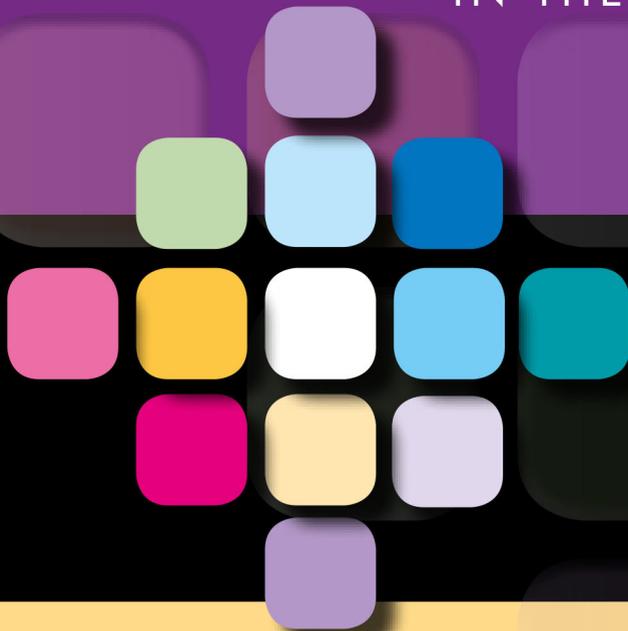


In Touch

A HISTORY OF THE
HAPTOTHERAPY PROFESSION
IN THE NETHERLANDS



DOLLY VERHOEVEN

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1

A YOUNG PROFESSION

Association of Haptotherapists (vvh) Twenty Years Old

Waverveen, 15 December 1992. Eight people, five men and three women, raise their glasses to toast the birth of a new association that they will form together. Six of those present call themselves ‘haptotherapist’ – a profession which at that time had neither legal status nor a recognizable profile. These are precisely the objectives they wish to accomplish through the new association. The task of the Vereniging van Haptotherapeuten, [Association of Haptotherapists], hereinafter referred to as the vvh, is to ensure that the new profession makes a place for itself in the field of Dutch healthcare. The founders realise that this will by no means be easy, but they are optimistic and enthusiastic. Two months later, on 10 February 1993, the deed of formation has been signed and the association has officially begun.

Twenty years later, the association has its own office, a board of directors and several independently operating committees. It has set out a professional profile, a professional code and a complaints procedure. Agreements have been made with health care insurers regarding the payment of treatments and with educational institutions concerning the quality of degree programs and continuing education. The more than five hundred members who have joined and work under the gz-haptotherapist healthcare quality assurance mark, treat thousands of clients annually. In short, after two decades, haptotherapy has become an integral part of the Dutch healthcare system.

However, what exactly is haptotherapy? The vvh defined it in 2012 as follows:

Haptotherapy is an individually-oriented therapy, characterised by the therapist’s willingness to meet the patient affirmatively. [...] The essence of haptotherapy is to help the client gain or regain awareness of his own innate abilities in order to be able to focus on and open up to affirmative contact and to develop these abilities.¹

In other words, haptotherapy helps people to reconnect with their own feelings, and to enter into contact with others through those feelings. A haptotherapist can help people who are ‘out of sorts’, who have a negative self-image, who are overburdened or are struggling with stress.

¹ www.haptotherapeuten-vvh.nl

Haptotherapists also work in the fields of pregnancy and birth, relationship problems, conflicts and coping with bereavement. Touch and feelings play an important role in a therapeutic treatment.

Haptotherapy comes from haptonomy; it is in fact a therapeutic application of the principles of haptonomy. The vvH definition of haptonomy is:

A science that studies and describes the phenomena of human contact

In haptonomy, a person is considered to be an indivisible whole, a person, in which corporality, psyche and soul may be distinguished, but may never be considered separate from each other. In addition to a rational affirmation of existence, the fact that one exists, each person also needs an affective affirmation of being, the fact that you are fine just the way you are, which is necessary to be able to develop into an integrated and complete self-valued person, capable of both experiencing and giving significance ²

Organisation of the Book

Their twentieth anniversary gave the Association of Haptotherapists reason to research and record the history of the profession of haptotherapy in the Netherlands. This history goes further back than twenty years; in order to obtain a complete overview of the origin and development of this profession, we will have to go back more than sixty years

In this book, the history of the profession of haptotherapists will be divided into three periods. Chapter two will first describe the origin of haptonomy in the 1950s and 1960s in Nijmegen, where the founding father, Frans Veldman, developed haptonomy through research and practical application, and then widely disseminated his findings through lectures, courses and publications. In the 1970's, the first initiative arose from his work to set up a formal education for this profession, the Academie voor Haptonomie en Kinesionomie [Academy for Haptonomy and Kinesionomy].³ Teachers and professors like Dorus Gerritse, Kiek Zeydner, Willem Pollmann, Jan Dijkhuis, Anne-Jan van Minnen and Ted Troost worked on this effort together with Veldman. Dozens of students followed the haptonomy alpha courses (basic principles) and beta courses (the therapy training). In 1980, Veldman decided to hand over his training to two of his instructors, Van Minnen and Troost. He himself moved to Oms in the south of France, together with his wife, Lore Tromp and his assistant, AnneMarie van Polen. There, he dedicated himself to further research, publica-

² idem

³ Term coined by Veldman: the science of kinesiology from the haptonomic perspective

tions and the establishment of a French-language centre for haptonomy until his death in 2010. The second period, discussed in chapter three, covers the period from 1980 to 1992. The transfer of the haptonomy education program was quickly followed by a separation of the minds, first between Veldman and his two successors and subsequently, between Van Minnen and Troost. In 1985 a foundation took over the Academie voor Haptonomie [Academy for Haptonomy], hereinafter referred to as the Academy. This was then established in Doorn. Shortly thereafter, Van Minnen began his own educational institution. Other haptonomic educational programs followed, among which Synergos in Amersfoort and the Instituut voor Authentieke Haptonomie [Institute for Authentic Haptonomy] by Frans Veldman Jr. in Grave, both of which still exist today. In order to connect the increasing number of graduates of haptonomists and haptotherapists, the Nederlandse Vereniging voor Haptonomie [Dutch Association for Haptonomy], hereinafter referred to as the NVvH, was formed in 1985. This association concentrated on organising lectures and workshops and in 1989, the publication of its own magazine by the name of *Haptonomisch Contact*. The association held the express view that the promotion or protection of professional interests, a growing need among its members, was not its task.

In chapter four, the history of the vvH itself is discussed. After its official foundation, it quickly became apparent in February 1993 that the association served a need; membership had increased to almost three hundred in seven years. The NVvH did not survive the competition and was discontinued in 2001. From the beginning, the vvH's objective was to achieve a respected and lasting place within the healthcare system for the haptotherapy profession. This process, however, did not always go smoothly. Determining basic principles and setting boundaries within their own profession, consulting with insurance companies on professional and patient fees, and organising professional cooperation with the educational facilities took a great deal of time and energy. The assessment of admission criteria for membership in the association not only led to differences of opinion between the vvH and the educational institutions, but also to a serious crisis within the association itself in 2006. Following that year, the association continued on its way with renewed fervour, primarily putting its energies into the professionalization of the profession and its professional association.

The fifth and last chapter offers a glimpse into the future. Based on a conversation with the current board members of the vvH, several new developments haptotherapists and their professional association will be confronted with in the future, are discussed.

The Research

The history of haptotherapy is one of experimentation, making discoveries, blazing new trails, finding new terms and carving out a place within the healthcare system in the Netherlands. It is a history filled with passion and enthusiasm, but also one of differences of opinions and conflicts of interests. The inspiration of those involved and their enormous passion for haptonomy or haptotherapy sometimes led to serious conflicts. It was courageous of the vvH to have decided to have its history researched and recorded, in spite of all this.

There was not an abundance of sources for historical research. Very few documents from the initial period were available. Very little information about important events and crucial decisions made well into the 1980s was ever put to paper. To be sure, the usual publications, written by Frans Veldman and others, appeared over the course of the years regarding the substantive side of haptonomy and haptotherapy, but these generally contain few details on the historical development of the profession. In order to fill in these gaps for this book, the author also made use of oral history, using historical interviews. Conversations were conducted with approximately 20 people who played a prominent role in the history of haptonomy and haptotherapy, persons whose names are included in *Appendix 2*.

In historical research, personal recollections may offer information where other sources do not; they can add colour and significance to events and bring them to life. However, the human memory is fallible, and this underlines the need to handle information carefully and, where possible, to compare or confirm against other oral reports or written information. The most important written sources for this research were the *Haptonomisch Contact* magazine and, for the period after 1993, the vvH archives. By combining a diversity of source materials, as researcher and author, I have endeavoured to portray the history of the haptotherapy profession as accurately and clearly as possible.

The focus of this book is the pre-history of the vvH as a professional association. The development of professional training indirectly forms a part of that story; educational archives were not extensively consulted. The development of the actual professional content of haptotherapy has only been touched upon casually. Professional terminology has been avoided as much as possible, in order to make the book accessible to those not schooled in haptonomy.

This research project would not have been possible without the cooperation of the interviewees, who were prepared to share their reminiscences and to provide their view of the history of haptotherapy. I wish to thank each one for their time and candour. I would especially like to thank AnneMarie Veldman-van Polen for her trust in allowing me access to a number of documents from the Frans Veldman collection. My thanks also go to the

director of the vvH, Marja de Jonge, for providing information and support during the examination of the records, and to board members Constans Manganas and Marli Lindeboom, for their supervision of the research. I wish to thank Gert Klabbers for the loan of nearly his entire library on haptonomy and Willem Hagg for a number of fascinating and enlightening exchanges of ideas.

Dolly Verhoeven

Apeldoorn, December 2012

2 NO LIGHT BURDEN

The Origin of Haptonomy (ca. 1950-1980)

Introduction

The tender beginnings of haptotherapy lie in post-war Nijmegen, a city that, at that time, was fully occupied with recovering from the ravages of war. It was in this city that physio-therapist Frans Veldman's search for a more humanly-oriented manner of treating patients began. Using a combination of theory and practice, studying and touching, he discovered and developed the principles of haptonomy. Principles, which he subsequently propagated with great passion at demonstrations, lectures, courses and in written texts. Haptonomy fell on fertile soil with many physical therapists and with some doctors, psychologists and psychiatrists as well. By the time Veldman left for France in 1980, he had ignited an enthusiasm for haptonomy in a large number of medical and paramedical practitioners.

The Founder: Frans Veldman

Frans Veldman, the founding father of haptonomy, was somewhat reticent about his personal history. "I'm not important. Haptonomy is," he explained in one of his rare interviews. Veldman was born in Vlissingen on 6 September 1921. He hailed from a Dutch Reformed family, both parents originally from Friesland. According to Veldman, he inherited a deep social conscience from his father, who worked at a post office. When Frans was three years old, his family moved to Nijmegen. In this predominantly Catholic city, he, as a Dutch Reformed boy, experienced the mechanisms of exclusion and intolerance. There, the communities of Catholics, Protestants and Jews led their lives within their own closed circles. According to some sources, Veldman began to study medicine around 1940, probably a nursing program, which he then had to cut short because of the war. Nijmegen, where Veldman spent the greater part of the war years, did not yet have a medical faculty at that time.

During the war years, Frans Veldman worked as an assistant in Jouke Bol's practice, a socially-conscious doctor in Nijmegen, with whom he shared many conversations about the fundamentals of life, death and the related problems.

¹ See www.haptonomy.org/vf/cirdh/origine.html

Shortly after the war, on 4 October 1945, he married 21-year-old Lore Tromp from Ubbergen. She came from a Catholic family and Veldman probably became a Catholic himself on the occasion.² The couple settled in the Mr. Frankenstraat in Nijmegen where seven children were born of their marriage. Initially, Veldman resumed working together with Dr. Bol. Studying medicine was no longer an option, however, he did graduate with a state certificate in physiotherapy. In 1947 he announced in an advertisement in local paper *De Gelderlander* that he had established himself as a 'state-licensed physiotherapist-masseur, equipped for remedial gymnastics, massage and physiotherapy (radiotherapy and suchlike).

At that time, 'remedial gymnasts' or physiotherapists assigned exercises to their patients and gave them massages, for physical as well as psychological problems. The profession of physiotherapist existed since the middle of the nineteenth century. Since 1942 it has been recognized as a paramedical profession, which means it may be practised after referral and under the supervision of a doctor. This recognition resulted in criteria being set for educational requirements and the establishment of a state certificate. A year earlier, in 1941, physiotherapy had already been included in the then newly-formed obligatory National Health Service. Subsequently, in 1948, fixed national treatment fees were set. In this manner, physiotherapy gained a permanent position in Dutch health care. After the Second World War, the technical options for treating patients increased rapidly. Massage and physiotherapy were supplemented by 'physio-technique', treatment using electrical equipment.

Frans Veldman was good at his work. He possessed sharp powers of observation and made quick diagnoses. He also distinguished himself in the way by which he treated his patients. Touching patients was part of his daily work as a physiotherapist. In his practice however, he discovered that the manner in which he touched someone made a huge difference: were it as an object that needs repair, or as a person. A difference in touch resulted in a difference in reaction. Touching someone as a person ensured direct contact and proved to have a therapeutic effect. This *modus operandi* is more enjoyable and less tiring for the therapist, too. Finding this was the beginning of an intensive scientific and practical quest for a more human-oriented way of approaching and treating patients.

Veldman's human-oriented patient approach fit well with the developments afoot in the academic world at that time, particularly in the medical sciences, philosophy and psychology.

² Until the beginning of the nineteen-fifties, Catholics were not permitted to marry non-Catholics

The idea that spirit and body are two separate parts of a human being had taken root during the Enlightenment, but was being abandoned by a growing number of scientists. One of them was the French philosopher Maurice Merleau-Ponty (1908–1961). He maintained that body and spirit are not two separate entities but one inextricable whole; together they form the living human being. Merleau-Ponty rejected the purely scientific approach for the life sciences, based as it was on experiments and empirical proof. In its place, he assumed the idea of 'phenomenology', the science that phenomena speak for themselves and are recognized by direct observation and by intuitive experience.

Merleau-Ponty's ideas were introduced into the Netherlands by among others the famous physiologist, psychologist, anthropologist and philosopher, F.J.J. Buytendijk. This versatile scientist lectured at various universities on corporality, tactile sense, the human motoric system and human encounters. In his famous book, *De vrouw* [Woman], published in 1951, he unfolded the, for that time, revolutionary idea that a woman 'is a person, not nature, not a thing, but a being that can develop itself.' Buytendijk received an appointment at the Catholic University of Nijmegen directly after the Second World War, where, among other things, he became involved in setting up a medical faculty, together with the famous professor of Neurology and Psychiatry, Dr. J.J.G. Prick, who like Buytendijk, was recently appointed to Nijmegen. Prick's work as well, emphasised the unity of body and spirit. Both scientists agreed that the Nijmegen University must teach an anthropologically-oriented medicine, in which body and soul of a person are considered to be one entity. The human being is, after all, not a 'thing', but a 'secret'. Physicality forms an union with intellectual and psychological faculties.

Not only in medicine, but also in psychology a different view of humankind arose in the post-war years. Jurist and moral theologian Professor Willem Duynstee, was an important representative of this viewpoint in Nijmegen. Based on his counselling work with scores of people with psychological problems, Duynstee asserted that it was necessary to make room for impulses and feelings so that the human emotional life could develop and flourish. He found support for this theory in his colleague at the University, professor of psychology P.J.A. Calon, who in turn worked closely with Prick.

From the 'fifties onward, Frans Veldman took para-university classes in Nijmegen from among others the professors Prick and Calon, on subjects such as body-consciousness, sense of touch, the meaning of touch and tenderness, and from Buytendijk on human encounter, inter-human contact and breathing as the 'sense of emotion'. He also became acquainted with the female psychiatrist, A.A.A. Terruwe, who conducted her practice in Nijmegen. Anna Terruwe in particular, was well known for her 'affirmation theory', in which

she asserted that a human being, as a social creature, needs affirmation and selfless love. Terruwe held that negative behaviour and neuroses could be explained by neglect during the years of youth. She also considered the repression of sexuality as a source of serious psychological problems. This brought her in conflict with the Roman Catholic Church in the nineteen-fifties. The source of her inspiration, Professor Duynstee, was summoned to Rome and forbidden any further contact with her for several years thereafter. In 1965, both Terruwe and Duynstee were rehabilitated.

Frans Veldman continued to deepen and expand his study of new theories in the areas of philosophy, psychology and anthropology, both by taking courses and by way of self-study. The theoretical insights he acquired, he then tested in his own practice on his own patients. It is this practical slant that distinguishes Veldman from the Nijmegen scientists. As former fellow student Dorus Gerritse put it, “In Nijmegen in the fifties, there was a fertile basis for growth. However, it was purely an environment of discussion where a very nuanced exchange of ideas on the meaning of touch took place. But no actually one did it. Frans Veldman greedily absorbed a great deal of knowledge from this, with a keen nose. It is also to his credit that he experimented in his physiotherapeutic practice with manners of touching and the significance thereof, led by his exceptional powers of observation.” No wonder that people like Calon and Terruwe followed his experiments with great interest.

Meanwhile, his physiotherapy practise flourished. Halfway through the nineteen-fifties Veldman moved to a detached building in Nijmegen, where he renamed his practice Physiotherapeutic Institute. In 1962 the institute was expanded substantially. It then contained 22 treatment rooms, including three exercise rooms. Seven therapists worked there, who under doctor’s orders, treated patients with psychological or physical symptoms. In addition, posture and exercise classes were given to groups of housewives, children, toddlers, expectant mothers and athletes. In his opening speech, the mayor of Nijmegen praised Mr and Mrs Veldman’s private initiative, which, with the support of local doctors but without any help from official agencies, had enriched the city with this institute.

In the fifties and sixties Veldman, in addition to his own practice, worked in the rehabilitation centre of Nijmegen’s Catholic Canisius hospital, which, lacking a separate university hospital, also served as an academic clinic until 1956. He taught at the Katholieke Hogeschool voor de Verpleging [Catholic College of Nursing] in Nijmegen, a school founded by the Zusters Onder den Bogen [a congregation of nuns] and furthermore worked those years as a physiotherapist in a nursing home, a sanatorium and at a boarding school in the surroundings of Nijmegen.

Veldman was politically active in the Nijmegen community for several years. In September 1956 he was elected president of the local kvp [Catholic People’s Party] chapter. In this capacity, Veldman emphasised the importance of good teamwork. He turned his back on the party’s practice of promoting particular interests, such as that of employers or employees. Only two years later he resigned from his position as president, ‘because his studies did not permit him further activity in this direction’, according to a local newspaper. His farewell speech revealed his struggle with sectional and class interests. He intimated his disappointment about particular interests impeding the implementation of a consistent policy.

The theme of promotion of interests would return later in his life. In 1974 he gave a lecture entitled *Méde-mens of Mede-méens* [Fellow Human or Also Human] in which he rejects the culture of adaptation or assimilation that inevitably accompanies living in any group. ‘Group forming’, he asserted, ‘seems to be an infectious sign of the times, by which the group is functioning less as an association of like-minded or kindred spirits, but more as a means of exercising power to obtain specific interests.’ If group interests prevail (closed society), an individual is forced to adapt and surrender his individual freedom, according to Veldman. He juxtaposes the community (open society), in which each person is responsible for himself, makes his own choices and can participate as a free person.

A striking personality

Frans Veldman was a man who made a strong impression due to his tall build and handsome appearance, but still more so because of his attitude, his voice and the way he looked at you. Veldman touched people deeply, even at a first encounter. A short book, published after his death, illustrated this by recounting memories of twenty people when first meeting Veldman. One story told by a Dutch psychologist describes her meeting with Veldman in 1976 on the recommendation of the neurologist Prof. Dr. Prick, “This professor worked with Frans frequently at the University Hospital and greatly appreciated haptonomy. I asked him to explain exactly what it was and he took my hand, held it and said, ‘You need to discover that for yourself; it is difficult to explain.’ A week later, she met Frans Veldman in Overasselt. “I remember this like it happened yesterday. From the very first moment he affected me with his gaze, his expression and his hospitality. At the time, I didn’t

know what was going on, but I knew immediately that this encounter would be decisive for the rest of my life. An hour after returning home, still bewildered because I was trying to understand what had happened, for the first time in my life I felt that I was truly happy.”³

A New Therapy

Based on his education, self-study and experiments, Frans Veldman developed his own form of therapy in the course of the nineteen-fifties. When treating complaints related to neurosis, stress and nervous exhaustion, he noticed that through massage and tactile contact, a response occurred in the breathing and the muscle tension (tone) of the patient. He succeeded in making contact with patients through touch and by inviting them to cooperate, achieved change or healing. Initially he called this the ‘physio-psycho-technical method’. At the suggestion of Dr. Anna Terruwe, he changed the name later to ‘psycho-tactile therapy’.

While developing his psycho-tactile therapy, Veldman worked together for a number of years with doctor and respiratory therapist, Volkmar Glaser, who owned a practice in the southern German city of Freudenstadt. Glaser was a student of Dr. Johannes Ludwig Schmitt (1896 - 1963), pioneer of the ‘Atemheilkunst’ [Art of Breathing] in Germany. At the beginning of the nineteen-fifties, Glaser developed a method for treating psychosomatic symptoms that he called psychotony. It was a type of breathing massage that could have a significant influence on the patient’s emotional state.

Veldman and Glaser came to a similar conclusion concerning muscle tone and the regulation of breathing. Independently of each other, they carried out research and shared their findings. By 1963, they felt the time had come for a publication explaining the basic principles of psycho-tactile therapy. In their article they described the tactile sense or the tactus, touching and being touched as the ‘most elementary, instinctively primitive form of interpersonal contact’ and as the most emotional of all sensory perceptions. According to Veldman and Glaser, the patient will feel affected, ‘touched’, by the massaging hands of a therapist who has the intention of making true contact and will open himself emotionally to the other person. This contact, they asserted, would develop a specific muscle tone or tonus, not a state of tension or relaxation, but a state of greater elasticity and resilience,

³ I. Op Heij, ‘Ma voix garde silence pour laisser parler l’affectivité’, in: Soler, *Présence Haptonomique*, p. 61 [translation DV]

physical or otherwise. Veldman and Glaser emphasized that psycho-tactile therapy was not a new method, but ‘a valuable natural development of the manual contact during the massage, based on the current knowledge of anthropological phenomenology’. In brief, they did not want to propagate a new methodology but rather a fundamentally different method of approaching a patient. The affirmative psycho-tactile contact could help the patient open up to the support of the therapist.

At the initiative of Dr. H.P.J.M. Dijkhuis, medical advisor with the National Health Service, Veldman expounded on the various treatment methods of ‘the modern physiotherapy’ in 1964, during a course he gave to more than a hundred doctors and other interested parties. Some time later a book was published with an overview of the therapy forms discussed at the course. The final chapter gives a comprehensive description of Glaser and Veldman’s psycho-tactile therapy.

Midway through the nineteen-sixties, after collaboration with Glaser broke off due to a difference of opinion, Veldman changed the name of his therapy. On further reflection, he decided that the terms physio-technical and psycho-technical method and psycho-tactile method emphasized the presumed duality of body and mind. This duality is not actually experienced as such by the therapist and the patient; indeed, the therapist touches the patient as a person and the patient in turn feels touched in his totality as a human being. Veldman introduced at that time the term haptonomy. He derived this word from the Greek words hapsis (touch) and hapto (healing touch) and nomos (patterns or rules). This word haptonomy, is then, in short, a ‘description of the rules of touch’.

Intense feeling

The psychologist Prof. J.J. Dijkhuis worked together with Frans Veldman for a long time. Referring to the discovery of haptonomy he said: “Veldman was an excellent clinician. He realised that people struggle with all kinds of things. He wanted to help, but wished to do so by actively involving them in the process and realized that touch could play an important role in achieving this. If you touch someone in a particular way, for instance by exerting pressure, the person will withdraw. If you touch him or her in another way, you can draw him or her to you. A practitioner can treat a patient as a commodity, something that has to function again. You fiddle around with it and it’ll start working again. But the practitioner can also carefully approach a

patient and look for the way he or she can be reactivated. Veldman said, 'If I want people to feel I am moving towards them, I have to be sensitive to their feelings, over the boundaries of my body towards them. I ask the other person to feel intensely in return, to be sensitive to me, as it were. This opens the way for an intense process of reciprocal feeling that enables a patient to be actively involved in the process of change. If a therapist relates to the patient as a person, the patient is not looked at as an object or a victim, but as an active participant. Healing and change become a shared responsibility.'"

One of the areas in which Frans Veldman put his findings into practice was in the schooling and supervision of nursing students. In the nineteen-sixties, he started exploring the prevention of back problems of nurses. Nursing is known to be a difficult profession, partly because of the continuous necessity of lifting and moving patients. Veldman developed a method to make that easier, based on his insights into touch, touching and affirmative contact with the patient, which he had gained in his therapeutic practice. The results were so successful that Prof. Dr. H.J.P.M. Dijkhuis, now inspector with a provincial department of Public Health, had the method recorded in a book and a training film. The first book about haptonomy by Frans Veldman, who at that time called himself a physiotherapist and special education expert, appeared in 1970 entitled *Lichte lasten. Kinesionomie bij de verzorging en behandeling van patiënten* [Light Burdens: Kinesionomy in the Care and Treatment of Patients].



Frans Veldman and a nurse demonstrate the best way to lift and move a patiënt (from *Lichte Lasten*).

In *Lichte lasten* Veldman expanded on the technique of lifting and moving, partially based on a technical-physical discourse about strength and weights, and partially through concrete and detailed instructions for all kinds of movement actions, such as turning patients over, situating them on a bedpan, helping them upright and moving them in and out of bed. Small photographs accompany each step of the action. Nurses are told to avoid any form of lifting as far as possible, but rather to make use of aids and equipment, whether a leverage device or the assistance of a colleague. Moreover, they must also approach the patient in the right manner, not as an object or body, but as a person who can be appealed to for co-operation.

The practical and technical instructions on lifting and moving in *Lichte lasten* are preceded by an explanation of the basic principles of haptonomy. According to Veldman, the adverse physical burden on nurses stems to a large extent from an errant attitude towards sick people. Patients simply will not let themselves be manipulated 'as a random object that can be subjected to the laws of mechanics and dynamics ad libitum' without exhibiting adverse effects. By treating a patient as an object, she or he will unconsciously start acting like an object and caring becomes unnecessarily burdensome, for both patient and nurse. Veldman contended that good treatment requires that a patient is touched in an affective manner. Neither is this restricted to physical touch, but it must be so from the moment the caregiver enters the 'contact' space, the personal space of the patient, about an arm's length away.

In *Lichte lasten*, Veldman introduced the concept of 'kinesionomy', a term which refers to the laws of kinesiology (the study of motion), combined with the 'non-objectifying quality of approach within the human contact', or the haptonomic approach. Kinesionomy then is not only about the technical aspects of movement, but also about the individual and psychological facts that play their part. The therapeutic method developed from this idea is, in Veldman's words, 'actually less a question of leading than of guiding'. In other words, it is an approach of correction and support, in conjunction with the patient's own abilities.

This new method of approach and treatment required a new terminology. The need for a precise description of the phenomena related to the sense of touch, perception of space and being touched, led to an entirely new haptonomic vocabulary. In addition to concepts such as haptonomy and kinesionomy, Veldman developed a large number of new terms over the years, or created a new meaning for existing words. In the second edition of *Lichte lasten*, which appeared in 1977, he introduced the concepts of persensus, consensus and transensus, which are concerned with the ability of the human being to feel intensely towards respectively objects, persons or spaces outside one's own body. In 1977, he also

published an extensive list of concepts and basic principles of haptonomy, entitled *Tasten naar zinvol contact* [Feeling the Way towards Meaningful Contact]. This included terms related to touch, with various forms of sensory perception, physical perception and with the effect of haptonomy on the regulation of tonus, that is, tension in the muscular tissue.

Throughout his entire lifetime, Veldman continued to develop specific haptonomic concepts and terms, specifying and defining their meaning more and more precisely. As a result, haptonomy became equipped with an increasingly specialist but also increasingly impenetrable language. This language led to incessant discussion among students and followers on the precise meaning and interpretation of haptonomic concepts.⁴ Despite a growing arsenal of haptonomic terms, the essence of haptonomy remains difficult to express in words. As Dorus Gerritse put it in 1987, “If you want to know what haptonomy is, you must undergo a good haptonomy treatment yourself. A verbal description can only reflect the outside shell, which lacks the conclusive element, the perception. This approach is not a verbal process, but is experienced through tactile contact with the unclothed body. Touching in this manner is however, a taboo in our society and thus an outsider may be averse to haptonomy. Westerners simply rarely communicate physically. They don’t caress each other, and they don’t hit each other; they seldom kiss and cuddle, touch very little and seldom weep. They live intellectually and in dissociation. This is exactly the crux of their misery.”

Execution

A story Veldman liked to tell when he wanted to explain the fundamental phenomena of haptonomy, he borrowed from the book *Venture to the Interior* by Laurens van der Post. The author related how during the Second World War he was a prisoner of war and was forced by the Japanese to witness several sadistic executions. Two other officers were standing beside him. The men kept each other on their feet by putting their arms around each other, whereby they experienced a strong mutual closeness, which helped them to rise above the horrifying scenes. “This, I knew, was the truth, this closeness of him for me, me for him. This was the core of reality. We could all be this way, close to each other, if we would only permit ourselves to do so.”

⁴ In March 2013, a translation entitled *Woordenboek van de Haptonomie*, a French-language dictionary by Frans Veldman and André Soler, was published

A Separate Training

Besides in publications, Frans Veldman also made his findings known in lectures and demonstrations. Interest in these presentations grew during the nineteen-sixties. His audience consisted primarily of physiotherapists who, dissatisfied with a technical and symptomatic patient treatment, were seeking other ways to approach their patients. Frans Veldman’s lectures, particularly the practical demonstrations he gave, made a huge impression. “When you watched such a demonstration and saw what happened, it was wonderful. Everyone was stupefied. For example, a person was lying on the bench, as stiff as a poker and when he was touched affectively, you could see the stiffness melt away. You could see his rigid back expand. At such a moment the person is receptive to change. People who are suddenly touched in an affective way, are confronted with their emotions. These feelings inevitably rise to the surface. So there was a lot of crying and weeping. That always made a deep impression on observers.”⁵

Magic

Frans Veldman’s demonstrations stimulated his audience to choose an alternative interaction with their patients. A participant related the following, “In those years I was head of a physiotherapy department in a nursing home. We had a female patient who weighed 120 kilos. Her left side was paralysed and when she had to leave her bed a patient lift was used. You can imagine how someone becomes an object in one of those. After attending a lecture by Frans Veldman, I thought, ‘Let’s try something else’. By inviting her to do what she could still manage, I could help her use her healthy leg and turn her body so as to get herself from the bed to a chair. She was thrilled and the nursing staff thought I had worked magic. Then I helped them to do the same thing.”⁶

In the mid-sixties, the first formal education in haptonomy gradually emerged from these lectures under the designation ‘psychological tactile therapy’.⁷ The lectures were given in the gymnasium of the Physiotherapeutic Institute in Nijmegen. Veldman himself gave lectures and demonstrations. Being a very charismatic man, his students hung on his every word. “Veldman could move groups of people to great emotion,” one of them commented.⁸

⁵ Willem Pollmann interview

⁶ Marli Lindeboom interview

⁷ Anne-Jan van Minnen interview

⁸ Mieke de Wolf interview

The programme started with a small group of students. “Initially, it was not a school at all,” a former participant said, “It was more like a project, a set of lectures for people to whom he introduced his theory. He just started one Sunday morning with a sort of get-together. Whoever wanted to come and listen, came. First there were five people, then ten” The study programme, which in the mid-sixties officially became known as the Academy for Haptonomy and Kinesionomy, began to take shape. In 1966 seven people graduated in psychological-tactile therapy. In 1968 there were seventeen and in 1970 twelve. The name of the course had since been changed to haptokinesy. Among the first graduates were physiotherapists Anne-Jan van Minnen, Ted Troost and Mieke de Wolf; later on there were Cock van den Berg, Peter Zwiers and Emiel Vermeulen. All of them would leave their own mark on the history of haptotherapy. In the second half of the nineteen-sixties, the study came more or less to a standstill because Veldman was struggling with health problems. In the spring of 1969 he was admitted to hospital with serious heart problems. A year later, studies were resumed with short courses in the summer for doctors and physiotherapists and in the fall a two-year haptonomy programme was started. In the meantime Anne-Jan van Minnen was employed as the head of education. “I was asked to join the staff in 1970, to put my shoulder to the wheel. And so I did.”⁹

At this time, other teachers besides Frans Veldman were engaged to give lectures. One of them, Dorus Gerritse, later became an university professor and inspector of post-secondary education. He knew Veldman from a para university course in special education pedagogy, which they both took in the nineteen-fifties. At Veldman’s request, Gerritse taught courses in philosophical and psychological theory. In the early stages Kiek Zeydner, a fellow physiotherapist and friend from the Betuwe, was also engaged in teaching. The same applied to Willem Pollmann-Wardenier. She and her husband were neighbours and friends of the Veldman family. Pollmann was experienced in socio-cultural training and women’s group work. Veldman asked her to give lectures on themes like ‘freedom’, ‘tenderness’ or ‘maternal care’. Gradually she became more intensively involved in the training program. The very first employees helped to spread the word about haptonomy by giving lectures and demonstrations, and by publishing articles in the *Nederlands Tijdschrift voor Fysiotherapie* [Dutch Magazine for Physiotherapy].

The Academy for Haptonomy and Kinesionomy grew. From 1970 on, a new programme started every year. The lectures were given across various hotels and conference centres throughout Nijmegen.¹⁰

⁹ Anne-Jan van Minnen interview

¹⁰ Willem Pollmann interview

As a solution for the continual shortage of space, Veldman decided to build a new educational site in Overasselt, about ten kilometres south of Nijmegen, a location that he invariably referred to as ‘the centre of the Netherlands’. A former doctor’s residence was converted into a living space with consultation offices and a large lecture hall in the attic. Veldman maintained the Physiotherapeutic Institute in Nijmegen as a financial basis for the Academy, which still had to grow. He did, however, implement a policy change: the institute would work on a haptonomic basis. The current personnel were replaced by therapists who were prepared to follow the haptonomy course. Anne-Jan van Minnen was appointed director of the institute, in addition to his position as head of education at the Academy.¹¹



The Academy Dorenhage in Overasselt, ninetenseventies.

On 26 October 1974, the educational centre in Overasselt was officially opened with a symposium entitled *Lief(de) en leed* [Joy and Sorrow]. So many people were interested in participating, that not everyone could get in, due to space restrictions. The official opening was conducted by Jan Bastiaans, Professor of Psychiatry at the University of Leiden, specialised in trauma treatment of members of the resistance and warvictims.

¹¹ Nenny Kegels interview

He spoke highly of Veldman's accomplishments and said he was looking forward to the contribution the Academy for Haptonomy and Kinesionomy could make to public health, said contribution 'not a minor one and one which in many respects may have a more causal effect than a verbal-communications technique or a general contact-training technique alone.' The Leiden Professor of Clinical Psychology Jan Dijkhuis also expressed high expectations at the symposium. The greatest shortcoming in society, according to Dijkhuis, was the poor development of emotion. The thousands of doctors and therapists in training should do something about this. However, in order to achieve that, not only ideas but people were needed for a methodical organisation. "I feel," said Dijkhuis, "that a turning point is possible in Overasselt. I hope that it will be recognized as a turning point and that I'll be around to see it happen."¹²

In his word of thanks, Frans Veldman acknowledged he was aware of the need to expand the group of employees who formed the foundation of haptonomy. "Haptonomy is not mine, you know that. Haptonomy is a given. I tripped over it and decided to pick it up. It is anything but a 'light burden', on the contrary. Luckily, there is a small group helping me to carry it. This circle is expanding and this will be necessary, because haptonomy is an essential and vitally important matter that requires the passionate and practical efforts of many."¹³



Frans Veldman lecturing before an audience of students in Overasselt. On his left a painting of Armand Campi that served as inspiration for many a haptonomy-logo.

¹² idem

¹³ idem

In addition to Anne-Jan van Minnen and former student Ted Troost, who taught much of the practical education together, Willem Pollmann and Jan Dijkhuis were also appointed as staff members of the Academy. They taught the theoretical courses. Jan Dijkhuis, who on the advice of his brother Prof. H.J.P.M. Dijkhuis, took a course with Veldman at the beginning of the seventies and kept in touch with him, was an admirer of the American psychologist Carl Rogers, grounder of the client-centred therapy. Dijkhuis saw clear lines running between haptonomy and the Rogerian psychology and lectured on that.

The course in Overasselt was an enormous success from its beginning. Students flocked to the school. "He didn't have to do anything at all, place any advertisements or anything," according to Willem Pollmann: "They came to apply for entrance at Overasselt and they already had their tuition ready to pay."¹⁴ Sixty students were accepted per course, and they all had to have at least a degree in a higher professional (applied) education in the field of mental or physical health care. Mostly physiotherapists registered for the course, as well as several speech therapists, doctors and psychiatrists.¹⁵

Glue

"Something in this approach touched me to the extent that it made me think: that's it! I did my physiotherapist training with Leffelaar who at that time was one of the nestors of Dutch physiotherapy. The teaching was at a very high level. But no matter how good it was, you learned to subdivide people in small parts. They had lower back problems or hip problems for instance, or problems with their neck or shoulder. Physiotherapy didn't have any glue to make a complete man or woman out of these parts. And that's what I saw in haptonomy."¹⁶

The programme started in the seventies with an alpha course, in which the basic principles of haptonomy and kinesionomy were taught. This programme took two years and consisted of several separate blocks of two days. In the morning there were theoretical classes and in the afternoon practical lessons or vice versa. A former student related, "I was in the group that had theory lectures in the mornings. They were given either by Frans Veldman himself or by Willem Pollmann. Then there were the practical lessons in the afternoon. In

¹⁴ Willem Pollmann interview

¹⁵ Jan Koolhaas interview

¹⁶ idem.

these classes, the topics that had been discussed in the morning were translated into more practical exercises. The objective was always to let go of all intellectual and rational ballast and to keep getting closer to your own feelings. The idea was to learn to see the difference between what you were actually feeling and what was more intellectual thinking. This was really the central theme of the entire alpha course.”¹⁷

Those who completed the alpha course could proceed to the beta course, which offered a more practical, therapeutic application of haptonomy. The Academy also offered lessons in the field of kinesionomy, where the emphasis was on lifting and moving patients. Students could choose either a practical course in kinesionomy or a teaching course that enabled them to teach nursing students and therapists in hospitals.

In addition to the course training, conference evenings were also held at the Academy during the winter seasons. Simultaneously with the opening of Overasselt in 1974, the Instituut voor Haptonomische Communicatie [Institute for Haptonomic Communication] was founded for the purpose of organizing these evenings. The IHC evenings took place in the attic of the institute. They were well attended. “It was sometimes so crowded, as there being no room left in the attic and the rest of the attendees had to sit in the cafeteria. Loudspeakers were set up so that everybody could follow the presentation.” The IHC evenings were filled with lectures, music or presentations. They offered those present, often former students, the opportunity to meet and exchange experiences. Part of the lectures and presentations were compiled over the years in *Haptonomisch Perspectief*, a ‘domestic scientific publicity medium’ of the Academy for *Haptonomy and Kinesionomy*. The focus of *Haptonomisch Perspectief* was on students, members of the IHC and other interested parties. Until 1980 three editions were published.



Audience in the lecture hall at the attic of the Overasselt institute.

¹⁷ Jan Koolhaas interview

Success and Criticism

Veldman not only wanted to gain the attention of nurses and physiotherapists for his theoretical and practical insights into haptonomy, but also that of doctors, gynaecologists and psychologists. The appearance of the book *Lichte lasten* contributed to the recognition of his name among medical practitioners. He was invited in 1971 to give a presentation during a course for medical practitioners at the University of Leiden. In a lecture entitled *Non-verbale en non-directieve benadering binnen de geneeskunde* [A non-verbal and non-directive approach within medical science] Veldman explained his vision on the inherent features of contact with patients. As opposed to the purely scientific approach, which is directed exclusively at the technical healing of an illness or ailment, he presented the therapeutic contact, a non-verbal and inviting approach to human beings. This haptonomic approach, according to Veldman, should be the basis for research, diagnostics, and treatment, as well as care. “In our opinion, it {haptonomy} is the most fundamental and appropriate, but also perhaps the optimal kind of personal approach to any contact, especially in our contact with our ill and infirm fellow human beings.”

His message fell on willing ears at the Leiden University, where Veldman knew several people through H.J.P.M. Dijkhuis who at the time was teaching there as a Professor of General Practice Medicine. In 1974, at the opening of Overasselt, Professor Jan Bastiaans suggested there might be options for a continued cooperation. “Leiden is interested in Veldman’s work. Perhaps Veldman is also interested in Leiden.”

On 18 October 1975, a major haptonomy congress entitled *Raakvlak heel de mens* [Touching the Whole Person] took place at the City Theatre in Nijmegen. The occasion was the thirty-year anniversary of the Physiotherapeutic Institute in Nijmegen, which Veldman dated from 4 October 1945. Practitioners of therapeutic and care professions in healthcare and welfare-organizations, students and former students and other interested parties were invited to celebrate this jubilee together. It was a mad rush. Of the thirteen hundred persons interested, four hundred had to be turned away because of space restrictions. Speakers were the Leiden professors, Jan Bastiaans and Jan Dijkhuis, the Leiden clinical psychologist, Dr. L.J. Menges and the Nijmegen psychiatrist, Anna Terruwe.

In their lectures, each speaker endorsed the insights developed by Frans Veldman from their own scientific perspective and background. For example, under the title *Doorbraak van isolement* [Breaking through Isolation], Bastiaans discussed the issue of how haptonomy can help people to reach a ‘limitless way of being’, a way of living in which they feel at home with themselves and with the world. According to Bastiaans, in order to do this, the

haptonomically-oriented therapy would have to aim at ‘allowing patients to experience security in both being together and acting together.’ Subsequently, Menges in his lecture highlighted the importance of interpersonal relationships within psychotherapy. He asserted that from the causal scientific perspective, psychotherapy had long focussed primarily on the patient’s childhood, tracking down the cause of his current suffering to his past. Menges argued a more integral approach that also heeds the present and future of the patient. He saw an important opportunity for haptonomic therapy to do this, because it “is actually attuned to the needs of these times. It can help alleviate alienation with respect to all aspects of the human existence and offer the possibility of discovering one’s own identity, as well as that of other people.” Jan Dijkhuis discussed the innovations in psychotherapy in his lecture, whereby he also examined the client-centred psychotherapy of the American Carl Rogers. Rogerian therapy was based on the assumption that the therapist should not behave as an expert but should assist the client in clarifying his problems himself, and in doing so, arrive at solutions. The basic principle of any form of psychotherapy according to Dijkhuis is ‘the self-regulation of the one seeking help’. The task of the aid-giver is to help the client to actualise self-regulation. For this a listening attitude and a continuous connection with the patient and his experiences is needed, a work method which is employed pre-eminently in haptotherapy. Dijkhuis then concluded that haptotherapy opened an entirely new possibility for psychotherapists to interact with those seeking help. The last speaker was Anna Terruwe, whose lecture entitled *Affectiviteit en Effectiviteit* [Affectivity and Effectiveness] discussed the importance of affectivity as the basis for an authentic, humane and healthy way of life. When life is merely determined by effectiveness, it leads to loneliness and frustration, stated Terruwe. “In the effective way of life, a person can find himself walking into a blind alley, as if he has hit a dead end.” She asserted that caregivers and life scientists must pre-eminently be the keepers of the ‘open existential way of affectivity’. Terruwe saw haptonomic communication, presented by Frans Veldman as a tactile form of affectivity, as a physical affirmation, which on one hand is objectively discernable, but which simultaneously ‘does not cease to have consequences where the corporality melts into the totality of being human’.



Prof. J.J. Dijkhuis

dr. A.A. Terruwe



Prof. dr. J. Bastiaans

Dr. L.J. Menges

Symposium 1976

In his closing speech, Frans Veldman stated that the growing societal alienation was leading to an increasing number of people seeking help and guidance. In his opinion, there was great need for a non-directive and affirmative form of assistance, as is offered in haptonomic therapy. He emphasised the necessity of educating competent and motivated therapists who could provide haptonomically-based guidance and care in a cautious and responsible way. This haptonomic approach, stated Veldman, is characterized by affectivity and a listening attitude, in accordance with the principle set out by psychiatrist, H.C. Rümke: ‘Drawing as close as possible while still maintaining distance’. In this way, the haptonomic approach offers the patient, in Veldman’s words, ‘a lamp for his feet, which irradiates the grey mist of alienation and builds a house for the homeless, in which he can dwell in his individuality, with prospects for the morrow’.

The symposium *Raakvlak heel de mens* formed a festive highlight and a public acknowledgement of Frans Veldman's achievements. The symposium clearly underlined the position of haptonomy, in between physiotherapy and psychotherapy. Four psychotherapists delivered their lecture to a room full of physiotherapists. When the lectures in 1976 were published in a book, H.J.P.M. Dijkhuis reiterated this explicitly in his foreword. 'Frans Veldman is not only surrounded by students and patients, but also by renowned scientists – particularly from the life science disciplines – who sense that a breakthrough of insight into a multidimensional human functioning is at hand'. Dijkhuis had great expectations of this breakthrough; in his opinion it would be the starting point of the 'advancement of humane wellbeing'.

Although therapeutic intervention for adults is the focal point in *Raakvlak heel de mens*, in the next few years Frans Veldman applied himself with increasing intensity to the haptic supervision and coaching of pregnancy and birth. From the understanding that the sense of touch is the basis upon which all other senses develop and that affective tactile affirmation significantly influences the growth of human emotional life, he researched the sensitivity to tactile stimuli in new-borns and unborn children. He discovered that even in early stages, unborn children clearly react to such stimuli, and that expectant parents can communicate and play with their child while it is still in the uterus. In 1976 he spoke about his findings at a symposium of the Nederlands Genootschap voor Fysiotherapie [Netherlands Association for Physiotherapy]. Here he asserted that surrounding the child with loving, cherishing tenderness, even before birth, stimulates her or his motoric, intellectual and emotional development. Subsequently, a tactile-affective and affirmative reception of the baby by the mother during and directly following birth ensures optimal conditions for growing up propitiously.

His unique method of making contact with unborn children drew the attention of a research group in France, engaged in the survey of new-borns, the Groupe de Recherche et d'Étude sur le Nouveau-Né (GRENN). One of the members reported there was someone in the Netherlands who 'played with unborn babies'. GRENN then invited him to send an article about his mode of operation. Sometime later, an unfathomable text arrived from Overasselt, written in awkward French and full of Greek and Latin terms. The article was politely rejected. However, Frans Veldman was not one to be easily put off, as one of the research group members recalled: "His answer arrived quickly. 'You cannot understand it because you've never experienced it. I have to be in Paris soon, let's set up an appointment'." That meeting was to become the beginning of a long and fruitful collaboration. One of the scientists from France who contacted Veldman was the Parisian gynaecologist

and obstetrician, Frédérick Leboyer, who in Paris was engaged in finding ways of bringing new-borns lovingly into the world, without unnecessary stress. Leboyer went to visit Veldman in Overasselt. Some time later they gave an afternoon course on prenatal haptonomy, at which among others, two well-known Dutch gynaecologists were present. Leboyer showed films on the 'the gentle birth' at one of the IHC evenings.¹⁸

Although he was successful in what he did, Veldman did not gain the recognition in the Dutch academic world that he was looking for. His behaviour, dominant and completely convinced that he was right, evoked resistance in some people. "On the one hand, he was seen as a man of distinction," said one of his former students, "but on the other hand he had to deal with jealousy and criticism from physiotherapists and doctors as well."¹⁹ Despite earlier suggestions, haptonomy was ultimately not included in the standard curriculum of the Leiden general medicine programme.²⁰

In his own circle, criticism of Veldman's teaching methods grew. "He gave wonderful lectures, he could tell great stories," said a former student, "but he was not that good at tutoring. He could demonstrate, he could underline theoretically what happened, but he couldn't teach the students step by step."²¹ Within the Academy for Haptonomy and Kinesiology, employees became irritated at Veldman's authoritarian manner and his peremptory rules and regimens. Affirmative as he could be towards patients, with students and employees he could be harsh and unyielding. Some students felt they were not respected. Others felt that he sometimes overstepped a limit. A former student recalled: "There was a swimming pool in Overasselt and it was more or less expected that students went swimming in the nude."²² She didn't feel comfortable doing so, but the group pressure was so great that wearing a bathing costume was not really an option. "We weren't even allowed to take yoga classes," said another former student, "and we had to wear certain clothing; no shoes, but sandals that you could take off easily. It was actually a way of life. Twenty-four hours a day. That's what I found so fascinating about it, although I could have done with a little less. But that was never the case with Frans, it was always a little more."²³

¹⁸ AnneMarie Veldman-Van Polen interview

¹⁹ Mieke de Wolf interview

²⁰ AnneMarie Veldman-Van Polen interview

²¹ Willem Pollmann and Marli Lindeboom interview

²² Nenny Kegels-van den Brandhof interview

²³ Mieke de Wolf interview

Loudspeakers

Teacher Willem Pollmann remembers vividly Veldman's strictness with his employees. "I went to Overasselt to give a lecture. His study was connected to the public address system. He listened in to hear if I was doing well. Even in the swimming pool he could listen in and hear me lecturing while he swam. If he didn't agree with something I said, he would let me know. He would wait until the students had left the room and then opened the door of his study: "Have you got a minute?" I would enter his study and then he'd point out to me what I had done wrong. I would say: "Did I get anything right?" "Oh yes," he would say, "most of what you said was OK, but that's not what I'm talking about right now." He never complimented me. He just assumed you did the right thing."²⁴

At the end of the nineteen-seventies, Frans Veldman indicated that he was considering terminating the educational programme; he wanted to move to the south of France where he had since purchased a house. He offered to sell the Academy for Haptonomy and Kinesionomy to his 'crown prince', Anne-Jan van Minnen. At Jan Dijkhuis' initiative, who was more in favour of a collaborative management of the Academy, a meeting was held to discuss a broader takeover, in which Dijkhuis and the Pollmann couple would take part. However, they were not successful in getting the necessary finances together. Anne-Jan van Minnen was able to do this, albeit in a partnership with Ted Troost who had a successful physiotherapy practice in Rotterdam.

At the beginning of 1980 Veldman announced his departure to France in a circular and informed everyone that the Academy would pass into the hands of Van Minnen and Troost as of 1 October of that year. According to the agreement, he still had to teach a haptotherapy beta course. This was the second and last beta course that was taught under his tutelage. Ted Troost and Mieke de Wolf, among others, had taken part in the first experimental course. This second course had about forty students, twenty-five of whom eventually received their diploma in 1983.²⁵

²⁴ Willem Pollmann interview

²⁵ The course ended 4-3-1983. Graduates were, among others,: Lore Veldman, AnneMarie van Polen, Kiek Zeydner, Frans Veldman Jr. and Wim Laumans

After the course of 1980, Frans Veldman moved permanently to the little French village of Oms, situated in the Pyrenees, where he would dedicate himself to research. He settled in Oms together with his wife, Lore Tromp and his assistant, AnneMarie van Polen. Van Polen was a nurse by profession and followed one of Veldman's courses in the nineteen-seventies. In 1976 she resigned from her job in order to support Veldman in his work; she remained his number two until his death in 2010.

3

FOR THE BETTERMENT OF HUMANITY

The Search for Form and Structure (1980–1992)

Introduction

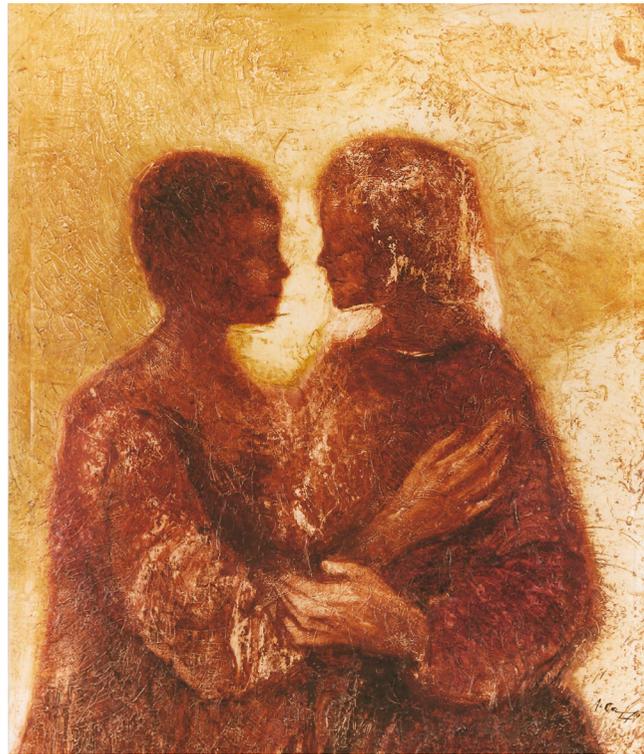
Following Frans Veldman's departure for France, haptonomy continued to develop on its own strength in the Netherlands. Educational programmes started in various locations throughout the country and a growing number of students had themselves educated in haptonomy or haptotherapy. Subsequently, the graduates looked for a place in the Dutch healthcare system. The whole process had its share of growing pains. The structure of the educational programmes, the content of the subject matter, mutual relations, how to relate to the founder of haptonomy – everything had to take form and structure while in motion. To the outside world, this sometimes seemed to be an incomprehensible, almost sectarian process, in which the tone was set by conflicts over the route to take. However in everyday practice, it became evident that an increasing number of clients benefited from a therapeutic treatment based on haptonomy. Slowly but surely, haptotherapy became an accepted method of treatment.

A Parting of Minds

As of 1 October 1980, Ted Troost and Anne-Jan van Minnen took over the Academy for Haptonomy and Kinesionomy from Frans Veldman. They would bear the organisational and financial responsibility for the Academy together, while the actual team of teachers, among whom Jan Dijkhuis, Willem Pollmann and Kiek Zeydner, would continue on. Veldman himself was intended to stay on at the Academy as a teacher and theoretical expert, albeit at a greater distance than before. However, things didn't go as planned. The transaction between Veldman and his successors was accompanied by conflicts, originally business in nature, but the dissension quickly grew into an ideological battle, which eventually, in 1981, led to a definitive rift between Veldman and his successors. It was a period of fierce emotions. Many of those directly involved later looked back on it with pain and distress.¹

¹ Mieke de Wolf interview

One of the stumbling blocks was the fact that Veldman, even after the takeover of the Academy, had every intention of keeping a tight grip on the organisation of the training programme down to the smallest detail. However, his successors wanted to leave their own mark on the Academy. They decided to physically loosen the ties with Veldman and moved the Academy to a new location.² They found temporary accommodations in a church in Krimpen aan den IJssel, but that space quickly became too small. Thus, after more than a year, the lectures were carried on in Rotterdam, Ted Troost's home base, where lecture halls and practice rooms were rented in a conference centre.



Painting by Armand Campi, produced on request of Frans Veldman.

The high overhead costs obliged the new directors to work with larger groups, one hundred and twenty students, instead of sixty per year. Veldman refused to agree.

² Anne-Jan van Minnen interview

“They immediately wanted to expand commercially,” said AnneMarie Veldman-van Polen, “Classes would be attended via a television screen and afterwards students could practice. We objected to this. We said that this had nothing to do with haptonomy.”³

Shortly after the transfer Veldman published a number of circulars, in which he made it known that he had no confidence in the dealings of his successors. “He wrote that his legacy in Anne-Jan’s, Ted’s and my hands was not safe. That it was being sullied and squandered,” Willem Pollmann reported. “Whereupon he withdrew and never returned. We no longer could boast a crown-appointed professor.”⁴ Out of loyalty to Veldman, Kiek Zeydner decided to withdraw from the Academy as well. Veldman reproached his successors for using commercial methods. His successors threw back in his teeth that he refused to hand over the existing course material. “He took all his notes and materials with him,” said Willem Pollmann, “things that we had all worked on together. All video material, all notes. He only left the tables and chairs and chalkboard behind.”⁵ Former Academy director Ted Troost stated it even more graphically. “After half a year, it appeared that Veldman didn’t feel like it anymore. He withdrew, declaring he couldn’t reconcile himself to our way of thinking. He took his homemade cake, his cookie tin and his recipe with him. And there we were.”

The staff of the Academy consisted at the time of Troost, Van Minnen, Pollmann and Dijkhuis. There was a small team of teachers that comprised, among others, Mieke de Wolf, Peter Zwiers, Cock van den Berg and Emiel Vermeulen, all trained by Veldman. Staff and teachers had an enormous task at hand reorganizing the curriculum and develop new teaching materials. It was hectic. While classes were already underway, the didactic concept was being developed step by step, chiefly by Van Minnen and Pollmann.⁶ Part of the teaching staff was still in training at the beta course in Zetten, but the dissension between Veldman and his successors became at some point palpable there too, causing several students to quit. Peter Zwiers: “It became very uncomfortable. Especially once Frans started speaking his mind in public and writing letters in which he stated that all sorts of things were wrong with our course. Both as teacher and student, you were caught in a double bind and that didn’t feel right.”

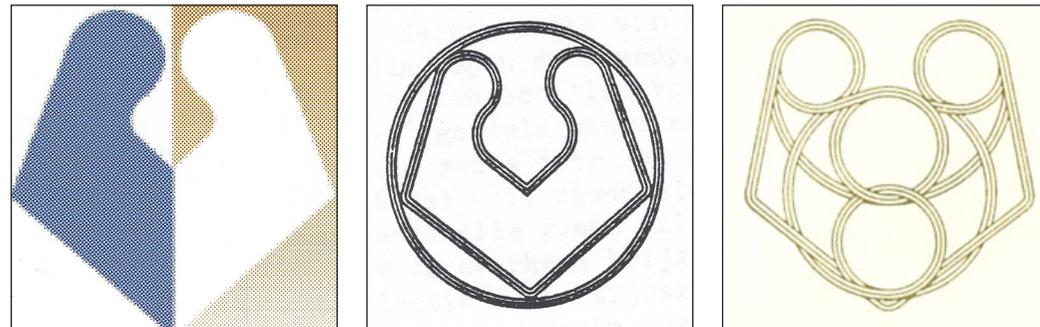
³ Annemarie Veldman-Van Polen interview

⁴ Willem Pollmann interview

⁵ Willem Pollmann interview

⁶ Willem Pollmann interview

Apart from teaching at the beta course in Zetten, Veldman was not allowed to teach in the Netherlands because of a competition clause. He withdrew and moved to South France permanently. There he founded the Société Internationale de Recherche et de Développement de l'Haptonomie which was later renamed the Centre International de Recherche et de Développement de l'Haptonomie CIRDH [International Centre for the Research and Development of Haptonomy], where courses and training in haptonomy were given. The French students were mostly medical personnel, among whom many gynaecologists, who integrated haptonomy into their existing professional practices. From 1990 onward, scientific congresses were also organised by the CIRDH.



From France, Frans Veldman continued to respond from time to time to the developments in the Netherlands through public letters. A number of faithful followers, former colleagues and former students, kept him informed of these developments in detail. Whenever anything happened in the educational programme or in the haptonomic practice that Veldman didn't like, he never hesitated to sharply condemn it. For example, in 1982 he issued a warning in a publication entitled *Memoranda Haptonomica* against the incorrect usage of several terms he had introduced and against an incorrect way of touching, applied to teach haptonomic basic presence. His circulars were received with mixed emotions in the Netherlands. "We felt abandoned by him. Every so often those letters came flying down from that mountain there in Oms, stating that we weren't doing things properly. That was really terrible. We couldn't do anything right anymore."⁷ Veldman would later remark in an interview that he considered transferring the Academy to his successors as a big mistake, yes, even 'the biggest mistake of my life'.

⁷ Willem Pollmann interview

After Frans Veldman and Kiek Zeydner stepped back, the problems for the Academy were not yet over. Tensions arose quite quickly between the two directors, who were very different, both in character and way of thinking. Anne-Jan van Minnen explained, "Ted Troost choose to exert pressure, taking people far past their limits in order to point out a new path to them. I preferred a more gradual approach: definitely confronting people with their limits and grey areas, but differently. This led to a deadlock."⁸ In 1983, the two terminated their collaboration and Van Minnen left the Academy. For the remaining staff members, it was clear that something had to be done, if the Academy was to become viable. "What was Ted going to do with his own school?" Jan Dijkhuis asked himself, "Troost was a man of many gifts, but he didn't have the organisational capabilities to run an academic course." Together with Hans Pollmann, Willem Pollmann's spouse, Dijkhuis set up a foundation on the 19th of October 1984 to take over the Academy from Troost. More than six months later, on 6 May 1985, the negotiations were successfully concluded. From that moment on, the Academy for Haptonomy and Kinesionomy was owned by a foundation under the chairmanship of Jan Dijkhuis. Willem Pollmann-Wardenier was appointed director. Around this time, the Academy settled in the woods of Doorn in a former school building.

An Educational Scene Divided

Once the Academy was established in Doorn, it finally seemed like the right time to build and expand. Yet, there were many concerns. The foundation had incurred a significant debt with the costs of the takeover. Mieke de Wolf, who succeeded Pollmann as director in 1989, recounted, "We were lucky to attract an adequate number of students but we had very high expenses ... that was very worrisome. We had no money, but buckets of idealism. There was a time when the whole thing threatened to go down the tubes. As teaching staff we decided to put half our salaries into the Academy and so the bank said: well, if these people have so much faith in it, let's extend them some credit."⁹

The content and form of the educational programme had to be developed further. Doorn started with an alpha course of two years. In addition, there were blocks of *Behendigheid, Vaardigheid en Training*, the so-called BVT-blocks [Dexterity, Skills and Training] in which one aspect of the alpha course was studied in depth over a three-day period. In order to build up a sufficiently qualified teaching staff, a teacher-training programme was started. From October 1986, Doorn also offered a therapy programme, the beta training. This too, had to be built up from scratch. Under Jan Dijkhuis' guidance, the teachers set to work to

⁸ Anne-Jan van Minnen interview

⁹ Mieke de Wolf interview

draw up the course. Mieke de Wolf reminisced: “There were six of us involved in it. The boys were brainstorming. I, being a woman, was appointed to write. I had a roll of wallpaper and that’s what we composed the entire beta course on. Vestiges of it are still being used.”

One hundred and twenty candidates signed up for the first beta programme in Doorn. They all had a post-secondary professional education in health care and had completed the alpha course. Nevertheless, they had to undergo a three-day selection process doing exercises, labs and trial treatments in order to be admitted. The Academy teachers assessed the candidates on presence, transparency and prudence. In the end, less than half of the candidates were accepted. The first beta programme consisted of three blocks of three days per year. In between these blocks, the students carried out practical exercises and discussed literature in small study groups. After four years, the course was concluded with a proof of competence, which consisted of the treatment of a student from the alpha training. Whoever passed was admitted to the apprenticeship programme, in which one of the senior teachers supervised the treatment of a number of clients. Finally, a dissertation had to be written. For the students, most of whom had their own offices, the beta programme was exceedingly intensive, not only because of the amount of time required but also because the training had a strong impact on their personal emotional development. No wonder that over the course of four years, a large number of students dropped out. Only fifteen students reached the finish line of this first beta programme, called ‘Beta 1’.¹⁰

The personal development of students was the focal point of the haptotherapy programme in Doorn, just as it was in Overasselt in the seventies. “People are involved in their own process,” as former teacher Mieke de Wolf put it. “It’s always about your own emotions, your own feelings, your own gestures.”¹¹ Traditionally there were no grades or diplomas, so teachers had a hard job objectifying student assessment. “It was always based on your gut feeling; you never really felt certain about anything. One teacher might say that it was good, while another one might assess it as insufficient.”¹² At the initiative of Jan Dijkhuis, who was used to handling subjectivity in psychology courses, an assessment with grades was eventually introduced. From that moment on, the graduates received a diploma.

¹⁰ Jan Koolhaas interview

¹¹ Mieke de Wolf interview

¹² idem

Diploma

“I didn’t have a diploma at all,” Mieke de Wolf said. “So being the director, I gave myself one. I also gave one to Cock van den Berg, Peter Zwiers and Jan Dijkhuis. None of us had one. Frans Veldman wasn’t into diploma-giving. Haptonomy was not about skills, said he, but rather an art. I liked that. He said, ‘As soon as you institutionalize the education, rules and restrictions will follow and the fervour will be lost. Vitality will be lost.’ There’s something in that, but it’s not what our society is used to. You leave your students in the lurch. If it doesn’t lead to anything, what are you educating them for? Just to propound an interesting theory or a nice way of doing things?”

With Doorn still being a work in progress and seeking the right form, the fact that an authoritative central educational programme was non-existent left the way open for the proliferation of haptonomy and haptotherapy programmes that emerged during the second half of the nineteen-eighties. It seemed as if everyone wanted to set up his own institute during those years. First, Anne-Jan van Minnen started a new therapy study near Nijmegen from his haptotherapeutic practice, the Instituut voor Toegepaste Haptonomie (ITH) [Institute for Applied Haptonomy]. He described it afterwards as something that just more or less happened. “Colleagues often used to consult me about their patients. They would say, ‘Can we appeal to you if we are stuck on something?’ At a certain moment, several people appeared to have identical problems, and they asked, ‘Can’t we form a small group to discuss these things together, to evaluate and see what comes out of it?’ This was very successful so they said, ‘We should really structure this thing.’ So, yes, then it became a training programme.”¹³

The ITH was officially founded in 1985, the first college year started in 1986. The study programme with Van Minnen took three years and was specifically geared toward the profession of haptotherapist. A post-secondary professional diploma in health care was the pre-requisite, although individual exceptions were sometimes made. Substantively, Van Minnen pursued his own path from the beginning. For instance, he considered moving

¹³ Anne-Jan van Minnen interview

with vitality more important than touch and resilience. He also emphasized the importance of involving the client's circle of friends and family who could offer support if necessary. The ITH abandoned the classic 'trptych' developed by Frans Veldman, in which the client, through touch, was familiarized with the basic phenomena of touch in three successive sessions.

Tryptych

"During the first and second part or phase of the triptych, the client lies on his (or her) stomach. During the first phase you touch him on the back. This helps the client to learn that by opening up to me as a therapist, his body will respond by releasing tension. During the second part the client's legs are touched. This helps the client to realize that the way in which acts or occurrences come to one from the outside have an effect on whether one opens up to them or whether one shuts down. If the left leg is touched with the right intent, the leg will become warmer, softer, more relaxed. This will help the client to become more resilient, both physically and emotionally. When something approaches us from the outside and it's good, our bodies will respond by opening up and release tension. In the third phase or part of the triptych the client lies on his back and you touch the stomach. This is much more confrontational. Veldman called this a triptych. I still apply this with each new client."¹⁴

A third educational institute that opened in this period is the Wetenschappelijk Instituut voor Haptonomie (WIH) [Scientific Institute for Haptonomy] in Overasselt. In his father's former educational centre, son Frans R. Veldman continued his father's work from 1985 onward. He provided introductions and courses in what he called 'authentic haptonomy'. This initially took place with the apparent approval of Veldman senior. Around the turn of the century, however, father and son had a falling out. In 1998, the WIH moved to Grave. Frans Veldman Jr. refused any contact with the other haptonomy or haptotherapy educational programmes.

Early in the nineteen-nineties, one of the teachers at the Academy for Haptonomy, Peter Zwiers, decided to start his own programme after a conflict with the board of directors. His ideas on renewal of the programme, which he developed together with his wife and

¹⁴ Jan Koolhaas interview

co-teacher, Arina Winkelman, received no support from his colleagues and the board. The majority of the Academy wished to stay in line with the ideas of Frans Veldman. "It was also a bit of a philosophical conflict of principles," Winkelman related. "We wanted to add some theoretical framework, in which we also used the basic principles and models from social psychology. There was absolutely no support for this at all."¹⁵ After a period of tension and conflicts, Zwiers and Winkelman left the Academy. In September 1993, they opened a school for haptonomy and haptotherapy in Amersfoort called Synergos. A sizable group of students went with Zwiers. The chairman of the board and co-teacher Jan Dijkhuis and his wife, Willy Dijkhuis-Abbinck, also made the switch to Synergos. This left a gaping hole in the Academy for Haptonomy.

Within fifteen years, these events resulted in a serious fragmentation of the haptonomy and haptotherapy educational scene. From the mid-nineties on, there were four institutions in the Netherlands where one could study haptotherapy: in Doorn, Berg en Dal, Overasselt/ Grave and Amersfoort. In addition, small-scale training programs in haptonomy existed for shorter or longer periods, such as in Enschede, where owner-director Otto Huizinga offered a three-year educational programme geared toward the application of the basic principles of haptonomy in one's own profession. In Castricum, the Haptein programme, by Cor Koolhaas and Eric Zwiers, ran for several years and also focused on the integration of haptonomy in one's original profession. In Eindhoven, Pieter van der Slikke gave short introductory courses in haptonomy and applied kinesionomy. Kiek Zeydner ran a small-scale training for students in Bemmelen. Each educational programme applied its own definition of haptonomy and haptotherapy and placed its own accents on the method of touch. There was little contact between the programmes. Just how difficult the inter-relational contact was, became painfully obvious during a conference evening in September 1989, where Anne-Jan van Minnen and the newly-appointed Mieke de Wolf presented their vision on haptotherapy. It was an evening of bickering, mutual criticism and babbling confusion. Nevertheless, both speakers concluded that it would be worthwhile to explore to what extent an exchange of information and cooperation might be possible. Several more conversations followed but the contact eventually came to naught.¹⁶

¹⁵ Peter Zwiers and Arina Winkelman interview

¹⁶ Anne-Jan van Minnen and Mieke de Wolf interview



Mieke de Wolf, director of the Academy for Haptonomy in Doorn

Of the four therapy programmes, the Academy in Doorn set itself most clearly in the tradition of Frans Veldman Sr., even though Veldman himself refused any contact with the board and teachers for many years.¹⁷ Mieke de Wolf found the directorship of the Academy ponderous. As teacher and former student, it was difficult for her to adopt the business-leaders role in regard to the many financial and personal problems. She resigned from the position in 1991, although she remained on the teaching staff at the Academy for another twenty years. Dienneke Naeyé succeeded De Wolf. She was the first director who had not studied haptonomy or haptotherapy. This created both distance and clarity. Naeyé held the position for almost five years and was succeeded in November 1996 by Jeroen Hendriksen, who remained director for six years. From 2002 until mid-2010, the management was run by Laurens de Kleine, and later by the current director, Jo Rutten.

Whilst the changes in management in Doorn occurred with some regularity, the other educational institutions remained more strongly aligned to one owner-director. Anne-Jan van Minnen carried out the management of the ITH until 1997, when his wife Monique van Bilderbeek, succeeded him. Van Minnen did, however, remain at the ITH as a teacher until mid-2010. At Synergos Peter Zwiers was no director any more since 2006, but he continued on as a teacher. As of 2012, Frans Veldman Jr. still ruled the roost at the WIH in Grave.

The various educational institutions produced a growing number of graduates in the nineties. Those who had followed the haptonomy programme generally simply added what

¹⁷ A cautious renewal in contact doesn't appear until 2005 (see chapter 4)

they had learned to their existing medical or paramedical practices, which they then carried out 'on a haptonomic basis'. So there was an expanding group of physiotherapists, psychotherapists and doctors who worked on a haptonomic basis. For those who had taken the haptotherapy training, the situation was somewhat different. They called themselves haptotherapists, but as yet, this was a profession without statutory or legal status. As more and more people successfully graduated from the therapy training, the question as to what the profession of haptotherapist exactly entailed and where this profession was seated in the spectrum of Dutch health care became increasingly relevant. As the first haptotherapists had just graduated in Doorn as early as 1990, director Mieke de Wolf realised that a register of haptotherapists would eventually have to be set up. "We must get started, even though I am dreading it. If we're going to create a separate profession for this, we'll have to shape it ourselves. [...] We also shouldn't be afraid of peer-to-peer reviews and supervision. These things must be included. If we're going to set up a professional register, then we'll have to specify disciplinary rules and determine complaints procedures. I don't know how we're going to do all this, but I'm convinced we'll have to do it."

In 1993 the Academy for Haptonomy shortened the beta course to three years, the same length as the ITH-course. Simultaneously, the Academy began a separate two-year programme for haptonomic pregnancy coaching, set up by Roos Ferdinandus and Olga Prent under Willem Pollmann's supervision. Earlier, in Rotterdam at the beginning of the eighties, the Academy offered a similar type of course, which was integrated into the general theoretical training in 1986. The formation of an independent programme for pregnancy coaching meant that from the mid-nineties there were not only certified haptotherapists, but certified haptonomic pregnancy coaches too.

An Association for Haptonomy

In 1981, shortly following the transfer of the Academy for Haptonomy and Kinesionomy to Troost and Van Minnen, proposals were made to the Academy staff for the foundation of an independent association, which, among other things, would engage in encouraging contact amongst those trained in haptonomy. The suggestion was discussed, but the staff at that time just had too many other things on their plate. However in October 1981, the Academy did send out a questionnaire to about eight hundred former students, asking their opinion of issues like education, post-graduate courses, practice groups and communication. Three hundred and twelve individuals responded to the questionnaire and returned it. The responses showed that former students often found it difficult to apply in practice what they had learned, that a large gap existed between training and practice. There was a need for practice groups, for the exchange

of information and for regional meetings. The desire for more written information was also expressed: professional literature, a syllabus and the resumption of the *Haptonomisch Perspectief* publication.

The results of the poll did not lead to immediate action. It was three years before an initiative was taken to launch an independent association for graduates of haptonomy.

This initiative came from the IHC the Institute for Haptonomic Communication, which Frans Veldman had transferred to his successors simultaneously with the Academy in 1980. Over the years the IHC-evenings were held in different locations.¹⁸ As previously done in Overasselt, they consisted of lectures, workshops or performances by well-known actors. They were very popular, two or three hundred listeners a night was no exception. The IHC-evenings were organised by staff members and teachers of the Academy, but from the very beginning the point was to distinguish them from the educational programme. Advisor Jan Dijkhuis in particular, was an adherent of this idea. In 1984, when Dijkhuis and others set up a foundation to take over the Academy from Ted Troost, this also provided the go-ahead to transform the IHC into an autonomous association, the Dutch Association for Haptonomy NVvH.

The initiator and first chairperson of the NVvH was Cock van den Berg. Members of the very first board were Willy Dijkhuis-Abbink, Kees Popping, Hans Koerts and Jan Koolhaas. In a preparatory period of one and a half years, the objectives of the association were formulated during very comprehensive discussions and the charter was drawn up. The initiating group formulated its objective as 'the promotion of haptonomy in the Netherlands, in its practical and scientific aspects'. To do that, the association focussed on four concrete areas of activity: professional development (such as the introduction of practice groups), improvements in communication (through conference evenings and the publication of a magazine), safeguarding the importance and value of haptonomy (by pointing out developments and if necessary taking a stand) and finally, serving and protecting the interests of haptonomic professionals (through public promotion and cultivation of a better understanding of the profession).

The NVvH was formed on 24 September 1985. Two months later the introduction meeting took place in Driebergen. It was a tumultuous meeting, not in the least because Frans Veldman, in an open letter that at his request was read aloud at the meeting, declared in no uncertain terms his opposition to the association. Veldman argued that haptonomy 'in its very being and nature', exclusively acknowledges open and free communities that do

¹⁸ Jan Koolhaas interview

not advocate any specific group, professional or personal interests. According to Veldman, this new association that wished to engage in the representation of interests, among other things, was clearly a 'société close', a closed society, of which membership was reserved for a small group of people. Even more reprehensible he found that by using the predicate 'Dutch', the association created the impression that it represented haptonomy in the entire country, a representation of facts that he called presumptuous and misleading. He then called for the association to be immediately dissolved. He advised members who had already joined to cancel their memberships. Several months earlier, in September 1985, Veldman had already written a critical publication in which he exhaustively explained why he opposed the formation of an association for haptonomy. Each interest group, he wrote on this occasion, would eventually turn against those who join the association. Members would be forced to assimilate and so be robbed of their own identity and personality. 'Any conformity to a group has a de-personalising effect'. It was for this reason exactly that haptonomy was principally against the formation of groups. According to Veldman, the founders of the NVvH had shown that they really had not understood any of this. 'The provisional association board has declared as its objective and motivation for the foundation that it will safeguard the values of haptonomy but in fact, the act of founding this association tramples this most principal of all values underfoot'. That it had come to this, he considered 'deeply lamentable'. The board, the staff and teachers of the Academy who had contributed to this situation, according to Veldman, had showed 'their incompetence in the most revealing manner possible' and so in his opinion, had proved once again that he had with good reason distanced himself from the policies, board and teachings of the Academy.

Frans Veldman was not the only one criticising the new association. Anne-Jan van Minnen also turned his back on the NVvH. At the introduction meeting in November 1985, he held a penetrating plea against the association's objectives and organisational form and asked the board to consider dissolving the association again. Perhaps the fact that the NVvH stemmed from Academy circles, from which Van Minnen had since withdrawn, had something to do with his criticism.¹⁹ His greatest objection was that the NVvH acted as the self-appointed guardian of the values of haptonomy. He contested the mandate of the association to assume this role. "So I stood and said: 'First I want to know which values of haptonomy you are going to guard. How do you plan on doing this? Does this mean these values become sacrosanct? May nothing ever touch them again? That would also bring to a halt any further development of haptonomy.'"²⁰ Written objections to the foundation of the NVvH also

¹⁹ In the articles of association from 1989, the Academy for Haptonomy is named as the educational programme that provides access to membership of the NVvH

arrived. In 1985 alone, the board of the new-formed association received fifty-five letters, including some that acclaimed the initiative.

In the months after the introduction meeting, the board members discussed the pros and cons of all the arguments. They realised that with regard to the statutes, they had ‘bitten off more than they could chew’. In November 1986, they proposed an amendment to the statutes at the General Meeting, in which the association’s ambitions were expressly reduced. The promotion of interests, the protection of haptonomy values and professional development were removed as objectives. The association now chose solely to stimulate communication between individuals who were trained in haptonomy or were interested in it. In concrete terms, this comprised setting up lectures, the exchange of professional experience and maintaining contacts with external parties.

Despite the many vocal protests against the foundation, the Dutch Association for Haptonomy appeared to fulfill a need. After one year, the association already had 416 members. At the end of 1990, at its fifth anniversary, their number had grown to approximately five hundred. In addition to former students of the haptonomy education programmes (‘regular members’), the association specifically addressed persons interested in haptonomy; they could apply as a ‘prospective member’.

The first and most important task of the NVvH was to organise conference evenings like the former IHC had done. A preliminary committee headed by Jan Koolhaas took on this task. In addition, a magazine for the profession of haptonomy called the *Haptonomisch Contact* was launched in 1989. This magazine would appear quarterly; its objective was ‘to contribute to the development of haptonomy as a science, as a life perspective, as a therapeutic alternative’.

As with the association itself, *Haptonomisch Contact* aimed at a mixed audience of haptonomically-educated and other interested professionals. Because of this mixed focus, the contributions were rather diversified. The magazine contained dissertations on aspects of haptonomy and haptotherapy, discussions on the use of terminology, announcements and reports from the conference evenings and members’ meetings, advertisements from the various educational programmes and courses, reviews of relevant literature and theses, and

²⁰ Anne-Jan van Minnen interview.

also poems, sketches and reports of personal experiences with clients. Controversies were not shunned. *Haptonomisch Contact* regularly published spirited debates on colleagues’ treatment methods or viewpoints, on the effectiveness and operation of the association or on the difficult relationship with the ‘father of haptonomy’, Frans Veldman. Discussions were also held on the content and character of the magazine. Readers sometimes complained about its policies concerning advertisements or editorials or about the scientific quality of articles. Viewpoints were frequently presented baldly and bluntly. As the editor-in-chief put it: “I’ve noticed that in haptonomic circles, people sometimes are too convinced of the difference between Good and Evil.” An editorial advisory council to improve the quality of *Haptonomisch Contact* was established in 1992. It consisted of Dorus Gerritse, employed at that time as a teacher at the ITH, haptotherapist Hans van Slooten and scientific journalist Ruud Overdijk.

The broad-ranging and rather vague profile of the NVvH, chosen to appease the objections to the organisational form, quickly appeared to be turning on the association. The participation in the association was limited; within five years there was an obvious shortage of active members. It was difficult to find a new executive board and committee members. The NVvH membership meetings were poorly attended, usually no more than ten to twenty of the more than five hundred members. The run on lectures and workshops also decreased in the course of time. In the peak years, as many as a hundred and twenty people sometimes came to the evenings. This later dropped off to only thirty or so.²¹

The board members of the NVvH had a difficult task, not in the least because they had to cope with issues which they did not feel equipped to handle, such as complaints about therapists who worked on a haptonomic basis, invitations from insurance companies to discuss fees, and requests for help from members who were struggling with VAT- problems.



Dorus Gerritse at the tenth anniversary of the NVvH

²¹ Joost Leonhard interview

In addition, the board wrestled with internal differences of opinion on the wisest course to follow. In the words of chairman Cock van den Bergh at his farewell in May 1989: “As is usual within haptonomy I would almost say that we do not lack our share of troubles.” The new chair, Jan Koolhaas, stayed on for less than two years, after which the position had to be fulfilled by an acting representative because of a lack of candidates. This difficult administrative situation was only exacerbated by financial problems. In 1990 the NVvH celebrated its fifth anniversary with a conference, featuring speakers like Dorus Gerritse, Anne-Jan van Minnen and Emiel Vermeulen. Because it had not been budgeted in advance, the anniversary celebration knocked a substantial hole in the annual accounts.

The NVvH Anniversary

The fifth anniversary of the NVvH induced Frans Veldman to write a long letter in which he explained at length his objections to the association and to *Haptonomisch Contact*, consistently dubbed by him as ‘your little newsletter’. Reacting to this, a columnist sent in a fictitious interview with the five-year old NVvH, a character that sat slumped in a chair as youngsters do, oafishly complaining about his father:

“I’ve had enough. They say he is my father, but I’ve never met the man myself. He doesn’t want to acknowledge me as his son and what’s more, I have a so-called half brother who doesn’t want to have anything to do with me, either. What can you do? [...] They say you need your father for your sense of identity. Well, he didn’t acknowledge me. A natural consequence of that seems to be you sort of strive after this father figure. You dress somewhat like him, you spend money you don’t have, you try to adopt his norms and values, that’s to say, as far as you think you understand them. None of it really helps. [...] I think I’m going to stop worrying about my father. I’ve got so many other things to do and maybe at the end of the day, it’s really his problem. He is the one who says he knows everything perfectly. And then everyone else starts interfering too. It’s enough that I know who I am myself.”

At the beginning of the nineteen-nineties, a hefty discussion flared up on the theme of the representation of interests. Within the group of haptotherapists an increasing need arose to define and distinguish essential characteristics. What precisely is a haptotherapist, and how is he to be distinguished from someone who works on a haptonomic basis? The educational programmes themselves offered no clarity. They each had their own vision on the nature of the profession. This made it difficult for haptotherapists to present an unequivocally distinctive image towards the greater public, the health insurers and the government. Friction developed between haptotherapists on the one hand and on the other those who worked on a haptonomic basis in an medical or paramedical practice. The therapists, whose education was more thorough and had taken them longer, tended to oppose the latter group and look down on them. A growing number of therapists strove for legal recognition and financial regulations. They asked themselves what a completed degree in haptotherapy should signify for treatment fees. ‘It is a known fact that any therapist who thinks he has learned something new expresses this by increasing his rates, and why not? One doesn’t get a Rolls Royce for the price of a Fiat’, according to one letter submitted. One member of the editorial staff of *Haptonomisch Contact*, Mia van Luttervelt, made a strong argument at the beginning of 1991 to have the issue of promotion of interests placed on the NVvH agenda. ‘It would seem that the representation of interests in haptonomy falls into the same category as doping in sports. We know that it takes place, but not to what extent. We know that it’s officially not allowed, but no one knows exactly what and why not. Everyone has an opinion on the matter, but no one has sufficient authority to enforce a general opinion’.

Van Luttervelt proposed to set up a committee to research the exact need for representation of interests and the role that the NVvH should play in this. The board of the Dutch Association for Haptonomy categorically did not want to represent any professional interests. Former chairperson Joost Leonhard, stated on the subject: “For us it was all about keeping in touch with each other regarding insights, ideals, perspectives and possible applications of haptonomy. For the betterment of humanity – we really did take such a broad view on the subject. We explicitly did not want to turn the association into a lobby group, because then we would have to discuss things like money and surely we would drift away from the gist of the matter. It was a very specific choice of the NVvH to continue as before.”²² The board did however agree to study other options. During the General Meeting in March 1991, the Commissie Communicatie Belangenbehartiging [Communications Committee for the Representation of Interests] was created. In consultation with the representatives of the educational programmes and several advisors, this committee drew up a survey, which was sent to all NVvH- members in

²² Joost Leonhard interview

December 1991. The response was disappointing; no more than sixty forms were sent back, far too few for the association to take any action. Nevertheless, the gist of the answers was clear. There was indeed a need for more representation of interests. There were members who explicitly asked for a professional association, one which would guarantee the professional quality of its members, would help solve problems and would be accountable at a professional level, also for complaints. The board of the NVvH acknowledged at the beginning of 1992: 'Such an association does not fit in with the current Association for Haptonomy. It will have to be a separate association'. And this is exactly what happened. At the end of 1992, a new association saw the light of day: the Association of Haptotherapists, the VvH.

The NVvH itself underwent a serious administrative crisis in 1992. Vacancies for the entire board of the association were open. Three committees (the Editorial Committee, the Contact Committee and the Preparatory Committee) all faced a lack of replacements for members stepping down. There were too few people prepared to put their time and energy into the association. *Haptonomisch Contact* placed an urgent appeal: the continuation of the association would be at risk should no board members come forward. This cry for help brought results. In the spring of 1993, a new team took office in a - modified - small executive board, a larger general board in which the committees were represented and supported by an external secretarial office. The new board resolved to improve communication with members of the association and with external organisations. In the coming years, the NVvH would also be forced to define its role and position in relation to the new professional association, the VvH.

Representation in the Media

Slowly but surely, Dutch people were getting acquainted with the concepts of haptonomy, haptonomist and haptotherapy. However, the specific meaning of these terms remained obscure for many people. In a short book entitled *Verkenningen in de haptonomie* [Exploration into Haptonomy] from 1986, Pollmann, Dijkhuis and Troost attempted to explain to outsiders what haptonomy actually entails. The text is based on lectures given at the Academy for Haptonomy. After an introduction called, 'What is haptonomy', topics such as relationships and contact, pregnancy and birth and haptonomic coaching of sports were discussed. There was a great interest in the book; in 1998 it went into its fifth printing.

The more clients came forward for a treatment or therapy based on haptonomic principles, the more the media became interested in this new phenomenon in health care journalists

and programme writers attempted to delineate the content, organisation and significance of haptonomy. Their point of view was initially favourable. In January 1985, *Elsevier*²³ journalist Alice Oppenheim described haptonomy as a meaningful treatment for people in danger of being crushed under the intense demands that society imposed upon them. Instead of reaching for the bottle or pills, according to Oppenheim they might better submit to the restorative powers of a therapist with haptonomic know-how, for such a therapist is able to help people recover their sense of emotion and feelings. In the article, she quoted the inspector of Public Health A. de Wit, who called haptonomy valuable because people 'can be helped tremendously' by haptonomy without having to directly end up in the psychotherapeutic circuit. Oppenheim continued on to call haptonomy a 'bridge between psychotherapy and physiotherapy'. In addition to her appreciation of the significance of haptonomy, the journalist expressed her astonishment at the factional struggle that was taking place within the world of haptonomy at that time. It was particularly the controversy between Frans Veldman and Ted Troost that drew attention due to the extremely negative statements made by Veldman about his successor. 'It would be a terrible shame', she argued, 'if the relatively 'new' approach of haptonomy would not receive the attention and guidance it deserved, because of diverse personal interests of those directly involved'. Other media, as well, followed with interest the struggle within the world of haptonomy.

In the nineteen-eighties, Ted Troost was a determinative image for haptonomy in the Netherlands. He presented himself in the media as 'haptonomist'. He based his reputation on the fact that he treated a number of famous athletes, among whom were the speed skaters Hein Vergeer and Yvonne van Gennip, tennisplayer Richard Krajicek and soccer players such as Hans van Breukelen, Marco van Basten and Ruud Gullit. In 1988, he coached a majority of the players of the Dutch national soccer team. When Oranje, the Dutch national team, won the European championship in Western Germany in June of that year, Ted Troost shared their success. In his book *Het lichaam liegt nooit* [The Body Never Lies], which appeared in 1988, he explained the added value of haptonomy for the sportsman or sportswoman. 'Sometimes there are complaints for which no trainer, doctor or physiotherapist has a remedy. Then it is usually high time to give the athlete his or her emotions back, to make him feel how she or he should handle equipment, opponents or his environment. That's where haptonomy comes in'. According to Troost, haptonomy teaches top athletes to involve themselves deeply in their sport, 'body and spirit'. By getting to feel more for themselves, their material and their opponents, they can experience more joy in sporting and will perform better.

²³ *Elsevier* is a liberal weekly magazine

On the treatment table

Speed skater Hein Vergeer described what happened to him on the treatment table with Troost. “Ted’s treatment focusses exclusively on using your feelings. ‘Feel where you are’, he says as you lie on the table. Suddenly he grabs you forcefully or smacks you. You are shocked. It hurts. And it proves that you were not emotionally present at all. So you start to resist and oppose him, afraid he will hit you again. But that’s the wrong thing to do. Then you feel his hand on you and you experience an immediate warmth and connection. Next he helps you to feel the energy flowing through your body. He helps you to feel this in various parts of your body. You even start to feel your blood flowing and it feels like a beneficial physical expansion. You can feel that you’re working, changing something yourself.”

Ted Troost did not shy away from hard-handed tactics in order to start people on a new path. The athletes he treated were full of praise about his interventions. However, within the world of haptonomy not everyone was enthusiastic about Troost’s ground-breaking approach. In France, Frans Veldman condemned in no uncertain terms the methods and public appearances of his former employee and successor. ‘Not being curbed by any sense of standards or values or self-criticism, he launches his stupidities and shows in an stupefying manner that he has not understood one iota of the essence of haptonomy’, Veldman wrote in 1985. In the Netherlands, too, some colleagues were worried about the effect Troost’s actions would have on haptonomy’s image, especially when some physiotherapists, sometimes with little expertise, followed his example. Mieke de Wolf said on this: “There were people who took this and ran. They had for instance followed a three-day course and subsequently called themselves haptonomist. Not restricted by any knowledge, people did the strangest things. Ted Troost would sometimes stand on top of someone to have that person experience his capabilities. And people who had seen that would do the same thing. We witnessed terrible things. Inappropriate and unacceptable.”²⁴

²⁴ Mieke de Wolf interview

Another form of unacceptable behaviour with an exceedingly negative effect on the image of haptonomy took place in the realm of sexuality. Since in the context of haptonomy clients are touched on their unclothed body, a form of intimacy easily arises between therapist and client, which in incidental cases gives rise to sexually-tinted behaviour. In the eighties, with the sexual revolution barely behind them, many Dutch people had a relatively tolerant attitude towards nudity and sex. Yet there were limits. An actual code of conduct for haptonomy did not yet exist in the eighties but the Academy for Haptonomy in Doorn had set up a number of basic rules for handling intimacy sensibly and prudently. Former rector Willem Pollmann said: “Limits were different then, more flexible, really. But we were aware of the fact that we needed to be very prudent. If someone had been sexually abused and you started working with her, you could easily go too far. Particularly if you don’t realise that sexuality is sometimes the only way in which she can make contact. Being the haptotherapist, you have to keep on being gentle with her; that is what she really needs. Otherwise, you’ll run into problems, of course.”²⁵

In 1993 various daily newspapers published stories about haptonomy with the gist that haptonomy could easily lead to sexual abuse of clients. The negative publicity was triggered by a concrete accusation of abuse made against a physiotherapist in Norg.²⁶ Although the therapist in question had not had any actual haptonomic training, the incident was cause for the secretary of the Dutch Association for Physical Therapy to claim that abuse was increasingly prevalent among physiotherapists who work on a haptonomic basis. The executive board of the NVvH considered taking a public stand against this image, however, true to its viewpoint that the representation of interests was not among the association’s tasks, it eventually decided against it. Publications linking haptonomy to sexual abuse obviously did not do the image of haptonomy any good.

Meanwhile in France, Frans Veldman proceeded researching and defining haptonomy. This resulted in a voluminous publication in 1988, entitled *Haptonomie, wetenschap van de affectiviteit* [Haptonomy, the Science of Affectivity]. The book consists of three volumes. Veldman first deals with the basic principles and tenets of haptonomy. He examines the relationship between humankind and its social environment, humankind and body, the meaning of intimacy and the role of vital yearnings for humankind’s well-being. In the second volume, the fundamental phenomena of haptonomy are described

²⁵ Willem Pollmann interview

²⁶ Norg is a little village in the east of The Netherlands

and explained, whereby a great number of haptonomic terms are introduced. In the third volume, Veldman examines haptonomic applications and the ethical aspects of haptonomy. The numerous Latin terms and the long, complex sentences make *Haptonomie, wetenschap van de affectiviteit* neither an easy nor accessible book to read. Veldman directed his writing primarily to an audience with some philosophical, psychological, medical or paramedical knowledge. A comprehensive publication on haptonomy was anxiously awaited in the Netherlands, but when it finally arrived, a number of Veldman's earlier employees were critical of the result. Dorus Gerritse for example, wrote an extensive review for *Haptonomisch Contact*, in which he called Veldman's book a missed opportunity, 'a book with a counter-productive effect, often barely readable and scarcely understandable in the essential aspects, veiled by a film of rationalization.' Jan Dijkhuis too expressed criticism, in particular on the scientific quality. In an interview he said: "It is scientific to the extent that it is a kind of philosophical study, but Veldman has actually become more of a moralist through his books, than a scientist."²⁷ However, none of this detracts from the fact that *Haptonomie, wetenschap van de affectiviteit* is to this very day still considered to be an important standard work in haptonomic circles. In the Netherlands, three printings appeared; the French edition even saw eight printings.

The appearance of *Haptonomie, wetenschap van de affectiviteit* led to a modest wave of publicity on haptonomy. Frans Veldman agreed to a limited number of interviews. In February 1989, journalist Frits Abrahams published an exhaustive and critical article in a progressive newspaper entitled *De pijn van het onbegrensde zijn* [The pain of limitless being], in which he described haptonomy as 'a new rage in health care'. The journalist reported on a meeting with Veldman, during which he underwent an introductory haptonomic treatment. Abrahams had lengthy conversations for his article not only with Frans Veldman and his son, but also with Ted Troost and with critics of haptotherapy, one of whom was Dr. C. Renckens, chairman of the Vereniging tegen de Kwakzalverij [Association against Quackery]. Although the journalist acknowledged that success stories about haptotherapy were being reported from all sides ('...haptonomy does help, people completely agree on this'), his final assessment was by no means positive. He drew a picture of haptotherapy as a world of 'feuds, sectarian behaviour, nudism, avarice and assault'. Father and son Veldman were so disgruntled about Abrahams' article that they filed a complaint with the Council for Journalism. This complaint, however, was declared unfounded.

²⁷ Jan Dijkhuis interview

The clash with the newspaper served to make Veldman even more reticent in his dealings with representatives of the press than he already was. The editorial staff of *Haptonomisch Contact* noticed this, when in October 1990, they wanted to cover the first International Congress for Haptonomy in Paris. The editor in question was not allowed access. 'A series of accepted and paid for congress seats were withdrawn when it appeared that they were for a member of the editorial staff', wrote the editorial office of *Haptonomisch Contact*. The editorial office complained about the fact that 'in the haptonomic world, nota bene, free access to information was made impossible'.



Frans Veldman at the Paris congress 1990

Thus the public image of haptonomy and haptotherapy was in the early nineties partly determined by differences of opinion and conflicts of interests, not only between 'France' and 'The Netherlands', but also between haptonomists and haptotherapists from different training programmes. The fact that the haptonomically-educated still had problems explaining the essence of haptonomy and haptotherapy to journalists in clear and simple terms did not help. However, no matter how critical the media might be, the number of clients was steadily growing. More and more people were finding their way to the haptotherapist or the haptonomically-trained physiotherapist for a curative treatment of their complaints. In *Haptonomisch Contact*, a former client described the effect of such a treatment. 'After one year of haptonomy, I feel stronger and in touch with life. I am no longer startled if people touch me. I have confidence in myself again, and in my life. Neither do I feel like an object anymore, but 'human'. I can find a place for myself among others. Now, I can enjoy feeling someone's arm around me, to be comforted, simply, the sense that I can share feelings...' It was an experience she shared with many others.

4

A GOLDEN OPPORTUNITY

A Professional Association for Haptotherapists (1993-2012)

Introduction

At the beginning of 1993, a professional association for the practitioners of haptotherapy was founded. From that moment onward, haptotherapy developed into a separate paramedical profession aspiring to explicitly distinguish itself from other professions that practised ‘on haptonomic principles’. The new professional association focussed on three main duties: to define and delineate the profession, to gain recognition and compensation by health care insurers for the treatment method and, last but not least, to stimulate the quality and professionalism of haptotherapy. The association was successful in achieving these objectives, but success brought along other problems. As health care insurers increasingly required membership of the professional association as a condition for treatments to be covered, the discussion about who could or could not become a member became increasingly fierce. An internal battle on this issue brought the association to the brink of an abyss.

A New Association

It was in the air: a professional association for haptotherapists was needed. The Inspector of Health Care for the paramedical professions A. de Wit, insisted on this as early as 1985. He foresaw a great future for haptotherapists – if the treatment method was channelled in the right direction. “A professional association must be established that can apply and enforce a code of conduct. We must be able to verify what is and isn’t acceptable and what is contrary to the ethics of haptotherapy so that we can impose sanctions, for example, in the form of expulsion from the profession.” At the beginning of the nineteen-nineties, a growing number of graduating therapists also seemed to need a professional position and set fee rates. Health care insurers also were asking for clarity and explicit agreements. Given that the NVvH, the Dutch Association for Haptonomy, specifically did not want to engage in these types of issues, the formation of a new association was inevitable.

After the NVvH- survey on representation of interests foundered in the spring of 1992 due to an insufficient number of responses, an initiatory group of five haptotherapists sent a

letter that summer, via the Academy in Doorn and the ITH in Nijmegen, to three hundred people who at one time had followed a haptotherapy training programme. The addressees were asked if they were interested in membership of a professional association, as yet to be formed. Sixty per cent responded and this gave the initiators sufficient encouragement to forge onward. With the help of a financial advisor, an organisational expert and a legal advisor, they took inventory of the basic issues confronting a new association, such as the definition of haptotherapy, the relationship with the educational institutions, the formulation of disciplinary regulations and the establishment of recommended fee rates for treatments.

After a few more consultative meetings, the next step was taken on 15 December 1992. A group of eight people, gathered around the kitchen table in the practice of Constans Manganas in Waverveen, decided to take the leap and proceed with the formation of the Association of Haptotherapists, the vvH. Those present drew up draft bylaws and appointed the provisional executive board positions. Jan Guichelaar accepted the chairmanship, Hans ter Keurs became secretary, Wim van Offenbeek treasurer; four interim board members and a legal advisor completed the board. Less than two months later, on 10 February 1993, the official deed of formation was signed.

Three committees were set up, a Members Committee, an Education and Professional Training Committee and a Public Relations Committee. The Members Committee took inventory of the applications and issued the first provisional membership cards. Approximately 80 people applied for membership in the first four months; as of 1 January 1994, they could join the association permanently. The Education and Professional Training Committee consulted with the boards of directors of the Academy for Haptonomy in Doorn and the ITH in Nijmegen on the possibility of their collaboration. The Public Relations Committee tackled the press releases, newsletters and a vvH-brochure. It quickly became apparent that the three committees could not handle the large volume of associationwork and consequently several more committees were set up throughout the following decades.

The new association presented itself in *Haptonomisch Contact* at the beginning of 1993. It stated the need for protection of the name and profession of haptotherapist as the most important reason for its existence. Up until that time, anyone who wanted to do so could call himself a haptotherapist. This had to be stopped as quickly as possible, according to the vvH. The association set as its objectives: to represent and protect the economic and social interests of its members, to have the profession of haptotherapist recognized by law and

to promote the quality of professional practice. In order to achieve all this, the association wanted to stimulate research, bring about identical exit-qualifications for the various educational institutions, set up a register of members that could be used for referrals and by insurance companies, formulate a professional code of ethics, set up a disciplinary committee and promote communication between members. The board expressed their hope that all professional colleagues would support them to realize these goals.

A biting response to the introductory article of the vvH from the Advisory Council of *Haptonomisch Contact* was instantaneously sent to the editor. Why was this competitive association allotted over two and a half pages of free space, nota bene, while no editorial comment was added, the Council wanted to know. It had little faith in the viability of the new association, which, in the Advisory Council's opinion, in contrast to the nvvH, had only one actual new objective, namely to improve the income of its affiliated members. All of the other objectives were unrealistic. 'The educational requirements specified for legal recognition alone [...] are completely unfeasible considering the current structure of haptonomy in the Netherlands', according to the Council. It also believed the formulation of a professional code of ethics and the introduction of disciplinary law to be 'castles in the air'.



Jan Dijkhuis, Willem Pollmann and Ted Troost at a anniversary of the Academy for Haptonomy

Following this critical opinion, the board of the nvvH decided that the *Haptonomisch Contact* may not serve as a mouthpiece for the new association. Membership recruitment would only be allowed in the form of advertisements. However, the boards of the nvvH and the vvH did mean to maintain regular contact as sister organisations, and to consult and coordinate any overlapping member activities such as lectures, whenever possible.

The board of the NVvH was not opposed to the formation of a professional association, rather it envisioned a future in which it would serve as an ‘umbrella organisation’ that could coordinate different specific professional organisations within the haptonomy field and could advance inter-organisational communication. It was quite conceivable that other professional associations would arise, such as physiotherapists who apply haptonomic principles. This is how Mia van Luttervelt in a letter submitted to the *Haptonomisch Contact* envisioned it: ‘They could all shoot up like mushrooms, a clump of haptonomically-based doctors, the psychotherapists, the nurses, the sport coaches, the social workers, the actors, the violin and vocal coaches...’ all connected under the communicative umbrella of the NVvH. For the time being however, this was not the case, and the brand-new Association of Haptotherapists vvh had to start by simply justifying its existence.

Building Phase

One of the first matters that the new professional association had to tackle was the definition and delineation of the profession of haptotherapist. Who may actually call himself a haptotherapist, what belongs to the haptotherapist’s line of work and what exactly is the difference between a haptotherapist and others with a haptonomic training? The association opted for a dichotomy in terminology: either one was a haptotherapist or one practised a different profession ‘on haptonomic principles’. The association did not want to use the term ‘haptonomist’ for a therapist; in the footsteps of Frans Veldman, the vvh viewed a haptonomist as someone who studied haptonomy. The designation ‘haptophysiotherapist’ launched by a Rotterdam contact group of the NVvH was resolutely tossed in the waste bin.

Anyone wanting to become a member of the vvh had to show documents to prove he was a qualified haptotherapist practicing the profession. Students could register as prospective members. A vvh Registration Committee was to record and maintain the registration of members. The question was, who was authorized to issue a licence or certification to qualified haptotherapists? There were several different educational training programs for haptotherapy; so which one would be recognized by the vvh and based on what criteria? In 1994, the association opted for a quick and pragmatic solution in which three groups were considered to be qualified haptotherapists: those who had taken a beta training with Veldman Sr., graduates from the Academy for Haptotherapists’ beta course in Doorn, and graduates of the ITH in Nijmegen. The Academy and the ITH were thus in fact recognized by the vvh as educational institutes. Other programmes were not. The Wetenschappelijk Instituut voor Haptonomie (WIH) made it known by word of the director, Frans Veldman Jr. that it wanted nothing to do with the vvh and Synergos in Amersfoort had barely started.

This did not mean that the issue of recognition of educational programmes was definitely settled; it would, in fact, cause a great deal of commotion for years to come.

After determining who might become a member of the vvh, the next step was to describe in detail what the profession of haptotherapy entailed: what is the scope of activities, who are potential clients and what is the purpose of treatment. The vvh wanted to make up a professional profile, preferably drafted in cooperation with the two recognized educational institutions. The ITH was happy to oblige. Anne-Jan van Minnen had pressed for the formation of a professional association for a long time; he assumed it would lead to better protection of clients. First because the educational quality of members could be guaranteed and second because clients would have the option of submitting a complaint to a disciplinary committee.

The Academy for Haptonomy reacted more cautiously when invited to discuss the professional profile, prompting the first conversations to be conducted separately. However, from the end of 1996, the vvh and the two educational institutions formed a joint ‘professional profile committee’. vvh-chair Jan Guichelaar stated, “In the beginning, the meetings were held in Doorn. These were really enjoyable sessions, with all those yellow sticky notes on the board: you say this and you say that. Gradually the shape of a document emerged.”¹ However, it was not always smooth sailing in these discussions; the interests of the three consulting parties did not always correspond. The two educational institutions were, in fact, each other’s competitors. Sharing information, therefore, could be quite sensitive.²



Anne-Jan van Minnen at the symposium in honor of his farewell.

¹ Jan Guichelaar interview

² Jan Guichelaar and Anne-Jan van Minnen interview

It quickly became apparent that the interests of the association and the institutes were not corresponding either. A point constantly at issue was whether or not firm requirements could be stipulated for the education prerequisites of prospective haptotherapists. Both institutes wanted to decide for themselves who to admit as a student. However, the vvH-board wanted all haptotherapists, and thus all students at the accredited institutes, to have previous qualifications in health care or welfare services from a professional post-secondary Dutch institution for applied sciences. This difference of opinion led to well-nigh endless negotiations between the vvH and the educational institutes. It wasn't until mid-1998 that a definitive agreement was finally reached about the professional profile. In March 1999, the vvH General Meeting approved the text.

Professional Profile of a Haptotherapist

In the professional profile of 1999, the haptotherapist's area of work was thus defined: 'Promotion and/or maintenance of the wellbeing and optimal functioning of a person.' Haptotherapists want to address 'people with issues about their quality of life and emotional problems that disturb the balance between their strength and resilience and the burdens they carry'. The therapy, in which the human touch is often pre-eminent, is designed to 'achieve the desired change in regard to feeling security, trust and contact'. Haptotherapists must have at least a HBO-diploma [professional post-secondary degree] in health care or welfare services; they must have followed a training programme at one of the institutes recognised by the vvH and they have to be listed in the Register of Haptotherapists.

The board of the vvH exerted pressure to realise their demand for prerequisite education because of their wish to be recognized as an autonomous profession by the health care insurers; this required a quality guarantee. From the beginning, the association had already been in contact with insurance companies. Chairman Jan Guichelaar had the necessary experience; at the beginning of the nineteen-eighties he had already set out agreements with a Amsterdam public health insurance fund for compensation of his own haptotherapeutic practice. Now he and another board member went round to meet with all of the insurance companies. "We said to each other, we're going to sell it to them again. We used to show our own passion as we explained what haptotherapy was about. Our enthusi-

asm proved to be contagious."³ This active approach of insurers was time-consuming but effective. By the end of 1994 an Amsterdam health insurance company was the first to cover haptotherapy, provided it was carried out by a member of the vvH. By the spring of 1995, new success stories were reported. Two more local insurance companies included haptotherapy in their coverage package, the public health fund in Groningen had started a trial, and two big national companies offered incidental coverage. In the following years, one after the other insurance company agreed to cover the therapy, albeit under additional insurance coverage and under the name 'alternative medicine'. The haptotherapists would have preferred a different category, but the vvH was in no position to be choosy.

Not a Circus Act

Jan Guichelaar drew a picture of a negotiation. "At one of the insurance companies, Saskia Taat and I were facing the entire Board of Directors. Someone in the chairman's family or circle of friends had been treated by Saskia and he was terribly excited about it. So he asked, 'Could you show us something?' But Saskia replied, 'Sorry, we don't do that. It's not a circus act. We've come to discuss the interests at stake.' At the start of the meeting I stated, 'When we leave I want to know whether or not you are going to cover haptotherapeutic treatment. I don't want to hear that you'll discuss it in another meeting. You are the Board of Directors and your word is law. I am not leaving until I've heard you say yes or no.' They thought this quite odd, the directors did. But eventually, after a break, we were invited back in the room and the chairman said, 'Ms Taat en mr. Guichelaar, we're happy to have you on board.' This was, however, the only time we pulled it off like that; the only time they included us on the spot."

Even though haptotherapy was covered by the insurance companies, it did not mean the profession was recognised by law. By the end of 1993, a databank was set up in the Netherlands for recognised Beroepen Individuele Gezondheidszorg [Individual Health Care Professions], abbreviated in Dutch to the BIG-register. Physiotherapy was included in this register,

³ Jan Guichelaar interview

but not haptotherapy. This led to troublesome situations for physiotherapists who were also haptotherapists— about eighty per cent of the members. For physiotherapeutic treatments they were required to adhere to fixed rates, determined by the COTG [National Health Tariffs Authority] and were not allowed to charge VAT. For haptotherapeutic treatments they could set their own rates, but they had to charge VAT as well. It was very tempting to circumvent this problem by simply declaring haptotherapeutic treatments as two physiotherapeutic treatments. However, the vvH was dead set against this. Not only would this constitute an economic offence, but it would also undermine the position of haptotherapy as an independent profession, clearly distinguished from physiotherapy. The vvH therefore advised its members not to combine practices for physiotherapy and haptotherapy, but preferably to work in two separate buildings with two sets of financial accounts, different stationery and separate telephone numbers.

As the vvH succeeded in setting up more agreements with insurance companies, the interest in membership of the association also grew. Not only graduates from the two recognised institutes requested membership, but also those graduating from Synergos and the wIH. From 1996, a delegation from the board started discussions with Synergos about possible recognition. These talks were laborious. Synergos had serious issues with the professional post-secondary degree prerequisite; they accepted as a matter of principle students with a varied background, including people with a mbo [secondary vocational education] diploma. In their opinion, a broader intake of students, including administrators, trainers, salespeople, engineers and advisors would give haptonomy a much wider social significance. 'The fact that haptonomy, with so many tools at its disposal to coach people preventively and help them flourish, can only be applied after symptoms are showing, is simply a waste', wrote Peter Zwiers of Synergos in a letter to the vvH General Meeting.

After an extensive internal discussion the association, however, decided to hold firm to their prerequisite education demands and at the end Synergos did not receive recognition. In the summer of 1999, two Synergos graduates tried to force admission to the association through legal proceedings. They felt they were harmed by the restrictive admission policy, because insurance companies would not cover their haptotherapeutic treatments. The court, however, ruled against them. It ruled that the association was free to set their requirements for membership admission; the fact that the health care insurers do not cover treatments of non-members could not be blamed on the vvH, according to the court.

Graduates of a non-recognised training programme could only be admitted after taking a modified course at one of the recognised institutes. Some chose this route. Others decided

to become a member of the Nederlands Verbond voor Psychologen, Psychotherapeuten en Agogen (NVPA) [Dutch Federation of Psychologists, Psychotherapists and Community Workers], a professional association established in 1975 that also accommodated haptotherapists. Frans Veldman Jr.'s wIH decided to work with its own register of graduates.

Whilst the vvH board was grappling with the educational institutes about the necessity of a professional post-secondary degree prerequisite, the subject was in discussion within the association too. Not everyone shared the board's point of view regarding prerequisite education. Fierce discussions often ensued. Guichelaar reported: "At the General Meeting, haptotherapists who taught at an educational programme would defend the standpoint of their educational institute. As chair of the meeting, I repeatedly had to warn them. 'That is the perspective of your institute. In this meeting you have to act as a vvH-member. I'll allow you to have your say, but it will not be recorded in the minutes, because it is irrelevant to the business of the meeting'." Another point of internal discussion was the number of rules and regulations and how binding they must be. Quite a few haptotherapists had a deep-seated aversion to rules. This tendency had already emerged at the first General Meeting in October of 1994, where some of those present objected to the regulations for training and continuing education in the Internal Regulations. They did not recognise 'the language of haptotherapists' in these rules.

Although it took an effort, members increasingly had to conform to the rules of the association. Between 1993 and 1999 the vvH structure was built with rules, regulations and committees. This began in 1994 with a regulation for the registration of members, including the ancillary Registration Committee and Appeals Committee. A regulation for supervision was also adopted, which included provisions for ethical conduct and professional practice for therapists. A Supervisory Committee and an accompanying Appeals Tribunal were set up to handle client complaints. In reality, the Supervisory Committee was only installed after the first complaint was received in August 1996, the chairperson and secretary both being external parties: an attorney and a sub-district Court judge. After the regulations were laid down the association sent out a press release to insurance companies and other organisations, claiming that the vvH had 'exceptionally strict disciplinary regulations'. This message was partly inspired by negative articles in the press concerning sexual abuse of clients by physiotherapists with haptonomy training. By focussing attention on the disciplinary regulations, the association underlined the fact that guaranteed quality could be expected of vvH-members.

This quality of course had to be maintained as well. Haptotherapists who were a member of the professional association not only had to meet all criteria when admitted but were

also obliged to partake in refresher courses and continuing education. Every three years they had to submit the required documentary evidence of continuing education they had taken in order to ‘re-register’ with the Registration Committee. Those who failed to do so would eventually be deregistered, according to the regulations. In practice, some leniency was required, because the necessity for continuing education only sank in slowly with the vvH-members. In 2000 it became apparent that about thirty per cent did not meet these requirements. All continuing education was initially provided by the two recognised institutions. The vvH advised its members not only to take courses at their own ‘former institute’ but to take a look at other educational programmes as well, to gain new impressions. In 2000, an Accreditation Committee was formed which could approve of continuing education activities, including those from non-recognised programmes. This meant a significant increase of options for continuing education.

Refresher courses and continuing education

In December 2011 the Academy for Haptonomy, ITH and Synergos offered a number of refresher and continuing education courses via an advertisement in *Haptonomisch Contact*:

- A rucksack of haptonomic exercises
- Sexuality, men’s day/women’s day
- Workshop Adolescents
- Timing
- Development scheme as a meeting place
- Dealing with anger
- Business skills for therapists
- Diversity in your practice
- Presence, according to the Academy for Haptonomy and according to ITH
- Fullday workshop Depression
- Fullday workshop Burnout
- Fullday workshop Breath and Emotion
- Fullday workshop Optimising the moving body

All in all, in the first seven years of its existence, the Association of Haptotherapists succeeded in building a solid foundation. In the year 2000, haptotherapy had its own professional profile, compulsory professional liability insurance, regulations for continuing education and regulations for the set-up and furnishing of therapy facilities. Agreements

had been made with most insurance companies concerning coverage and good relationships had been forged with the recognised educational institutes. Crowning glory was a positive evaluation by the Dutch Consumers’ Association. In a comparative study of more than forty ‘alternative’ professional associations, the vvH came in third in the rankings with a score of 8.7. The association’s success was also apparent from its membership count that in 2000 reached 278. Mostly they were A-members, that is, graduates from a recognised educational programme, practising their profession. They were allowed to affix the identification insignia on their door. Then there were B members, graduates but not practising, such as teachers of the therapy institutions, and C members who were still studying. In the initial years the association also had D members: haptotherapists who were listed in the register without being a vvH-member, and who ‘absolutely did not want to become a member of a professional association but did fulfill all the qualifications’. Because insurers increasingly used the vvH-membership as a criterion for providing coverage rather than the register, the D membership has since lost its purpose. A decision to phase out this category was made in 1999.



Signboard of a vvH-member

Whilst the professional association was being set up, the educational institutes for haptonomy and haptotherapy continued to focus on quality improvement and increase of knowledge. In November 1994, the Academy for Haptonomy celebrated its ten-year anniversary with a symposium entitled *Kennis over aanraken* [Know-how about Touch]. The Academy’s objective in this symposium was not only to assert itself as an educational institute, but also to get the message across that employees, students and graduates of haptotherapy should engage in the systematic reflection of the why, what and how of their work. The other institutions organised symposia as well. In 1999 Synergos’ honoured advisor, Jan Dijkhuis, one of Frans Veldman’s first employees, former chairman of the Academy in Doorn and now advisor at Synergos, set up the symposium *Haptonomie hoe verder!* [Haptonomy – What’s next!].

A year later, the ITH celebrated its fifteenth anniversary with a symposium, entitled *Affectiviteit, de menselijke maat in hulpverlening* [Affectivity, the Human Measure in Therapy]. On this occasion director Anne-Jan van Minnen received a royal honour. In consideration of his services to haptonomy and haptotherapy, he was appointed Knight in the Order of Oranje-Nassau.

The vvH also embarked on the acquisition of knowledge by means of scientific research. Under the association's instruction, the University of Utrecht investigated in 1996-1997 who the clients were that came for haptotherapy and what added value this therapy offered them. One hundred and eighteen registered haptotherapists participated in the study; the data from 884 clients were collected through a questionnaire. The study shed a favourable light on haptotherapy. Clients primarily appeared to come with questions about their emotional life, complaints about stress or physical complaints such as back or neck problems. Often, they had already seen another therapist. More than half of the clients believed that the effects of haptotherapy were in comparison better or much better, while almost no one thought them worse. After terminating the therapy, ninety per cent of the clients said it had met their expectations. The researchers concluded that 'Most of the clients were very positive about the therapy; their satisfaction was founded on the positive changes they had experienced in their lives'.

In the year the University of Utrecht report was presented, a master thesis written by Mia F.W. van Luttervelt appeared at the Erasmus University of Rotterdam, in which she reported the results of a philosophical study into the fundamental ideas of haptonomy as 'the theory and practice of the affirmative touch and the affirmative encounter'. She turned out to be very much impressed by the philosophy of Emmanuel Levinas, who in his thinking focusses on 'the Other' and the relationship with 'the Other'. She urged further study of Levinas' philosophy for the benefit of the development of haptonomic ethics.

Anyone wishing to refer to scientific literature on haptonomy and haptotherapy could access the Academy for Haptonomy in Doorn since 1999, where a library was opened with professional literature and student theses. *The Haptonomisch Contact* regularly published discussions and summaries of such theses, as well as books and articles having a direct or indirect link to haptonomy and haptotherapy. In addition, between 1993 and 2000 this magazine printed the long-running series *Haptonomic Dictionary*, in which Dorus Gerritse analysed and explained concepts and terminology of haptonomy and haptotherapy.

Mounting Tension

As the set-up phase came to a close, a difficult period began for the Association of Haptotherapists. Internally, tensions mounted and relations with external organisations became strained.

At the General Meeting of 25 November 2000, several members criticized the top-down structure; they felt the vvH had become too much of a 'club of rules'. Indeed, during the first years the board had primarily focussed on specifying regulations, setting up agreements with insurers, consulting with educational institutions and drawing up a professional profile. Maintaining contact with the membership had been somewhat neglected; newsletters appeared only one or twice a year. As a result, many members did not feel connected to or involved in the association. No more than twenty or thirty people usually attended the General Meetings.



General Members Meeting vvH 2012

Within the vvH board, a categorical need was felt for expansion and rejuvenation. The association had started in 1993 with seven board members. Over the course of time, five of them had resigned from their duties and in 2000, the first secretary Hans ter Keurs, also said his farewell. Of those who had witnessed the birth of the association, only chairman Guichelaar remained. New board members had taken office in the meantime, but some of those had already left as well.⁴ Because of this, the board consisted in 2001 of just three people, including Jan Guichelaar. In order to lighten their workload, Guichelaar's practice assistant was brought in as a vvH management assistant. In this way an 'association office' automatically came into being, established at the address of Guichelaar's group practice in Amsterdam. Among other things, this office was given the task of maintaining the mem-

⁴ See attachment I for a list of all board members

bership records. The magnitude of the tasks assigned to the association office increased dramatically within several years due to the rapid growth of the association.

Around 2000, it became difficult to find new board members. There were few haptotherapists willing to make time for administrative work. One factor that made things difficult were the cultural differences between the former students of the Academy for Haptonomy and the ITH. This made working together sometimes complicated.⁵ Possibly, the powerful personality of chairman Jan Guichelaar, also played a part. He himself said, “Up until that time, we’d always had enough board members, then suddenly there were far fewer. It may very well have had something to do with my personality. I became increasingly strict during my chairmanship. I would get irritated when people started cutting corners on appointments made. So I can imagine that some people thought, ‘Well, I’m not going to be on the board with Jan.’”⁶ In November 2001, the board presented the General Meeting with a prickly choice: if no help came to support the board, all activities of the association would first be suspended, and then cease completely. The vvH was in danger of falling apart. However, it never came to that as four new members volunteered to join the board.

In order to foster more involvement of the members in policy-making, an internal magazine was created in 2001, the *vvH-Journal*, including not only announcements from the board, but also members’ initiatives and opinions. The association also organized regional meetings where members could convene. A coordinating Regional Committee was to ensure that the various regions remained in contact with each other and with the board.

Relations between the association and the educational programmes came under increasing pressure around the turn of the century. One of the factors that contributed to this was the restart of the vvH committee Education and Professional Training in 2001. This committee was to assess the quality of the educational programs and trainings based on predetermined criteria. The programme’s vision on people and society, health care and the profession of haptotherapist, the content of curriculum and training, methods of testing, the admittance policy and the organizational structure would be reviewed. The committee wanted to take on the two recognized institutions first. Then they would turn to the educational programmes that wished to be accredited. However, it never came to that. Huge interests were at stake, which complicated communication much more than anticipated. Former committee chair Joost Leonhard said, “We intended to draw up educational criteria together with the institutes.

⁵ Joost Leonhard interview

⁶ Jan Guichelaar interview

But before you can do that you must take a look behind the scenes. And these institutes were each other’s greatest competitors, so they didn’t want the other party to see their programme. Let alone sit down around the table and talk.”⁷

The educational institutes not only had problems with their programmes being assessed, neither were they satisfied with the prerequisite training requirement that was set out in the professional profile. They considered themselves quite capable of determining whether someone was suited to follow the programme. The ITH in particular resisted and continued as before to accept people without a post-secondary degree in health care or welfare services. When these students applied for membership with the vvH after graduation, they were denied. This led to enormous frustration on everyone’s part. At the institutes’ request, a working group was established at the end of 2002, which would once again take a closer look at the prerequisite requirements. In the meantime, a practical solution was found for the few haptotherapists who had graduated years ago, for example with Frans Veldman Sr., and who now wished to have a recognized diploma with which they could become a member of the professional association. In many cases they were already (partly) practising haptotherapy, but because they were not a vvH-member, the insurance companies did not reimburse the treatment of their clients. At the initiative of teacher Mieke de Wolf, the Academy for Haptonomy decided to start a ‘pick-up’ course in 2002 for these professionals. The vvH would admit the graduates of this course as members of the association.

Prerequisite Post-secondary Requirements

Looking back at the clash between the educational institutes and the vvH, Anne-Jan van Minnen, founder of the ITH said, “I strongly encouraged the coming of an organisation that would support the interests of haptotherapists. But I was shocked to see that haptotherapeutic interests were only seen in a financial context. The vvH approached the insurance companies with the question: ‘What conditions must a haptotherapist meet in order to be paid for her or his work?’ They felt this was in the best interest of the haptotherapists. To me the focus should be on the importance of amassing and exchanging knowledge, that is to say on the substantive aspect and much less on the financial aspect. The consequence was that they imposed

⁷ Joost Leonhard interview

ever-increasing restrictions on our institute. [...] At a certain moment we noticed that students we had assessed at the beginning of their studies, then in possession of a post-secondary professional degree though not in a medical or paramedical field, and whom we had found suitable and motivated for and during their training, when they applied for membership of the vvh after four years of training with us they were told no, we cannot admit you because you don't have the prerequisite medical or paramedical post-secondary education. Well yeah, what then is the meaning of recognition as an educational institute if graduates are not accepted as members of your association.”⁸

The Association of Haptotherapists vvh was not the only organisation struggling with a deficit of board members around the turn of the century; support for its ‘sister association’, the Netherlands Association for Haptonomy nvvh, was also declining. The nvvh traditionally focussed primarily on content and communication. It wanted to serve a broad constituency: people interested in haptonomy, those with haptonomy training and those with haptotherapy training. This last category, however, had from 1993 on for the most part turned over to the vvh. The remaining members were interested in haptonomy, but were not easily persuaded to participate actively. Thus the nvvh too struggled with a constant shortage of new board and committee members.

At its 10th anniversary in 1995, chairman Joost Leonhard noted how difficult it had been to keep the association afloat the last few years. The nvvh leaned heavily on the shoulders of a few board members. Leonhard described the nvvh as a ‘collection of strong egos’, wanting to meet and exchange ideas. As soon as the association no longer fulfilled the expectations of these ‘egos’, they quickly tended to react against it or withdraw from it. He called upon them to take on a different attitude. They should make themselves heard and participate actively in forming the nvvh to their own needs.

Despite this stirring call, the problems lingered on. At the end of 1997 an advertisement for new board members appeared in *Haptonomisch Contact*, stating that if nobody came forward the association would have to be discontinued. This had a temporary effect; three

⁸ Interview Anne-Jan van Minnen

new board members applied: Noud van Poppel, Els Boon and Esther Snijder. They set to work with great enthusiasm. In 1999 a membership register was published to promote internal communication among nvvh-members. This list was meant exclusively for internal use, but it quickly became apparent that some members were making use of it externally as well. They informed their clients that they were members of the nvvh, thereby creating the impression that this was a kind of quality label. This was erroneous, because everyone who had followed an educational training in haptonomy, even a limited one, or who even showed an interest in haptonomy, could become a member. In the fall of 2000, the membership list led to misunderstanding among the insurance companies as well. One of them, De Friesland, made it known that treatments ‘by a haptonomist’ would be covered if the therapist was registered on the membership list of the vvh or the nvvh.



The NVvH board in 1997 From left to right: Esther Snijder, Nout van Poppel and Els Boon

The vvh reacted as if been stung. The association had worked hard the last number of years to make a case for recognition of the vvh-membership as the only quality guarantee and as the only criterion for coverage of treatments. If membership of the nvvh could make someone a ‘recognised haptonomist’, this would seriously harm the position of the professional association. Chairperson Guichelaar and three other members of the board cancelled their membership of the nvvh with immediate effect. They demanded that the board of the nvvh take internal measures against the misuse of the membership list and inform external parties, in particular the insurance company in question, that a place on this list could not pass as a quality mark.

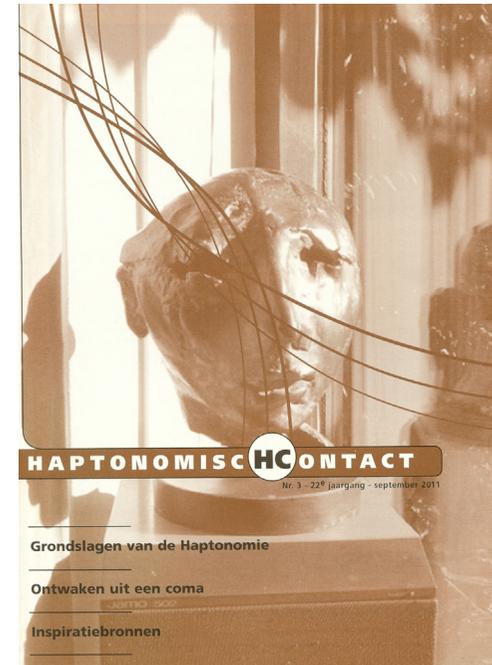
Although the exchange of letters between both boards initially carried a prickly tone, they very quickly agreed concerning the content. The NVvH-board acknowledged unhesitatingly that the membership list was never intended to be used as a hallmark of quality. The members received a letter containing an urgent appeal not to print their placement on the membership list on folders or business stationery, in the yellow pages or mention it in direct contact with clients. The insurance company De Friesland, received a request not to cover treatments of therapists who were only members of the NVvH. These actions took the chill out of the air between both boards. Even more, the necessary consultations on this matter led to a greater mutual respect and a willingness to cooperate more closely.

An opportunity to do just that arose quickly. The NVvH-board that took office in 1997 had responded to a distress call to help ensure the continuity of the association. When their term was up after three years, the well-known problem arose once more. Again, there were no candidates to take over their duties. The board members, however, did not intend to be the only ones making an effort to preserve the association. “We found the association as a whole should feel the need,” said former secretary Esther Snijder. “There is a point where it makes the job less fun if you notice that no one wants to take your place. You think, ‘What are we doing here?’ So we played hardball and said, ‘If no one else comes... it will not be us to continue, so that will be the end’.”⁹ Once again, the threat of dissolution of the NVvH loomed close. In November 2000, the boards of the sister associations vvh and NVvH discussed the situation. Cautiously, the possibilities for cooperation and pooling of resources were explored. For example, a new foundation could be formed to house the haptonomically-trained, or the magazine *Haptonomisch Contact* could be carried out by the vvh.

However, the differences between the two associations proved to be just too much for an actual fusion, and perhaps there were too many old sores. Looking back, Joost Leonhard said, “For a long time the two associations just tolerated each other. At some point the vvh rather disparaged the NVvH. They were more focussed on interests than on substance. They were willing to incorporate us, but we were afraid this would be at the expense of our ideals and vision, and we didn’t like that. We preferred to create an umbrella organisation with both an interests and a substantive section. Everyone involved in haptonomy would be under one roof under which there would be room for substantive discussion as well as for representation of the profession’s interests. Unfortunately, it didn’t work out. The substantive part of the construct has in fact disappeared.”¹⁰

⁹ Esther Snijder interview

¹⁰ Joost Leonhard interview



Cover of the renewed *Haptonomisch Contact*

The General Meeting of the NVvH rejected the amalgamation of the two associations on 29 March 2001; the decision to dissolve the NVvH was made on 23 June 2001. The vvh’s suggestion to take over the magazine *Haptonomisch Contact* met with objections from the editorial staff, who preferred a re-launch as an independent foundation. The remaining capital of the NVvH was given to the independent *Haptonomisch Contact* as a dowry. One of the vvh’s disappointed board members commented, ‘Game over’.

Management Crisis

A year and a half after the NVvH was dissolved, an important change took place within the vvh. Jan Guichelaar resigned in the autumn of 2002 after 10 years as chairperson of the professional association. He remained on as an advisor to the association and continued to maintain contact with the insurers. His position as chairperson was taken over by Esther Snijder, who was a board member of the NVvH before its dismantling. ‘She will be a completely different chairperson than I was, absolutely. It will take some time to adjust’, Guichelaar said at his farewell. ‘Whereas I was a busy bee who wanted to have a finger in everything and did so, Esther isn’t like that and doesn’t want to be. She has other qualities’. Under the leadership of Esther Snijder, the vvh board, full of optimism, set the course for

renewal. They wanted to start working bottom-up, setting out future policy in close consultation with the members. However, this proved easier said than done. The new chairperson realised that managing an association that's all about professional content such as the NVvH differed fundamentally from directing a professional association in which the interests were greater, the external contacts required more expertise and moreover, whose members were inclined to rather firm opinions.¹¹ The new style of management brought Esther Snijder into conflict with several board members. "I wasn't living up to everyone's expectations. I allowed more room for others to operate and that took some getting used to," she said herself.¹² Four board members resigned in 2003, after which the others found themselves up to their eyeballs in work. In the meantime, General Meetings became increasingly difficult. Even the former chairperson Guichelaar appeared to have problems with the new approach and he wasn't the type of man to hide his feelings; both in the General Meetings and everyday practice, he vented his criticisms. The fact that the vvh association office was still housed in the same building as his practice complicated the situation even further.

In order to deal with the enormous pressure of work, the staff was in 2004 temporarily expanded to include an administrative secretary. It was clear as a bell that the growing association needed a more permanent support staff, but the vvh-board was still in doubt about the form this support should take: a growing association office or rather hire external employees? A proposal by the board to have both options researched by an independent consultant did not make it past the General Meeting in November 2004 because of the high costs. Why not use the expertise of association advisor Jan Guichelaar? The chairperson's argument that Guichelaar was too much involved in the issue, being both a partial employer of one of the office employees and the lessor of the office, was not well received. It was decided that former board member Gert Klabbers and Jan Guichelaar would together look into the question as to whether an external study was necessary. "I felt this was a dreadful development," said Esther Snijder. "At that meeting I realised our cause was lost. It became clear that the members did not support us, at least not sufficiently to reject bygone influences that came back to haunt us each meeting. That's when I believed it had become unmanageable."¹³ Six months later, the management term for the chairperson expired

¹¹ Joost Leonhard and Esther Snijder interview

¹² Esther Snijder interview

¹³ Esther Snijder interview

and she resigned the position. The remaining board members decided to resign their posts with her. The association found itself in a crisis situation.

Following a short interim period, a completely new board took office in the summer of 2005 under the leadership of Jan Brinkman. He was not a haptotherapist himself, but a manager in a local government.¹⁴ Brinkman described the state of affairs on his arrival as a walk in the park that had gone awry, 'No sense of direction, no longer arm in arm and out of step'. The new board energetically set about getting back on track. It focussed on restoring connection and cooperation. The lines of policy set out by the preceding board were partially used to build on. Meetings with the Academy and the ITH were held and with Synergos as well, the training programme that up to this point had not been a permanent consultation partner with the professional association because of its acceptance policies.

Meanwhile, the Stichting Post-HBO (SPHBO) [Foundation Post-Secondary Professional Education] had been founded in the Netherlands, an independent body that assessed all post-graduate programmes on their educational quality. The SPHBO had already accredited the Academy for Haptonomy and the ITH; Synergos was aspiring for accreditation. The new association board quickly became convinced that the SPHBO certificate offered a satisfactory guarantee for quality and that an additional review of certified programmes would not be necessary. Any additional prerequisite requirements could also be eliminated. In a memorandum entitled *De weg is de beste herberg* [The path is the best shelter], the board presented its programme to the General Meeting on 19 November 2005. The members present reacted favourably to the board's proposal but did not officially adopt it.

Yet less than a month later, the vvh-board decided that from that date on a SPHBO certified therapy programme sufficed to join the professional association, a decision that would apply with retroactive effect from the date that the Academy and the ITH had been certified. The same would apply to Synergos as soon as their programme was accredited. The decision was not presented to the General Meeting anymore, but announced directly by letter to the educational programmes. In doing so, the board ignored quite a few of the association's rules and agreements. In the first place there was the professional profile, which stated that haptotherapists must have a post-secondary education in health care or welfare services. Secondly there were the standing orders of the association, which provided that recognition of educational programmes fell under the General Meeting's jurisdiction and not that of the board. Finally, the board decision also ignored the accreditation instrument that had only recently been developed by the Education and Professional Training Committee.

¹⁴ Jan Guichelaar interview

Following the written commitment to the educational institutes, a few applications for membership were sent in as early as February 2006, which according to the old policy should have been rejected. The board approved two of these applications. This led to a difference of opinion with the chair of the Registration Committee Guusje van Raay, who contested the decision-making powers of the board in this matter. Admission of members, she argued, must be reviewed by the Registration Committee on the basis of the adopted regulations and not by the board. She informed the brand new members that their acceptance was an error and would be reversed. In doing so, she in turn deviated from the rules, because the Registration Committee was not authorized to deregister members once they had been accepted. This put the relationship between the board and the committee on very thin ice. The internal conflict increased to such an extent that the board finally suspended Van Raay as the committee chairperson.¹⁵

In the meantime, the relationship between the board and the Education and Professional Training Committee deteriorated likewise. In April 2006, all three members resigned their positions. In an open letter to the General Meeting they criticised the board's decision to relinquish the prerequisite requirements. Inadequate selection at entry level carried the risk of devaluating the profession; they foresaw an erosion of the position that haptotherapy had built up over past years. Aside from the question if the new policy was wise, they felt the board should not embark on such a major policy change without the explicit approval of the General Meeting.

At the next General Meeting on 13 May 2006, the board defended their reform of the admissions policy. Jan Brinkman acknowledged that the professional profile should actually have first been amended. He proposed to repair this by sending round a *Proposal to Amend the Professional Profile of Haptotherapists*, to which the members could respond in writing. This procedure met with opposition. Six members, including the chair of the Education and Professional Training Committee, summoned all A-members by letter not to agree to the proposal for amendment but to summon an extra General Meeting. On 6 June 2006, haptotherapist Els Plooi, on behalf of 68 other haptotherapists, sent the board a formal request to call an extra general meeting, to be chaired by an independent chairperson. "Personally, I rather felt that the programme prerequisites should be increased rather than decreased," she later said. In addition to her objections to the content of the board's proposal, she also had major objections to the way in which 'the association manoeuvred that proposal into place'.¹⁶

¹⁵ Later on she was rehabilitated

¹⁶ Els Plooi interview

The extra General Meeting was held on 1 July 2006. It was extremely tumultuous. Before the meeting even commenced, the chairperson had already resigned and the other board members stepped down from office on the spot. Members with differing outlooks were flatly opposed to each other. Harsh words were spoken and emotions ran high. Jan Brinkman, who at his own request was given the opportunity to clarify his policies, said he had always acted in good faith. He had focussed on rebuilding trust between the vvh and the educational institutes, 'because that really was gone completely'. He denounced the association's culture as a 'rules are rules' culture in which people 'did not communicatively connect with each other but passed judgment behind each other's backs'. In turn, prominent members blamed the board for acting without authorization. Jan Guichelaar reported, "You may want to interconnect people and there's nothing wrong with that. But in doing so, hold on to the main points that we agreed on previously. And that didn't happen. The Brinkman board fell because they had made agreements with the educational institutes without the consent of the General Meeting. Yes, however much I liked those people, I did indeed take action against them during that infamous General Meeting. I really blew my top. I was so angry."¹⁷ He was not the only one. In the weeks following the meeting, the vvh's internal digital forum flooded with responses from seriously alarmed members who were stunned by these developments. Some of them tried to defend the board that had resigned. 'For starters, I think it's horrible for the board that things worked out like this! Secondly, I think this is terrible for the association. What I want most is to have the board back immediately, and otherwise at the next GM!!!', someone wrote in the *vvh-Journal*.

Differences of Opinion

In the world of haptonomy and haptotherapy differences of opinion were at all times cause for hefty debate whether the differences regarded the content of educational programmes, the use of terminology, the foundation of professional associations or the member admission policies. The controversies were often accompanied by blazing rows and could end in long-lasting and bitter schisms. Perhaps this is so because haptonomy and haptotherapy strongly focus on feelings and emotions, while there is no strong tradition of discussion and debate. "But there really is something at stake," said Els Plooi. "There are very noticeable differences in outlook, which lead people to take different paths. And since at the same time the

¹⁷ Jan Guichelaar interview

haptotherapy world is like one big happy family, these differences can end up being very fierce.”¹⁸

The return of the board that had resigned was impossible, water under the bridge. In order to find a way out of the crisis, an interim board took over the helm, consisting of former chairperson Jan Guichelaar, former board member Gert Klabbers and a former member of the Education and Professional Training Committee, Martijn Bakker. An external advisor was brought in to analyse the problems and propose solutions. He presented his findings in November 2006. He advised that action be taken in two directions. In the first place revision of the association structure with a clearer definition of roles and a better description of the authority of the board, the committees and the General Meeting. In the second place, he advised an association-wide discussion on the admission policy, after which the General Meeting should take a decision. Following these recommendations, the interim board, supported by a few working groups, got down to work.

The interim board adopted a strict attitude towards the educational institutes; the leniency employed by the board under Jan Brinkman's leadership was over. “The institutes had, of course, been given an inch and immediately took a mile,” said Jan Guichelaar, “so we had to start all over again with what we had spent the first 10 years building up. Luckily Gert Klabbers and I were both very familiar with the whole history; we were both well informed as to the old discussions and agreements made. This did not always make us very popular with the educational institutes.”¹⁹ The toughened discussions about the prerequisite requirements caused a deep chill in the relationship between the professional association and the educational institutes in the years after the crisis. Relationships within the association itself were also disrupted, both by the management crisis as by the stricter attitude of the interim board. The latter took the Internet forum off the air temporarily, blocking internal discussions.²⁰ Moreover, at the insistence of the interim board, the General Meeting of March 2007 decided not to discharge the former board that had stepped down, in view of any possible damage claims or legal proceedings that may later arise. The former board members and their supporters felt this was an exceedingly harsh decision.

¹⁸ Els Plooi interview

¹⁹ Jan Guichelaar interview

²⁰ Marja de Jonge interview

All in all, vehement differences arose and deep wounds were inflicted by the crisis. It would be a long time before the pain would somewhat subside.

Renewed Contact

Although the professional association had to weather some storms over the last few years, in the meantime the developments within the profession itself continued. Within the occupational group of haptotherapists, subspecialisations had gradually evolved. The first of these, stemming almost directly from the training given by Frans Veldman Sr., was haptonomic perinatal care. This (sub)specialism is practised by haptotherapists, as well as by midwives and obstetricians or nurses who work on a haptonomic basis. Since 1993, a specific educational programme was set up in Doorn for them. Haptonomic perinatal care has three major goals: to promote the instinctive communication between parents and their unborn child, to support and facilitate the development of pregnancy and birth as naturally as possible, and to offer the best possible start to the newborn child by affirming his vitality and desire to live. In 2003, the Vereniging voor Haptonomische Zwangerschapsbegeleiders (VHZB) [Association of Haptonomic Perinatal Coaches] was founded. Initiators were Gert Klabbers, Marjan van der Vaart Smit, Christine Bak and Jan Koolhaas. The VHZB is not part of the vvH but operates completely separate from it. Just like the vvH, the VHZB strives for recognition of its profession. Chair Jan Koolhaas, “It is a very specific field, absolutely different from haptotherapy. It is important that this profession is placed on the map too. We are very busy setting up a register. It must be obvious for everyone in the Netherlands where they can go for haptonomic perinatal coaching.”²¹

Making room in your belly

Esther Snijder, a recent chairperson of the vvH related how she experienced haptonomic perinatal coaching herself. “Through prenatal care, I came across haptonomy. It was a revelation. It made me feel so strong. I felt that I could trust something in myself. I actually knew that already, but now it was confirmed. No gymnastics, no fitness training or learning how to puff: just making room in your own belly, feeling your child. This helped my husband to get involved too, through touching, cradling the baby and playing with it. I thought, “This is how it should be.” I really

²¹ Jan Koolhaas interview

wanted to hang on to that. I was working as a physiotherapist at the time, but hadn't quite found my niche yet. So then I went to Doorn and took the training programme myself.”²²

Haptonomy gained not only a role in perinatal care but also in terminal care. Other specialisations arose, such as child-haptotherapy and haptotherapy for relationship counselling. For healthcare psychologists who wished to study and acquire haptotherapy qualifications, the Academy for Haptonomy offered an accelerated training programme as a pilot in 2005. They reached an agreement with the vvH allowing graduates of this programme to apply for membership of the professional organisation. The driving force behind this pilot was psychologist and haptotherapist Els Plooiij. It became an one-time experiment. Teachers and management were not sufficiently enthusiastic and applications for the training programme lagged behind. A comprehensive advertisement campaign was considered too expensive.²³

The substantive developments in haptonomy and haptotherapy in the Netherlands sparked a wish for renewed contact with the founding father Frans Veldman, who, although over eighty years old, was still actively working in southern France. Over the course of twenty-five years, he had further developed his Centre International de Développement de l'Haptonomie (CIRDH). In France, unlike in the Netherlands, haptonomy did not grow into a separate therapeutic profession, but was applied by doctors and specialists within their original profession. The time seemed ripe to bridge the gap between France and the Netherlands. Veldman appeared willing to enter into a dialogue with haptonomists and haptotherapists from his homeland, more so than in the past anyway.

One of Frans Veldman's former students, Wim Laumans, who had been the chief editor of *Haptonomisch Contact* since 2003, established the first contact. In 2004 and 2005, Laumans organised two seminars in Oms with Frans Veldman and AnneMarie Veldman-van Polen, in which nearly thirty people from the Netherlands participated. Following these events, Veldman said that he was prepared to answer questions from the Netherlands in *Haptonomisch Contact* and to publish a few of his articles. This did not mean he dropped his critical attitude towards the magazine. “When he received a new edition of *Haptonomisch Contact*,

²² Esther Snijder interview.

²³ Els Plooiij interview.

he usually called within a half hour because of something he didn't agree with,” Laumans recalled.²⁴ Yet during this period of time, Veldman was clearly open to a renewed cooperation with haptonomy in the Netherlands. He wanted to inform the haptonomy field about developments in haptonomic thought that had taken place in France over the past decades.

The Academic Science and Research Committee of the vvH also cautiously came into contact with Veldman in 2005, ‘In the sense that Frans Veldman knows about our existence. We received several publications with research data from him. He looks upon the committee favourably as long as we try to link haptonomy to the scientific world.’ At this point, even renewed contact between Veldman and the Academy for Haptonomy seemed possible. In a letter in *Haptonomisch Contact* at the beginning of 2005, Veldman informed the board of the Academy that in principle he was open to an exchange of ‘thoughts, findings, opinions and possibilities of application’, but that in order for this to happen, a ‘respectful and trustworthy contact’ was required. ‘I cannot and will not permit haptonomy to be devalued and degraded to an alternative method of mercantile applications of body techniques, school of thought or approach.’

In that same year, a delegation of teachers from the Academy of Haptonomy visited Oms for the first time. Els Plooiij was one of the initiators. “I thought it was important that we did not deny our past history,” she commented. “While Veldman was in France and there was no contact, haptonomy had developed further. But still, it is where we come from.”²⁵ Earlier, during a



Participants of a colloquium in Oms gathered on the terrace of the Veldmans residence.

²⁴ Wim Laumans interview

²⁵ Els Plooiij interview

meeting in Oms, the director and chairperson of the Academy had cleared a path for a cautious reconciliation. Both parties agreed that they would explore the possibilities for a substantive collaboration. However, they did not take Frans Veldman up on his offer to completely retrain the staff of the Academy.²⁶

At Laumans' initiative, a Dutch delegation took part for the first time in a symposium on haptonomy in Paris in December 2005. Ten months later, in October 2006, the careful restoration of the relationship was rewarded. vvH-boardmember Gert Klabbers in a personal capacity was successful in convincing Frans Veldman to come to the Netherlands as a speaker at a symposium in the Jaarbeurs exhibition centre in Utrecht. *Haptonomisch Contact* called it 'a small miracle'. At the symposium, the staff of the CIRDH presented an outline of the developments in haptonomy that had taken place in France. Under the title, *Vitale intentionaliteit en zelfactivering* [Vital Intentionality and Self-actuation], Veldman gave a lecture to a full audience about a number of fundamental principles of haptonomy.



Frans Veldman at the congress 2006 in Utrecht

Despite the initial optimism, a few years later another rift developed between Veldman and a large part of the haptonomy and haptotherapy professionals in the Netherlands. The contact with Laumans was cut off after Laumans had delved into the philosophy of Levinas and together with philosopher Jan Keij, developed a training course based on Levinas' tenets, called *Raakbaarheid als fundament van de haptonomie* [Affectability as Basis for Haptonomy]. "Frans was unbelievably upset and offended by this," said Laumans, "I thought I

²⁶ Els Plooi interview

was contributing something, but wasn't allowed to do so. He ended our friendship."²⁷ The contact with the Academy for Haptonomy also came to nothing in the end. Nearly twenty haptotherapists, including a number of (former) vvH-boardmembers, however, did stay in touch. They continued to participate in workshops in Oms with some regularity. One of them related the following about those workshops: "It's not so much that it's a different level, it's the whole content that differs. Authentic haptonomy is taught. A master class. I really learned so many things there, that it made me wonder why I didn't do this ten years ago. I really regret that but sadly, at the time there were battles to be waged."²⁸



Workshop in Oms

The group formed an independent study network that besides in Oms, met in varying places in the Netherlands. In addition to this network, and overlapping in part, Coos Stolper, haptotherapist and psychologist, and her husband Willem Hagg set out to form an educational training centre in Warnsveld. The couple, who maintained a good relationship with Frans Veldman, wanted to provide a new stimulus to haptonomy in the Netherlands from the French educational tradition. When Coos Stolper passed away in 2010, the initiative was put on the back burner. However Willem Hagg, with several members of the study network, to this day continues to work on the increase and transfer of knowledge, including a translation he made of French haptonomy terms into Dutch, *Woordenboek van de Haptonomie* (Thesaurus Haptonomicus).

Frans Veldman passed away in Oms on 25 January 2010 at the age of 88. After his death, contact with the study network was continued through AnneMarie-Veldman van Polen.

²⁷ Wim Laumans interview

²⁸ Jan Guichelaar interview

Professionalization and Popularization

After the administrative storm in the vvH had subsided, professionalization, both of the association and the haptotherapy profession, had room to grow. First and foremost, the association's structure underwent an alteration in November 2007. In addition to the board, which was given the task of determining policy, and the General Meeting, which was authorized to approve said policy, two kinds of committees were formed. Independent committees would shoulder their own responsibility for the verification of individual registration and continuing education, the accreditation of the educational programmes, the processing of complaints and the visitation of practices. Internal committees would assist the board in the field of public relations, academic research and contact with the health care insurers. The association office finally moved from Jan Guichelaar's practice to its own location in Amsterdam in 2009. In the meantime, the office staffing had also undergone an expansion; in 2010 Marja de Jonge acquired the position of director.

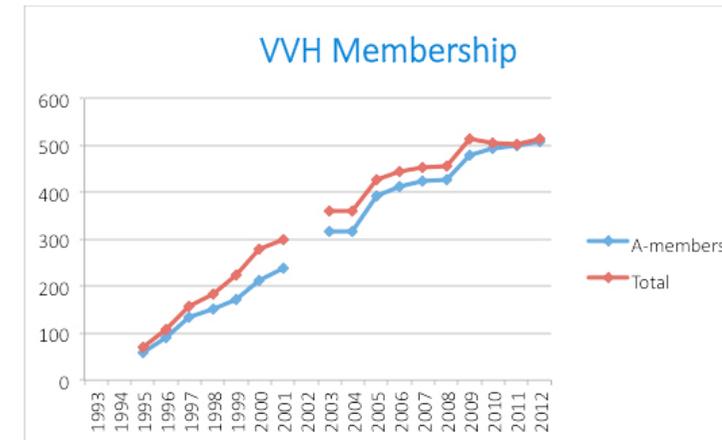


Marja de Jonge at work in the vvH-office

The continually recurring question of the admission policy was dealt with thoroughly this time. A working group from the association drew up a report in which several options and their respective consequences were examined. Following an in-depth discussion on that report, the General Meeting decided in February 2008 to adhere to the prerequisite requirement of a post-secondary health care or welfare services degree. Two arguments played a significant part in this decision. Firstly, to be recognized as a medical or paramedical profession, medical and psychological fundamentals are necessary and secondly, coverage policy of the insurance companies demanded a quality guarantee. If membership were to be opened to everyone with a post-secondary prior education – which the educational programmes were still advocating – the membership numbers would certainly rise, but simultaneously there

would be a negative effect on the coverage policy of the insurance companies. This was a risk the association was not willing to take.

The crisis the association had experienced was reflected in the development of the membership. From the beginning, there was a reasonably constant growth of thirty to forty members per year. After 2005, the membership stagnated for several years, which later was compensated in 2009. After this, the numbers remained stable at about five hundred members.²⁹



As the most pressing questions were solved around the beginning of 2008, the interim board was turned into a 'normal' board, which began to employ a schedule for resignation. In 2009, Jan Guichelaar bade farewell as a board member for the second time; Gert Klabbers followed in 2010 and Martijn Bakker in 2011. In the meantime, Constans Manganas took over the chair of the association at the end of 2008 and new board members took office.

Based on a strategic policy plan the association underwent a renewal. The Register of Haptotherapists was remodelled and became a Register of gz-Haptotherapeuten [Healthcare Haptotherapists] in 2009. Whilst the professional designation 'haptotherapist' could be used by anyone, the predicate 'gz-Haptotherapeut' is a registered mark of quality reserved only for members of the vvH. With this mark, the association wanted to increase the visibility of its members and to underline their quality stature. The addition 'gz' was to clarify that haptotherapy was part of the primary Health Care (gezondheidszorg) in the Netherlands.

²⁹ Membership statistics were not always kept up to date in the period 2002-2004 due to the enormous pressure of work at the association office

Part of the renewal was the replacement of the existing professional profile by three quality documents: a domain description, a professional code and a professional competence profile. The domain description indicated the area of activity assigned to the gz-Haptotherapeut and his/her position in health care in general. The essence of haptotherapy, according to the domain description was to 'activate or help restore the natural affirmative interaction between the individual and his environment'. Indications leading to a referral for haptotherapeutic treatment were among others: stagnated development, problems with intimacy and closeness, relational problems, stress and distress, and physical symptoms with a possible psychosomatic origin. The haptotherapist was not allowed to engage in curing the body as if it was an 'object' nor in serious psychiatric disorders.

The professional code formulated rules of conduct and ethical principles to which the therapist must adhere. These included privacy and confidentiality, prohibition of sexual conduct, respect for the integrity and intimacy of the client and the amount of pressure that may be imposed upon the client. Finally, the professional competence profile indicated which competences are needed before anyone can call himself a gz-Haptotherapeut. The requirements for these competences became stricter rather than more flexible. In addition to a post-secondary educational degree in healthcare or welfare services and a diploma from one of the SPHBO-recognized professional gz-Haptotherapeut training programmes, vvH- members must also have sufficient basic medical knowledge. The category of student members (C-members) was phased out from 2008, leaving only graduates to be submitted to the vvH.

The extra quality requirements ensued indirectly from changes in the Dutch healthcare system. A new system was introduced in 2006, with a compulsory basic insurance on one hand and the option for additional insurance coverage on the other hand. This led insurance companies to make increasingly tighter (quality) agreements with healthcare providers and their organisations. In addition, the VAT issue cropped up again. For a short time, all haptotherapists were exempt from charging VAT but this was reversed in 2008 due to economic cutbacks. Only those who were included in the BIG register through another profession such as physiotherapists, remained exempt. The vvH-board felt it was undesirable that because of this rule, some members had to charge VAT and others did not. The association then tried to come to new agreements with the Ministry of Health, Welfare and Sport to include haptotherapists in a new, yet-to-be-formed, Complementary Register of VAT-exempted medical and paramedical professions. This register would only be accessible to therapists with training at a minimum post-secondary level and with basic medical knowledge. In the end, the discussion concerning VAT exemption came to naught while

admission to vvH-membership in the meantime had been tightened up. Haptotherapists who did not possess sufficient basic medical knowledge were only accepted as a member if they followed supplementary training at a post-secondary level.

The recognised professional education programmes for gz-Haptotherapeuten themselves were then also subjected to stricter requirements. Besides being assessed by the SPHBO, they are now checked annually by the vvH's Education Accreditation Committee as well. In the meantime this committee also made a recommendation concerning the Synergos educational programme. As soon as this programme was recognised by the SPHBO, graduates with the proper prerequisite degree and the proper basic knowledge could in principle become vvH-members.

The association's strategic policy not only focussed on stricter quality requirements, but even more on better academic substantiation of the profession, in part to be able to distinguish haptotherapy from other alternative therapy methods. Jan van den Broek, teacher at the Academy for Haptonomy, advocated more research in an interview in the *vvH-Journal* in 2006. 'We have gold in our hands', he said, 'and we mustn't squander it, but show it to the world. More research into the effects would be useful; we should make the performance of our profession measurable'. Indeed, there is a clear need for information about the activities and the effectiveness of haptotherapy, also among healthcare insurers. A complicating factor is that haptotherapy is not symptom-focussed but rather person-focussed. Effectiveness should not be the object of treatment, but rather 'the realisation of a psychologically matured person'. This is very difficult to measure in an effectiveness study. Yet, the association continued to strive towards their goal of academic substantiation. In 2003, the Academic Science and Research Committee was revived. Moreover, a Scientific Council was set up three years later, on which among others, professor Jan Dijkhuis, former chairperson of the Academy for Haptonomy, took a seat.

The Academic Science and Research Committee set out by taking inventory of valuable existing publications and identifying functional research criteria for haptonomy and haptotherapy. In 2005 the vvH decided to participate in a comparative study being conducted in Louvain into multiple therapies based on 'body-oriented interventions'. The results were somewhat disappointing. The 'unique characteristics' of haptotherapy in comparison to other therapies could not be clearly demonstrated, and no conclusions could be drawn based on the study, regarding the effect of the therapy on clients. In 2009 Bob Boot, member of the Academic Science and Research Committee argued for a better alignment with existing scientific traditions, in order to secure a place for the profession

in the field of healthcare. Rather than focussing on fundamental research into the nature and meaning of haptonomy, the committee gave preference to a smaller-scale quantitative study. Since 2010, approximately fifty members of the association are participating in a study on the effect of haptotherapy conducted by the Free University of Amsterdam and headed by Dr. R.J. Bosscher, senior lecturer of human movement and behavioural influences. The study primarily focusses on the collection of clientdata regarding changes in physical and psychological symptoms, self-awareness, self-reflection and physical sense. In the long term the data will serve as a basis for writing master's theses.³⁰ At the University of Tilburg, vvh-member Gert Klabbers is conducting doctoral research into the effect of haptotherapy on pregnant women who fear going into labour. This study is expected to be completed in 2017.

Meanwhile during the autumn of 2007, a Knowledge Centre had been established at the Academy for Haptonomy. Academic employee Els Plooij and librarian Margriet van An del selected and collected scientifically sound literature, placed summaries on the website and initiated the formation of networks, such as the network of haptonomy for people with an intellectual impairment and the network of psychologists and educators in haptonomy. The Academy wanted to make the Knowledge Centre a collectively supported institute, in which ITH, Synergos, the vvh, the vHZB, the NVPA and the magazine *Haptonomisch Contact* all participated. Els Plooij tried to create a platform for this cooperation, but met with reticence and resistance. An external study into the feasibility of a broadly supported Knowledge Centre led to the conclusion that the interests of the potential partners differed too much. A joint Knowledge Centre could be easily paralysed by the many contrasts and cultural differences. Progress could only be achieved in small steps. The study eventually pointed in the direction of a Knowledge Centre that would primarily be supported by the three educational institutes, possibly in cooperation with *Haptonomisch Contact*. The professional associations could then offer support in the form of paid assignments, manpower and resources. The educational institutes however, proved to be unprepared to put substantial money and energy into a Knowledge Centre. As Peter Zwiers from Synergos said, "We applauded the initiative, but once we realised the amount of effort and money it would take, we decided to give priority to our own substantive development."³¹ When Els Plooij withdrew from the Academy and the Knowledge Centre in the summer of 2011, the driv-

³⁰ www.haptotherapeuten-vvh.nl/jos/index.php?/Onderzoeken/effectonderzoek-haptotherapie.html

³¹ Peter Zwiers interview



Presentation of the Jan Dijkhuis bookcollection to the Academy for Haptotherapy.

ing force was gone and now only a website and a library in Doorn remain.³² The library would later be expanded considerably through the agency of Jan Dijkhuis, who passed away on 1 August 2011. He left his complete medical and psychological book collection to the Academy that he once helped to found.

With the expansion of academic knowledge about haptonomy and haptotherapy, the popularisation of these professions took a flight. From 2000 onward, an increasing number of publications appeared in which the basic principles and the possibilities for application of haptonomy were explained in accessible language. Dorus Gerritse, involved from the very beginning, took the plunge with the book *Over kleine dingen* [About Small Things], in which he clearly described, using many concrete examples, what haptonomy is and how it can be applied therapeutically. Other books followed, for example from haptotherapists Bob Boot, Els Plooij, and Dieuwke Talma.³³ They all attempted, each in their own way, to explain in accessible language the basic principles, the methods and possible results of haptotherapy.

³² Peter Zwiers interview

³³ See the bibliography

These books were aimed at both referrers and fellow paramedicals, and at potential clients. In 2004, Frans Veldman jr., director of the wih in Grave, published the book *In contact zijn* [Being in Contact], in which he explained his ideas on haptonomy.

Meanwhile, the concept of haptonomy has become quite integrated in the Dutch health-care system and with Dutch people, even though not everyone knows exactly what it constitutes. The authoritative Dutch Van Dale dictionary describes haptonomy as a ‘method to relax through touch and to learn to know one’s own feelings’ and a haptonomist is ‘someone who applies haptonomy’. This is an extreme simplification of the definition used by the profession. It remains problematic how to clearly explain in words a profession that is all about feeling. “Language and haptotherapy do not go well together,” the director of the association office stated. “People are still inclined to write about haptotherapy in a rather artificial way. This is primarily because they are wary of doing damage to the profession. The question is whether the general public is interested in all these tiny nuances.

If communication were more flexible, perhaps the profession could be larger.”³⁴ One thing that did help was the fact that, slowly but surely, clients were starting to put their experiences with haptotherapy down on paper as well. An example of this was Sonny Kroon, who in *Terug van weggeweest* [Back again] gave a personal account of the various phases of a haptotherapeutic treatment. Other articles appeared in health and lifestyle magazines and in women’s magazines, describing how haptotherapeutic treatments work and what they can do for you. The tone is almost always positive; it is perhaps a bit uncomfortable in the beginning to be touched by a therapist while you’re completely undressed, but in the end it helps you to feel more comfortable, calmer, stronger or more self-assured. ‘It remains difficult to understand rationally what exactly happens’, wrote the editor of a health magazine after a number of sessions with a haptotherapist. ‘I thought that I, as a thirty-something, self-confident woman, had developed enough insight in myself, but sometimes my body indicated otherwise’. She decided that haptotherapy had opened a new world for her, a world of affectivity, in which a different language is spoken.

Contrary to the words haptonomy and haptonomist, the terms haptotherapy and haptotherapist have not yet captured a place in the Dutch dictionary *Van Dale*. Yet, in the past twenty years the therapeutic application of haptonomy has carved out a place within the Dutch health care system, in part thanks to the work of the vvH. Through its effort, an increasing number of people are personally learning to know and appreciate the significance of a haptotherapeutic treatment.

³⁴ Marja de Jonge interview

Quality of Life

Marja de Jonge, director of the vvH-office: “Haptonomy is very similar to my personal outlook on life. I’m not a haptotherapist myself, but I understand what it’s all about, namely the quality of life and the wholeness of a person. In almost everybody’s life something is broken. I can see people drifting further away from what they really want and losing contact with themselves and their surroundings. Efficiency is the ultimate goal and everything must be converted to numbers. I see that this generally doesn’t do anyone any good. I’m convinced that haptotherapy has a lot to offer. The challenge lies in bringing it into the limelight. The opportunities are there.”

5

MAKING CONNECTIONS

A Glimpse into the Future (2013 and onward)

Introduction

In this last chapter, not haptotherapy's past is the focus, but the future of the profession. A glimpse will be given into current issues and new developments through a group discussion held by four board members of the vvH: Constans Manganas, chairperson, Marli Lindeboom, secretary, and general board members Roel Klaassen and Joost de Leijer. At the association office in Amsterdam, they discussed themes such as representation of interests, defining boundaries of the professional domain, recognition and professionalization, age-old themes that continually need to be updated and reinterpreted. One important theme that has been added over the years is making connections between the many parties engaged in the haptonomy and haptotherapy professions.

Interests and Qualities

One of the reasons for founding a professional association was the haptotherapists' need for a collective representation of their commercial and financial interests. In 2012, representation of interests is still an on-going theme within the association. A constantly recurring issue is the levy of VAT charges for haptotherapy treatments. As of the beginning of 2013, 21% VAT must be charged on these treatments. Board member Roel Klaassen: "The government decided that VAT exemption will be linked to professional practice. If you are a physiotherapist as well as a haptotherapist, you are exempted for physiotherapy, but not for the complementary haptotherapeutic care. This means that haptotherapeutic services will be 21 per cent more expensive for clients. This will undoubtedly have a negative effect on the accessibility of the therapy. It may also tempt therapists to declare treatments in a different category, not as haptotherapy, but as a 'physiotherapy treatment based on haptotherapy.'" The association, wanting to stimulate a better recognisability of the haptotherapy profession, is fiercely opposed to the VAT levy and started a lobby to make the government aware of its disadvantages. One important argument is that the effect of this regulation could actually be counter-productive. "Because people who now come to us at a relatively low cost will then make extra claims for different and more expensive treatment methods."

For the sake of their lobby, the association headed for The Hague with other complementary care professionals who were similarly affected by this regulation. The healthcare insurers also encourage cooperation between related professional associations. “Insurance companies have the tendency to make a distinction between complementary care providers of higher and lower quality care,” said Constans Manganas. “The ‘high-quality’ professional associations, those with a prerequisite post-secondary degree and effective disciplinary regulations, are increasingly regarded as a collective consultation partner by insurance companies.” However, this mutual cooperation does not happen automatically. Each organisation still has the tendency to lobby for its own interests first. The vvH-board however, can see that the complementary care professions are moving towards each other. They all share the goal of shedding the label ‘alternative medicine’ and strive for a place in regular healthcare. Opposed to this is the Vereniging tegen de Kwakzalverij [Association against Quackery] which keeps an Argus-eyed watch on all the developments in the alternative and complementary care. “Until now, haptotherapy has remained out of their range,” said Roel Klaassen, “because, in contrast with chiropractors, osteopaths or craniosacral therapists, we do not offer symptom-directed treatment. Neither do we have a strictly curative technique or treatment method. With us, it’s about making contact, and there’s little reason to be opposed to that. I think they might say: yes, but anyone can do that, right?! They’re right about that, except that no one else does it, and besides, we can do it better.”



Board vvH 2012. From the left: Roel Klaassen, Sjoerd van Daalen, Constans Manganas, Marli Lindeboom, Joost de Leijer.

In order to be better positioned towards both critics and insurers, the association turns to stimulating evidence-based research. Constans Manganas: “We are convinced that elucidating our image is one of our most important missions. People have to know what to expect from a haptotherapist. This is true for clients, but also for referrers. Academic research is necessary to prove our added value.” In an attempt to stimulate academic interest and to increase awareness of the name haptotherapy, the vvH organized an academic congress in March 2013, to celebrate its twentieth anniversary. In addition, the association engaged in writing casuistry, specifying what a haptotherapist may do for what type of symptoms. As a follow-up, folders will be made about specific complaints, such as haptotherapy for migraines, or for burnouts. “We have to stop being so modest, and instead really show what we have to offer,” purported Roel Klaassen. “Though one of the problems is that evidence-based treatment is often meant to have short-term, quick results. Haptotherapy’s concern is the quality of life. The question is, does a client make less use of a doctor or hospital after haptotherapy, and how big is the difference. But those are very lengthy, complex studies.”

The vvH-board also sees opportunities at this juncture. It is becoming increasingly clear that short-term politics in health care has huge disadvantages. “The cost of health care is growing so enormously that it has to be stopped,” said Marli Lindeboom. “We are all getting older, we are becoming increasingly stressed, we are getting more ailments and infirmities and all that has to be taken care of. But that’s not always possible. I am convinced that haptotherapy can contribute to the responsibility of taking care of yourself and accepting that age and lifestyle are simply accompanied by certain symptoms and ailments for which you don’t always have to go running to the doctor.” In order to contribute to that awareness, the vvH believes clients should continue to pay for a part of their treatment, to make them realize their own responsibility. The board concluded with satisfaction that an increasing number of people are asking for haptotherapy of their own accord. Marli Lindeboom said, “These are people who very consciously don’t want to go to therapy to talk; they want to learn to feel and that’s why they come to us.” Family doctors, company doctors and rehabilitation specialists alike are increasingly finding their way to the haptotherapist.

An important area of tension lies in the fact that the professional association must keep up to date, promote awareness of haptotherapy with the general public and expand its reach, while at the same time maintaining and guarding the specific identity and substance of the profession. In their search for new markets, the educational programmes have begun to offer an assortment of specialisations in recent years, such as child haptotherapy and perinatal haptotherapy, but also haptotherapy for relationship problems, terminal patient care or the practice of sports. The growing number of concrete therapeutic specialities seems some-

what inconsistent with the all-embracing claim of haptonomy, which really encompasses all of life in its professional dealings. The vvH tries to solve this tension by first creating a strong, common basis around the definition and the content of haptonomy and haptotherapy. Two documents have been drawn up for this purpose, which include the principles of haptonomy and the core values of haptotherapy. “You may ask yourself: should a professional association do this?” said Constans Manganas, “But we are doing it. We think it’s important. We think that we need a strong basis in order to go out into the world while staying true to our premise.” Marli Lindeboom added, “To give an example of such a fundamental idea: in the case of a burnout you try to get people back on their feet again so they can actually feel what fits for them and what doesn’t. This may cause some of them to go back to work, but others may not because there’s something else they want to do. So you can’t promise an employer that his employee will return to the job. Of course everyone wants to know where a therapy is leading to, what they can expect after four, six, eight or ten weeks, and how much it’s going to cost. We mustn’t succumb to this mentality, but at present, that’s an unpopular attitude.”

With the principle of haptonomy and the core values of haptotherapy, the vvH hopes to lay a firm and common base under the profession for the future. Both documents were drafted by Marli Lindeboom in close consultation with a group of colleagues. “We view them as documents that must evolve and explicitly invite members to read them, study them, look at them and give us their opinion. Hopefully at some point the necessary discourse about our vision will get off the ground. Together with several members, we hope to prepare a proposal for adoption by the General Meeting.”

Restoration of Ties

In the first decades of its existence, the vvH focused on practical work of every kind, such as setting up a members list, determining admission requirements and establishing disciplinary regulations. Recently, attention has shifted to creating a more substantive cohesion within the profession. Constans Manganas: “We want to foster the same substantive quality level for all haptotherapists in the Netherlands. Whether you work in the north or the south part of the country, and whether you’ve followed one form of education or another, it’s important that we all offer the same level of care. To do this we need the cooperation of the educational institutes because, of course, you cannot lay that standard of quality at the feet of each individual haptotherapist. Eventually we would like to see that the educational institutes move closer to taking the same route, keeping their own specific hallmark, but working from our common principles and core values. After all, we’re too small to be so divided; if we want to create a clear profile for ourselves, we cannot permit there to be so much division among us.” She concluded to her satisfaction that cooperation between the

educational institutes has clearly improved over the past few years: “A consultation among the directors has been called into being, the educational programmes have organised a course for basic medical knowledge, and recently, a continuing education course in psychopathology. The Academy in Doorn, ITH and Synergos are all participating in this. As a pilot, a joint AVC-procedure [Competences Otherwise Acquired] has also been started for haptotherapists who were educated elsewhere. They may become members of the association after having completed this procedure. The two accredited institutes are now engaged in setting up a final exam protocol for this procedure. This is a huge step, because never before have they compared their examination assessments together.”

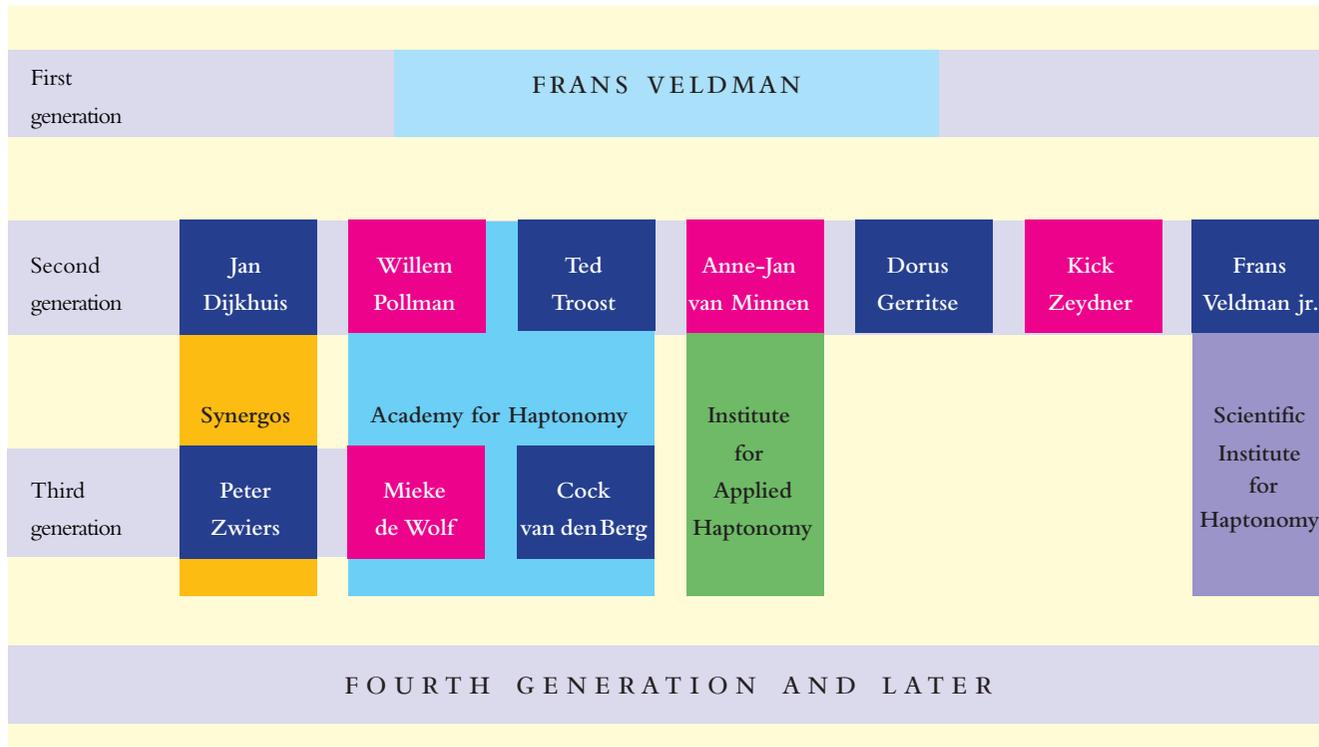
A big Family

According to vvH-boardmember Marli Lindeboom, the Dutch educational trainers in haptonomy and haptotherapy may be considered to be one big family that, partly through emigration to France, became divided against itself.

“First there is the founding father Frans Veldman, who moved to France. Then in the Netherlands, a second generation followed with people like Willem Pollmann, Jan Dijkhuis, Dorus Gerritse, Kiek Zeydner, Anne-Jan van Minnen and Ted Troost. Communication between these people and Frans Veldman broke off and rifts also occurred among themselves.

Then, there is the third generation with Mieke de Wolf and Cock van den Berg who stayed at the Academy, Peter Zwiers who started the Synergos programme with the help of Jan Dijkhuis and Frans Veldman Jr. who set up his own institute. The third generation did not communicate with Frans Veldman Sr. either, nor were relations among themselves very warm.

Now there is a fourth generation: the great-grandchildren as it were. That’s our inheritance. We are now engaged in studying the source anew, keeping the valuable elements and trying to bring everybody together. That’s an ideal we very much want to work on.”



things are moving again.” Constans Manganas: “Now you see a new generation of haptotherapists arising. Young people who are excited about the profession, who are really brimming with energy. They use new media and do all kinds of things digitally, like working with electronic patient files. They’re starting off fresh. It’s very important they do not end up mired in the old infighting. They need to find a good professional organisation, one that can mean something to them. Then in turn they will be fully prepared to put their shoulders to the grindstone. So for that reason too, this new atmosphere is vital.”

The vvh-board has given itself the task of bringing not only the educational programmes closer together, but also other players in the world of haptonomy. In doing this, their view extends beyond the Netherlands. They hope to eventually strengthen the links with the haptonomy institute in France. With great interest the association is also following the private initiative of Gert Klabbbers, Jan Guichelaar, Robert de Vos and Willem Hagg to start a digital English-language journal on haptonomy. “I think this is a very positive development,” said Roel Klaassen. “It also fits in well with our endeavours to be more academic. The choice for English is fine, because it’s a language that is accessible to everyone.” The choice for interconnection implies a certain turn in the board culture of the association. “In the past there has been a great deal of dissension,” said Joost de Leijer. “But we now feel that in 2004 the vvh can get along fine with all the other parties involved. You don’t always have to agree but you must be able to look each other in the eye. For a long time, the association had the image of being very strict: rules were rules. Perhaps at the time that was necessary but it was also the cause of distrust. We’re trying to change that now, to create a different climate, to ease up a bit. The consequence is, among other things, that it’s easier now to find people to serve on committees. There’s not a run on it, but



APPENDIX 1

Literature

(Nota bene:

In Touch is a academic study about the beginnings and growth of haptonomy and haptotherapy as a profession and about the formation of an internal much debated professional organization of haptonomists en haptotherapists. As all this happened in the Netherlands, references that were consulted for this study are mostly written in Dutch. For the readability of this edition most references to original sources are left out. Readers who want to learn more about these are referred to the Dutch edition which contains them all.

As for publications and books concerning the nature and essence of haptonomy and haptotherapy we refer to the List of Literature below.)

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APPENDIX 2

Board members

Name	Position	Took office	Resigned
Jan Guichelaar	chairperson	1993	2002
Hans ter Keurs	secretary	1993	2000
Wim van Offenbeek	treasurer	1993	1998
M. Börger		1993	1993
Constans Manganas		1993	1995
Bernard Samson		1993	2003
Nelleke van Diepen-Levens		1993	1998
Saskia Taat-Piena		1994	2000
Josje Schutte		1995	2001
Robert de Vos	treasurer (until Apr. 2000) secretary (Apr. 2000 – Oct. 2001)	1998	2002
Arno Tromp	secretary (from Oct. 2001)	1998	2005
Catholijn te Wechel		2000	2003
Gert Klabbers		2000	2002
Ilse Beemsterboer-Mattemaker	treasurer	2000	2001
Yolande Reichert		2001	2003
Esther Snijder	chairperson	2002	2005
Marijke Andriessen	treasurer	2002	2003
Pieter van der Slikke		2003	2005
Michiel Reinders		2004	2005
John van der Zwaan	treasurer	2004	2004
Harry van Nie		2004	2006
Jan Brinkman	chairperson	2005	2006
Catholijn te Wechel	secretary	2005	2006
Gerard Oudendijk	treasurer	2005	2006
Hanny Rietveld		2005	2006
Marguërite Boeije		2005	2006
Martijn Bakker	chairperson (from Febr. 2008)	(2006 interim until 2008)	2011
Gert Klabbers	secretary / treasurer (from 2010 Febr. 2008 through Dec. 2010)		2010
Jan Guichelaar		2006 (interim until 2008)	2009
Constans Manganas	chairperson	2008	present
Marli Lindeboom	secretary (from 2011)	2008	present
Sjoerd van Daalen	treasurer	2010	present
Roel Klaassen	2010		present
Joost de Leijer	2011		present



APPENDIX 3

List of interviewees

Jan Dijkhuis† (26 January 2011)
Jan Guichelaar (12 December 2011)
Marja de Jonge (28 June 2012)
Nenny Kegels-van den Brandhof (30 March 2012)
Roel Klaassen (28 June 2012)
Jan Koolhaas (27 January 2011)
Wim Laumans (6 June 2012)
Joost de Leijer (28 June 2012)
Joost Leonhard (20 April 2012)
Marli Lindeboom (1 October 2010 and 28 June 2012)
Constans Manganas (28 June 2012)
Anne-Jan van Minnen (14 March 2011)
Els Plooiij (7 June 2012)
Willem Pollmann (1 October 2010)
AnneMarie Veldman-van Polen (12 October 2011)
Arina Winkelman (6 June 2012)
Mieke de Wolf (12 May 2011)
Peter Zwiers (6 June 2012)



APPENDIX 4

Photographs

We have attempted to trace the entitled owners of the photographs. Those who are of the opinion that they may have claim to certain rights are requested to contact the publisher.

- p. 20 Taken from: Frans Veldman, *Lichte Lasten*, second printing 1977.
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- p. 25 AnneMarie Veldman-Van Polen collection
- p. 26 Willem Pollmann-Wardenier collection
- p. 28 AnneMarie Veldman-Van Polen collection
- p. 31 AnneMarie Veldman-Van Polen collection
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- p. 46 Doorn Academy for Haptonomy collection
- p. 58 AnneMarie Veldman-Van Polen collection
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- p. 74 Haptonomisch Contact collection, 2009
- p. 75 Jan Guichelaar collection
- p. 87 Wim Laumans collection
- p. 88 Gert Klabbers collection
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- p. 98 vvH collection



APPENDIX 5

Abbreviations

VVH :	Vereniging van Haptotherapeuten = Association of Haptotherapists
CIRDH:	Centre International de Recherche et de Développement de l'Haptonomie = The International Centre for the Research and Development of Haptonomy
ITH :	Instituut voor Toegepaste Haptonomie = Institute for Applied Haptonomy
WIH :	Wetenschappelijk Instituut voor Haptonomie = Scientific Institute for Haptonomy
IHC :	Instituut voor Haptonomische Communicatie = Institute for Haptonomic Communication
NVVH :	Nederlandse Vereniging voor Haptonomie = Dutch Association for Haptonomy
VTDK :	Vereniging tegen de Kwakzalverij = Association against Quackery
BIG :	Beroepen Individuele Gezondheidszorg = Individual Health Care Professions
SPHBO:	Stichting Post Hoger Beroeps Onderwijs = Foundation Post-Secondary Professional Education
VHBZ :	Vereniging voor Haptonomische Zwangerschaps Begeleiding = Association of Haptonomic Perinatal Coaches
NVPA :	Nederlands Verbond voor Psychologen, Psychotherapeuten en Agogen = Dutch Federation of Psychologists, Psychotherapists and Community workers