

## What is antroposophical curative education?

Curative Education and Social Therapy Council, [www.khsdornach.org](http://www.khsdornach.org)

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Curative education with anthroposophical orientation was initiated by Rudolf Steiner, the founder of anthroposophy, in 1924. Today curative teachers working out of anthroposophy are active in many different areas of curative education in curative education schools and homes, life communities, psychiatric clinics, specialist kindergartens, early learning support and advice on upbringing given at home, and in social therapy work with adults.

### Methodology

The methodology is based on intensive investigation of the phenomena disabilities, unusual characteristics, 'disorders' where anything that does not appear 'normal' at first sight means that specific tendencies have grown dominant and often also out of balance in body, soul and spirit or at the social level. Thus a 'hyperactive' child will have a marked emphasis on the external movement aspect, whilst the interiorized movements of directing attention and listening anatomically based on a continuous process of movement interiorization and concentration are poorly developed. Another example are compulsions. Independent of a possible psychic origin or a connection with characteristic neurobiological processes, compulsions may be seen as a memory process acting right down into a physical that has become one-sided, so that the process of forgetting tends to be weak. There are numerous polarities, processes and levels in the human being. To assess these in a differentiated way is the purpose of an 'anthropology' for curative education that takes its orientation from anthroposophy. These processes must again and again be brought into balance and equilibrium so that health may arise as a 'whole'. Such an approach, taking its orientation in the phenomena, does not exclude medical and psychological diagnosis but takes it further in such a way that the way in which a person's disabilities come to expression is not merely classified but speaks to the perceptive ear in the language of the phenomena.

### Learning

From this point of view, it is also possible to see why the arts are so important in curative education and therapy. Working with the arts, one lives in the shaping of pure elements such as colour, form or sound. These elements offer their own polarities, such as high and low or short and long notes, major and minor in music; every musical rhythm, every melody, relates these opposites in a different way, and at the same time every sound, every rhythm has its own inherent language. Much the same can be said for working with other arts or crafts in an elementary way. Educational and artistic means can thus be used in response to the one-sided developments which have been outlined, for they use related languages. To take up the examples given above, a rhythm in music represents a body-bound movement that is more outward in direction, compared to melody as a movement that is more inward and closer to the conscious mind. Being able to forget also is like a movement that may be compared to something where we are consciously getting 'lower' or 'softer'.

Children or adults with disabilities or unusual behaviour can be helped in finding a relationship to the particular polarity in them which is not yet fully evolved. On the other hand they can also be encouraged to develop the potential which lies in every one-sidedness or to transform it. Efforts to bring healing therefore always are the attempt to stimulate the integration process in an inward and also outward direction.

### The role of the teacher and educator

In the encounter with the child or adult, the teacher and therapist always makes his own individual nature the starting point. This is his 'instrument', with its inherent potential and limitations. A resonance develops between him and the child or adult and this can provide the basis for curative-education work and therapy. It does require thorough knowledge of one's own individual nature and a readiness to develop this further through exercises.

Anthroposophical curative education is thus primarily seen as a method of gaining insight and of being a teacher and therapist the core of which are a series of exercises formulated or suggested by Rudolf Steiner. In this sense, it is a radically personal rather than institutional way, though institutions are called on to make such a way possible. Summing up the above, curative education means

- perceiving how a child's reality comes to expression, classical diagnosis
- studying a phenomenological anthropology
- understanding the signs and unusual aspects as a 'language of the phenomena'
- that curative teachers have self-knowledge and work on their own inner development

Disabilities may be seen as impairment of the 'capacity to gain impressions' (e.g. with sensory disabilities) and above all also of the power to express oneself. Perception of the phenomena may enable curative teachers to see them as the reflection, the language, of an essential nature which has so far gone unregarded, lying hidden, however noticeable some features may have been, and now presents itself with its unspoken questions, wishes and developmental needs.

### **Personal development**

This is something which anthroposophical curative education shares with other educational and psychological approaches that take their orientation from the individual nature of the child or adult. At the same time the human being is seen as not only having an earthly biography but also being in a process of development that was in progress before he was born and will continue after his death. In life, the individual seeks developmental steps and the possibility to be effective in a way that is only possible on earth. The bodily basis, temperament and intelligence, and also the social environment are a vessel, a kind of 'garment', for this development, an understanding of which demands a higher point of view from which a particular life can also be seen as a work of art and process of development. From this point of view, the essential nature of a child is seen as gradually connecting with the bodily basis and the environment. To be by the child's side in this is the task which is set in anthroposophical curative education.

It is vital to stress that such an approach can be wholly in accord with modern scientific, medical and psychological insights and can also integrate different therapeutic approaches. Anthroposophical curative teachers and social therapists live in awareness of a spiritual core in the child or adult - and in themselves; they know about the dialogue between them, a dialogue that may not be immediately apparent. Such awareness is not knowledge in the classic sense but has more the character of cautious but continuous questing and seeking.

Every human being is capable of development, and every human being also has one or several tasks to do. In social therapy in particular, the aim is to recognize the capabilities and interests that crystallize out as people grow to adulthood and to support them. This is not just in the sphere of work; the social influence of a person goes much further, encompassing also the things one is able to evoke in others.

Anthroposophical curative education brings together medical and therapeutic, educational or curative-educational, and socially creative endeavours. Specific social forms that do not derive from established methods are needed for the upbringing and therapy given to work with children and adults of whom Rudolf Steiner said that they were 'in need of special care' forms that give sufficient space and sovereignty to the child and the adult and also to the teacher and therapist in the work they do together. Apart from this, curative education and social therapy have a slight but significant connection with the reality of social life. In a paradigm of 'normality' that is increasingly more confined and above all is one of 'being functional', the individual with a disability draws attention to himself, is considered 'disruptive' and marginalized. Rejection of this kind is a failure to perceive the important contribution which people with disabilities make in society, a contribution which needs to be accepted, however, if it is to be truly fruitful. We hear of this, for instance, from parents who speak of what a child with disability contributes to the family, and of the road they themselves have gone in their efforts to understand the child and help him or her.

There are also general, though hidden connections between society and sickness or disability. To mention just one, children with developmental problems do in some respects reflect social phenomena of our time (at least in industrialized countries). Thus it is not difficult to find many of the features of 'hyperactivity' in modern social life. Work done to create spaces where these children can live and develop will at the same time also provide something which is urgently needed for contemporary society and civilization.