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A Century of Psychotherapy in Argentina: Clinical Psychology, Psychoanalysis and Recent Developments

Un siglo de psicoterapia en Argentina: psicología clínica, psicoanálisis y desarrollos recientes

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Argentina owns an authentic psychotherapeutic culture, being psychoanalysis its most spread expression, particularly in public-managed universities. Nevertheless, Argentina lacks of a system to provide appropriate and continuous education for psychotherapists. Thus, psychologists' abilities have been repeatedly described as biased and deficitary. Adopting a socio-professional historiographic framework, this study presents an historical overview and analysis of the development of the heterogeneous psychotherapeutic spheres in Argentina during the twentieth century, aiming to grasp and retrospectively explain the field's present state. Argentinian psychotherapy is first described, from around 1900, when psychiatrists and physicians inaugurated and dominated the field, up to 1930, when psychoanalysis, reflexology and existentialism coexisted as clinical perspectives. The period between 1940 and 1970, characterized by psychoanalysis' institutionalization, is then analyzed. The arrival of psychoanalysis at the newly created psychology careers, the professional disputes started by such arrival and the consequent hegemonization of the theory and its therapeutic outlook are emphasized. The period from 1970 onwards is detailed, describing institutional and professional developments. The development of systemic, cognitive and integrative approaches is detailed. Finally, contemporary challenges of the psychotherapy in Argentina are discussed, emphasizing the necessity of a deep debate based on historical and empirical evidence.

Keywords: Argentina, psychotherapy, psychoanalysis, training and education in psychology.

Argentina posee una auténtica cultura psicoterapéutica, siendo el psicoanálisis su expresión más difundida y aceptada, particularmente en las universidades públicas. Sin embargo, Argentina carece de un sistema que provea formación continua y apropiada para los psicoterapeutas. Por tanto, las habilidades de los psicólogos han sido reiteradamente descritas como sesgadas y deficitarias. Adoptando un marco historiográfico socioprofesional, esta investigación presenta un relevamiento y análisis histórico de conjunto del desarrollo de los ámbitos psicoterapéuticos heterogéneos en Argentina durante el siglo XX, para explicar retrospectivamente el estado actual del campo. Primero, se describe la psicoterapia en Argentina desde 1900, cuando los psiquiatras y médicos inauguraron y dominaron el campo, hasta 1930, cuando el psicoanálisis, la reflexología y el existencialismo coexistían como perspectivas clínicas. Se analiza el periodo 1940-1970, caracterizado por la institucionalización del psicoanálisis. Se enfatiza la llegada de psicoanalistas a las recientemente creadas carreras de psicología, las disputas profesionales gatilladas y la consecuente hegemonización de dicha teoría y terapéutica. Se describe el período posterior a 1970, caracterizado por desarrollos institucionales y profesionales. Se detalla el desarrollo de aproximaciones psicoclínicas sistémicas, cognitivas e integrativas. Finalmente, se discuten desafíos contemporáneos de la psicoterapia en Argentina, atendiendo la necesidad de un debate profundo basado en evidencia histórica y empírica.

Palabras clave: Argentina, psicoterapia, psicoanálisis, formación y entrenamiento en psicología.

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Introduction

Argentina is one of the countries with most psychologists in the world. Since 1965, more than 101,000 Argentiniens have obtained a degree in psychology. There are currently more than 98,000 active professionals in the country and for every 100,000 citizens, there are 194 psychologists—the highest ratio in the world—(Alonso & Klinar A., 2016). This is the result of decades of growth in psychology careers' enrollment, especially in public-managed universities (Alonso, 1999; Klappenbach, 2007, 2015; Vilanova, 2003a). The main occupation of most Argentinian psychologists—the majority of which concentrate in the Province of Buenos Aires—is professional, clinical psychology, often in the form of private practice (Alonso, Gago, & Klinar, 2017). Recent researches have suggested that consistently with a fifty-year tradition (Ardila, 1979), most clinical psychologists working in mental health public services strictly adopt a Freudian or Lacanian outlook (Muller & Palavezzatti, 2015), with scarce knowledge of their chosen theories' epistemological or theoretical foundations (Muller, 2008). Such prevalence is not exclusive to Buenos Aires, but to other Argentinian provinces as well (Muller, Oberholzer, Iglesias, Flores, & Bugiolocchi, 2004).

This contemporary peculiarity is usually identified as a product of historical biases in psychologists' university training and education. Specific historical surveys have shown that the professionalization of psychology in the mid-1950s was fueled by philosophers, physicians and psychiatrists with clear psychoanalytic orientations, but with scarce, sometimes even null, knowledge on international psychology (Dagfal, 2009; Piñeda & Jacó-Vilela, 2014; Polanco & Calabresi, 2009; Rossi, 2001; Vilanova, 1993). These professionals were the teachers of the first cohorts of Argentinian psychologists, and these first cohorts often emulated the professional identity of their mentors without any systematic change (Dagfal, 2014; Ferrari, 2017). This took place in a detrimental juridical context, where until the 1980s psychotherapy and psychoanalysis were forbidden by law to non-medical professionals. With scarce economic and infrastructural resources to contain massive enrollments, to conduct original researches and to hire international, trained professional psychologists

for newly formed chairs, psychology since its inception as a discipline in Argentina mostly lost notice of critical international scientific advances and was tied and often reduced to clinical, psychoanalytic psychotherapy (Di Doménico, 1999a, 1999b; Piacente, 1998; Saforcada, 1993; Vilanova, 1997). Defined in such way, psychology entered collective representations, permeated literary and humanistic circles and soaked Argentinian culture (Plotkin, 2003), reaffirming and legitimizing the alluded narrow and mono-theoretical professionalism.

This phenomenon, correlated with political and institutional instabilities (military regimes, enclosement of academia, and an overall cancellation of isonomic and scientific debates) has been maintained until very recently. Since the 1980s (in certain local cases even earlier), psycho-clinical alternatives to psychoanalysis began their slow, and progressive incorporation into the Argentinian professional collective (Korman, Viotti, & Garay, 2015; Macchioli, 2012a; Van Alphen, 2009; Vilanova, 2002) even though this was achieved through individual scholars and specific private institutions. This was also accompanied by certain, albeit scarce theoretical and philosophical reassessments, both on Argentinian psychoanalysis and psychoanalysts (Acevedo, 2003; Fernández-Álvarez, 1970; Saforcada, 1969; Serroni-Copello, 1997; Vilanova, 1985, 1995a) and of psychotherapy as a rational exercise (Fernández-Álvarez, 2001; Klappenbach, 2006b; Serroni-Copello, 1997; Vilanova, 1994b, 1994c, 1996b, 2003b). Finally, nationwide diagnoses on the outdated psychology curricula in Argentina during the 1990s highlighted the need of university reforms in psychologists' undergraduate training and education (AUAPsi, 1998, 1999). While the success of the undertaken reforms has been limited (Di Doménico & Piacente, 2011; Klappenbach, 2015), it has collaborated to shaken the identification between psychology and private, clinical psychoanalysis—an identification that has been largely fed by a precarious, biased undergraduate education.

Nevertheless, the average Argentinian psychologist still exclusively perceives his stronger competences in clinical psychology, while simultaneously undertrained in several key clinical activities (like the use of international diagnostic manuals, the confection of psychological reports or the design of test batteries) (Castro Solano,

2004; Manzo, 2010). There is a great discrepancy between the services that public and private health institutions expect from a professional clinical psychologist, and the services in which the bulk of such professionals is actually trained and thus can provide. Researches about the causes of this phenomenon point to outdated, mono-theoretical undergraduate education (Vázquez-Ferrero, 2016), especially to clinical psychology and psychotherapy-related courses (Brisuela Blume, Bruna, & Fierro, 2016; Klappenbach, 2004; Manzo, 2015).

Considering this situation and recent debates regarding the accreditation of psychology grade careers in Argentina, which have touched upon deficitary undergraduate training in clinical competences (Di Doménico & Piacente, 2003), it's necessary to critically assess the history of psychotherapy in Argentina up to our recent past. In North-American and European nations, clinical psychology and psychotherapy have been historically conceived as government tools for disciplinary purposes (Rose, 1996), as technologies for civil adjustment (Napoli, 1981) with considerable amounts of research funding or as shared fields between psychiatrists and psychologists (Benjamin Jr., 2005). In Argentina, clinical psychology and psychotherapy often constitute self-contained, self-validated systems, which in only specific and recent cases have struggled to empirically assess their processes, to base their tenets in public basic and applied research and to regain international communication (Muller & Palavezzatti, 2013; Vera-Villarroel & Mustaca, 2006).

Even when the proliferation of diverse schools and approaches in psychotherapy has not been a particularity of the Argentinian case, it is possible to identify a significant difference in relation to most occidental countries. The absence of a clear set of rules and regulations determining what licensed psychotherapists are enabled to do, and thus, what is understood by psychotherapy, has led to the present situation in which a diverse display of self-proclaimed psychotherapeutic practices coexist. Many of them do not fulfill the principles established by organizations and international associations. Finally, it must be stated that the bulk of Argentinian psychologists, because of the previously mentioned historical training deficits at universities, are oblivious to vital, current issues in psychotherapy, as the identification of harmful treatments (Dimidjian & Hollon, 2010).

Fifty years ago, a clinician and historian of psychology asserted that "history cannot be denied; the choice is between making it a conscious determinant of our behavior as psychologists, or allowing it to influence us unawares. There is no other alternative" (Watson, 1966, p. 64). Applying such reasoning to the Argentinian case, this work aims to historically explaining the aforementioned contemporary peculiarities, thus enabling deliberate reflection, further debates and corrective measures. We first describe psychotherapy in Argentina since around 1900, when psychiatrists and physicians inaugurated and dominated the field, up to 1930, when psychoanalysis, reflexology and existentialism coexisted as clinical perspectives. We then detail the period between 1940 and 1970, when psychoanalysis' institutionalization and professionalization and its arrival in the newly created psychology grade careers gave way to an exclusive hegemonization of the theory and its therapeutic outlook. We then delve into the period from 1970 onwards, when important institutional and professional changes and the reception of previously unacknowledged psychotherapy-research trends stimulated the development of systemic, cognitive and integrative approaches, mostly through private initiatives parallel to public universities psychology education. We emphasize university and curricular variables in our analysis since most undergraduate teaching of psychology in the last fifty years has remained oblivious to advances regarding scientifically-oriented psychotherapies, greatly contributing to the current state of affairs.

Method and procedure

With the aim of providing a coherent narrative about the main events that marked the development of Argentinian clinical psychology and psychotherapy during the XX century, we analyzed several primary and secondary sources in the context of broader philosophical and theoretical debates on clinical psychology and psychotherapy research. Following recent recommendations on the methodology of historical research in psychology (Klappenbach, 2014), we first defined our working hypotheses: the clinical reading of psychological phenomena has been a constant during the XX century in Argentina, but with different theoretical perspectives and emphasis varying in

accordance to differing historical periods and processes. We then surveyed the existing historical scholarship on clinical psychology and psychotherapy in Argentina during the XX century.

In order to critically assess secondary sources and to prove or disprove our hypothesis, we retrieved and analyzed primary sources on psychology, psychiatry and psychoanalysis significant to our aims, beginning with the turn of the century and up to the 1980s. After analyzing primary and secondary sources, we summarized and organized the retrieved historical data in three historical periods which we argue define several key issues regarding how clinical psychology was conceived in Argentina, which psychological theories dominated such conception, who were some of the main figures that produced conceptual and technical advances in the field, and which were some of the main debates on controversies when understanding—and treating—clinical phenomena.

Results

Historiographic issues and psychotherapy in Argentina between 1870 and 1930: Medical and psychiatric circles

As far as modern psychotherapy is concerned, there exists wide consensus on conceiving clinical practice based on a theoretical model of the mind as a legacy attributable to the figure of Sigmund Freud (Fernández-Álvarez, 2008b; Strupp & Howard, 1992). Nevertheless, multiple historical analysis trace back the origins of clinical psychology and psychotherapy to movements such as confessional practices, moral treatments and mesmerism (e.g., Cautin, 2011), to Scottish faculty psychology (eg., Sokal, 2006) and to often-forgotten figures of functionalism like L. Witmer and his psychological clinic (Benjamin Jr., 2005). Hence, there exists a link between psychotherapy's problematic definition and its heterogeneous, multi-layered historical roots.

In this context, the danger of presentism or historiographic finalism (Dehue, 1998) when defining psychotherapy as a mean to guide historical reconstructions is evident. Since we assume that psychological fields and categories are intrinsically historical (Danziger 1990, 1993; Smith, 2005), we must grant that what we refer as psychotherapy today is not what philosophers and psychiatrists at Buenos Aires in 1900 had in mind when using the

same term. In line with critical-presentist approaches (Buss, 1977), we assume that, while psychotherapy has undergone significant changes during the last century, a certain core of meaning in psychotherapeutic activities—or a certain family resemblance, in the terms of Hübner (1983) and Danziger (1994)—has survived across the decades regarding the field.

An international definition of psychotherapy adopted by the American Psychological Association in 2012 identifies it as the “informed and intentional application of clinical methods and interpersonal stances derived from established psychological principles for the purpose of assisting people to modify their behaviors, cognitions, emotions, and/or other personal characteristics in directions that the participants deem desirable” (Norcross, 1990, p. 218). Naturally, this depiction entails a conceptualization of psychotherapy as a therapeutic application, understood as an amalgam of science and art supposed to resort to as much theoretical and empirical evidence as possible, according to the limits of the irreducible ideographic character implied in any treatment (Hoffman & Weinberger, 2007). Other similar definitions emphasize that psychotherapy, as an activity related to mental health, is based both on theories, on technologies and on interactions between the therapist and the client, aiming to efficiently reach agreed, consensual changes (Fernández-Álvarez, 2008b). Treatment guidelines clearly require a grounding in evidence generated by both basic and applied research, hence the research-oriented nature of psychotherapy's empirical domain.

In brief, these definitions seem to converge in that psychotherapy involves a psychological service provided by a health-related science professional, aimed at providing a patient's mental health and through variable techniques. Such kind of definitions are operative to historical inquiries, not only because their use by previous researches (Cushman, 1992; Fernández-Álvarez & Pérez, 1993; Strupp & Howard, 1992; Vilanova, 1994a), but also because they constitute the products of consensus by professional psychologists. Retrieval from historiography always implies epistemological and theoretical standpoints, as well as previous definitions (Weimer, 1974). Social historiography of science (Danziger, 2013; Shapin, 1982; Sokal, 1984), albeit historicist-minded and critical of linear, backwards historical writing, conceives that

definitions product of socio-professional, institutional or disciplinary agents—in contrast with theoretical, abstract or purely conceptual definitions—can fruitfully structure historical reconstructions. Hence, psychotherapists' conceptions of their own empirical domain, in Danziger's (1993) sense of the term, are necessary starting points for our historical analysis.

Considering such conceptions as starting points, we find in Argentina that the first graduate theses on the subject, authored by psychiatrists from 1906 onwards, define psychotherapy as “the action that the psychism of the doctor can exert on the ideas of the ill” (Agrelo as cited in Del Cueto, 2010, p. 350), or as the therapeutic that aims to the patient's “intellectual and moral [pathologic] element” (Meroni as cited in Del Cueto, 2010, p. 350). Through the emphasis both on the authorized professional's influence on the will of the alienated (Bonavia, 1913) and on the isolation of the latter from damaging environments (Lagos, 1906), clinical treatment of mental illnesses constituted a true, coherent matrix for the then nascent Argentinian psychology (Vezzetti, 1988). Nevertheless, defined as a clinical practice linked to psychic maladies and carried on by physicians through the so-called moral medicine, psychotherapy as a discipline began in Argentina around 1870, when a marked proliferation of public and private psychiatric institutions started to sprout parallel to an equal proliferation of works and theses on mental pathologies (Ingenieros, 1937)¹. Hospitals, asylums and medical wards were the key agents in the treatment of mental illnesses until approximately 1930 in Argentina. In 1854, for example, the first two public asylums for demented people were created in south Buenos Aires. The Hospital for the Alienated Women (Hospital de Alienadas) was first directed by Ventura Bosch, a physician and figurehead of the vernacular psychiatry, and the San Buenaventura Hospital (Hospital de San Buenaventura) was first directed by José Uriarte, also a physician. The Hospital for the Alienated Women had its own laboratory since 1912, when

research on the biological underpinnings of psychopathology began under the leadership of Christofred Jakob (Rossi, Ibarra, & Jardón, 2012a; Vilanova, 1994a).

In the wake of the proliferation of asylums, colonies for the insane and hospitals in Argentina started by Domingo Cabred (another Argentinian doctor) around 1870, private institutions with psychotherapeutic aims and methodologies also began to appear (Ingenieros, 1937)². José Ramos Mejía, a doctor with philosophical and sociological inclinations, was appointed in 1880 as the first director of the Phrenopatical Institute, where many key figures for psychology and psychiatry, as José Ingenieros, Francisco de Veyga, Carlos Octavio Bunge and Rodolfo Senet, were educated and trained as Mejía's disciples (Ingenieros, 1988a; Vezzetti, 1991; Vilanova, 2001). The Hospital de Alienadas was later renamed as Hospicio de las Mercedes (Mercedes Hospice) as a tribute to the saint of the crazy and the delinquent (Vilanova 1994a).

This last point is very significant to the period here analyzed. Psychology in Argentina between 1890 and 1920 was strongly oriented towards psychopathological matters and was thoroughly permeated by the thought of French pathologists like Ribot, Grasset and Charcot (Klappenbach, 2013; Piñero, 1988a; Stagnaro, 2000), thus making non-professional psychologists—philosophers, essayists, and psychiatrists alike—an important collective in the definition and study of psychotherapy-related phenomena (Klappenbach, 2006a; Vilanova, 1996a). Simultaneously, in a positivistic vein similar to the one present in many other Latin-American nations around the time (Campos, Jacó-Vilela, & Massimi, 2010; Mardones Barrera, Fierro, & Salas, 2016), what classified as mental illnesses or alienations in Argentina towards the XX century often were the issues that the government, or more precisely the dominant elite, perceived as detrimental to the process of national organization and to the formation of a common national character, in the wake of the processes of massive immigration of Europeans to South America (Ablard,

¹ Towards the first decade of the twentieth century, Ingenieros (1937) identified more than 15 mental institutions for alienated people in Argentina.

² Ingenieros (1937, p. 194) estimated that towards 1919 there were 15,000 alienated people in Argentina: 8,800 institutionalized and 6,200 located with their families. There were also

10,400 retarded people in the country. Consequently, there existed 1.82 alienated citizens and 1.30 retarded per thousand normal people.

2008; Vilanova, 1998, 2001). For example, the alienated were often socialist immigrants or prostitutes, and the alienations compromised phenomena ranging from alcoholism and delinquency, to idleness and tendency to disturb public peace (Rossi & Ibarra, 2010; Rossi, Ibarra, & Jardón, 2012b; Vezzetti, 1985). Thus, matters constitutive to the social question, often of criminal nature, were perceived and defined as objects of psychotherapeutic (psychological and psychiatric) intervention (Ingenieros, 1955; Rossi, 2012; Talak, 2014; Vezzetti, 1988). Consequently, specific institutes as the Criminological Institute of Buenos Aires organized by José Ingenieros studied phenomena indirectly linked with psychotherapeutic applications and considerations, such as anthropometry and individual differences in delinquents until 1930 (Miceli, 2006; Vilanova & Di Doménico, 2004).

The rationale of such interventions can be explained through the theoretical and praxeological groundings of physicians and psychiatrists. Such groundings included of “a caritative democratism, in the vein of Pinel’s or Esquirol’s, and a mechanistic technology of anatomic-clinical orientation, inspired on the ideas of Georget, Falret and Morel, although with a clear predominance of the first orientation” (Vilanova, 1994a, p. 79). For example, therapy received by women often prescribed praying and included the promotion of virtue and domestic manual abilities, while insane men were incited by the therapist to imitate the movements, behavior and attitudes of the urban, cult man. Consequently, psychotherapy in fin-de-siècle Argentina relied on suggestion as a method, emphasized rational persuasion of the patient’s will and behavior and supported the institutionalization and isolation of patients (Del Cueto, 2010). José Ingenieros, Ramos Mejía’s disciple and a pioneer of Argentinian psychology, best summarized these trends in his experimental (longitudinal, naturalistic and observational) researches on neurosis and hysteria at the beginnings of the XX century, from which he recommended suggestion, hypnotism and directive therapy as psychotherapeutic methods complementary—and even more efficient—in relation to psychopharmacological treatments (Ingenieros, 1956).

Channeled through specific university psychology courses (De Veyga, 1988; Ingenieros, 1988b;

Piñero, 1988b) and in line with a theoretical dichotomy structural to Argentinian psychological diagnoses of social and cultural problems (Vilanova, 1996a) towards 1900 we find two psychosociological conceptions as the roots of autochthonous clinic-pathological considerations. On the one hand, certain scholars adhered to racism, evolutionism and hereditary degeneration theories in the form of a Darwinian, bio-sociological determinism. An illustrative example was Lucio Meléndez, Argentina’s first psychopathology professor, of Cabred himself and even of Ramos Mejía (Vilanova, 1999). On the other hand, certain scholars accepted biological, congenital conceptions of mental diseases but combined them with ambientalist, exogenous and toxicological etiologies and nosographies. The works of José Borda and Florentino Ameghino (Dellacasa, 2000), and the clinical labor of Ingenieros himself (Ingenieros, 1955, 1956), are representative of this complex alliance. The naturalism and positivism espoused by these psychotherapists emphasis—in a clear broad sense—was in Argentina a true state policy, and at the same time the ideology of both the dominant governmental elite and social, political and medical scientists, who embraced the doctrines by Spencer, Smith, Comte and Bentham (Klappenbach, 2006a; Talak, 1999, 2005; Vilanova, 1998, 1999). Vilanova (1994a) quotes Lamarck, Spencer and Darwin’s evolutionism, Comte and Stuart Mill’s epistemology, Fechner, Helmholtz and Wundt’s psychophysiology, Ferri, Morselli and Lombroso’s criminal anthropology, and Ribot, Janet and Dumas’ medicalist psychopathology as theoretical influences on Argentina’s first alienists and psychologists.

Such theoretical outlooks were often based in empirical (sometimes experimental) replications of clinical phenomena, such as hysteria, hallucinatory psychoses, suggestion and social aggressivity among others. This was directly inspired by the tradition of French psychopathologists at physiologically-oriented laboratories like the one directed by Horacio Piñero since 1898 (Vilanova & Di Doménico, 2004), even if most Argentinian psychology laboratories didn’t produce original knowledge through research, instead constituting

didactic devices with pedagogical aims (Klappenbach, 2006a, 2013)³. It could be stated that the whole intellectual context of Argentinian psychotherapy between 1870 and 1920 was permeated by a naturalist-materialist, medical and sometimes sociological conception of psychopathological phenomena. The treatment of mental illnesses through verbal and nonverbal means, although identified as psychotherapy, was an exercise exclusive by law to physicians and psychiatrists, and towards 1930 it had been consolidated as incumbency of the medical field (Klappenbach, 1995a).

The latent positivism, naturalism and scientism in most of these authors and institutions was greatly revised by the so-called anti-positivistic reaction: A movement that flourished around the 1920s marked by philosophical, vitalist and phenomenological orientations channeled through scholars like Alejandro Korn and Coriolano Alberini (Klappenbach, 1995b, 2002; Vilanova, 1990, 1995b). As a movement with axiological and humanistic concerns, this reaction philosophically and metaphysically redefined psychological knowledge-claims and, hence, psychotherapeutic outlooks and approaches. In this period's readings and diffusion of German-speaking philosophers some authors located the conditions of birth of future dogmatical and anti-empirical orientations for Argentinian psychology. Especially after the 1930s, in Argentina:

Psychology was a part of philosophy in a classical sense that excluded empirical studies. The development of forms of philosophy near to existentialism or thomism, were epistemological obstacles to the new models of psychology developed principally in the United States, where technical intervention on human behavior was the main goal (Klappenbach, 1995b, p. 100).

Clinical psychology between philosophy and positivism: Professionalization of psychology and the psychoanalytic redefinition of psychotherapy

Three schools of psychotherapy condensed in Argentina towards 1930: psychodynamic, psychiatry and pedagogy, objective psychotherapy rooted in Russian reflexology, and —from 1940 onwards— phenomenological psychotherapy (Bermann, 1959). Although the second school had strong, concise exemplars like Azcoaga, Merani, Thenon and Ponce (García, 2015), neither reflexology nor phenomenology could compete to the progressive advance of subjective, dynamic and unconscious conceptualizations of psychopathology. Pavlov, Bekhterev and existential analysts like Moss and Binswanger never truly constituted a systematic alternative to Freudian doctrines.

The reception of psychoanalysis in Argentinian medical and philosophical circles was an early one. Since around 1910, Freudian doctrines began to infuse the thought of Argentinian professionals (Vezzetti, 1996), mainly through secondary sources from French scholars. Many psychiatrists in Buenos Aires began to incorporate psychoanalysis to their theories —mostly somatic explanations of mental illnesses—, crafting an uneasy alliance between orthodox, Freudian psychoanalysis and heterodox (vernacular) explanations of medical phenomena (Plotkin, 1996a). The Viennese neurologist doctrines found in Argentina both sympathetic physicians and philosophers, like Merzbacher (1996), Ponce (1996), Beltrán (1996) and García Martínez (1996), as well as thorough but rational critics, like Mouchet (1996). Since many of these scholars taught psychology courses, psychoanalysis was soon included in their teachings (Rossi, 2000), especially in the University of Buenos Aires (UBA). Thus, began a slow incorporation of psychoanalysis into Argentinian scientific, cultural and even literary circles. By the 1930s, Freud was relatively well known by health-related professions, especially in psychiatry, the discipline that took advantage of the lack of professional psychologists and quickly claimed exclusive legal rights to psychotherapy (Bermann,

environments such as hospitals (Brooks III, 1993; Nicolas & Murray, 1999).

³ In this regard, early psychology in Argentina (e.g., Ingenieros, 1956, 1957) faithfully followed French psychopathologists like Ribot and Janet in asserting that experimental didn't mean objective research in controlled settings, but longitudinal observation of single cases in non-controlled

1936)⁴.

Nevertheless, it was with the local institutionalization of psychoanalysis that the influence of Freudian doctrines in Argentina experienced a process of accelerated progressive and systematic expansion and diffusion. The Argentinian Psychoanalytic Association (APA) was founded in 1942, well before any psychology-related professional institution or association, fifteen years before the first local psychology university degree, and was recognized officially in 1944 by the International Psychoanalytic Association. Founded by local as well as European emigres with psychoanalytic orientations like Angel Garma, Arnaldo Rascovsky and Enrique-Pichón Rivière, and with a clear emphasis on the treatment of neurosis and of psychosomatic illnesses, the APA enabled the starting of official training programs through didactic analysis in Argentina (Balán, 1991).

The reclusive character of APA's psychoanalysts, as well as their isolation in regards to non-psychoanalytic psychiatric circles until 1950 has been well documented (Plotkin, 1996a, 2003; Dagfal, 2009). This severing of ties regarding international and local intellectual circles greatly contributed to craft Argentinian psychologists' attitudes towards empirical research, in psychology as well as in psychoanalysis. According to multiple historical analyses (Braakmann, 2015; Cautin, 2011; Vilanova, 1990, 2003b), the 1940s were marked, especially in the United States, by the gradual appearance of controlled research on clinical processes and, in a broad sense, of empirical research in psychotherapy. Often backed by research teams, figures like Carl Rogers (Rogers, 1942), during the aforementioned decade, and, to a lesser extent, Hans Eysenck (Eysenck, 1952; Strupp & Howard, 1992), during the 1950s, started to reject the idea

that clinical psychology and psychotherapy could be exclusively based on the therapist's previous experience, or on their subjective convictions, however strong they could be.

Previous research (Dagfal, 1996, 1997; Marin, Kennedy, & Boyce, 1987; Papini, 1976; Vilanova & Di Doménico, 2004) has shown that until approximately 1940, Argentinian psychologists conducted systematic, relevant and empirical international-level research on developmental, child and work psychology, among other fields. These works and their philosophical and epistemological foundations would have been the necessary background for a steady reception of international works on clinical psychology and psychotherapy research. Nevertheless, starting around 1920, experimental, laboratory and overall empirical psychological research in Argentina slowly began to diminish or, in more precise terms, to languish after laboratory closures⁵, professor relocations and an agitated political and institutional life that often interrupted the course of university affairs (Dagfal, 1997; Rossi, 2002; Vilanova, 1995c)⁶. The anti-positivistic reaction, the prevalence of idealist and historicist philosophies in the teaching of psychology (Rossi, 2000), and the influences from German metaphysics —Husserl, Bergson and Scheler, for example— greatly contributed to such withering, which around the 1930s started to reflect even in clinical psychology (Sanz Ferramola & Klappenbach, 2000). As referenced earlier, such reaction represented an epistemological obstacle to the reception of non-philosophically oriented psychologies, as behaviorism and humanism.

According to Argentinian phenomenologists, thomists and existentialists as Korn and Alberini, the soul was driven by collective, unconscious ax-

⁴ Psychoanalysis found local scholarly reception in several Argentinian journals: *Psicoterapia* ('Psychotherapy'), for example, was initiated in 1936 by psychiatrist Gregorio Bermann and was the first Spanish-speaking journal specific to the field.

⁵ There are certain, isolated exceptions to this. For example, after the 1940s University of San Luis and University of Córdoba retained specific, empirically-oriented research groups (Piñeda, 2008). But it has also been noted that because of the scarce enrollment at psychology careers in those universities, their effect on reversing the psychoanalytic dominance in the country was, and has been, negligible (Klappenbach, 2000, 2004; Polanco & Calabresi, 2009).

⁶ For example, according to Vilanova (1995c), the first military dictatorship in Argentina that began in 1930, while intellectually keen towards Germanic, fascist anti-positivistic trends, intervened universities and enabled doctors in theology to teach psychology courses, thus leading to laboratory closings and overall depreciation of naturalistic-oriented psychology. As noted by Dagfal (1997) and Vilanova (1995c) the government of Juan Domingo Perón (1943-1955) greatly interfered with university life too: first, it exonerated professors and forced resignations of relevant scholars. Second, and in line with the 'anti-positivistic reaction', it affirmed the habilitation of philosophers and pedagogues in teaching psychology, and forbade experimenting on human subjects, thus negating the definition of psychology as an empirical (although not necessarily natural or experimental) science.

ologies, and psychopathologies were mostly volitive, spiritual or metaphysical. Between 1921 and 1949, when Alberini occupied the psychology chair that had been previously taught by the naturalist, positivist-minded Ingenieros at the UBA between 1907 and 1911, such Germanic humanism and subjectivism impregnated psychology and psychotherapy-related matters (Plotkin, 1996b). Consequently, students of these courses that were to become professors —like philosophers García de Onrubia and Enrique Mouchet— often reproduced similar outlooks during the 1940s (Dagfal, 1997; Rossi, 2000).

When this philosophical psychology melded with psychoanalysis' early institutionalization in Argentina, it seems to have also impeded or even distorted the local reception of empirical advances in many psychological fields, especially in psychotherapy, in various ways (Vilanova, 2002). In 1954, the First Psychology Congress had place in San Miguel de Tucumán, where the need to create a career in psychology at the university level was made explicit. During the following decade, the first fourteen careers in the country were organized: Six in national public management universities, six in national private management universities and two in provincial educational institutions (Klappenbach, 2015). The curricular programs of these careers were developed from the beginning in a context characterized by the predominance of the medical and psychoanalytic field. Hence, such hegemony stimulated a clinical, professionalist bias to the detriment of other application areas such as research or education and other theoretical orientations such like humanism, behaviorism or cognitivism.

Psychoanalysis entered the discipline's mainstream at its professionalization, which in Argentina took place between 1955 and 1966 with the creation of psychology grade careers. While theoretical alternatives to psychoanalysis in Argentina towards the 1960 did undoubtedly exist (Kohan, 1978a; Saforcada, 1969), psychoanalysis was the theory that permeated most debates before, during and after the professionalization. From 1960 onwards, such theory constituted the core of multiple polemics regarding graduates' legitimate fields,

competences and legal exercise, to the point where what was most debated wasn't what psychology was, but what psychologists were and what could they do as applied professionals, always in a Freudian key (Klappenbach, 2000, 2007). International theoretical issues, or advances in basic and applied research were thus necessarily occluded. It has been noted that in such context, most professors at psychology careers were orthodox or heterodox psychoanalysts, psychoanalytically-oriented philosophers and psychiatrists (Dagfal, 2009; Plotkin, 2003; Vilanova, 1993), with scarce or null knowledge of theoretical and professional advances in psychology towards the mid-1950s (Moreno, 1997; Polanco & Calabresi, 2009; Saforcada, 2008). Regarding psychoanalysts, their inclusion to university chairs was a consequence of contracts made between the APA —a private institution unregulated by the state— and several universities (Horas, 1961; Kohan, 1988). Thus, psychoanalysts' ideology regarding clinical psychology and psychotherapy research soon spilled to public university education, where massive amounts of students with little or null previous knowledge of the field were eager to find and adopt a professional identity (Dagfal, 2009, 2014; Delucca, 1994). At a pedagogical concrete level, what students often found was the caricature, demonization and ideologization of empirical, hypothetic-deductive research in general (Kohan, 1978b)⁷. At an applied level, what they found was a professionalist, reductively-clinical and outdated model of psychology (Saforcada, 1969). In terms of Vilanova (1993):

psychology careers were founded on preexistent (Philosophy and Literature, Humanities) departments. Faculty was also precarious since instead of hiring international scholars to fill university chairs, appointed professors belonged to other disciplines, lacked of real identification with psychological science, and were poorly informed about it. The absence of research resources and the mentioned scientific disidentification allowed the installation of a verbalist and speculative tradition, centered on

⁷ Kohan (1978b) precisely denounced how the scientific method nodal to research in psychology through observation,

conjecture, deduction, replication and falsification was identified in the teaching of psychology with positivism, ideology and reductionism.

clinical judgments and initiation rites. Legislative neglect and the presence outside universities of trans professional clinical corporations (which nonetheless were present in the former through directives at psychology careers) conspired together in the nullification of psychologists' socio-professional identity (p. 201).

In such setting, clinical psychoanalysis soon overshadowed other psychological alternatives, both theoretical (humanism and reflexology, in particular) and professional (vocational guidance and psychotechnics, for example) (Klappenbach, 2007; Moreno, 1997). Since the appearance of psychologists as new socio-professional agents meant the dispute of the psychotherapeutic field (Fernández-Álvarez & Pérez, 1993), towards the 1960s psychotherapy appeared at the center of multiple, multi-layered debates. Certain disciplinary ones revolved around which professionals were to be allowed to conduce it: Psychiatrists, psychoanalysts or psychologists. Most debates, carried out by the first two stronger, older professions, considered psychologists unable to conduct clinical psychology (Klappenbach, 2000, 2007; Dagfal, 2006). Psychiatrists and pedagogues collectively communicated to legislative, university and other public-managed instances stating that psychotherapy could only be practiced by physicians and that psychologists could collaborate with the former only "in personality study and research" (Tercera Conferencia Argentina de Asistencia Psiquiátrica, 1959, p. 474). Here, research essentially meant treatment, furthering the confusion between controlled investigation and clinical practice. Such legally backed monopoly of mental health was strongly held by professionals up to around 1965 (Bermann, 1959; Monasterio, Rolla, Tobar García, & Ravagnan, 1960; Moscovich, 1964; Olivera, 1964), when changes in Argentina's institutional and political life slowly marked the appearance of personalities and actors that progressively demanded the psychologists' rights to psychotherapy (Escardó, 1965). Nevertheless, towards 1975 there still existed considerable medical opposition to granting psychologists the right of

conducting psychotherapy (Brignardello, 1975).

Other related controversies involved defining if psychologists were auxiliaries of psychiatrists — thus unable of conducting treatments— or were autonomous, scientifically-based professionals that could carry out clinical and non-clinical activities alike. Here again, until the 1980s psychologists were considered as appendices of the medical profession, and thus were legally unable to conduct psychotherapies, although most graduates did so contrary to what was stipulated by professional and legal regulations (Vilanova, 1990). Influential psychiatrists demanded the subsuming of non-somatic therapeutic treatments (that is, psychotherapy) in medical sciences (Bermann, 1964)⁸. At Argentina's first national meeting on psychotherapy in 1962, and according to panels exclusively conformed by psychiatrists, the field was methodologically divided in four kinds: hypnosis, hypnoanalysis and psychoanalysis, psychoanalytic, rational, and personality psychotherapies (Bermann, 1965). To local psychiatrists, such methods could be applied only by their professional kin, psychologists constituting auxiliary staff (Lucero Kelly, Kusnir, Spiguel, & Tavella, 1960). Psychiatrists' paternalism towards psychologists in this period is further reflected in collective works where physicians and psychiatrists were the professionals writing about psychology, diluting the latter into the former (Bohoslavsky, 1973).

Moreover, in a sense a dead end was reached towards the 1970s regarding empirical or research-based psychotherapy because of Argentinian psychiatrists' and psychoanalysts' professional resistance to consider and include regional and international psychological advances on the field into their practice and teaching. With no systematic updating on psycho-clinical subjects and issues, with bleak links with the field's international scholarly journals and associations and practically ignoring the blooming on psychotherapy research in North America (Cautin, 2011; Strupp & Howard, 1992), towards 1970 psychotherapy in Argentina was, according to Serroni-Copello (1997), in a pre-scientific, pre-rational state. This was recognized even by certain psychiatrists, whose surveys showed

⁸ Bermann's intent soon found further legal support. In 1967, a law sanctioned by the Argentinian government regarding the professional exercise of physicians defined psychologists as psychiatrists' auxiliaries, forbidding psychologists' practice of psychotherapy and of psychoanalysis (Klappenbach,

2000). The 1972 military dictatorship furthered such restrictions, even denying psychologists the right to research, and stipulating that their only responsibility was to administer psychological tests.

that in Argentina hypnotism, suggestion, zen-Buddhism, pastoral psychotherapy, spiritism and curanderism passed as psychotherapies, and were cultivated by many physicians (Bermann, 1965). Nevertheless, Freudian and Kleinian psychoanalysis were clearly the most known and applied psychotherapies, by far surpassing the second, main psychotherapy in Argentina towards the 1960s: a peculiar and eclectic mix of Pavlovian, politzerian and dialectical doctrines with neurophysiological bases and environmental, adaptive aims, called rational psychotherapy (Etchegoyen, 2001). And while by the 1960s individual psychotherapy had begun to be contested by other forms of clinical psychology —mainly group and family psychotherapy—, such alternatives were often of psychoanalytic nature (Macchioli, 2012b).

This state of affairs cannot be exclusively attributed to psychiatrists' and psychoanalysts' lack of knowledge on psychotherapeutic alternatives to their own preferred methods. Towards 1970, non-partisan, eclectic and general overviews of psychotherapy as a field had been effectively available in Spanish for at least 20 years. In 1947 an Argentinian publishing house, Paidós, had edited in Spanish E. Mira y Lopez' translation of Schilder's 1938 classic *Psychotherapy*. Moreover, in 1942 Paidós had edited and published Mira y Lopez' own *Handbook of Psychotherapy* in Spanish. These works were widely read and cited by Argentinian professionals (Falcone, 2013; Rossi, Falcone, & Ibarra 2014). Hence, professional allegiances and intellectual-gremial interests were at the base of Argentinian psychoanalysts' conception of psychotherapy. Accordingly, national journals and bulletins on clinical subjects were progressively occupied by psychoanalysts and psychoanalytic themes (Fernández Álvarez & Pérez, 1993; Klappenbach & Arrigoni, 2011). What seems missing in local authors towards the 1970s is the notice of international, empirical, research-based advances on clinical psychology and psychotherapy which were published in books and, especially from 1960 onwards, took the form of limited, concrete investigations published in specific, international journals.

Interestingly, as an axis of these issues and debates, psychoanalysis, which at this point had distanced itself from psychiatrists and somatic-oriented physicians, passed not only as a scientific psychology but as the only theoretical program that defined psychologists as psychotherapists by need (Brignardello, 1975; Danis, Bohoslavsky, Malfé, Siquier de Ocampo, & Berlín, 1970). Nevertheless, since psychologists were trained in psychoanalysis at the universities, and since psychotherapy had been monopolized by psychoanalysts and psychiatrists, APA-members, who simultaneously were professors, dissuaded students from pursuing clinical psychology as a professional enterprise, while at the same time pressed the same students to undertake personal analysis with the aim of improving their training. Professors such as Mauricio Knobel, while declaratively legitimized psychologists' claim to conduct psychotherapies, identified the entire psychotherapeutic field with psychoanalytic theories and therapies, and considered that the education and training, which are demanded to any psychotherapist, were not provided by accredited, public universities but by unregulated, private institutions in the form of reading groups, seminars and above all, self-analysis: Every psychotherapist "should have the experience of a psychoanalytic personal treatment" (Knobel, 1973, p. 234)⁹. Developing such idea, another influential psychoanalyst at psychology careers, while detailing the personal prerequisites for any psychotherapist, further stated that

The psychotherapist is —must be— someone who, as humanly possible, has come to know himself in his most intimate and hidden springs, who has successfully overcome his neurotic conflicts ... The profound verification of such conditions can only be achieved *during the long psychotherapeutic dialogue that constitutes didactical [analysis]* (Ostrov, 1973, p. 259; emphasis added).

Complementary proposals by other professors asserted that "with psychoanalysis, psychology is inaugurated as a science ... marking a breaking point with pre-scientific psychology" (Grego &

⁹ Paradoxically, Knobel acknowledged the distinction made by Shakow (1969) between diagnosis, investigation and psychotherapy in clinical psychology, but in the lines of other Argentinian psychoanalysts, he simultaneously identified

clinical, private practice with research and considered psychoanalysis as a normative matrix for the entire, trans-theoretical field of psychotherapy.

Kaumann, 1973, p. 71). Such theoretically-laden notions led students to naturalize the idea that psychology and psychotherapy could not be conceived without reference to psychoanalysis, and furthered the acceptance that “be it any way in which they interact, the relation between the psychologist and the psychoanalyst is always a professor-student relation, where the psychologist is the student” (Students and Authorities of the Universidad de Buenos Aires, 1973, p. 27).

In such context psychotherapy was often defined exclusively in psychoanalytic terms. For instance, the Marxist psychoanalyst José Bleger, whose lectures and charismatic style marked several cohorts of Argentinian psychologists in the late 1950s and early 1960s (Dagfal, 2000, 2009; Klappenbach 2000), defined clinical psychology as a research method in the sense of (and complementary to) experimental inquiry (Bleger, 1999). Bleger’s was not an isolated case, as other scholars such as Jaime Bernstein adhered to such views (Rossi, 2000). In the UBA, towards 1964, “eleven mandatory courses [were] of clear psychoanalytic orientation, seven of them offered by APA members” (Plotkin, 2003, p. 232), while in the University of the Litoral, the entire orientation was psychoanalytical since the curricula was created in 1955 (Klappenbach, 2000).

The years between the professionalization of psychology in Argentina in 1955 and the last civic-military dictatorship in 1976 showed an exacerbation of such tendencies. Psychoanalysis was considered the founding science of the structural, as opposed to the phenomenal, and the Freudian unconscious was considered the condition of possibility of scientific psychology (Harari, 1975)¹⁰. The dissolution of democracy and university life in 1976 in the wake of the mentioned dictatorship greatly precluded open, scientific debates and further weakened psychology’s links with international and regional empirical advances (Sanz Ferramola, 2000).

Clinical psychology beyond psychoanalysis: Systemism, cognitivism, integration and the proliferation of scientifically-based clinical outlooks

Argentinian psychology began to change slowly during the 1970s. At a disciplinary level, the quantitative growth of psychologists that claimed rights to conduct psychotherapy, and their progressive institutional organization, led to the gradual inclusion of psychologists into the psychotherapeutic field. At a theoretical level, certain scholars opposed the solipsisms caused by all the above described approaches, pleading for greater communication between diverse psychological and psycho-clinical orientations (Fernández-Alvarez, 1970; Vilanova, 1985). But it was not until the late 1980s and early 1990s that such individual and isolated pleads became systematic and collective proposals regarding clinical psychology and psychotherapy.

The dissemination of new psychotherapeutic approaches started in the late 1970s. Unlike the previous ruptures in the psychoanalytical movement, all motivated by theoretical or political reasons, a new type of cleavage divided the field into different groups. This divergence was originated in pragmatic as well as ethic postures challenging the efficiency of the psychoanalytical framework. As a consequence, two major leading trends emerged: The family systems psychotherapies and the cognitive theories of psychotherapies.

The germ of the emergence of systemic psychotherapeutic model in Argentina can be traced back to the first attempts to address family issues as an object of study and psychological intervention. In this sense, in the mid-1940s, the figure of Pichon-Rivière became relevant as he integrated theories from diverse origins as English psychoanalysis (especially Melanie Klein’s theoretical perspective), the concept of Gestalt, the field theory by Kurt Lewin, the concept of role from American social psychology and the communication

¹⁰ “According to a survey conducted in Buenos Aires between 1961 and 1970, the Argentinian mode psychologist of this period—that is, the mean psychologist statistically derived from surveyed data— was a 31-year old woman, married to a physician or a psychologist, with two children, graduated from the UBA, that works in clinical psychology and, more concretely, in psychoanalytical therapy with neurotic patients ... This person started working at an institution

without any remuneration; she did it to practice what she couldn’t at the university ... *This person reads only Spanish-language published journals, specially Argentinian journals. At the moment she is under psychoanalytical treatment, with the finality of satisfying the requirements of didactic analysis for future analysts*” (Ardila, 1979, p. 83; emphasis added).

theory in Bond Psychiatry. In this intellectual context, the person was conceived not as an isolated individual but as a part pertaining to a whole: the family group. The subject's mental health was understood within the interaction of such group. Thus, the family gained importance as the unit of study to grasp the etiology, diagnosis and prognosis of the treatment.

During the 1960s two lines developed from the mentioned postulates of Pichon-Rivière (Macchioli, 2004): One of the approaches represented by Isidoro Berenstein with a psychoanalytic tint, and the other led by Carlos Sluzki that emphasized the American contributions to communication theory. Considering his notable impact in the country, we shall focus here on the contributions of Sluzki to systemic psychotherapy in Argentina. Alongside Eliseo Verón, they were the first ones to introduce the contributions of the theory of communication and the developments of the School Palo Alto on Family Therapy.

In line with what happens with some of the referents of cognitive therapy in Argentina described later in this work, Sluzki had a psychoanalytic training and was a member of the APA. From 1966, year of the foundation of the journal *Acta*, Sluzki, in his role as deputy editor, translated the works of Gregory Bateson and Paul Watzlawick and the conference by Watzlawick at the Lanús Polyclinic in 1969. As Macchioli (2003) describes, another contribution by Sluzki was conducting and publishing a research in *Acta* about the types of communication in schizophrenia¹¹. Such work was published in three parts between 1963 and 1969, years in which he also released another series of related articles on systemic therapy.

The first International Conference Family and Mental Illness was organized in 1965. This meeting brought together the most representative national figures in the field: Carlos Sluzki, Eliseo Verón, Guillermo Vidal, Isidoro Berenstein, José Bleger and Miguel Matrajt. Nathan Ackerman (New York) and Janet Beavin Bavelas (Palo Alto, California) also took part in the event. In 1970, the

First Congress of Pathology and Therapeutic Family Group took place, in which Pichon, Berenstein and Sluzki had a central role. Since the mid-1960s, the visit of Nathan Ackerman, Janet Beavin Bavelas, Paul Watzlawick and Jay Haley facilitated the exchange of experiences and the consolidation of the nascent field of the systemic tradition in the country.

In 1971, Sluzki compiled the main texts of the School of Palo Alto in *Family Interaction*. In the same year Verón moved to France and Sluzki to the United States, the latter becoming director of the Mental Research Institute (MRI) in Palo Alto in 1981. While the initial formation of Sluzki was psychoanalytic, his position on this theory changed over time. In 1981, he was entrusted the preface of the second edition in Spanish of the classical book *Theory of Human Communication* by Watzlawick, Jackson and Bavelas¹². In the aforementioned preface, Sluzki refers to psychoanalysis in the following terms: "The reconstructive character of this theory also led to the production of circular explanations invalidating all attempts to test the model. Psychoanalysis, using a rigorous language, showed some insurmountable deficiency" (Sluzki, 1981, p. 11).

As mentioned, the Argentinian 1970s were socially and intellectually turbulent. The politicization of the academy caused what Carpintero & Vainer (2005) called the outbreak of the institutions. In 1971, an internal disruption occurred within the APA, leading to the constitution of two dissident groups: Platform and Document (Dagfal, 2009). Plotkin (2003) places this episode as a disruption not only in APA's power, but also in the dissemination and hegemony of psychoanalysis in the country. Argentina's last dictatorship began in 1976 and caused the physical disappearance of nearly 200 workers and students in the field of Mental Health (Carpenter & Vainer, 2005). Psychology was seen as a subversive discipline, reason why teachers of the departments of psychology were expelled and many psychologists had to emigrate (Klappenbach, 2006a). In this context a retreat from public to private sphere took place.

¹¹ According to Macchioli (2003), Sluzki, who had been a member of the Palo Alto MRI since 1965, was at that time in the service of Psychopathology of Lanús as Head of Research. Sluzki took the samples and conducted his research in said Hospital, a work that led to five articles on Family Therapy published in *Acta* during the 1960s. His research

was funded by the Foundations for Research in Psychiatry Found through the WHO.

¹² The first edition of this book cited the aforementioned research carried out by Carlos Sluzki and collaborators in the Psychopathology Service of Lanús.

According to Macchioli (2012b), “regarding family as an object of ‘psy’ intervention, socially-oriented psychoanalysis gives way to a predominance of systems theory” (p. 277). The first representative institutions of systemic therapy in the country appeared in this context, integrated by professionals from psychoanalytic institutions. The Argentinian Society of Family Therapy (SATF) was created in 1978 and, a year later, the Center for Family and Couple. In 1984, the Association of Systemic Psychotherapy of Buenos Aires was created by Pedro Herscovici and Cecile Herscovici, nucleating professionals on systemic theory from Buenos Aires City and the Province of Buenos Aires. Hugo Hirsch, current director of the Private Center for Psychotherapy, was its founding president. In 1989, the Institute of Systemic Buenos Aires was founded under the direction of Alicia Salituri and Omar Biscotti. Systemic School of Argentina appeared in 1996 with the impetus given by its initiators Horacio Rodríguez Serebrinsky and Marcelo Ceberio.

The journal *Latin-American Psychiatric and Psychological Acta* (Acta), directed by Guillermo Vidal alongside Sluzki and Bleichmar as redactors, was the most relevant publication in which these topics were disseminated (Fernández-Álvarez & Pérez, 1993). It is also possible to find articles in the *Journal of Psychology and Group Psychotherapy* published since 1961 and in the *Argentinian Journal of Psychology*, published by APBA since 1969 (Macchioli, 2014, p. 65). *Family Therapy Journal*, the first Hispanic specialized publication, edited by Alfredo Canevaro¹³, was published between 1978 and 1993.

The rise of systemic psychotherapy expanded strongly after the return of democracy in 1983, but their developments were gradually subsumed in a therapeutic current that was then gaining strength: Cognitive psychotherapy. Although these two forms of psychotherapy started to confront the psychoanalytic dominance, the reasons and local contexts in which this occurred are not identical in both cases. Systemic therapy has a longstanding history in our country and its beginnings can be traced back to the unorthodox readings of a social

psychoanalysis that began to focus on the family as an object of interest in the 1940s. In the case of cognitive therapy, while many of its initial representative members also came from a psychoanalytic training, it differs by having a shorter past but a stronger present.

The behavioral-cognitive movement has experienced a significant expansion all around the world since 1980 (Hollon & DiGiuseppe, 2011), being the implemented framework by the most recognized public mental health systems, such as the British system through the stepped care model (Clark, 2011). Nevertheless, at the time of such developments the situation in Argentina was significantly different. Despite the introduction of new developments, such as systemism first and cognitivism afterwards, from the 1980s onwards the psychoanalytical movement saw its most massive expansion through Lacanism. Unlike any other country in the world, except maybe France, the introduction of Lacan’s theory had a strong impact in Argentina, and as happened in France, it served as a reception matrix that made difficult the reception of cognitive and behavior therapies (Amouroux, 2017). In Argentina, behavior-cognitive therapy was often seen by Lacanians as a human technology, as an outlook that denied human dignity and freedom, and as an imperialistic device which reduced psychical problems (Miller, 1994).

Because of the increasingly demand for psychotherapy many others psychotherapeutic expressions arose during the late 1970s and early 1980s. Nevertheless, they didn’t produce a systematic impact nor in the professional neither in the academic scope. As an example, the gestaltic and humanistic movements did not sprout out in the same way as the systemic or the cognitive movement despite the fact that some institutions were founded and persist to these years, such as the Gestaltic Association of Buenos Aires (Asociación Gestáltica de Buenos Aires).

The presence of new psychotherapeutic approaches was destined to the private practice and private institutions since public universities were still dominated by psychoanalysis. In addition, some private universities started to progressively

¹³ Canevaro was an Argentinian doctor who, between 1963 and 1967, studied psychiatry at the universities of Madrid, Hamburg and Paris (there with Henry Ey). On his return home he continued his training with Pichon-Rivière and worked at the Borda Neuropsychiatric Hospital. In 1978 he

was one of the founders and the first president of the SATF. Since 1988 he lives in Italy and continues to contribute to the systemic field developments.

incorporate professors formerly expelled from the public universities by the military dictatorships. Many professors had been exonerated in 1966 due to the military dictatorship led by Onganía, but it was not until 1976 with the last military coup that almost all the faculty of the UBA was obliged to leave their positions, many of them even having their lives at stake¹⁴.

In this sense, the private University of Belgrano was emblematic. Sara Baringoltz and Héctor Fernández-Álvarez, two of the three founders of Argentinian Association of Cognitive Therapy¹⁵ (AACT) in 1992 met there and practically initiated the introduction of cognitive theory and therapy in Argentina, through university courses and through specific editorial undertakings (Fernández-Álvarez, 1997). A key aspect of their understanding of the field was based in the need of supporting the therapeutic interventions in rationale principles derived from research. These agents were among the first Argentinian scholars that, while maintaining strong links to international psychotherapy research and thoroughly trained in the field, publicly recognized the negative effect that psychoanalytic hegemony had had in the growth and development of mental-health services in the country. Therefore, when Héctor Fernández-Álvarez organized the First Conference of Psychotherapy in 1981, Hans Eysenck was invited alongside Rubén Ardila with the aim of confronting psychoanalysts with a behaviorist, scientifically based practice (Korman et al., 2015)¹⁶. Finally, and in direct opposition to the local psychoanalytic trends sketched above, clinicians associated with Aiglé Foundation (García, 1991; Fernández-Álvarez, 2001) defended the idea that research in clinical and psychotherapeutic issues required clear objectives and specific technologies and methodologies in defined, research-oriented environments, and thus should not be confused with clinical practice itself.

Among the private institutions, Aiglé Foundation was the first one to spread an integrative model incorporating a triadic approach based on clinical practice, training and research. Its international reach (Fernández-Álvarez, García, &

Scherb, 1998), unusual in Argentinian institutions, justifies its detailed inclusion here. Aiglé, originally named Center of Psychopathological Studies, was characterized by an existentialist and eclectic approach but rapidly adopted an integrative model based on a cognitive core (Fernández-Álvarez, 2001). The training background of Héctor Fernández-Álvarez, one of Aiglé's founders, was a key factor in the subsequent development of the Aiglé Integrative Model. After a predominantly psychoanalytical undergraduate formation, he had an active participation in the reflexological group led by José Itzigsohn (Fernández-Álvarez, 1970). Likewise, already as a graduate student, Fernández-Álvarez collaborated in the Psychopathology chair of Carlos Sluzki. Afterwards, he established contact with the existentialist approach due to his first clinical in-training at the Hospital de Clínicas of the UBA. During this period, he started to work *ad honorem*¹⁷ both in the Hospital de Clínicas and in the biggest neuropsychiatric of Buenos Aires (Borda Hospital), as well as in a private clinic for autistic children. Fernández-Álvarez incorporated a wide range of therapeutic tools and a new notion of how psychotherapy could be carried through, the integrative spirit being perceptible in this motley spectrum of different influences he had experienced (Fernández-Álvarez, 2008a). Aiglé Foundation was a reaction to the expulsion of many professors from the public universities by the *de facto* government. Considered as a type of internal exile, in the words of Fernández-Álvarez: "I did not have the economic opportunity nor even the mindset to exile myself (before 1976 I had not travel abroad), so I took the decision with other close colleagues to found Aiglé Foundation as an inner exile" (Fernández-Álvarez, personal communication, October 5, 2015).

Aiglé Foundation took a central role in the spreading of the new worthy ideas that were emerging around the world by establishing contact with a vast array of prominent psychotherapists, many of which visited Argentina. Among these relevant figures, Jeremy Safran, Michael Mahoney, Paul Wachtel or Vittorio Guidano must be

¹⁴ Reflexologist José Itzigsohn and psycho dramatist Eduardo Pavlovsky were some representative cases of this scenario, having to flee the country.

¹⁵ Alongside Herbert Chappa.

¹⁶ The conference took place between 12th and 15th November 1981. Plácido Horas, a relevant figure from San Luis,

who had introduced the behaviorism in that province, also participated of the event. In 1985 the second edition of the Conference was organized.

¹⁷ As previously mentioned, by that time psychologists were not authorized to practice in the public health system. Nevertheless, *pro bono* collaborations were unofficially allowed.

mentioned. Hence, the decade of the 1980s constitutes an important period in the history of psychotherapy in Argentina. While the country was returning to a democratic system, psychologists were authorized to practice psychotherapy from 1985 on. Democracy naturally allowed the free functioning of academic and professional institutions. Thus, a noticeable pluralism of theoretical frameworks sprang up (Klappenbach, 2000, 2006a), although undergraduate education (Klappenbach, 2007; Piacente, 1998; Vilanova, 1997) and graduate training (Agrest, 1995) remained overtly psychoanalytic. Further, Aiglé-related psychotherapists were among the first Argentinian psychologists in writing proposed training models in psychotherapy that, far from relying on subjective beliefs and *petitio principii* as psychoanalytic university traditions in the 1960s often did, relied both on students' practices in naturalistic environments (i.e., hospitals, private practice) and on the instrumentation of video and audio recordings, role-playing, therapy-observation instances and self-registries in pre-grade psychotherapy training (Gómez, 1997). This incipient change in Argentina's outlooks on psychotherapy, although clearly outside the local mainstream, psycho-clinical enabled positive—albeit exceptional—reassessments of research techniques as audio-recordings in settings (Sozio, 1992).

Likewise, the international situation was favorable for such local changes since the psychotherapy movement started to sprout out outside Argentina. The development of psychotherapy research has largely contributed to the legitimation of the field. In the 1990s psychotherapy took the concept of evidence-based practice from medicine and the randomized control trials started to arise as a gold standard. In Argentina, there has been scarce research, fundamentally due to the lack of scientific tradition bound to psychotherapy but also due to limited funding (Roussos, 2001) and to the survival of the resilient confusion between research and practice (Constantino, 1997; Vilanova, 1994d). However, the global context was a tailwind and scientifically based psychotherapies gained importance.

In 1992, the SPR Latin-American Chapter was founded and it has been functioning from then on as a platform to catapult Argentinian researchers. Three Argentinians have presided the chapter so far: Elena Scherb (1995-1996), Héctor Fernández-

Álvarez (2003-2004) and Andrés Roussos (2011-2013), and Malena Broun has been recently elected for the upcoming chapter presidency (2018-2021). This chapter was of utmost relevance because it was the organization that practically set in motion the first group of collective, controlled and methodologically-sound studies in psychotherapy research in Argentina, backed up by important international models and their research groups, like H. Kachele from Ulm University and L. Beutler, from the University of Santa Barbara (Jiménez, 2006; Roussos, 2001).

Nevertheless, the few developments carried out by Argentinians in such institution shows how research and practice have been dissociated. The gap between scientific advancements and the clinical work constitutes a deep problem in psychotherapy as a field, and Argentina is not the exception to the rule.

Refocusing on the role of private universities and institutions, the development of systematic courses of cognitive graduate training at them has allowed the widespread increase of cognitive trained psychotherapists. In 1987, the first pure cognitive training institution, the Center of Cognitive Therapy, opened its doors. Led by Sara Baringoltz, it has been mainly devoted to the training of graduate students, and their members have their private practice independently from the institution. Only six years later, in 1993, the first accredited cognitive postgraduate degree started in San Luis, directed by Fernández-Álvarez.

Precisely, Aiglé played an instrumental role in helping to redefine therapists' training. In 1985, the first study groups on cognitive therapy were organized. Within the years, the courses were transformed into annual courses and more recently into official postgraduate formation. In 2003, a specialization degree on family therapy with cognitive orientation and a specialization degree on individual and group psychotherapy (alongside Maimónides University) were accredited by the National Commission for University Evaluation and Accreditation. Lastly, in 2006, alongside the National University of Mar del Plata, it authorized a specialization degree on individual, group, family and bonding (vincular) psychotherapy.

The introduction of the post-rationalist constructivist cognitive therapy by Juan Balbi as well as the creation of the Integrative and Cognitive Therapies' Institute by Herbert Chappa, cofounder

of AACT and a psychiatrist from La Plata, were important steps to strengthen the cognitive movement (Korman et al., 2015). In this sense, the 1990s constituted a period of consolidation for the cognitive therapy in Argentina. Once again, the international context favored the dissemination of cognitive therapies, being the foundation of the International Association of Cognitive Therapy in 1990 a decisive breakthrough. Only two years later the Argentinian Association of Cognitive Therapy was created. The same year, the launching of the Argentinian Journal of Clinical Psychology (*Revista Argentina de Clínica Psicológica*), edited by Aiglé, constituted an aspect of paramount importance since it was the first Argentinian academic indexed publication in which psychotherapists could disseminate their work, particularly empirical research. In 1995, an Argentine psychotherapist, Eduardo Keegan, started to offer cognitive postgraduate formation at UBA, which represented a decisive step towards the incorporation of the cognitive movement into the major public psychology program of the country. Keegan was a key agent in spreading cognitive psychotherapy not only in graduate but also in undergraduate education. In 2000, Keegan started offering a cognitive-behavioral oriented clinical psychology and psychotherapy mandatory undergraduate course, and in 2002 offered the clinical psychology course that had been previously taught by Lacanian-oriented Hector Fiorini.

Although private centers achieved a prestigious position and incremented their clinical assistance, the irruption of the third parties during the 1990s and 2000s posed a new scenario characterized by a massive attraction of clients. This scenario was replicated in Argentina, where public services were privatized and a generalized deregulation of the state occurred (Basualdo, 2003). The health system was not the exception to the rule and progressively the third parties got involved in the mental health system. Psychotherapeutic practice, previously conceived as an exclusively private contract between two agents, started to experience decrease of demand as a consequence of the expansion of the third parties. These were highly interested in adopting brief and focused therapies with the aim of reducing costs.

Beyond the past, towards the future: Conclusions and prospects on psychotherapy in Argentina

Classic characterizations of Argentinian psychology as mono-theoretical and psychoanalytical have probably led to obscure the fact that the field of psychotherapy actually had a complex, often problematic origin, thus naturalizing such mono-theoreticism. Initially a form of medical therapy by law exclusive to non-physicians, psychotherapy in Argentina gradually became contested by existentialists, objectivist and psychodynamic oriented psychiatrists around 1930. The professionalization of psychology, and the ensuing debates from 1955 onwards forced an opening of the field towards other, less somatically-oriented disciplines. While systemism arrived to Argentina during the 1960s, cognitivism and integrative approaches spread in institutional and curricular spaces only towards the 1980s. It would then seem fair to state that current psychotherapy in Argentina, after a century of developments and changes, is a heterogeneous, eclectic field.

Nevertheless, such statement would be oversimplistic and misleading. Psychoanalytic outlooks still have a strong, often exclusive presence in key academic and healthcare institutions, in detriment of more complex, refined and research-based psychotherapies. Such state of things is in turn explained by the social history of Argentinian psychology. Psychoanalysis was the first thoroughly received and institutionalized psycho-clinical outlook in the country. It was also the first theory in which psychology professors were systematically trained in, and it was the alternative to psychiatry at the eyes of the first psychology graduates. Psychoanalysis came to define psychology, psychotherapy and even other non-psychodynamic conceptions of mind and behavior in Argentina, to scholars and to ordinary people alike.

The fact that such historical issues have become chronic, amidst an agitated political life and a remarkable stagnation of university curricula, have prevented developments on systemic, cognitive and integrative clinical perspectives to systematically reach undergraduate and graduate education and training. If we consider that universities are key agents in producing critical, reflective scientists, then the improvement of such agents with regard to psychological training remains an open

challenge for Argentinian psychotherapy. Clinical psychology is the liberal profession *par excellence*, and this has been taken to an extreme in Argentina, where the bulk of psychotherapists do not deem necessary to update their previous knowledge, and where universities often rely on centenary essays to train psychotherapists (Klapenbach, 2015).

Another current challenge to psychotherapy, closely related to the previous one, is the passive role of the State in these affairs. Psychology is considered a matter of public interest in Argentina because professionals' reach regarding populace's health. This has made psychology grade careers the object of disciplinary-peered evaluation, reform and accreditation processes, which began in 2009 and ended last year. Nevertheless, recent analyses (Di Doménico, 2015; Di Doménico & Piacente, 2011) show how limited the impact of curricular reforms have been in regards to the improvement on education and training in psychology and particularly in clinical and psychotherapeutic subjects. In brief, contrary to other countries as the United States or England, state initiatives to control or regulate the profession have been scarce, and the most important and potentially valuable of such initiatives have been deemed as very limited successes.

A third challenge to psychotherapy in Argentina emerges from the scarce data available on what psychotherapists actually do in their private and public work. Because of the historical hypertrophy of private practice, the real work conducted by therapists—their interventions, background theories, and effective behaviors—is not available to citizens or scholars in the form of systematic studies. Hence, there is not objective information available regarding the peculiarities and limitations of actual clinical work, as well as about inert or harmful treatments.

Finally, supervision in psychotherapy in Argentina, since often conceived from psychoanalytic perspectives, constitutes a challenge for academic and non-academic communities alike. Taking the form of initiation rites and often conducted in the context of private institutions, supervision has come to be identified in Argentina as an instance that by itself can replace both training and updating through specific graduate courses, and refinement of previous knowledge and production

of new one through methodical research. Supervision is a quality control process (Fernández-Álvarez, 2015), and ensuring the highest quality in psychotherapeutic decision-making necessarily requires a consistent theoretical and empirical basis. Nevertheless, such productive use of supervision requires updated knowledge on clinical issues: a prerequisite not many Argentinian psychologists could fulfill considering the current state here described.

As we have shown, these contemporary issues and challenges have clear, identifiable historical, intellectual and sociological roots. They are often traceable back to Argentinian psychology's international isolation, to the detrimental modulatory effect of trans-disciplinary corporate interests on professional solvency and identity, and to nationwide politico-institutional instability. Furthermore, all this has led to a national, diffuse "propensity to totalitarian climates and to the success of dogmatic discourses [that have] promoted a professional identity typical of priests from secular cults" (Serroni-Copello, 1997, p. 65).

Considering psychotherapy's advances during this past century, the described challenges in Argentina should be faced with a critical, reflective and rational disposition, through the strengthening of communications and relationships with international scholarship, through the improvement of the training and education of psychotherapists and through the prioritization of the well-being of the population's mental health over partisan, subjective beliefs and likings. In this venture, the knowledge and analysis of the history of Argentinian psychotherapy is an unavoidable, enlightening tool for planning and instrumenting informed, desirable changes. If it is true that the knowledge of history has emancipatory and even therapeutic effects, and if it is also true that "narrow provincial, class and regional prejudices ... substitute for a historically founded background" (Watson, 1966, p. 64), then the collective reflection on the history of psychotherapy of one own's country, while doubly therapeutic, appears as a central task for any rational and critical psychotherapist. Given the current state of Argentinian psychology, such collective reflection seems as necessary as undelayable.

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