

Ferdinand Van der Veen: A Life Recalled

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Ferdinand van der Veen was ten years old when his family fled the invasion by the German army of their native Holland. They settled in Cincinnati, Ohio. He attended local schools, graduated in engineering from The University of Cincinnati and received his Ph.D. in psychology from the University of Chicago. At Chicago he began his learning and then his contributions to what has come to be known as Client Centered Therapy and the Person Centered Approach (PCA).

His early career in research and academia took place in Madison, Wisconsin, Lawrence, Kansas, and Evanston, Illinois. Forty-five years ago, Ferdinand was part of the research group working with Dr. Carl Rogers studying Client Centered Therapy with hospitalized clients diagnosed as schizophrenic. Using several empirical methods he tested various hypotheses from Client-Centered theory. In two detailed studies (Van der Veen, 1965a, 1967), he investigated therapeutic process and outcomes from the perspectives of clients, therapists, and observers.

In his later life, Ferdinand Van der Veen noted the trend that research in Person-Centered Approach has largely moved away from studying therapeutic process and outcome for people with severe emotional disturbance. But he continued to see relevance of these studies for our understandings today. "I hope my early work in this area will be useful to people who want good scientific research to back up their own work. Back then, I underestimated the importance of

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scientific methodology to bringing progress in helping clients by means of PCA. I failed to take my work to the next step; I didn't communicate it to make it more meaningful in the world." (Personal Communication, 2007).

Ferdinand Van der Veen began to believe that psychotherapy is ill-conceived as "progress" in a process of one person, the client. In the study published in 1965, he discovered client therapeutic behavior is a function of the level of engagement between a particular client and a particular therapist. Likewise, when the level of therapeutic behavior of one partner is high, it tended to be higher for the other. The level of therapeutic behavior of a client seems to be a function of that particular person, the particular therapist, and the client-therapist combination. Individual therapists in this study behaved consistently with different clients, but certain pairs of therapist and client accomplished better results.

In the second study, Van der Veen (1967) concluded that successful therapeutic outcomes are more likely when a client is able to link personal events to his own problems. At this time, Van der Veen's general impression was that clients tend to disconnect thought from feeling. A client engages in positive therapeutic behavior as a function of her/his own immediacy of experiencing and linking that experience to expression of her/his problem.

Additionally, Van der Veen (1967) found that success is more likely when the therapist is able to accurately express the client's experience, and his or her own experience, and to point toward further self-expression. A therapist's ability to carry this out is strongly related to his or her own attitude of empathy. Somewhat less important was a therapist's congruence, and therapists' unconditional positive regard seems to be unrelated. The clients' perception of these conditions in the therapist also showed no relation to therapeutic success, except that a client's perception of the therapist opening himself lead to the client continuing in therapy.

While this remembrance omits discussion of over 10 other papers, several of which were concerned with the "family concept" a construct similar to but different from the "self concept", key questions for Van der Veen became, "Can a client enter a relationship with a therapist that engages awareness, a relationship that explores

thoughts and feelings about enduring concerns, a relationship that allows change to emerge?" These questions relating to his studies of clients and therapists seem to have been, in one form or another, important considerations for Ferdinand throughout his professional and personal life. He was careful to encourage that we express feelings in ways that were true to our own experience. He was carefully slow and persistent to find his own accurate approach to his feelings and those of his companions. While this care was characteristic of Ferdinand's personal style, it was not only that. Ferdinand knew how hard it was for him (and others) to continue being heard by ourselves and others, and how that lack of being heard made more difficult our move toward completion of our internal/external integration. He knew that many of us jump ahead way too fast and miss thoughtful articulation of our experiences.

Over many years and occasions in Ferdinand's company, presuming he and I (W. S.) were accompanying one another's thoughts or feelings, I could find myself talking on my own. I had not checked that we understood one another, and almost in seeming despair he had stopped, or disengaged, or given himself distraction. In a small paper called "Dialoging" written in the early 1960's (Citation unavailable) he suggested the importance in interaction that before going ahead with one's own contribution, one ought reconfirm to one's companion what he or she had intended.

By the late 1970's, Ferdinand moved to California and began a private therapy practice that he continued into his final year of life. He became an active colleague at The Center for Studies of the Person, a community of practitioners for Person Centered ways of being. Shortly after this move, from more or less out of the blue, he experienced a "moment with God," and this moved him to seriously deepen and broaden his spiritual life. He re-engaged with Judaism (the religion into which he was born) and among other practices sat in Buddhist meditation.

The Person-Centered Approach remained integral to Ferdinand's ways of being. He was well-known and fondly regarded in several Person-Centered international communities. Ferdinand sought our individual autonomy and self-responsibility; likewise, he sought consensus and equality among us in our decisions that affect one other.

Within his last year, Ferdinand dealt with a matter that was deeply troubling for and to him. He struggled with this and with its ramification. He was deeply distressed by how some people of the international PCA community responded to him and to the matter. He experienced that some long-time friends and colleagues who ideally embraced person-centered principles turned away from him, not seeking to hear him, not showing interest in his experience of the facts, not offering to facilitate or witness his exploration of what the whole incident might have meant for him. He also found great comfort in those friends that did stand by him. For himself surely, but also for the community Ferdinand persevered. He strove to carefully confront his own and other people's reactions to and dealing with sensitive issues. Ferdinand worked for and wished for a community based in self-responsibility and mutuality, a community in which through a process of participation and dialogue, we all would understand and find acceptance for ourselves and others.

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