The narrative of special education in Sweden – history and trends in policy and practice

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Access to public education that provides equal opportunities for all is a democratic right for every person living in Sweden. In addition, every child should as far as possible be included in the mainstream school. An official story that is taken for granted in Sweden is that an extremely low proportion of children are in need of special support, since there is no categorisation system in the official statistics. However, the results from the interviews of a number of key informants in the Swedish school system and several research studies show the opposite; the proportion of children categorised in practice as being in need of special support has increased dramatically, especially the group of children assigned with neuropsychiatric diagnoses for example ADHD (attention deficit hyperactive disorder) or ASD (autistic spectrum disorder). Furthermore, excluding children from regular school and placing them in special teaching groups has become a common solution. In addition, earlier research shows that there has been a gap between policy and practice in the past and the interview data indicates that this is still the case. This paper explores the implications of growing segregation of children with special educational needs for the idea of an inclusive education system.

Keywords: Sweden, additional support needs, neuropsychiatric diagnoses

Introduction

Sweden is a country internationally recognised as performing well in the area of education, well-being and health providing well developed support services when needed. The narrative of Sweden further includes that this is a country, which has moved away from the labelling of children in school. Thus, a school policy prescribing access to public education that provides equal opportunities for all, without labelling children, has become a democratic right for every person living in Sweden. The catchwords – inclusion and 'one school for all' – indicate schools meeting the needs of every individual offering an equal, suitable and inclusive education of high quality. This has been the most prevalent idea in Swedish society for more than 200 years (Hjörne & Säljö, 2013). In spite of this, a significant number of children continue to be labelled as having special educational needs, often leading to some sort of specialist provision in segregated settings (Persson, 1998; Haug, 1998; Hjörne, 2006). Furthermore, alarming results in the latest PISA examinations in

years 2009 and 2012, especially pointing to poor results for boys and underprivileged children, show that the story of Swedish education as being exemplary is not entirely valid. In this paper, I will further discuss the issue of how learning difficulties are and have been understood in the Swedish school system, addressing the following questions:

(1) How are learning difficulties understood in policy and practice in Sweden today?

(2) How has the narrative of special education and learning difficulties developed over time?

(3) To what extent is there tension between the policy narrative of 'raising standards' and that of 'inclusion' in the Swedish school system of today?

Data have been gathered as part of the Leverhulme Fellowship project (2012–2014) entitled *Special Education and policy change: A study of six jurisdictions*. This has involved analysis of policy and administrative data, statistical data, and narratives evident in semi-structured interviews with the following seven key informants:

- government official from the Ministry of Education (G)
- representative from the National Agency for Special Education (NSE)
- representative from the National Agency for School Inspection (NSI)
- head of school development in a bigger city (LA)
- three head teachers from different schools and municipalities (LS1, LS2, LS3).

The semi-structured interviews conducted in Sweden focussed on the nature and purpose of official statistics; policy discourses and directions; categorisation system and disproportionalities in patterns of identification; special educational needs and international assessment regimes and future trends. The analysis of the data followed these themes, and was rooted within an analysis of the historical development of understandings of learning difficulties and special education in Sweden. First, I will provide an overview of the Swedish school system.

Sweden and its school system – some official statistics

In Sweden there are 9.5 million inhabitants of which about 1.4 million attend compulsory education. The decentralised school system is divided into preschool (1–6 years old); comprehensive school (7–16 years old) and upper secondary school (ages 16–19) (see Table 1). Ten years of education is mandatory, including the last year in preschool and the last year in the comprehensive school. However, most children spend eighteen years in the school system including preschool. In 1992 a free school system was introduced in Sweden. Free schools follow the same curricula as the municipal school system and they are free of charge. Overall about 14% of comprehensive school pupils (primary and lower secondary) and 26% of upper secondary school pupils attend free schools. However, according to the Swedish National Agency for Education, within the big cities up to 50% of the pupils in upper secondary school attend free schools.

Table 1: Numbers of pupils enrolled in preschool classes and compulsory school 2013/2014

School sector	Number of schools	Number of pupils	% of school population (6−16 years old)
Preschool class municipal	3073	99 115	7.2
Preschool classes Free schools	554	10 784	0.8
Primary/lower secondary municipal	4090	794 869	57.8
Primary/secondary Free schools	792	125 960	9.1
Upper secondary municipal	869	242 295	17.6
Upper secondary Free schools	460	85 079	6.2
Special schools etc., see Table 3		17 545	1.3
In total		**1 375 647**	**100**

Source: Swedish National Agency for Education (2013)

The only SEN data gathered at national level in Sweden refer to the following categories of difficulty: a) intellectual impairment; b) deafness; c) hearing impairment, and d) visual impairment. The proportion of children classified as falling into one of these categories has been stable (about

1.5%) for many years and these pupils are usually placed in special schools or special classes arranged for pupils with similar disability, see Table 2.

Table 2: Pupils enrolled in special schools 2013/2014

Type of schools	Number of schools	Number of pupils	% of school population (6–16 years old)
Primary/lower secondary for children with intellectual impairments	630	9,346	0.7
Special schools	10	478	0.03
Upper secondary for children with intellectual impairments	304	7,721	0.6
In total		**17,545**	**1.4**

Source: Swedish National Agency for Education (2013)

Since there are no official statistics concerning other kinds of learning difficulties we have to rely on data gathered by researchers. Several researchers report that the overall proportion of pupils in need of special support in school has been constant over a long period of time, at about 20% (including the 1.4% mentioned above, see for example Andreasson, Asp-Onsjö, & Isaksson, 2013). In one of our own recent studies of the pupil health team in school, we found that the team is at the heart of the process of identifying, defining and categorising school problems. In doing this they continuously re-framed and re-presented pupils and events in school (Hjörne & Säljö, 2012). Thus, the language (or discourse) developed can be seen as a constitutive feature of institutional practices in particular (see also Mehan, 1991). This view of talk as constitutive and as part of human action implies that one approaches 'linguistic behavior, not by referring it to private states in individuals, but by observing its social function of coordinating diverse actions' (Wright Mills, 1940, p. 904). The results from my study shows more specifically that the categories used when explaining learning difficulties, except for the four mentioned above, included ADHD, Aspergers, Autism and Dyslexia etc. (for an in-depth analysis, see Hjörne & Säljö, 2004, 2012). Thus, categories within a psychological-medical language or discourse have become dominant in the field of understanding and measuring learning difficulties within the pupil health team in schools of today (see also Mehan, 2014).

This emphasis on psychological-medical labels for learning difficulties was clearly seen in all of the key informants' interviews. They refer in unison to neuropsychiatric diagnosis, for example ADHD, as the most frequently used category when explaining learning difficulties today. In addition, this use of diagnosis has led to a request for more excluding strategies in school, according to the representative for the National Agency for Special Education, who claims that:

> the use of diagnoses is back and is increasing … the association for Aspergers and Autism for example want to discuss the educational provision for these groups and what they really want are special schools (NSE).

From the NSE's narrative about diagnoses we note that there seems to be a push for special schools from the interest groups representing different disabilities. However, head teachers at the local school cannot decide on arranging special schools at the local level, since these are run by the state. However, head teachers are able to provide special teaching groups and according to key informants (LS1, LS2, LS3), they are increasingly likely to use such teaching arrangements. National statistics on special classes have only been published since 2013 (see Table 5), and as a result they have been hidden from inspection. However, all key informants reported an overall increase in the use of special teaching groups and therefore a rise in exclusion from mainstream classrooms of children in need of special support, especially those with a neuropsychiatric diagnosis.

Drawing on a sociocultural perspective (Wertsch, 1991; Säljö, 1990), it is fruitful to consider the historical development of the policy and language of special education and the understanding of learning difficulties. Therefore, I will continue with a historical review of the how learning difficulties have been understood and explained over the years. What discourses have been influential and what categories have emerged?

A historical review of categorisation and schooling

Ever since compulsory schooling was established in Sweden in the middle of the 19th century,

when mass education began, there have been discussions of how to deal with the variations between pupils in their adaptation to school practices. In the process of dealing with diversity, categorisation became a necessity in the organisation of daily practice. From a sociocultural perspective, categories are seen as historically emerging conceptual tools that are put into use in processes of creating meaning and understanding in social interaction (Voloshinov, 1929/1973). Students having learning difficulties or being 'difficult to teach' (Mehan, 2014, p. 59) have always existed and they will be found across the world. As a result, different categories explaining school failure have emerged worldwide and these categories change depending on the dominant social discourse (cf. Deschenes, Cuban, & Tyack, 2001; Trent, 1994; Tomlinson, this issue; Mehan, 2014). Despite discursive shifts leading to the emergence of new categories, it is evident that grassroots practice is highly resistant to change.

Towards a moral and religious discourse

The development of mass education in nineteenth century Sweden was shaped by a strong moral and religious discourse. Children failing at school were characterised in terms of moral deficit. They were described as vicious, lazy, slow, dull, vagrant, nailbiters, slipshod, illegitimate, immoral and poor, (see Table 3) (Hjörne, 2004; Börjesson, 1997; Deschenes et al., 2001).

Categorising and differentiating pupils was an important feature of early mass education, but was also evident within popular teaching organised by the churches in the seventeenth and eighteenth centuries. For example, during the seventeenth century children were divided into three different groups depending on their ability to read and understand Christian texts (Warne, 1929, pp. 33–34). Furthermore, economic arguments were made for identifying 'quick-witted' individuals (in Swedish: kvickare ämnen) for school enrolment (Warne, 1929, p. 128). This was seen as a more profitable strategy than enrolling all children. Therefore, the 'inclinations' (in Swedish: böjelser) and the natural abilities of the young were examined 'so that the number of semi-educated people,

who could cause more harm than benefit in the country, will not be increased' (Warne, 1940, p. 348).

Thus, the idea of labelling pupils within educational practices seems to have been discussed from the very beginning of mass education in Sweden. Children classified as 'poor' or 'unintelligent' when the compulsory school started were marginalised by being offered a very short period of schooling. However, since the term 'poor' could be assigned to most of the pupils attending compulsory school during these early periods, it resulted in a situation in which most pupils went to school for a short time only (Nordström, 1968).

From a moral discourse towards a psychological-medical discourse

As a result of widespread dissatisfaction with the school system in the late 19th century, a new discourse grounded in a psycho-medical theory became influential throughout Europe, informed by psychometric testing of children's intellectual capacities and maturity (Ahlström, 1986). The idea behind the tests was to predict pupils' success in school, thereby distinguishing between pupils unlikely to benefit from education and the 'normal' school population. The idea of segregation was given weight by the assumption that children with intellectual deficiencies had a 'restraining influence and were dragging down … results to the detriment of children with a normal intellect' (Nordström, 1968, p. 144). This was an argument used not only in Sweden. For instance, in a study in the USA published in 1904, 9% of all children in school were classified as 'mentally dull'. The question raised concerning these children was whether they should be allowed to interfere with the 'normals' and 'remain a hindrance to the 90 or more per cent of normal children of the community?' (Monroe, as cited in Trent, 1994, p. 147). Thus, it has often been argued that the 'pupils in the pedagogical mainstream' have to be protected 'from being 'retarded' by the non-mainstreamers' (Deschenes et al., 2001, p. 533). Consequently, 'slow learners' were identified as a group, and the term 'special child' was conceived (Trent, 1994). Hence, there is a clearer articulation of a pedagogically motivated differentiation with a focus on pupils who were

considered as intellectually less fit for education. It is interesting to note that this somewhat reduced the validity of the category 'poor' as an argument for giving pupils special treatment in school. Rather, the psychological-medical arguments referring to intellectual capacity were foregrounded as the most important.

During this period of ability testing, new categories based on the measurement of intelligence were introduced and put to work in school. These categories diversified and later included a fine-grained set of concepts, especially for describing the lower end of the scale. Terms such as feebleminded, imbecile, idiot, backward, slow, moron and intellectually weak were introduced as relevant accounts (Trent, 1994) (see Table 3). The institutional strategies that matched these categories implied streaming pupils and the organisation of a wide range of special classes.

Again, there was a strong political opposition arguing that deciding on pupils' educational careers at an early age was a form of social selection, discriminating against children from low-income families and from rural areas, where most pupils lived at this time. The debate was fuelled by obvious social class and gender biases in recruitment to grammar schools (in Swedish: realskola) and further education (Richardson, 1980).

From a psychological-medical discourse to a social discourse and back again

From this intense opposition in the 1940s, when the Labour party was in government, the political debate in Sweden again turned to discussing the possibilities of creating 'a school for all', that is, a school for all children irrespective of social class and ability, which resulted in the comprehensive school in the 1960s. However, this idea of having 'a school for all children' again was immediately connected to the necessity of having some strategies for differentiation/segregation (Hjörne, 2004). It was evident in the 1940 investigation of schools (SOU 1945:60, p. 11), which included the following statement: 'everybody cannot be pushed at the same speed, in the same ways and towards the same goal' … some are 'developing slower, are slow on the uptake and work with more difficulty and with restraints'. Thus, individual differences became arguments for differentiation

and streaming and compensatory strategies were suggested. A range of factors that relate to social background and upbringing of children were used when explaining learning difficulties. In this more social or sociological understanding of children's adaptation to school, family circumstances came to be seen as important determinants that have to be attended to when trying to improve school performance. Categories such as aggressiveness, disorderly behaviour, concentration difficulties, immaturity, truancy, shoplifting, and rejected children now came to play a prominent role (Hjörne, 2004, see Table 3). Consequently, different types of special classes were used for children with diverse problems such as maladjustment or immaturity. It is clear that these special classes were not effective, as around 50% of pupils dropped out and placement in a special class was usually permanent (Emanuelsson, 1976). Consequently, pupils placed in special classes left school as 'educated special pupils' (Emanuelsson, 1986, p. 146), rather than as regular school graduates (cf. Thomas & Loxley, 2007).

Studies of this kind started a new, rather intense, debate in Sweden, concerning issues surrounding 'a school for all' and equal access to education. The dramatic increase in the number of pupils in special needs education reported that about 40% of pupils in school came into contact with some kind of special provision (Lindensjö & Lundgren, 2000, p. 65). This resulted in a new curriculum, again heavily emphasising equality of opportunity in the sense that all pupils 'independent of gender, geographical residence and social and economic conditions' should 'have equal access to education in the compulsory school' (*Lgr 80*, 1980, p. 14, my translation). In this curriculum, the descriptions of disabilities and learning difficulties were less specified, and special classes were not mentioned at all. Instead, it was argued that problems of different kinds should be solved within the mainstream classroom. However, this renewed policy of having 'a school for all' was once again complemented with ideas that implied assigning students to 'special teaching groups', (small teaching groups with few pupils and more than one teacher) when this was deemed necessary. The curriculum prescribed that if pupils had extensive difficulties – in the form of 'intellectual or physical handicaps, emotional or social disorders' (1980, p. 55) – some

compensatory strategies were recommended. The local school itself had to decide what kinds of problems or difficulties should be considered relevant for placing pupils in the special programmes suggested.

Table 3: A historical review of categorizing learning difficulties

Moral/ religious discourse (19th century)	Psychological/ medical discourse (early 20th century)	Social/Sociological discourse (1960s)	Psychological/ medical-neuropsychiatric discourse (from 1990s)
vicious	feeble-minded	rejected	ADHD
nailbiters	backward	aggressive	ADD
naughty	intellectually weak	bad home	Aspergers
slow	idiot	immature	Tourette
dull	deficient	left-handed	CD (Conduct Disorder)
lazy	slow learner	word-blind	Dyscalculia
poor	imbecile	disorderly	Dyslexia
vagrant	moron	behaviour	ASD
illegitimate		truancy	
children		MBD	

Source: Hjörne, 2004.

It is observable that from the end of the twentieth century and onwards the psychological-medical discourse has once again become influential, at present, with influence from a strong neuropsychiatric discourse. Within the cluster of neuropsychiatric diagnoses a whole range of categories emerges such as ADHD, ADD, dyslexia, dyscalculia, CD (Conduct Disorder) and ASD (autism spectra disorder) (Hjörne & Säljö, 2012).

What we can learn from the history is that the activity of understanding learning difficulties and categorising pupils is 'as old as schools themselves', as Mehan (1993, p. 243) puts it, despite efforts to change policy. Whilst the categories used have varied over the years, each new initiative or reform in the area of special services and pupil support can be understood on the basis of the preceding ones. As indicated by key informants' accounts, from the 1990s, the psychological-

medical discourse, reflected in different kinds of neuropsychiatric diagnosis, has become the dominant discourse in understanding school problems, with excluding strategies as a consequence. The question is how this will affect contemporary policy around inclusion.

Contemporary discourse of learning difficulties in policy and practice

Changes in policy discourse and direction of travel

Policy has changed over years and at present the school is a 'goal and result-oriented school' where decentralisation and deregulation have become the buzzwords of the day. This means that the responsibilities for running schools, for allocating resources, and for dealing with issues that relate to pupils in need of support, rest with the local school authorities, more specifically with schools and their senior managers, in particular with the head teacher. It is at the local level that solutions have to be found, and where knowledge about the needs of pupils has to be reflected in day-to-day practices. Emphasis on local solutions to educational problems is a key of the 2011 Education Act (SFS 2010:800), which launched a new curriculum.

All the key informants pointed to changes resulting from the Education Act as the most important in influencing policy discourse and direction of travel. In unison they emphasised the new focus on *inclusion*, the *right* to receive support for learning in order to *attain* the identified learning goals and the possibility of *appealing* against decisions concerning special needs support. The government representative emphasised the importance of new rights granted to parents and children to appeal against local decisions.

> This is a law of rights, not only for the child but for the parents as well. If a child does not reach the goal an IEP (Individual Educational Plan, cf. an Action Plan) will be established by the headteacher, which parents and children can appeal against. This is the very first time in the history of schooling this is possible. It's a huge change. (G)

According to the representative from the National Agency for School Inspection in 2013, one third of the appeals to be handled by the School Inspection concern the IEP (Individualised Educational Plan – see below) and the right to receive additional support for learning in school.

Key informants also emphasised the policy discourse of inclusion with its understanding of special teaching groups as provision of last resort. The Government respondent claimed that this is 'the point of departure in policy to keep the pupils in need of special support in their regular class' (G). However, the interpretation of how to implement this policy in practice varied among the interviewees generally and among the head teachers especially. One of the head teachers (LS1) interpreted the policy as prohibiting the use of special teaching groups. According to this interviewee (LS1) there is a risk that the strategy of inclusion of all would lead to exclusion of children who are not able to reach the specified attainment targets.

> I'm afraid, the pressure will increase on the schools concerning reaching the goals of inclusion and that everyone should attain the same qualifications and this will lead to more and more special needs education and maybe exclusion as a consequence. (LS1)

One of the other head teachers (LS2) presented an opposite view of the idea of inclusion and pointed to the benefits of providing mixed groups where 'everyone can contribute in their own way and all can learn from each other, everybody can make a contribution to the group' (LS2). Thus, the understanding and implementation of inclusion in practice seems to be blurred and likely to lead to different experiences of children depending on the school attended. This reflects the arguments by Armstrong, Armstrong, and Spandagou (2011) in their analysis of the nature of inclusion in the global context.

Furthermore, the emphasis on common learning goals, according to the Government interviewee, draws on the 'raising standards' agenda, a relatively new feature of Swedish educational policy. However, as noted above, some of the head teachers (LS1, LS3), felt that the raising standards agenda might lead to an increase in the number of children identified as requiring special provision. However, one head teacher (LS2) disagreed and saw it as a benefit for children in

need of special support, as the goals of attainment for these children were often way below what was expected of their peers (see also Hjörne, 2006 for a discussion).

Categorisation system and disproportionalities

Even though, until 2013, there was no official categorisation system or statistics on children with special educational needs, there has always been a clearly definable special education system in Sweden, which to a large extent is closely connected to the general education system. The 2011 Education Act stipulates that the local school head teacher has to 'speedily' investigate the special needs of a child and establish an IEP (Individual Educational Plan) with decisions of what measurements are necessary for supporting a child in their learning. In autumn 2013 the Swedish National Agency for Education reported that about 14% of the pupils in compulsory schools (7–16 years old) had an IEP, mostly boys. In grade 9 (15–16 years old), 21% of boys and 16% of girls had such a plan (see Table 4). There are only minor differences between local schools and free schools.

Table 4: Pupils with some kind of special provision 2012–2013

Type of special provision	Number of pupils in total in compulsory school	% of pupils in grade 9 in local school	% of boys in grade 9 in local school	% of girls in grade 9 in local school	% of pupils in grade 9 in free school
Individual educational Plan	125 885 (14%)	19	21	16	17

Source: Swedish National Agency for Education, 2013

The use of IEPs means that the proportion of children with special educational needs is recorded in official statistics but the reason for support is not visible. In addition to these changes, there has been an increased emphasis on attainment which, as will be shown below, can be in tension with provision for children with special educational needs.

Special programmes for children with intellectual impairments and special schools represent the most segregated forms of educational provision (see Table 2). In addition, local schools can organise special education of any kind according to the specific needs of the pupils in their own catchment area. In 2013, the Swedish National Agency for Education reported that about 3.6% of

boys and 2.3% of girls at grade nine were placed in a special teaching group (see Table 5). However, the statistic does not reveal what kind of learning difficulties these children were experiencing. According to the key informants, special teaching groups are usually provided for children with ADHD or ASD (see also Hjörne, 2006). The representative from the National Agency for School Inspection claimed that every municipality has at least one special teaching group offered to children having a diagnosis. 'In practice the diagnosis is strongly alive and it's easier to receive additional support if you have a diagnosis' (NSI).

Table 5: Pupils placed in special teaching group 2012–2013

Type of special provision	Number of pupils in total	% of pupils in grade 9	% of boys in grade 9	% of girls in grade 9
Special Teaching Group	12 588 (1.5% in local schools and 1.3 % in free schools)	3	3.6	2.3

Source: Swedish National Agency for Education, 2013

With regard to policy implementation, different accounts were provided by key informants from the National Agency for School Inspection, the local authority and the Government on the one hand and the three head teachers on the other. The former stressed that the duty of the school was to compensate for low SES, and that in the bigger cities as much as 25% of the school budget was allocated to areas with low SES. 'The municipality has a responsibility to compensate for inequality and distribute qualifications and money to the schools which need it the most' (NSI). And 'pupils should receive the support they need without a diagnosis' (G). The head teachers, on the other hand, emphasised neuropsychiatric diagnosis as the main explanation for learning difficulties and as the basis for distributing resources. Thus, policy and funding reflect a socioeconomic explanation of learning difficulties, whilst the three head teachers who were interviewed supported a psychological-medical explanation. This suggests that the gap between rhetoric and reality mentioned in the historical review is still there, so that shifts in policy do not immediately result in changes in practice, particularly in practitioners' understandings.

In addition, the government interviewee pointed to the discursive shifts evident in teacher training. In the 1990s, the special needs teaching qualification was replaced by the special pedagogue qualification, which emphasised the social causes of learning difficulties. Special needs teacher training has been reintroduced and there are plans for its extension into different specialisations, including deaf and hearing impairment; intellectual impairment; maths difficulties; and reading- and writing difficulties. Some of these specialisations reflect traditional explanations of learning difficulty (deaf and hearing impairment and intellectual impairment) but new categories have also been added (maths-difficulties, reading-and writing difficulties). The reason for these changes, according to the government interviewee, is 'to improve the attainment of all pupils in school' and so that 'all pupils should attain the same goals' (G), in line with the raising attainment objectives of the 2011 Education Act.

International assessment and future trends

Some interviewees, but not all, believed that international comparisons of school achievement were influential in driving policy change. The government interviewee claimed that PISA tests and 'raising standards' is 'what our politics is about'. Furthermore, he emphasised that policy was strongly influenced by Sweden's relatively poor performance in international school performance tests such as PISA and TIMMS, which had been highlighted in the media and used to argue for radical changes within the education system. The head teachers, on the other hand, all claim that PISA results were of no importance when making plans in the local schools. This is further evidence of the nature of the influence of policy on practice. As the Swedish school system is highly devolved to the local level, the influence of the macro political environment may be diminished. It is also clear that there are different interpretations of national policy at local level, suggesting that practice in the future is likely to vary.

In spite of different attitudes to PISA among head teachers, all key informants expressed concerns about lower attainment in national tests in schools. They believed that improving

attainment by pupils with special educational needs depended on the development of inclusive schools and teaching methods that met the needs of all pupils. One head teacher pointed out that 'teachers need to be prepared for meeting diversity' (LS2), placing greater demands on teachers' competence.

Furthermore, the politician and the school inspector disagreed on the best way of raising standards in schools. The politician recommended teacher-led lessons and less individual work for the children. He emphasised 'a need of raising the competence of the teachers by learning from examples of best practices and research of effective methods for learning for raising standards' (G). The school inspector, on the other hand, emphasised that 'formative assessment and more pupils with additional support needs included in regular classrooms will result in more pupils attaining the learning goals' (NSI). In addition, two of the head teachers (LS1, LS3) were worried that the emphasis on raising standards might lead to an increasing need for special education in school and that more children might be put into special teaching groups. Thus, there seems to be a tension between the idea of including all pupils in mainstream school and the need to raise standards.

Discussion and conclusion

The historical review and the contemporary trends show that the language and policy of special education and understanding of learning difficulties have changed over the years. Moreover, the discourse of special education developed in Sweden moves back and forth and could be described as a competition over the representation of pupils who are difficult to teach in mainstream classroom. A moral and religious discourse as well as a psychological-medical discourse, in which learning difficulties are seen as shortcomings in pupils' character or in their genes, has competed with a social discourse where school problems are seen as caused by environmental, socioeconomic and familial factors (cf. Mehan, 2014). Since the 1990s, a psychological-medical discourse has once more been dominant, categorising pupils' as *having* 'learning difficulties', 'ADHD', 'ASD' and so on. However, in the new policy a social discourse emphasising inequality and the influence of

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socioeconomic status on learning have been influential. Nevertheless, the psychological-medical discourse was the dominant explanation of learning difficulties in the interviews with most of the key informants, especially the head teachers. In addition, a new special needs teaching qualification is being developed, which has a strong focus on neuropsychiatric difficulties and compensate for pupils shortcomings. Thus, there seems to be a gap between policy and practices concerning the narrative of special education and categorisation of learning difficulties today. The policymakers recognised the role of social factors and this has influenced funding decisions, with more funding channelled to schools in poorer areas. However, on the ground individualised rather than social explanations of learning difficulties are still invoked.

The taken for granted educational narrative in Sweden is of a highly inclusive school where only a very low proportion of children are in need of special support. However, the story from the key informant interviews suggests an opposing narrative. The proportion of children categorised as being in need of special support, especially those with neuropsychiatric diagnoses, has increased dramatically. As history has shown, categorisation always is consequential, which means that when a child is categorised as having a particular shortcoming, certain measures are taken. At present, pupils categorised as having ADHD or ASD are often excluded from mainstream and placed in special teaching groups. Furthermore, the increasing stress in Swedish education policy on the creation of an inclusive school system with high levels of attainment for all seems to be creating certain tensions, with an increase in children identified, either formally or informally, with additional support needs and a growing special educational sector.

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