
Government policy	48.7	50.0	59.2	60.3	21.7
Regulation	32.3	26.6	35.4	48.2	18.1
European policy	30.7	32.8	58.2	15.4	8.7
Increasing competition from:					
Within your profession	42.3	46.2	28.5	66.0	28.0
Other professions	27.4	36.5	14.5	23.6	35.3
Non-professionals	19.6	25.7	11.0	23.4	18.1

Note: ^a Measured on a scale of 1 (no impact) to 5 (huge impact). Percentages given are responses of 4 and 5.

Table 5.1b
Impact on professional work of drivers of change: Germany (%)

	All	Pharmacists	HRM and business consultants	Lawyers	Psychological psychotherapists
Large impact^a from:					
Increased demands from consumers	44.0	48.4	67.4	43.8	16.1
Technological change	36.3	40.1	54.7	39.5	7.2
Changes targeted at profession by:					
Government policy	36.0	55.7	13.1	16.2	58.0
Regulation	42.1	39.0	25.6	30.1	73.3
European policy	17.1	38.7	7.2	14.6	5.3
Increasing competition from:					
Within your profession	33.5	40.3	35.5	46.2	14.4
Other professions	26.1	17.5	27.1	28.8	31.0
Non-professionals	19.9	32.8	15.4	17.5	4.1

Note:^a Measured on a scale of 1 (no impact) to 5 (huge impact). Percentages given are responses of 4 and 5.

For counselling psychologists in Britain market-based competition appears to have played a central role; for German psychological psychotherapists, on the other hand, government regulation and intervention was at the forefront. This relatively high ranking of the 'regulation' factor among German psychological psychotherapists indicates a largely negative evaluation of the manner in which some important aspects of their profession are now legally regulated. Although recognition as a profession in 1999 has been welcomed, the 'psychotherapists' law has settled important issues to their disadvantage. This also explains their response to the factor government policy. This response is confirmed by our qualitative data: 40 per cent of psychological psychotherapists complained about the external assessment of their professional judgements and their unequal admission to the Association of Doctors' Health Funds which determines differential rates of pay for the services by the various health professions. European policy was not seen to have had much impact on change at work by either British or German professionals.

6 Impact of change on professional work

The professionals were further asked to identify the impact of the important drivers of change on important features of their work. We enquired about the impact of change on the skills and knowledge required, quality and efficiency of the services provided, discretion exercised, costs and prices and viability of services, and how they related to the demands made of respondents in their work.

6.1 Skills and knowledge

There is an overwhelming perception both among the British and the German professions that external drivers of change have led to increases in skills and knowledge required (Figures 6.1 and 6.2), with the proportion noting a decrease tiny in each profession. The psychological professions conform to this pattern.

It is notable that such a wide perception, in both countries, of increases in knowledge and skills required stands side by side with recognition that new technology has been an important driver for change at work. Thus, in the views of professional workers, technology is not associated with the routinisation and deskilling effect with which it is still widely coupled in the sociology of work. The professions view the importance of technology more in the way it transforms markets, changes the boundaries between professions and widens the area of competition (qualitative interview data).

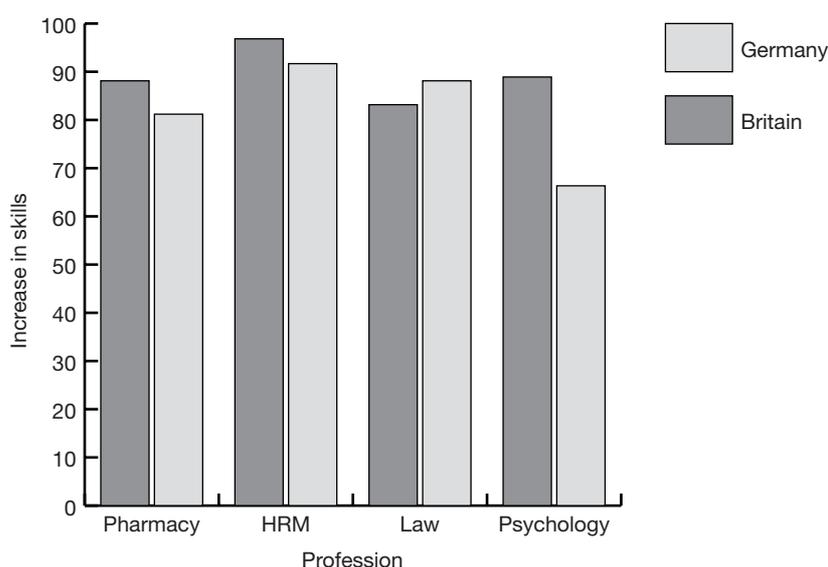


Figure 6.1
Increase in skills

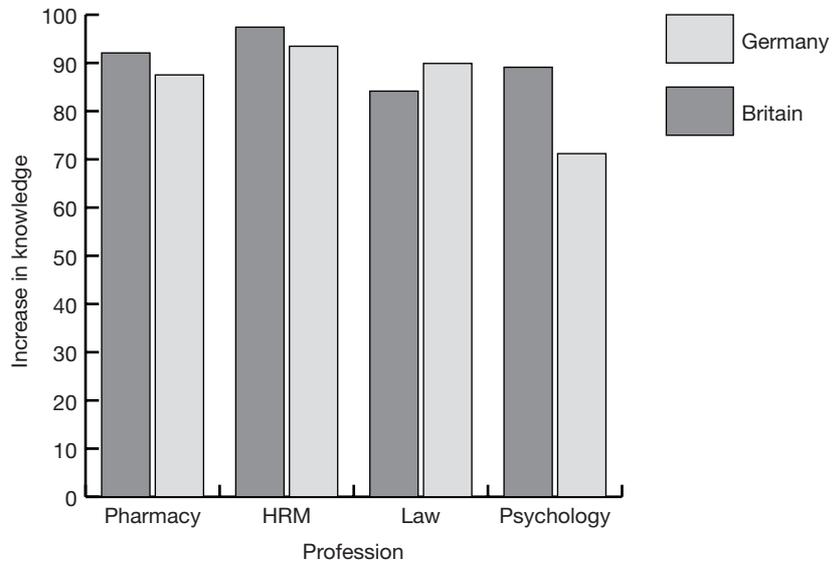


Figure 6.2
Increase in knowledge

6.2 Quality and efficiency of services

Figures 6.3 and 6.4 reveal that the general perception of the respondents in both countries was that quality and efficiency of their services had also increased. The German psychological psychotherapists were exceptional in that only a minority reported an increase in both. One explanation for this may be that the legal limitation of the range of treatments they can offer is perceived as having a negative impact on the quality of their services. In addition, the frequent criticisms of their work by medically qualified

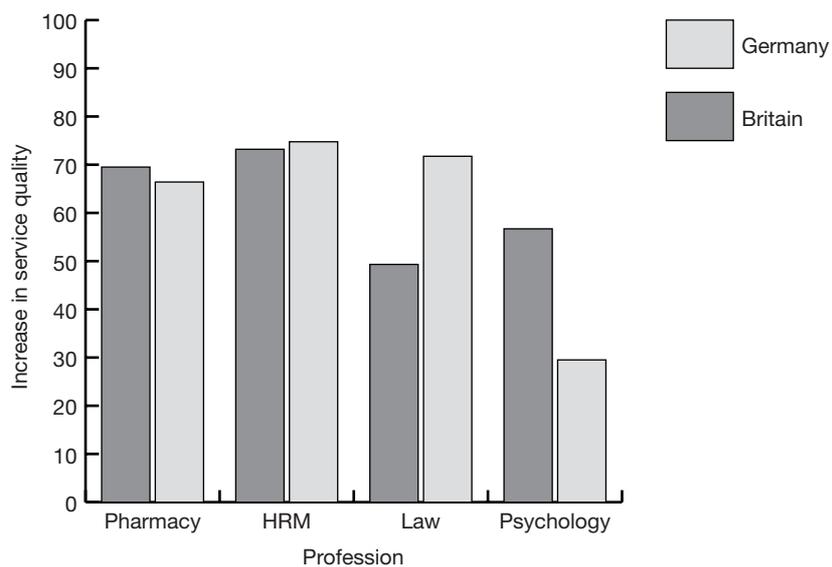


Figure 6.3
Increase in service quality

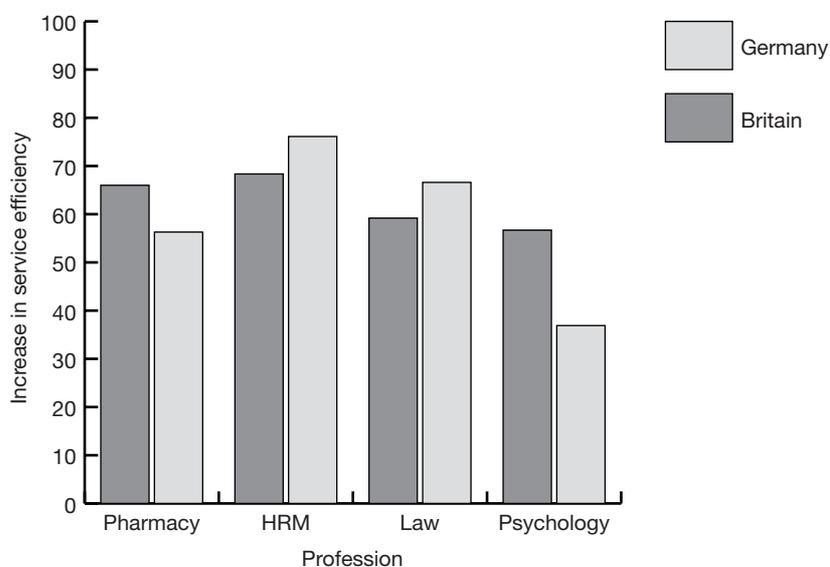


Figure 6.4
Increase in service efficiency

professionals may have sapped their confidence in the services they provide, as qualitative data on strained relations with other professions appear to confirm.

6.3 Discretion

It might have been expected that the increase in skills and knowledge required would have been accompanied by a comparable increase in the discretion exercised. But this does not appear to be the case among the psychological professionals in both countries (Figure 6.5). In particular, it might have been expected that – given the absence of hierarchy and a bureaucracy – more discretion would have been left in the hands of German psychotherapists. On the other hand, the Germans’ failure to identify high levels of discretion may reflect differential national patterns of regulation and state-directed education and training. This pattern of responses from the psychological psychotherapists probably reflects the imposition of a narrow range of methods in the ‘psychotherapists’ law. And, as is the case in both countries, the counselling psychologists and the psychological psychotherapists often have to have courses of treatment approved by external assessors from their own or cognate professions.

6.4 Costs, prices and financial viability

The respondents were also asked about impact of change on costs, prices and the financial viability of the organisations in which they were employed. Figure 6.6 shows that the cost of providing services has either remained the same or increased for the vast

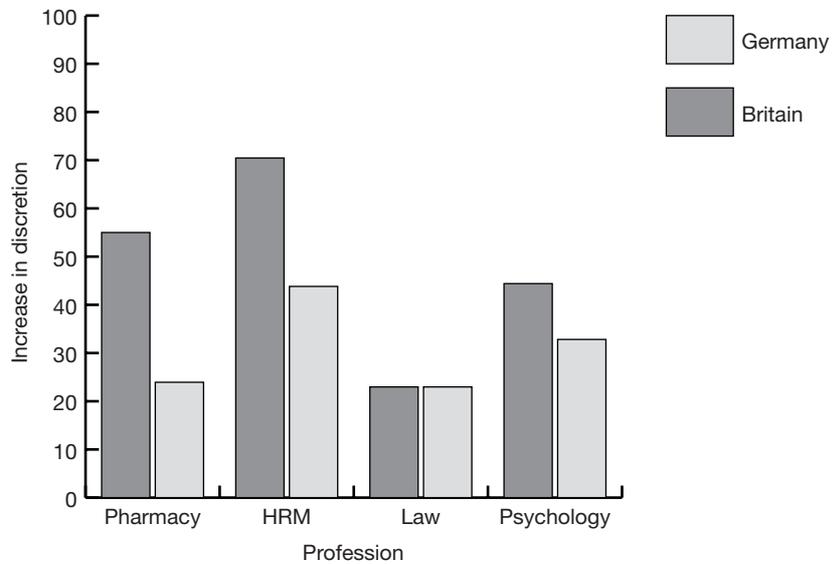


Figure 6.5
Increase in discretion

majority interviewed in each profession, although the proportion is slightly lower in Germany. In Germany the disparity in cost and price movements was substantial for psychotherapists: 69 per cent reported a fall in the prices of their services (Figure 6.7), despite the fact that for all but a tiny minority costs had remained stable or had increased (Figure 6.6). The perception of reduced earning power by a large proportion of psychological psychotherapists is attributable to their insufficient influence in the Association of Doctors' Health Funds (*Kassenärztliche Vereinigungen*). Here doctors and psychiatrists are said to influence the rates paid for different types of treatment, and they tend to put a lower value on the services of psychological psychotherapists (qualitative interview data).

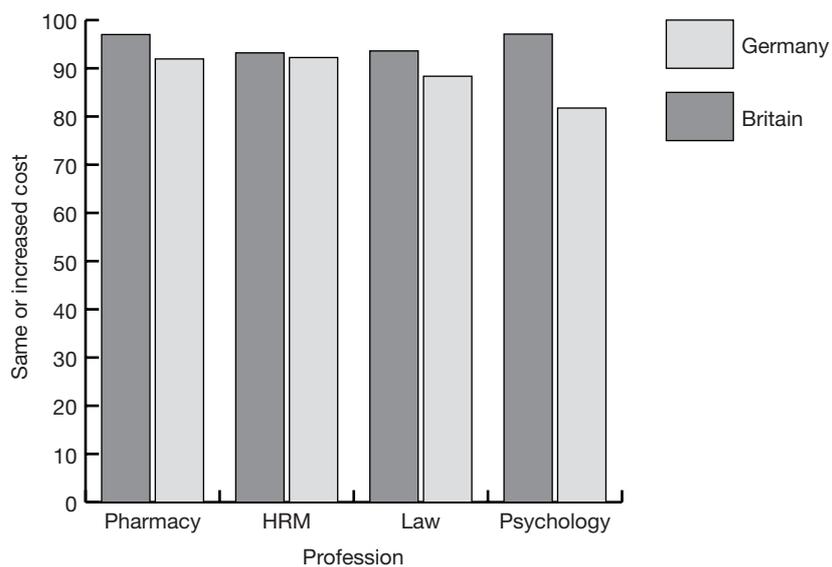


Figure 6.6
Changes in cost of services

THE FUTURE OF PROFESSIONALISED WORK IN BRITAIN AND GERMANY

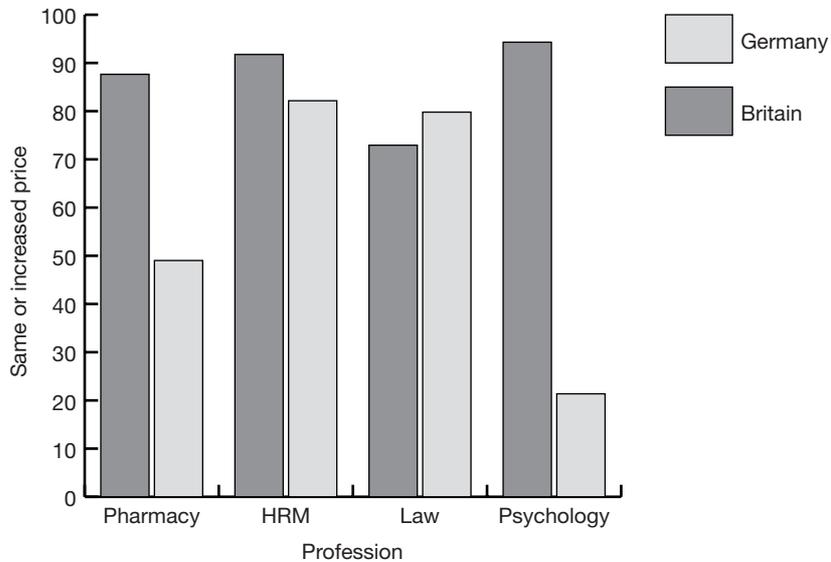


Figure 6.7
Changes in price of services

These divergent cost and price movements contributed, in varying proportions, to the reduction in the financial viability of organisations employing the professionals we surveyed (Figure 6.8). A higher proportion of German organisations suffered reductions in their financial viability, particularly those in which psychological psychotherapists were working: their financial viability had declined for more than 50 per cent of respondents.

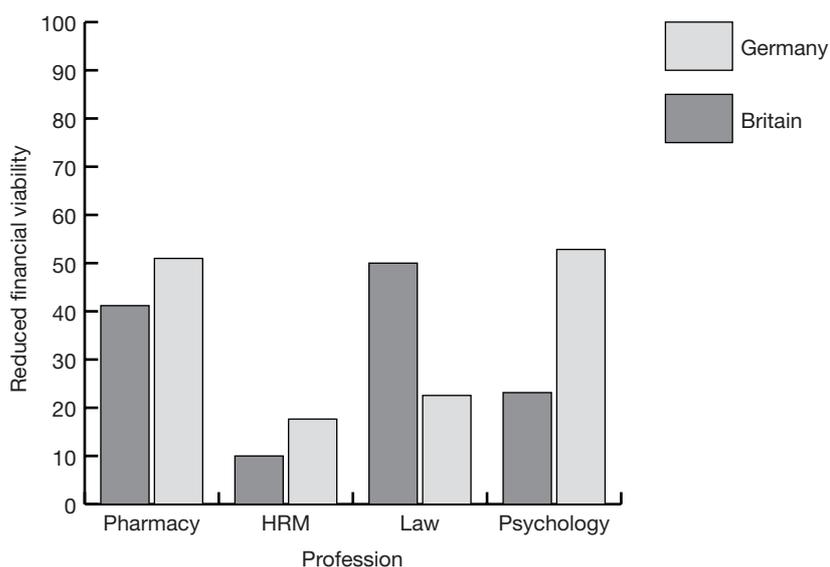


Figure 6.8
Reduced financial viability of employing organisations

6.5 Work demands

The decline in financial viability of a significant proportion of professional organisations in both countries has not in general been due to a reduction in work effort. On the contrary, in both countries a very large proportion of the psychological professions found their work to have become far more demanding (Figure 6.9).

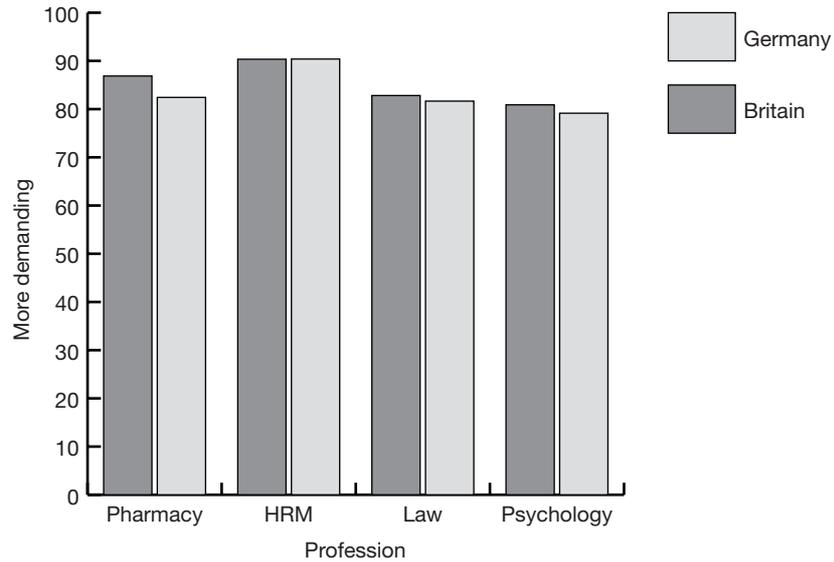


Figure 6.9
Changes in level of work demands

7 The impact of change on socio-psychological well-being of the professional workers

7.1 Prestige and motivation

High prestige is recognised as an important social attribute of professionalised work. Figure 7.1 shows that perceptions of movement in levels of professional prestige were fairly similar among the British and German professionals surveyed, and over 80 per cent of the psychological professions in both countries perceived it as having been maintained or increased.

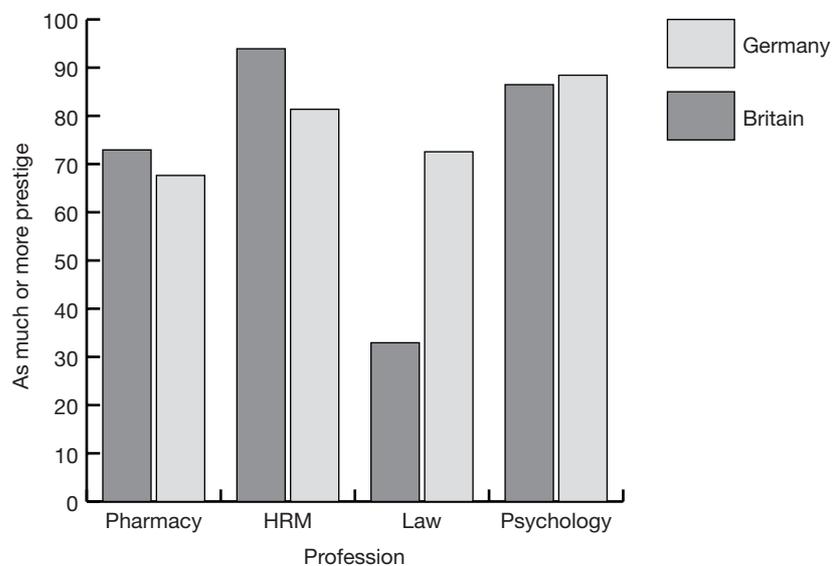


Figure 7.1
Change in prestige

Questions were asked also about trends in motivation to explore the effects of the drivers of change and their impact on work and financial viability. Motivation had been maintained or had increased for more than 80 per cent of British counselling psychologists, while the figure stood at around 70 per cent for their German equivalents (Figure 7.2).

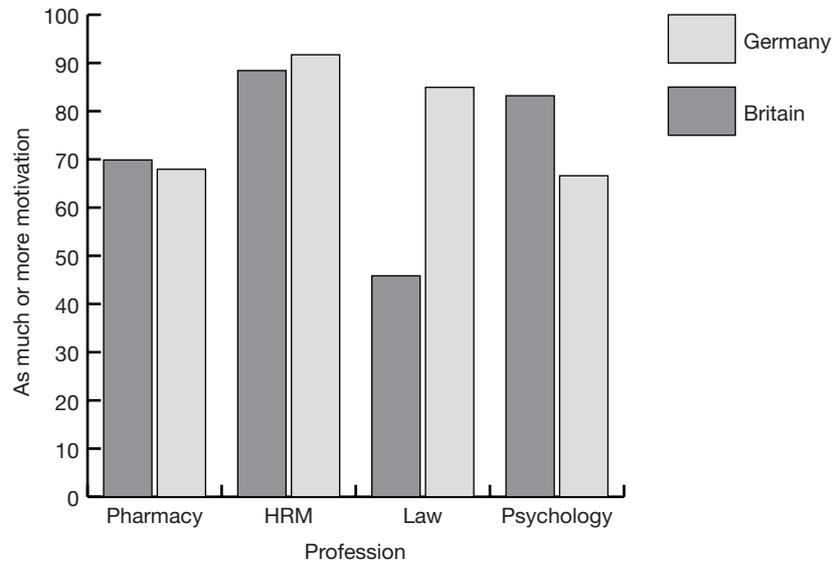


Figure 7.2
Change in motivation

7.2 Work satisfaction

Levels of satisfaction are also important gauges of well-being in work, and we asked questions both about levels of satisfaction in work and about recent changes in levels of satisfaction in the professions. These data show a greater level of job satisfaction in general among German than British professions, with 72 per cent and 61 per cent respectively stating that they were satisfied or very satisfied with their work. The psychologists, however, bucked this general trend and exhibited similar patterns of satisfaction in both countries (Figure 7.3), with the British even enjoying slightly higher levels.

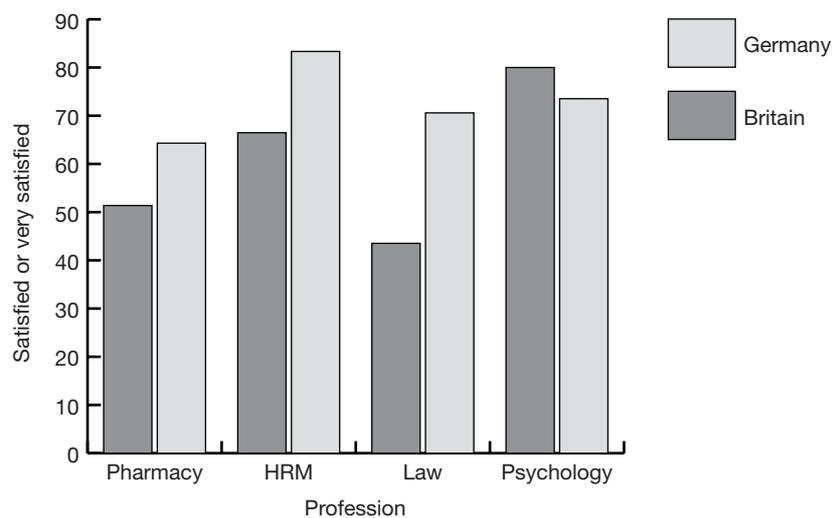


Figure 7.3
Levels of job satisfaction

The question of changes in satisfaction within professions was addressed in two ways. The respondents were first asked how their own satisfaction as a professional had changed over the past ten years, and then about how the satisfaction of people in their profession in general had changed. The responses to these questions are summarised in Figures 7.4 and 7.5. Figure 7.4 mirrors Figure 7.3, with satisfaction being maintained or increased to a slightly lesser extent for German psychological psychotherapists than for British counselling psychologists. Overall levels of satisfaction were higher in the emerging professions (HRM and psychology) than the established professions (pharmacy and law). When respondents were asked to reflect on the general satisfaction in their profession, this difference between them becomes much more pronounced (Figure 7.5).

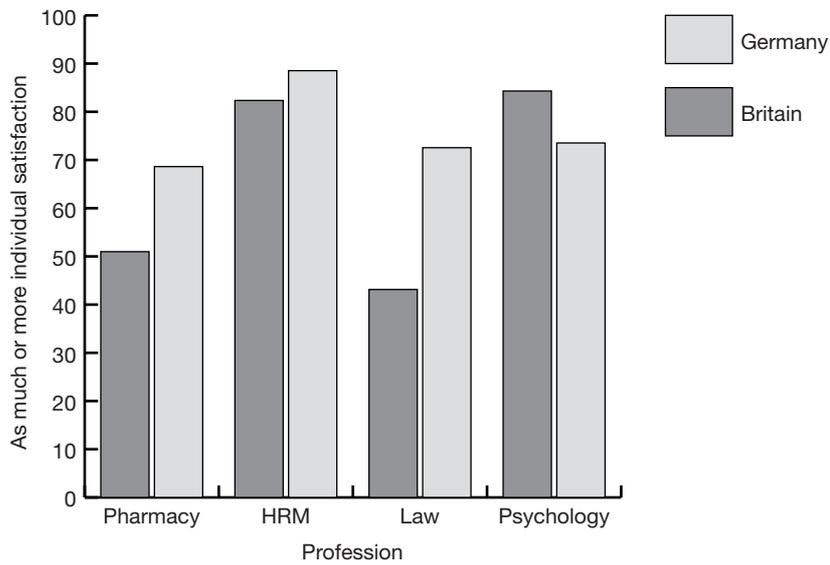


Figure 7.4
Change in individual satisfaction

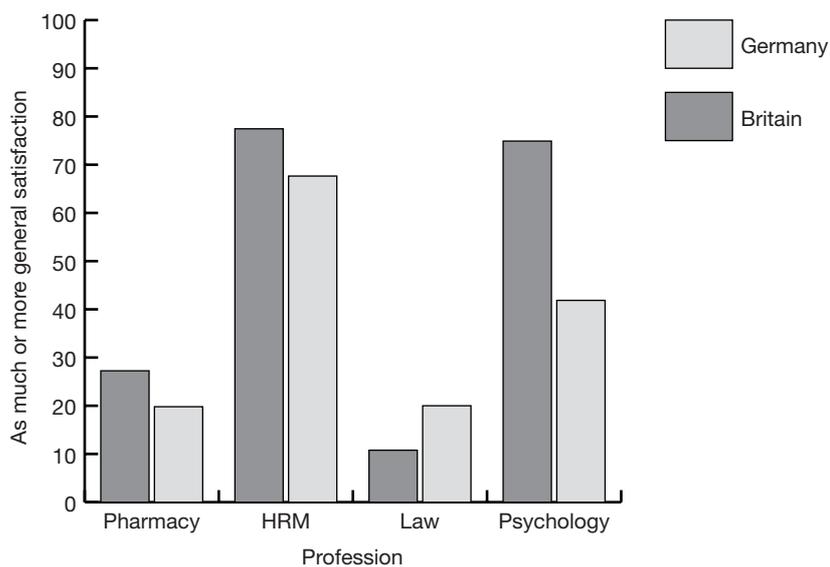


Figure 7.5
Change in general satisfaction within profession

7.3 Morale

The questions about changes in morale were also asked in relation to both the individual and the profession as a whole, and the pattern of responses was very similar to that for satisfaction. Figures 7.6 and 7.7 show that morale at the individual level had been maintained to a significantly greater extent in Germany than in Britain, especially among the established professions. However, in relative terms, the individual German psychological psychotherapists had maintained or improved their morale perhaps rather less than might be expected from members of an occupational grouping that had recently gained professional status.

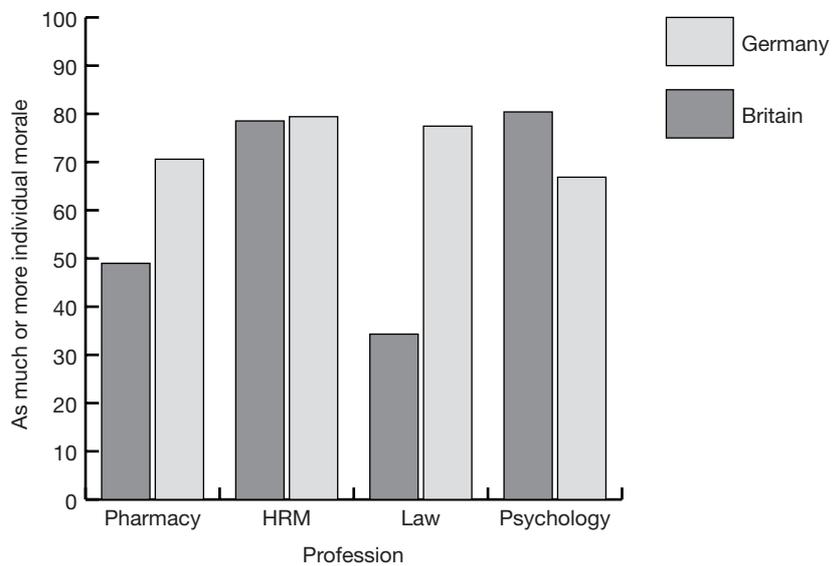


Figure 7.6
Change in individual morale

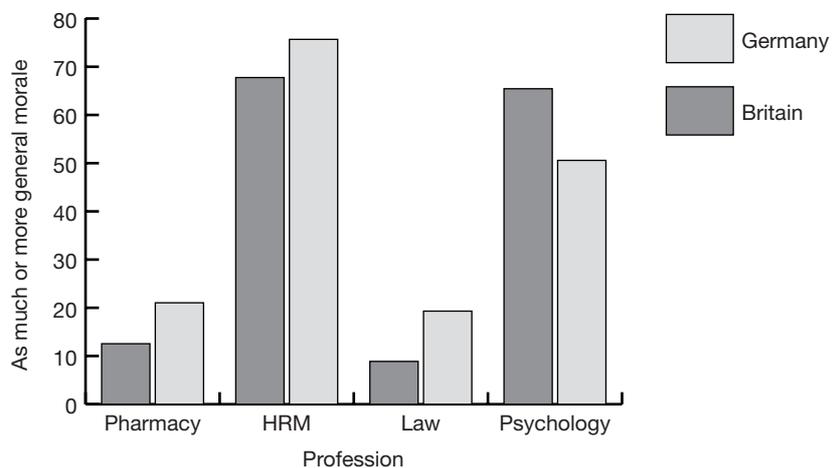


Figure 7.7
Change in general morale within profession

7.4 Employment security and future prospects

Employment insecurity during the 1990s was judged to have increased by a larger proportion for the German than the British psychological professions. As Figure 7.8 shows, the British psychological profession are slightly more optimistic about the future: 68 per cent in Britain were certain that their current work positions were secure compared with only 58 per cent in Germany. This illustrates relatively low expectations of future employment security among German psychological psychotherapists, despite the fact that the vast majority of German psychological psychotherapists owned their own businesses compared with only around 40 per cent of British counselling psychologists (Figure 7.9).

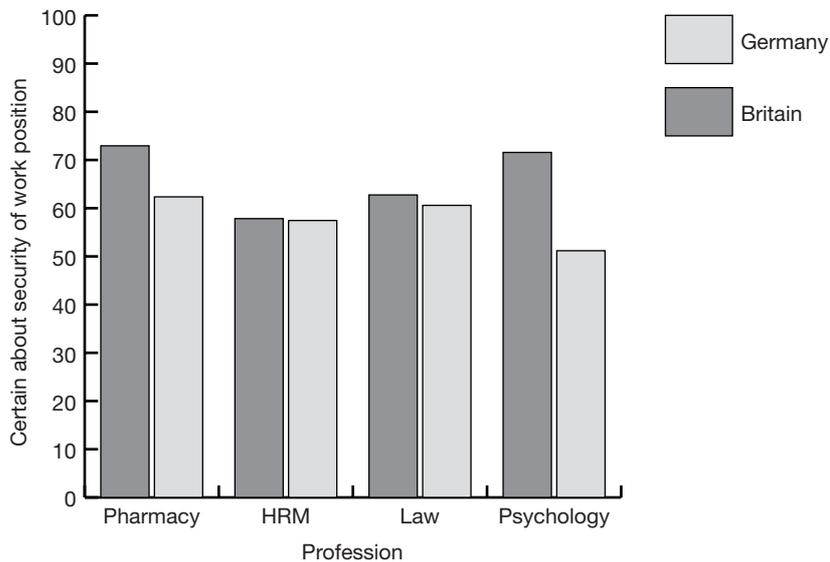


Figure 7.8
Certainty of security of current work position

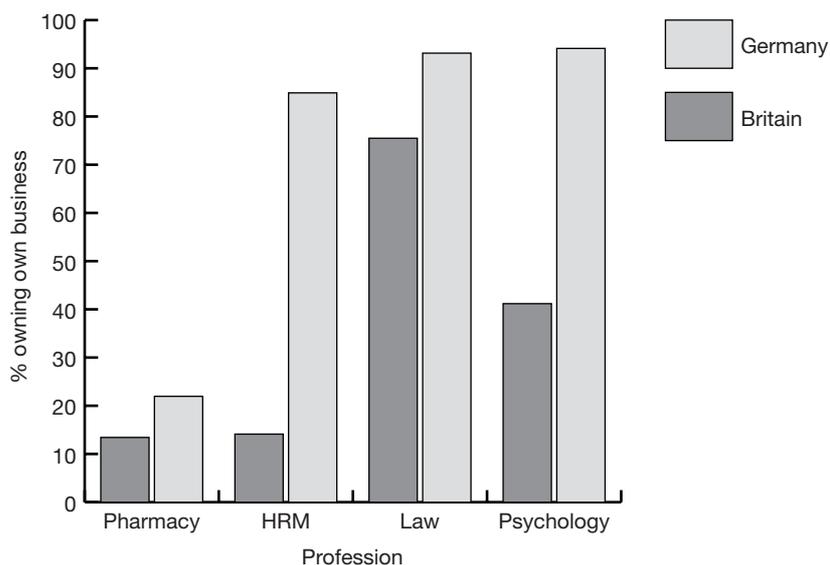


Figure 7.9
Business ownership

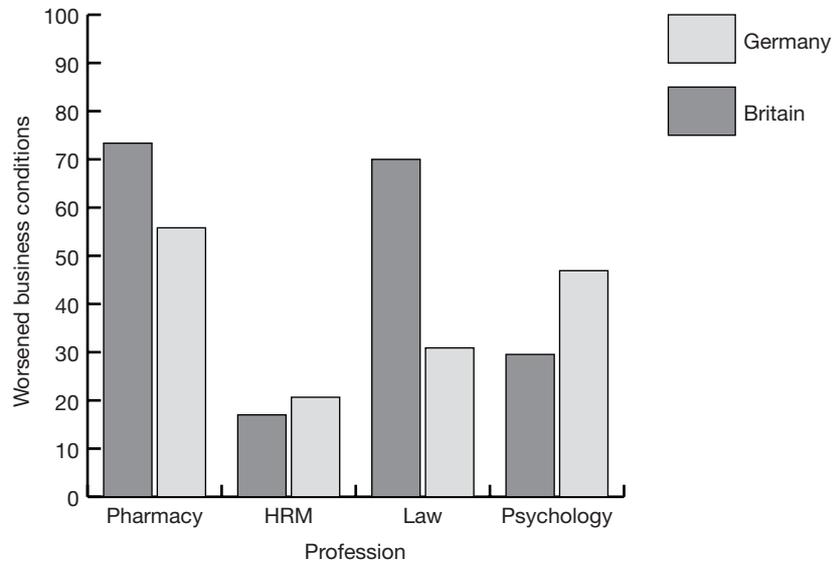


Figure 7.10
Worsened business conditions

And indeed 45 per cent of the profession in Germany perceived worsened business conditions compared with only 28 per cent in Britain (Figure 7.10).

However optimistic or otherwise they were about their future employment security, there was a large consensus of over 70 per cent in both countries that continued specialised training would be maintained (Figure 7.11). However, certainty about the need to upgrade skills and knowledge was not matched by certainty about future career

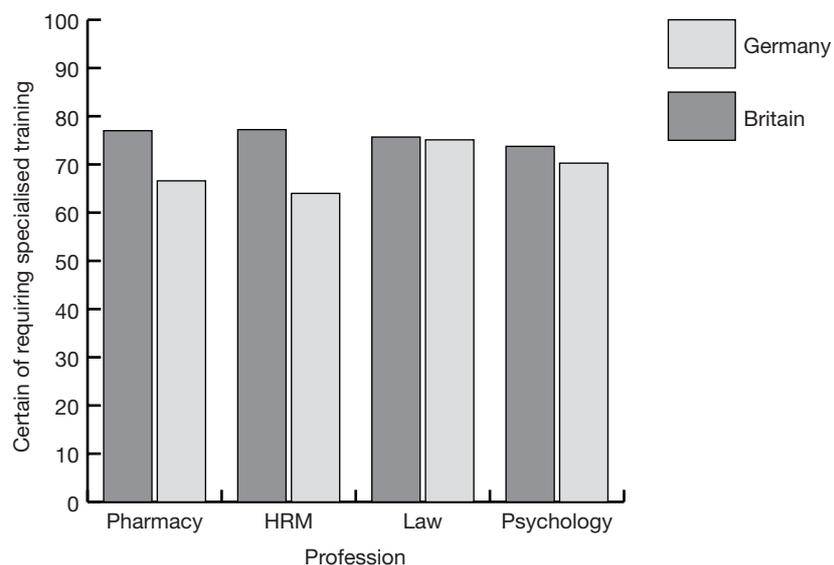


Figure 7.11
Certainty of needing continued specialised training

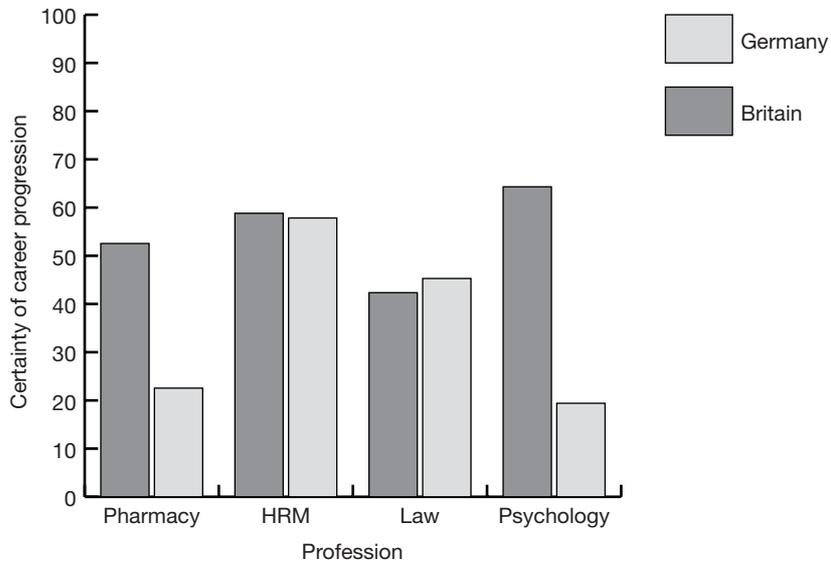


Figure 7.12
Certainty of career progression

progression (Figure 7.12). Here there was a great deal of disparity between the two countries: in Germany less than 20 per cent of psychological psychotherapists felt certain about their future prospects. This was in stark contrast to their British counterparts, around 65 per cent of whom felt secure in the knowledge that their career prospects were healthy. Less than 40 per cent of the German psychological psychotherapists and only around 50 per cent of British counselling psychologists were certain about being able to provide the current range of services in the future (Figure 7.13). Finally, concern about the future is further reflected in the low degree of certainty about the future prosperity of

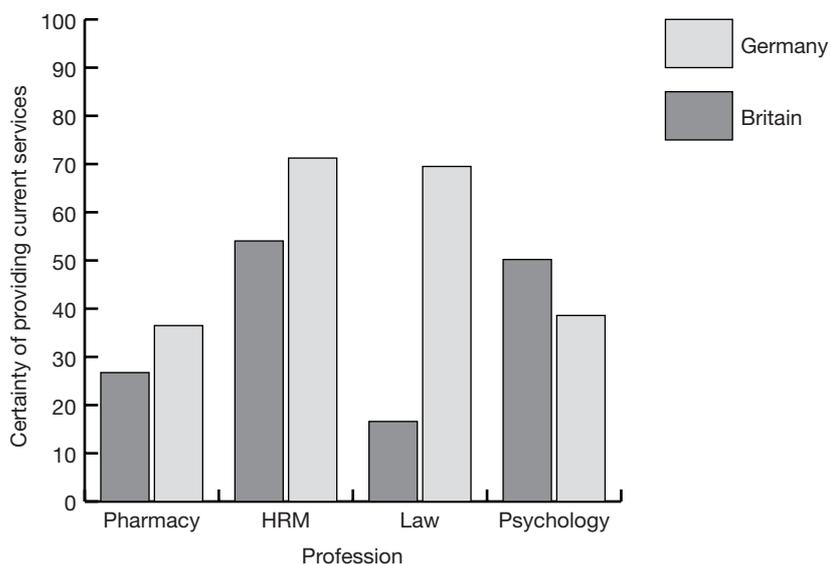


Figure 7.13
Certainty of providing all current services

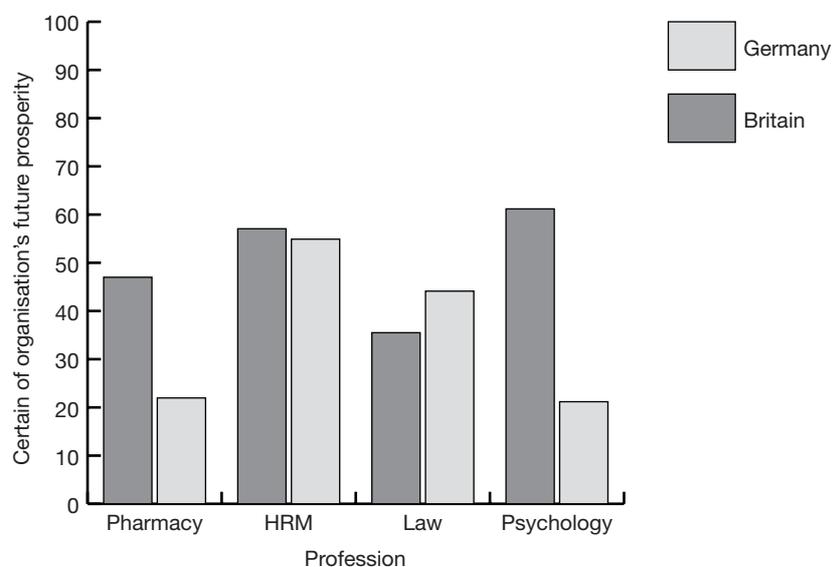


Figure 7.14
Certainty of future prosperity of employing organisation

the organisations in which our respondents worked (Figure 7.14). Again there is a striking contrast between psychological professions in the two countries: just over 60 per cent of the British counselling psychologists (a large proportion of whom are employed by the NHS) were confident about future prosperity, compared with only 20 per cent or less for German psychologists who are mainly self-employed.

PART III: CONCLUSIONS AND POLICY IMPLICATIONS

8 Conclusions

This report has illustrated a picture of extensive change in the field of psychological professional work during the 1990s in both Germany and Britain. In particular the report exposes stark differences between practitioners in the two countries in terms of positive future prospects for the profession, despite common goals and aspirations.

One striking commonality is that in both countries there was an overwhelming recognition of the greater demand for professional skills and knowledge and general increases in work effort. However, the British professionals were far more likely to reap positive benefits from their work, with much higher levels of discretion, employment security and levels of morale and job satisfaction than their German counterparts.

As illustrated throughout, the German psychological psychotherapists are the most disaffected of all the professions in both countries. They reacted to the fact that, despite recent state recognition as an independent profession, they still found themselves in a position of dependence and subordination to adjacent healing professions, with adverse consequences both for their autonomy and their economic opportunities. Although state recognition has brought the profession huge advantages historically, at the time of the survey it was perceived to have brought extensive disadvantages that have undermined the position of the profession significantly.

There were fundamental differences in the pattern of change between the two societies. On the whole, German psychological psychotherapists had reacted less frequently to increasing costs by increasing prices, and this, in a significant proportion of cases, had adversely affected their financial prospects. As the German psychological psychotherapists surveyed were predominantly self-employed in very small businesses in close relation with clients, they were more constrained in raising prices and consequently felt less certain about the future prosperity of their businesses.

In conclusion, despite much variation within and between societies, this survey of changes in conditions of professional work and well-being in Britain and Germany permits some general conclusions. While extensive pressures from states, markets, clients and technology have made members of the psychological professions surveyed suffer significant economic anxieties and lowered satisfaction and morale in both countries, the heavily state-regulated German psychological psychotherapists are affected to a higher degree.

9 Policy implications

The responses of professions to the consequences of increased consumer demand and technical change, their jurisdictional conflicts and the emergence of new highly skilled and knowledge-intensive occupations aspiring for professional status have been mediated by governments' own policy agendas.

A comparison of the emerging professionals casts significant light on the effects of the different government approaches to regulation. In Britain counselling psychologists have been granted chartered status and have established control over education and training courses and other routes to professional status. Their professional association, the British Psychological Society, lays down codes of conduct and operates dispute and disciplinary procedures to enforce quality control. But it cannot restrict entry into its occupation's territory, and any quality control effect it has is limited to its membership. The main benefit to members is an enhancement of their reputation in the market.

In Germany conditions for establishing professional status are more stringent. Aspiring professionals have to go to great lengths to gain acceptance for their claims that a high level of specialised skill and knowledge is required, that specialist educational/training provision needs to be provided to safeguard standards and that both are protected by some measure of exclusivity. In Germany the establishment of the need for professionalisation and the setting up of chambers is a protracted process and, as our study of the psychological psychotherapists suggests, it can place unwanted restrictions on those making the case, as well as on cognate occupations. But once achieved, the occupational boundaries are legally established and protected and the route into the profession is legally prescribed. Guarantees of quality of service are built into the legal processes for securing professional status, which also establish the framework within which the professionals compete.

It may be suggested that the British system of granting professional status by chartering private interest groups can best be described as regulated monopoly, while the more legally based verification of occupational jurisdiction, educational and training requirements and conditions for practising in Germany is better defined as regulated competition. The rationale for each is grounded in a different political economy, and each results in a divergent clustering of interests and social and economic outcomes.

As a result, although both the British and German systems have been subject to similar policy pressures, the outcomes have differed significantly. It is not possible to judge with any degree of certainty from our data what the effects of these changes have been on the quality and efficiency of service. There is a large measure of agreement amongst the professionals in both countries that both aspects have improved. There is evidence that the German psychological psychotherapists show a stronger client orientation and, because of the smaller size of organisations, have managed to stay closer to them. However, the psychological well-being and aspirations of future prosperity of German psychological psychotherapists have certainly suffered much more than those of their British counterparts. Therefore, to the extent that socio-psychological well-being is linked to motivation, it could be argued that the economic cost of change in Germany has been greater.

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Appendix 1: Research methodology

A1.1 Research design

The empirical work project was conducted at two levels:

- Interviews were carried out with representatives of the professional associations: two to four interviews in each of the four professions in each country, lasting two to three hours. In some cases follow-up visits were made. This was supported by documentary analysis relating to the practices, history and regulation of the professions and a critical review of the relevant socio-economic literature.
- A postal survey of individual professionals was carried out, with 1,000 questionnaires sent out in each profession in each country.

With the advantage of national research teams in each country, including bilingual members on each side, comparable questionnaires for the postal survey of the professionals in each country were constructed. Similar aide-memoirs were also used in each country for the extensive interviewing of professional associations, and a member of each national team participated in some interviews in the other country.

A1.2 Problems of cross-national comparison

It proved impossible to exactly match professional occupations from the two countries. British counselling psychology has no exact counterpart in Germany, the closest comparison being with psychological psychotherapy. However, both groups draw from the same pool of knowledge and have recently received formal recognition as professions.

A1.3 The postal survey

A survey of individual professional workers formed the central part of the empirical research. The main research questions covering the various aspects of professionals' working lives had been developed with the research proposal, but results from our interviewing of professional associations were also used in the questionnaire design. Great care was taken to ensure that the German translation of the English questionnaire was as close as possible, but because of inter-country differences it was necessary to adapt some questions and include others.

Extensive piloting and pre-testing of the questionnaire was carried out in each profession in both countries before the questionnaire was finalised. It consisted of ten main sections:

- A. Job satisfaction and loyalty (including effort, work demands)
- B. Basic information on employment
- C. Qualifications (and continuing development)
- D. Levels of discretion (regulation in one's work)
- E. Impact of change (including work satisfaction, morale)
- F. Occupational relationships (including competition)
- G. Employment security
- H. Professional associations
- I. General (demographic) information
- J. Further comments.

Most of the questions were formulated to be relevant to all of the professions, but *each profession* had a customised version of the questionnaire which included a few questions relevant only to that occupation. The research design is *comparative* not only between countries, but also between professions in order to capture the wide variety of developments.

Most of the questions were 'closed', except for a few questions where more complex and less channelled responses were required. The final section consisted of open questions inviting more general comments on all aspects of the questionnaire. It was estimated that the questionnaire would take 30 minutes to complete.

A1.4 Sample selection

1,000 questionnaires or more were sent out to psychology professionals in both countries. In Britain professionals respondents were selected by the British Psychological Society. The achieved samples are shown in Table A1.1. In Germany, due to data protection restrictions, databases of members in the professional associations were not made available. (except for some of the pharmacists). Instead, the German team used the nationwide Yellow Pages to randomly select addresses. Consequently the sample of German psychological psychotherapists had a bias towards self-employed professionals who list themselves in the Yellow Pages. Psychotherapists tend to work in their own practices. Because they are not listed in the Yellow Pages those employed in hospitals and other organisations could not be included in the survey. The figures for the German sample are given in Table A1.2.

These response rates are relatively high for postal questionnaires (response rates for unsolicited postal questionnaires are often closer to 5 per cent). The often extensive responses to the final open-ended questions also suggested that the professionals had found the questionnaires to be interesting and relevant to their working lives.

Table A1.1
The British sample

UK professions	Population sampled	Sample size	Response
Counselling psychologists	Members of the counselling psychology section of the British Psychological Society	1,242	317
Lawyers	Members of the Law Society under 60 years	2,000 ¹	121
Human resources managers	Members of the Chartered Institute of Personnel and Development	1,000	299
Pharmacists	Members of the Royal Pharmaceutical Society of Great Britain	1,000	294

Table A1.2
The German sample

German professions	Population sampled	Sample	Responses
Psychological psychotherapists (<i>psychologische Psychotherapeuten</i>)	Self-employed practitioners, from Yellow Pages Germany	1,000	302
Lawyers (<i>Rechtsanwälte</i>)	Law offices (<i>Anwaltskanzleien</i> – proprietors and employees), from Yellow Pages Germany	1,000	147
Business and human resources consultants (<i>Unternehmensberater</i>)	Mostly self-employed, proprietors of small companies, from Yellow Pages Germany	1,000	128
Pharmacists	500 pharmacies (proprietors, also employees), from Yellow Pages Germany, 300 members of <i>Apothekerkammer Niedersachsen</i> , 200 pharmacists (employees, members of the Federal Association of Employees in Pharmacies, BVA)	1,000	194

A1.5 Data analysis

The numerical data from the returned questionnaires were entered into Statistical Package for the Social Sciences (SPSS). The research teams in the UK and Germany coded the open-ended questions separately. Thereafter, comparative statistical analysis and qualitative interpretations were undertaken.

¹ The British solicitors were surveyed twice because the first sample we received was for over-60-year-olds although we had asked for 60-year-olds and under. The response rate to the second survey was so low that we decided to include in the analysis those from the earlier survey who had reported their age as 60 or under.

Appendix 2: Demographic details, education, earnings and working hours

A2.1 Education, gender and age

The respondents were highly educated. Almost all had first degrees, indicating the importance of vocational and other relevant experience as routes into this profession. British counselling psychologists stood out for the high proportion among them with doctorates.

Slightly more of the British respondents were women, 51 per cent compared with 47 per cent in Germany. However, in both countries, more than 50 per cent of the psychological professionals were women.

The age structure of the overall sample was similar in the two countries. In Britain 11 per cent were aged below 30, 61 per cent between 30 and 50, and 29 per cent were over 50. In Germany these proportions were 5 per cent, 66 per cent and 30 per cent respectively. The age structure in each profession broadly conformed to these patterns. However, many more German than British psychologists were aged between 30 and 50 (73 per cent compared with 50 per cent), and fewer were over 50 (27 per cent compared with 43 per cent).

A2.2 Earnings and hours of work

Approximately one third of both British and German professionals earned more than £40,000, although 27 per cent of Germans earned less than £20,000, compared with only 15 per cent of British. The lowest paid professions were the German pharmacists and British psychologists, more than 30 per cent of whom earned less than £20,000.

The differences in earnings partly reflect differences in hours worked: 43 per cent of British and 17 per cent of German psychologists worked 45 hours or more. It should also be remembered that a relatively high proportion of psychological professionals in both countries were women, which helps explain both their relatively short working weeks and low levels of pay.