



Goetheanum  
School of Spiritual Science  
Medical Section

International Coordination  
Anthroposophic Medicine/IKAM  
Eurythmy Therapy Department: Angelika Jaschke

# International Newsletter Nr. 10, December 2012

## Leading Thought

*"The healthy social life is found,  
when in the mirror of each human soul  
the whole community finds its reflection,  
and when in the community the virtue  
of each one is living."  
The Motto of Social Ethic by Rudolf Steiner*

*Out of the strength of these words  
we actively build the substance of our  
International Eurythmy Therapy Forum.  
A social organ which only exists  
through our common goal  
and combined efforts.*



**EURYTHMY THERAPY  
FORUM**

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***Dear colleagues, dear doctors, dear friends  
of eurythmy therapy worldwide.***

We would like to invite you to look back at the year 2012 through this newsletter; and to become aware of the diversity of what we intend for the future. This year we have been engaged in radical internal change and have considered many fundamental issues.

The Eurythmy Therapy Forum's new, seven-strong coordination team got down to the nitty-gritty of its new tasks, producing a great deal of activity. We try to work together closely in our bigger group, so as to maintain our usual clarity and transparency in the service of the worldwide professional community —in such a way that work in different areas can be deepened and new impulses from our professional community taken up.

Our collaboration with the International Young Physicians' Forum has borne fruit already in the form of the Whitsun Conference which we have been planned together for 2013; it is aimed at students and those at the beginning of their careers, in whichever professional group. We wish to give our wholehearted support to this anthroposophic medical work between the professions, which is such a hallmark of the younger generation.

The Perspectives Conference took place in Dornach on 16th September 2012. It united co-workers from all fields of anthroposophic medicine around the question „What would we like the different fields within anthroposophic medicine to have achieved by the year 2020?“

Our work together was informed by a sense of responsibility for the whole of our medical movement and by a concern for the spirituality within it.

I hope we all particularly enjoy reading the reports from the different countries: our suggestion was to describe the ground under our feet, on which we carry out eurythmy therapy with our patients. I myself have experienced very clearly on my travels what a strong effect aspects of the landscape can have on the human being and their engagement with eurythmy therapy.

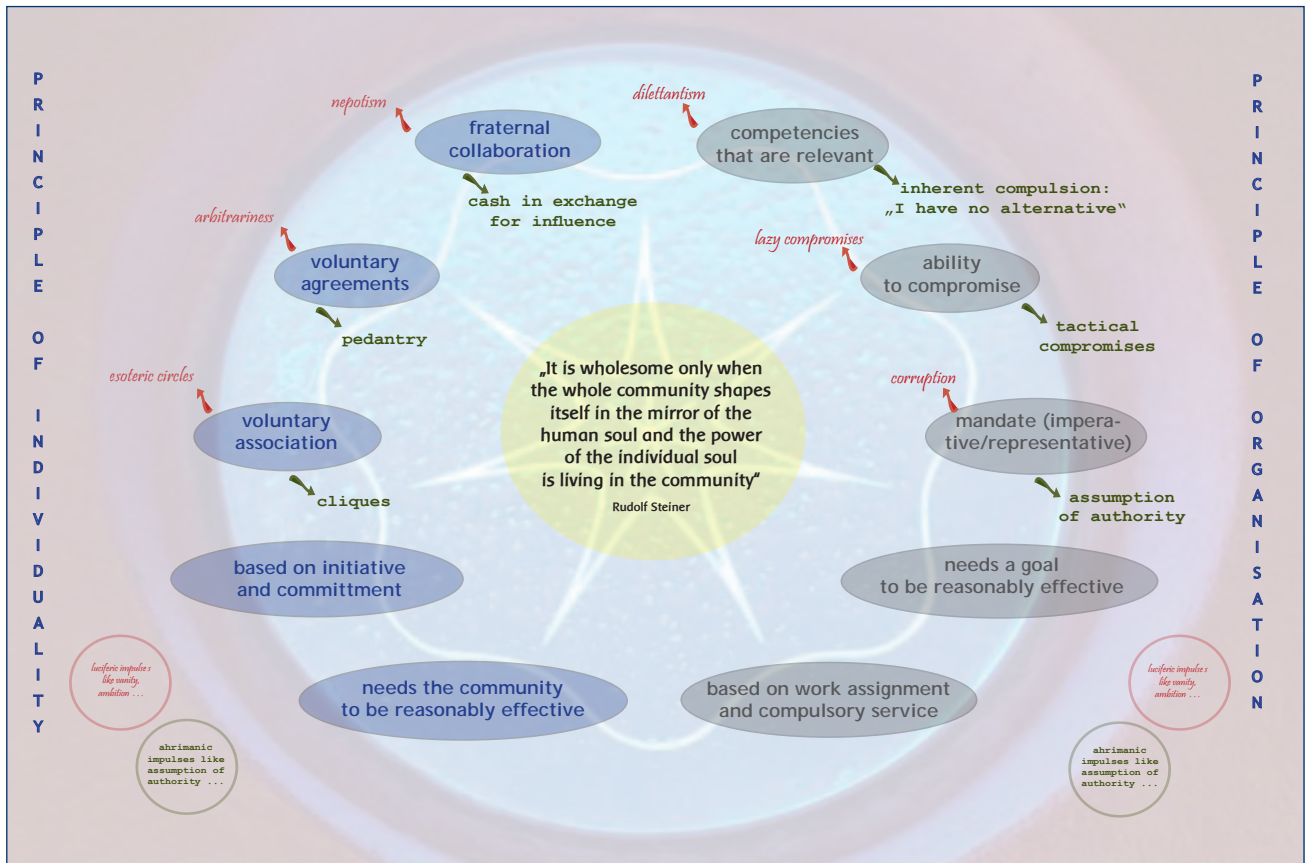
With warmest wishes,

*Angelika Faschke*

From the Medical Section

www.medsektion-goetheanum.org

*There can be absolutely no good that needs to be striven for only as a once-and-for-all, tranquil good; far rather does the good arise only in that the human being can continually swing toward two sides, like a pendulum, and find through their inner power the possibility of balance, of the middle gauge.“ (R.Steiner, The Spiritual Foundation of Morality, GA 155)*



Luciferic Impulses such as personal vanity and ambition	Principle of Individuality Committing oneself out of one's free initiative	Ahrimanic Impulses such as abuse of office and abuse of power
<i>social after-effects:</i>	<i>social after-effects:</i>	<i>social after-effects:</i>
esoteric circles	voluntary association	cliques
arbitrariness	voluntary agreements	pedantry
nepotism	fraternal collaboration	cash in exchange for influence
<i>I can achieve the greatest gain in my „image“ when others admire my competencies and I can act by virtue of my position.</i>	<i>„It is wholesome only when the whole community shapes itself in the mirror of the human soul and the power of the individual soul is living in the community.“ R. Steiner</i>	<i>Efficiency arises when I exploit other people's competencies and exploit financial resources in order to optimise the growth of my power.</i>
dilettantism	competencies that are relevant	inherent compulsion: „I have no alternative“
lazy compromises	ability to compromise	tactical compromise
corruption	mandate, obligation	abuse of office, abuse of power
	<b>Principle of Organisation</b>	

From the work of IKAM (International Coordination of Anthroposophic Medicine) April 2012

## From the Medical Section

www.medsektion-goetheanum.org

### Annual Conference, 13–16 September 2012 (review)

#### „Anthroposophic Psychiatry, Psychotherapy and Psychosomatics“ (The basis in human studies, therapy and prevention of psychiatric illnesses)

One thousand and ten people applied for this year's conference. That has never happened before! We felt we had hit on a particularly topical theme this year. Each day was devoted to an overall aspect: the soul as arena for dramatic struggles — the body as a reflective organ for illnesses of the soul — and the spiritual and karmic sphere with its healing power.

The preparation group facilitated by Dr Wolfgang Rissmann guided us with great clarity and calmness through this major interdisciplinary conference.

Apart from the content in the overall theme of the Conference, it became increasingly apparent that the space in the programme for working together in one's own professional grouping was beneficial and made sense, as people



had come together from forty nations all over the world. A beneficial rhythm arose in this way between the overarching conference themes and more professionally specific sharing and exchanges in relation to one's own discipline. (AJ)

### Annual Conference, 12–15 September 2013 (preview)

#### „The Human Heart“ (provisional working title)

We shall consider the culture of the heart in the history of humanity; work on its pathology and perspectives for therapy arising within the threefold human organism; and address the prevention of cardiovascular illnesses.

Eurythmy therapists who have particular experience with these conditions and who would like to offer a course from the perspective of eurythmy therapy are welcome to get in touch with me by March 2013. (AJ)

## Perspectives Conference of the Medical Section at the Goetheanum

Sunday 16th September 2012  
(2.30–10.00pm)

Around one hundred invited activists from the field of Anthroposophic Medicine divided into eight groups in order to review the intentions — whether achieved or not — of the previous Perspectives Conference of 2000; to survey the current situation; and to elaborate a realistic perspective up to the year 2020. The following five themes were assigned to the profession of eurythmy therapy:

1. Inter-professional training issues (Shaina Stoehr, Dr Wilburg Keller-Roth)
2. The TOPICS project, an international database on anthroposophic medicine and its publications (Aðalheiður Ólafsdóttir)
3. Research and academisation; Cognition-Based Medicine (Hermo Beer)
4. Professional esotericism and ethics (Mareike Kaiser)
5. The legal and political situation of anthroposophic medicine (Monika Eichele)

In the evening plenum, in which the findings of the conversation working groups were shared, one could sense how, in each group, the seed of future tasks was reflected and worked at realistically with considerable openness and an emphasis on earnestness.

The detailed working questions and findings are available via the Medical Section or, in the case of eurythmy therapy, from Angelika Jaschke.

Here are the most striking cornerstones and descriptions of aims for the entire anthroposophic medical movement — affecting all professional fields and groups in the coming years.

- The idea for an anthroposophic medical academy with an interprofessional basic module in human studies for all professional groups will be elaborated.
- Training for trainers in all professional groups is essential for our survival.
- Accreditation of all anthroposophic medical trainings is necessary for the implementation of the Anthroposophic Medical System and is being elaborated further.
- A clear description of methodology is a prerequisite for demonstrating the diversity of methods in anthroposophic medicine.

- Treatment concepts for twenty agreed clinical pictures will be elaborated by each professional group and brought together.
- The TOPICS database will be established as a collecting point all findings relating to anthroposophic medicine.
- The future basis for all research in anthroposophic medicine will be Cognition-Based Medicine / individual case study. Through Kiene and Kienle the method is now internationally recognised. We now need to populate it with content from all the professional groups within anthroposophic medicine.
- The approach to individual case study must be learned in the trainings („How do I document my practice?“).
- Trainings and Fields of Practice are essentially responsible for the qualitative evidence of anthroposophic medicine.
- Anthroposophic medicine as a „mystery medicine“ must leave the mysterious behind and show how it adds value in real life though the qualitative, therapeutic actions of its representatives from all the Fields of Practice.

(Summary, AJ,  
27th September 2012)

## Eurythmy Therapy within the Medical Section

### Not national — but universally human

*„...the Anthroposophical Society should be something that is really permeated by a spirituality born in community, ... in such a way that it would eventually come to a situation where it would have more meaning for a person to feel themselves in anthroposophical spirituality than in Russian or English or German spirituality. Only then would the communal really be there. ... the human being in our modern age has given up living in history and knowing that the Christian principle of universal humanity must now be taken seriously; for otherwise the Earth would lose its goal and its inner meaning.“ Rudolf Steiner*

*From: 1923: A Fateful Year in the History of the Anthroposophical Society —  
From the Burning of the Goetheanum to the Christmas Conference (GA 259 — not translated)*

### 9th Eurythmy Therapy Delegates' Conference

September 12, 2012,  
Dornach, CH

Angelika greeted the 31 participants who met in Dornach on the 12th September (national representatives, representatives of trainings and fields of practice, and eurythmy therapy coordinators) by saying ‚we are like the „beat of heart and lung“, because we wish to perceive each other, meet, share, and go back again with renewed energy‘.

We started by singing our ‚Song of the Grail Knights‘, then began the conference proper by describing concrete examples to illustrate the different situations of eurythmy therapy. We were in for a surprise: each of us said something in our mother tongue — how different they sounded!!! Fifteen different languages! I will only give a brief sample of what we heard, as you will be able to read reports from the national representatives further on.

South Africa has seventeen languages, of which eleven are official; whereas Germany has just one official language, in spite of which we have quite a hard struggle to understand each other. In Norway, which is cold and high, it is so difficult to meet... in delightful, warm Italy a visit from Angelika helped broaden the outlook to take in more of the world... the Dutch soul would really prefer to keep calm, but actually finds itself getting rather agitated. Everywhere there is a wish in eurythmy therapy for qualified training and the opportunity for going deeper through further training.

Irene Poewelse of the Netherlands and Christiane Wigand from South Africa guided us beautifully through the eurythmy meditations ‚Steadfastly I take my stand in existence‘ and ‚Light streams upward, weight bears downward‘, going from the artistic over into eurythmy therapy.



After the break, Angelika gave a report on the Medical Section's work. The year's theme was the relationship of ‚Individuality and Community/Individuality and Organisation‘. Both are necessary! The danger of egoism can be countered if the individual is embedded in the community and if the community empowers the individual.

Important questions and concerns about eurythmy therapy have arisen. Where are the roots of eurythmy? Where are its boundaries in relation to other therapies? How is it protected?

Six countries have so far received the **AnthroMed**<sup>®</sup> licence. America and Switzerland joined the scheme this year, while four others are on the way. Angelika spoke about the ten years of good collaboration among the coordinators in the International Coordination Group for Anthroposophic Medicine (IKAM). She also mentioned the Perspectives Conference that had taken place on the 16th September 2012, where an expanded group considered anthroposophic medicine into the next ten years.

Our ‚internal agreements‘ have been brought up to date and will now be called ‚agreements between delegates and coordinator‘.

Finances: Angelika is filled with admiration and gratitude for the €25,000 which has come in through contributions; she still needs to find sponsors to finance the multifaceted activity of the Forum. Each professional group in the Medical Section is still responsible for finding its own funding. It will take quite an effort!

A year ago, Angelika entrusted seven colleagues with specific tasks within the Forum. The colleagues active in the eurythmy therapy coordination group introduced themselves and their activities:

**Mareike Kaiser**, who visits many countries with courses on eurythmy therapy for the teeth, nurtures contact between representatives of the fields of practice.

**Monika Eichele** is actively engaged in assuring the public presence of the International Professional Associations for Eurythmy Therapy and of the International Federation of Anthroposophic Arts and Eurythmy Therapies.

**Ursula Browning**, responsible for the eurythmy therapy trainings, was represented by Dr Wilburg Keller-Röth on this occasion. The basic precondition for recognising eurythmy therapy trainings, anywhere in the world, is that they meet certain standards; the basic conditions have been elaborated. There are currently eurythmy therapy trainings for physicians in Britain, Georgia, Germany and the Baltic countries.

**Swantje Harlan**, of the Young Physicians' Forum, wishes to work with us to coordinate the collaboration between eurythmy therapists and physicians.

**Anja Meierhans** has concentrated for years on developing clarity in eurythmy therapy methodology and on documentation and research.

**Monika Margesin** keeps in contact with the forty national representatives in connection with reports for this newsletter. At last we were able to meet **Regina Delattre** who, over many years, has supported our professional group in everything to do with layout and typesetting. She has also helped give our website and newsletter a visible presence in the world; and will continue to work with us into the future.

After a good lunch, John Browning and Anja Meierhans led us into a group game, which gave us opportunities for the most varied social experiences and cognition, which we made use of later in the afternoon. We became more aware of different roles that we are always taking on, and that every action has consequences for everyone else. In conversations in pairs, we next looked at the impulses which carried us over the past year and which we would like to take into the coming year.

Our review at the end of the day revealed that we had created a warm, cordial atmosphere, enabling a real, human encounter, where joy, impetus and guiding vision could be reawakened. Our heartfelt thanks went to Angelika Jaschke: eurythmy therapist, social artist and coordinator of our Forum. Our thoughts turned, too, to our colleagues who had died.

We finished by singing the Song of the Knights of the Grail, and said farewell to each other until our next meeting on Wednesday 11th September 2013.

*Monika Margesin*

*Heartfelt thanks, too, to Margret Thiersch, who gave a deepening course in eurythmy therapy, in the week between the Medical Section Conference and the Michaelmas Meeting of the School of Spiritual Science, for colleagues from afar who were attending both.. (AJ)*

### Delegates' Conference Afternoon Meeting on the Theme of „Social and Artistic Encounter“ (September 12, 2012)

#### A brief summary:

The afternoon of the Delegates' Conference was devoted to the question as to how the work of delegates had gone over the past year, and what scope for shaping activity might arise in future. The overarching theme for our work together was „Individuality and Community: the Delegate between the Poles of Duty and Self-Responsibility“. The aim of this session was to nurture and train our capacity for mutual perception based on shared experience.

In a joyful mood of anticipation we gathered in the Goetheanum's North Room and sat on the chairs which John Browning, of Britain, had placed in three circles of ten to twelve chairs each. John explained the movement game that we were going to play, which called for attention, quick reactions and a good measure of equanimity.

John explained the game, which we then played joyfully and without inhibition, in a seamless flow from English to German.

In the group conversation work which followed, we evaluated and discussed the game/exercise (which lasted ten to fifteen minutes), the group dynamics which it revealed, and the role play and behaviours which it involved. We did this in three stages; a reflection of the exercise; finding parallels with our own work-based relationships; and scribing the results we came to on a flip chart. The conversation was both lively and jolly.

We shared our most important experiences and insights in the plenum which followed. This feedback included the following themes.

Reflection on the exercise:

- taking the initiative to become active; missing out on something because I am too much in myself and not carrying the entirety of something within myself.
- creating pauses; gaining an overview — not being completely involved in the game.
- we had pauses too!
- everyone got straight into the dynamics of the game!
- getting to know each other in a different (movement) context; perceiving different sides of the other.
- how did our language develop in the course of the game? Were its qualities still based on content?
- the group was able to bear with transgressions against the rules — this was almost a miracle!
- parallels with our working situations (or with our work as national representatives and delegates):
- what sort of mood comes toward toward the delegates from the periphery?
- playing different roles in life — being adaptable; different patients, different professions.
- my actions and their dynamics have consequences for everyone else.
- how can I become well-informed? Too much information can result in apathy and resistance.
- moving too quickly: others can feel under compulsion or less free.

Many thanks to all the participants for the wholehearted way in which they entered into this afternoon of social and artistic movement. Special thanks too to John, who gave us such clear guidance into this playful activity with its wealth of experiences.

*Anja Meierhans*



## The Eurythmy Therapy Coordination Team

„Very much depends today upon human beings in the world coming together in the right consciousness.“ (Rudolf Steiner: *Course for Young Doctors*, p.201, GA 316)

After a pioneer phase lasting ten years, the eurythmy therapy department in the Medical Section has developed a „face“ and its own status.

It has gradually been possible to elaborate the threefold structure (with nine tiers) of the levels in which we work; this has been achieved in life, from life and through life. Following the „principle of becoming“ (Rudolf Steiner: *From the History and Contents of the First Section of the Esoteric School 1904–1914*, GA 264), we keep all solidified forms mobile, although they are still binding agreements; through the mandate holder and their international associates they remain oriented toward a current reality, and must thus always remain in transition.

- There is the field of eurythmy therapy trainings — and the corresponding field of qualitative research.
- The field of national/legal Professional Associations, which are the crucial international voices representing eurythmy therapy's professional status and development.
- And the increasingly significant area of social and economic work in the Fields of Practice — through every single eurythmy therapist with their patients in their locality.

Above and beyond this, as the heart (in the sense that „the periphery gives impulse to the centre“), we have the International Delegates Conference, in which

all the elected or appointed mandate holders, from all of eurythmy therapy's areas of work, meet to share and exchange. A basis of trust has developed which is the precondition for implementing communally developed tasks and aims. In the rhythmical interplay of giving and taking, imparting an impulse and receiving, becoming and dying away, international activity and attentive listening, a communal stream of will for eurythmy therapy can come to being.

It has become increasingly clear that only the autonomous power of each individual I can share in shaping this communal stream as it comes into being.

As coordinator I have the overview — but I cannot keep my ear to the ground everywhere, to give due care to all the detailed issues and impulses. I realised two years ago that we need a person for each level of work, someone who can completely devote themselves to this listening activity out of their overview of the whole. We are few and the few are completely bound up in their workplace. Where however are the people who can and want to make it their (additional) task to weave the connecting threads between the different individual elements — for the wellbeing of the whole?

As I described in the previous Newsletter, I made the attempt to find such people within our own ranks. A new pioneer phase, which will hopefully benefit you all. Now we are busy becoming a real team, where each must know and keep an eye on the needs of the whole, and from this perspective establish autonomous work in their own area.

The eurythmy therapy coordination team will describe itself in the different sections of the Newsletter through its tasks.

They are:

- Ursula Browning for Trainings
- Anja Meierhans for Documentation and Research
- Monika Eichele for Professional Associations
- Mareike Kaiser for Fields of Practice
- Swantje Harlan for Collaboration with Young Doctors
- Monika Margesin for Compilation of the Newsletter
- Regina Delattre for Publicity (Website, Newsletter, Layout, and so on)

My warmest thanks go to these seven fellow-helpers who will to bring their professional competence and join me in building the future of our free community, the Eurythmy Therapy Forum in the Medical Section.

(AJ)

## Coordinating Eurythmy Therapy

„The eurythmy therapist ... can act only in relation with a doctor. ... Eurythmy therapy can be carried out only on the basis of a proper diagnosis.“ (Rudolf Steiner in *Extending Practical Medicine*)



Reality shows that in many cases collaboration between eurythmy therapist and doctor as described above unfortunately does not happen. Almost half the eurythmy therapy national representatives at the September 2012 Delegates' Conference reported that this was a serious issue in their country. There are various reasons: too little knowledge of how a different profession works; overload in one's own work; lack of interest in collaboration; or simply that there is no anthroposophic doctor available.

The wish arose in the Eurythmy Therapy Coordination Group to strengthen collaboration between eurythmy therapists and doctors. Because I have been engaged intensively with eurythmy and eurythmy therapy at the time of my medical studies and later while working as a doctor (two years of a eurythmy training; the part-time eurythmy therapy training for doctors in Unterlenggenhardt; and much else), and because this collaboration is close to my heart, I have been asked to be the contact person.

How this collaboration might be strengthened is still an open question

### Deceased colleagues and doctors - 2012 / 2011

Elke Bormhorst	† 23.02.2011
Verena Boger	† 28.03.2011 CH
Elisabeth Widmer	† 16.04.2011 Zuerich, CH
Sophia Andrea Habluetzel-Groh	† 18.05.2011 Ruettihubelbad, CH
Christine Marie Luise Brauer	† 23.06.2011 Kempten, DE
Eva-Marie Autenrieth	† 21.07.2011 Murrhardt, DE
Titia Pauline Jonkmans	† 09.09.2011 Zeist, NL
Gundi Johanna Schmidt	† 17.11.2011 Murrhardt, DE
Ilse Bierbrauer	† 21.02.2012 Stuttgart, DE
Gunvor Kumlander	† 08.05.2012 Jaerna, SE
Elizabeth Kotzuba	† 05.09.2012 Capetown SA
Ekkehart Wacker	† 30.09.2012 Dresden, DE
Kathy Tuttle	† 30.10.2012 Jaerna, SE
Meike Koehler	† 21.10.2012 Murrhardt, DE

Doctors:

Dr. Wilhelm Kenzler	† Juli 2012 Brazil
Dr. Christhild Blume	† 03.02.2012
Dr. Hanna Doemeling	† 22.02.2012
Dr. Ulrich Speidel	† 22.02.2012
Dr. Wolfgang Gravelmann	† 11.03.2012



which should become more apparent over time (I look forward to receiving your ideas and suggestions). The forthcoming 2013 International Whitsun Conference at the Goetheanum has arisen from a basically similar impulse: to bring together all those who are active therapeutically with the patient and make time for sharing and exchange („Strengthening the Heart“ — [www.enlightening-the-heart.org](http://www.enlightening-the-heart.org) — an initiative of the Young Doctors' Forum). This is a reality for the patient and a deepening for individual therapies. If the eurythmy therapy exercises are to be valued as a remedy, their effect needs to be included in the patient's whole therapy concept. Such a moment of sharing between eurythmy therapist and doctor (what is the patient lacking? what therapy do they need?) can be really effective for the patient.

In this spirit I hope for a lively sharing and exchange for the 2013 Whitsun Conference in particular, but also for collaboration between eurythmy therapists and doctors well into the future!

*Swantje Harlan*

### Collaboration between young doctors and young therapists

Medical students and young doctors have come together in a search for the origins of the Young Doctors' Courses, and have occupied themselves with Helene von Grunelius' question to Rudolf Steiner „How do I become a good doctor?“ Rudolf Steiner described three fundamental innovations:

1. The full inclusion of spiritual realities in the confrontation with illness and healing
2. The significance of community forming for the development and nurturing of anthroposophic medicine
3. Applying the staff of Mercury as the central medical paradigm

It became clear from this that anthroposophic medicine is unthinkable without the therapies.

Out of this impulse, the young medical students and doctors would like to join with all young therapists (or those who have stayed young) for an intimate sharing and to learn from one another — for one another — with one another.

Our first concrete step will be the Whitsun Conference 2013 in Dornach. Students and recent graduates will shape it together in such a way that a real therapeutic encounter can take place.

A particular concern of their hearts is inter-professional learning right from the start, and an entry into professional life based on a communal anthroposophical foundation in medicine and human studies. (AJ)

### Interview with Angelika Jaschke



**You did a great deal of travelling again this year. Could you perhaps describe any particular features that stood out?**

I travelled once more to countries where I was able to have direct contact with my colleagues, and where we could see the crucial collaboration between each individual and the worldwide anthroposophic medical movement. Inner and outer solidarity, after all, give us a chance for survival.

- In Sweden I was able to take part as a co-auditor in the accreditation, on behalf of the International Coordination of Anthroposophic Medicine, of the eurythmy therapy training in Järna. Good, transparent structures were brought about, and I was very glad to hand over to the Järna carrying group the Certificate of Accreditation from the Medical Section.
- In South Africa, active impulses were given for an International Postgraduate Medical Training, as well as for the preconditions leading toward a eurythmy therapy training.
- In Britain another graduation in the eurythmy therapy training took place. I was able to get to know the students and hand over the Medical Section diploma.
- In Italy we worked together on issues to do with the Association, in order to smooth the way toward the **AnthroMed**<sup>®</sup> licence for eurythmy therapy — our international trademark.

**It sounds as if training issues are particularly important to you?**

The trainings are the basis of our profession; if there are questions in that area, I prick up my ears and do what I can to help — in consultation with the Council of Trainers. Apart from that, I find that contact with the graduates is important: they will be shaping the future of our profession.

The Professional Associations have national tasks that are quite different. My impulse for the future there lies more in enabling **AnthroMed**<sup>®</sup>, and building competency through professional deepening in the Fields of Practice. These are shared, supranational tasks. The three-year-long Auditors' Training finished this year; it prepares auditors to accredit the trainings in a mutual process using comparable criteria. Trainers from all the professional therapeutic groups in the Medical Section took part.

This was a moving and historic achievement, to have trained our own anthroposophic auditors and to be in a position to help each other across the boundaries of our professions; we are all faced with the same challenges at this time.

**In respect of content, where did the last year take you? Looking back on the year, were there particular points of focus?**

In the International Coordination of Anthroposophic Medicine, we are revising our book Structures of Responsibility and Ways of Working in the Medical Section.

We have again undertaken an inner process of clarifying our intentions, based on the feedback which we have received. We have again focused on the actuality of individuality and community.

We were able to put in concrete terms how these two principles engage with each other, and how we find them embodied in actual life in such a way that they serve each other.

I have tried to illustrate this in the graphic image presented at the Annual Conference (see page 4).

To take it really seriously and implement it in our daily life and work for coordination — in all the essential aspects of our social interaction, right into our feeling life involving all our eurythmy therapy colleagues — that is a challenge which I am convinced is worth the effort to take up.

It was in this spirit that we in the Eurythmy Therapy Forum attempted this year to lay down a real basis, including the necessary awareness, for the changeover to a coordination team.

**..... and quite concretely, in relation to eurythmy therapy?**

I am very concerned — as are many of my colleagues worldwide — about a number of issues.

The sound as „medicament“ is rapidly disappearing. In many respects we have turned into an unreflective, psychologising culture of movement for wellness, that has lost any connection to Rudolf Steiner's methods of eurythmy therapy. We have an urgent task here to bring an explanation of our methods into the world and say goodbye to the mainstream therapy mix. Anyone can now learn elements of eurythmy therapy for their profession and use it as they will. This complementary mishmash will not lead to a sharpening of our profile or recognition in the medical or political worlds. And what about our responsibility to the profession? Are we just going to stand and stare — or even look away? Or will we find the right ways and forms to maintain eurythmy therapy and develop it further? Our whole professional community is faced with intensely burning questions.

**Knowing you as I do, I wonder whether you have a vision for the year ahead — and the longer-term future?**

I could neither live nor survive without a vision! „If you know not the goal, you will not find the way“ — freely quoted from Morgenstern. That is my motto in this respect. Such visioning always arises in collaboration with other people. These are not some notions I have woven together in my head. They crystallise in me and are then „polished“ by real life — or modified, sometimes even dissolved. This is the risk I take on.

The Medical Section's Perspectives Conference, looking forward to 2020, has just taken place. One hundred of us sought a broad perspective on this scale for the whole world movement of anthroposophic medicine. I am now trying to distil this specifically for eurythmy therapy and bring it into a dialogue with all my professional colleagues. If this endeavour succeeds, a united stream of will comes about. The future can be shaped from it — there lies my task.

*Regina Delattre conducted the interview on 29th September 2012*

**How can we finance our work.....?**

Expanding the eurythmy therapy coordination work through the new team entails financial challenges.

At the moment our annual budget runs at about €40,000 — please see the financial statement for 2011 on the Forum's website: [www.forumhe-medsektion.net/en/Annual reports](http://www.forumhe-medsektion.net/en/Annual%20reports)

We now manage to find more than half this sum within the International Forum, through the valuable „solidarity contributions“ from our colleagues working in many different countries. Please accept my continual admiration and deep gratitude! Our agreement that every eurythmy therapist in the world make available the fee from one therapy session for the Medical Section's international eurythmy therapy work has proved reasonable and equitable. This means that we are united together not just in the realm of ideals and awareness, but also through the stream of will manifesting through money; and can enable this helpful network linking us all — and representing eurythmy therapy in the world.

So far, by dint of much effort and with a degree of insecurity each year, I have been able to find charitable trusts to which I could communicate our need for donations to cover our basic budget. A large part of these funds is used for translations into English, for subsidising travel costs to international conferences and for administration. Funding for projects is supported through my applications to various trusts (for instance for the updating by Beatrix Hachtel of the

Eurythmy Therapy Bibliography; the International Coordination of Anthroposophic Medicine's accreditation process for eurythmy therapy trainings; or for producing newsletters, and so on).

My own work is covered on the basis of invoicing expenses, not by a contract of employment.

Our professional community is now served by a seven-strong, professional group of colleagues; previously its work was voluntary, with some expenses being reimbursed. In some areas this will probably always be necessary. So far, no financial support is in prospect to cover Monika Eichele's enormous achievement for the survey of the profession; or for Mareike Kaiser's creation of a network among representatives of the fields of activity; or for Regina Delattre's work maintaining the website and keeping it up-to-date, as well as producing newsletters including this one. This situation is not sustainable in the long term!

I would be very grateful if you could give this some thought, and if you might be able to help find further sources of finance for our international cohesion and solidarity. (What is the situation with doctors in your country? Are there umbrella organisations for anthroposophic medicine which would like to support our work? Are there wealthy patients who have come to value your work and who would like to help support our professional community? Are you aware of any available legacy funds or other charitable trusts? ... and so on?)

We have our own account with the Foundation for Anthroposophic Medicine for our international eurythmy therapy work (see below).

With heartfelt thanks for your assistance in seeking supporters who wish to help the work — they surely exist, if we can only find them...

With warm wishes  
Angelika

**Bank account:**

Volksbank Dreiländereck EG  
Med. Sektion / Förderstiftung AM  
KONTO: 970760  
Bankleitzahl: 683 900 00  
Reference: 1258, donation, name and year

From other countries:  
IBAN: DE92 6839 0000 9707 60  
BIC/Swift: VOLODE66  
Reference: 1258, donation, name and year

Postal address of the Bank:  
Tumringer Strasse 237  
D-79539 Lörrach / Germany  
Tel: +49-7621-172-0

Postal address of the account holder:  
Med. Sektion  
Albert Steffenweg 2  
CH-4143 Dornach/Switzerland  
Tel: +41-61-7064-370



# donate and help

Donations get to where they are needed.

**Yes!** I'll donate \_\_\_\_\_ euros  once  every month  every 6 months  every year

My donation should go to

- the international support fond for eurythmy therapy within the Medical Section
- the following project (e.g. training, research, professional accreditation): \_\_\_\_\_
- the work of the International Eurythmy Therapy Forum

## My contact details:

Surname, name \_\_\_\_\_

Street, no \_\_\_\_\_

Postal Code, city, country \_\_\_\_\_

Tel, fax \_\_\_\_\_

E-mail \_\_\_\_\_

## Bank details for the direct debiting mandate\*:

Account owner \_\_\_\_\_

Account number \_\_\_\_\_

Bank name and address \_\_\_\_\_

IBAN \_\_\_\_\_

BIC \_\_\_\_\_

- Yes, I would like to receive the Eurythmy Therapy Forum's international newsletter  
(I'll have to give my e-mail address for this purpose)

\_\_\_\_\_  
Date, signature

\* To hold the administrative efforts as low as possible, I authorise you until futher notice to draw abovementioned payments debiting my account. The direct-debit authorisation may be cancelled any time without observance of a time limit.





## How can I help?

Through donations to our international support fund in the Medical Section, earmarked for eurythmy therapy. We can use this to respond to urgent requests for support for eurythmy therapy initiatives all over the world.

Donations for specific projects (for instance accreditation of individual eurythmy therapy trainings; developing new eurythmy therapy trainings in different countries; research projects; supporting the compilation of the international survey of our professional status, and so on).

Since we now publish everything in English and German, we need support for translation costs.

We urgently need a solid and reliable financial basis for our coordination team's continuing international work, including public relations.



## Will my donation actually get to where it is needed?

The Eurythmy Therapy Forum has its own account within the Medical Section, guaranteeing that 100% of donations actually reaches the eurythmy therapy department without deductions for administrative costs.



## What can I achieve as a sponsor?

As a sponsor you can contribute with your donation to the further development of eurythmy therapy, through urgently needed research projects.

You will be contributing to the continuing establishment of worldwide networking and collaboration for approximately 1500 eurythmy therapists; and its further development where it already exists. This includes essential support for the travel costs of colleagues from far-off countries attending the annual Delegates' Conference.

Through the Eurythmy Therapy Forum's annual Newsletter, you will gain a comprehensive insight into and overview of the worldwide activities of the eurythmy therapy profession.

## Publicity work within the Eurythmy Therapy Forum

I've taken care of the Forum's presentation to the outer world for several years.



This work always focussed on two principles: There should be a professional presentation both in the print and the web media. But it should also serve to facilitate the communication within this globally active network. Thus the annual newsletter is a kind of gleanings on the past year with all important topics within the field, whereas the website is geared at offering up-to-date information and offering access to all important documents, addresses and important information.

Apart from general information for the public, the professional group will find a plethora of information and documents which are important for the profession of eurythmy therapists as such but also for their everyday working life.

One part of the website which is meant to help with exchanging information is called „Addresses“. Here you can find all contact details of the country representatives, the professional associations and training institutes. We try hard to be up to date - but we also have to rely on your help. Please let us know when your details will change or when you detect errors on our pages.

We are going to develop another part

of the website. There you will find news on training courses, conferences and relevant events. We look forward to your input!

*Regina Delattre  
Coordination publicity  
in the Eurythmy Therapy Forum  
of the Medical Section  
at the Goetheanum, Dornach,  
Switzerland  
pr@forumHE-medsektion.net*

## Eurythmy Therapy on the Internet – the Somewhat Different Publicity Work

I felt obliged to look round on the internet and see what there was on the subject of eurythmy and eurythmy therapy and what was said about them.

Eurythmy appeared on Twitter almost exclusively in connection with forthcoming events. Waldorf pupils like to go on about „dancing your name“ — the most delightful jokes and comments go out into the world under this keyword — and many of them are quite pleasant. Quite a few Waldorf pupils maintain that they enjoy „dancing their name“, but the joke element clearly predominates. A small, extremely disenchanted and embittered faction agitates intensively against Waldorf schools and hence also against eurythmy. Over the last year, a few stalwarts have come along to disseminate on a regular basis something of more substance on eurythmy and eurythmy therapy — experiences, publications, research, and answers to various tweets on the theme. If you have a Twitter account, you can not only follow these

but also contribute to strengthening our presence: regular tweets on eurythmy and eurythmy therapy come from Celia Schönstedt, of the Association of Waldorf Schools; „Eurythmy Therapy“ (my account, which only tweets on eurythmy therapy); and „Love for the Earth“, which condescends to partake of the depths of name-dancing tweets and discussions, and makes people aware of the idea.

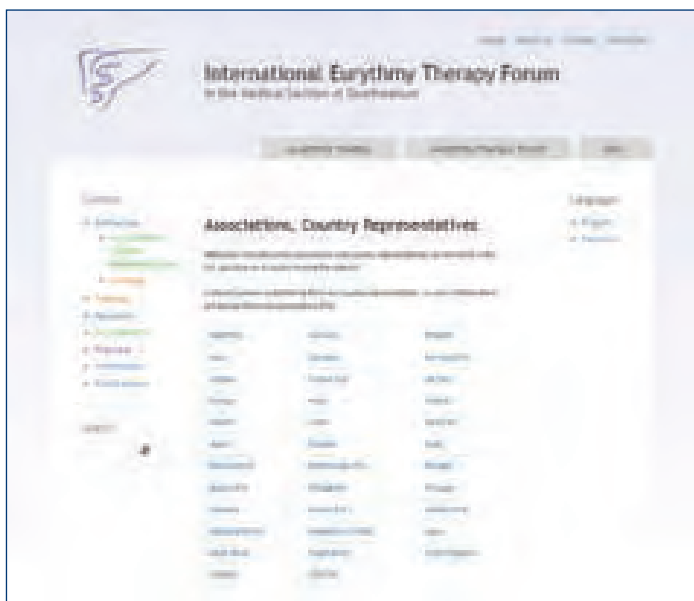
Still on the subject of Twitter, a group of around fifteen people joined Celia Schönstedt and me one afternoon in January to give eurythmy on Twitter a kind of birthday serenade under the slogan „100 Years of Eurythmy“ in the form of a „Tweet firework display“: following an intensive public relations action it receive considerable attention. Since then eurythmy tends to crop up in Tweets considerably more frequently.

I have also established a public Facebook forum on eurythmy — so far only in German. The basic idea was that nothing of this kind had so far appeared on the internet, where non-professionals could also participate and ask questions. Anyone with a Facebook account can read the posts on the forum. If anyone wants to join in the discussions, they have to apply for membership of the forum, which I always allow. I haven't refused anyone so far, although I have had to issue netiquette guidance once. One dyed-in-the-wool Waldorf jester who was allowed to join has so far not uttered so much as a peep. The purpose of this attempt has been to enable non-professionals and eurythmy therapists to share experiences in such a way that questions can be raised; the expression of criticism is explicitly invited. So far this functions really well: there is a high level of discourse (for instance, the difference to Qigong, the public image of eurythmy therapy, what should publicity look like, where can experts on this or that be found, where can you find something that has been published, and so on). Thanks to my work on the Bibliography I can point people to existing publications in many cases. Comrades in arms are welcome, as also — I would again like to emphasise this explicitly — are those with different views!

A group on eurythmy therapy is likewise planned for XING, the social software platform for professionals. XING offers many possibilities for getting better known. You need, however, to be able to demonstrate broad interest, and the number of colleagues represented there is not yet enough.

All in all, these experiments take up a lot of time. I can only encourage those of us with a computer and internet access to visit the sites occasionally — or more often. Fellow campaigners — whatever their opinions — are very welcome! After all they say „we exist, if people are talking about us“.

*Beatrix Hachtel  
BeaHachtel@gmx.de*



## Training/Research

### TRAINING

#### Preamble

We are glad to say that there are a number of initiatives worldwide for new Eurythmy Therapy training courses which, it is hoped, will lead to a Medical Section diploma. The mood and the life situations are different in each country, and the ideal is that the individual and the shared aspects can live in each course.



Questions which need to be taken up anew again and again are, for example: What are the criteria a trainer must meet? There is also no longer a consensus on conditions for admission to a training course in eurythmy therapy. These are burning questions, especially in Europe, that were also considered by the Council of trainers this year. Can we meet the needs of non-eurythmists who wish to do a Eurythmy Therapy training without having to make compromises when it comes to eurythmy therapy? Are there possibilities in working with the basic trainings to reduce the training from six to a maximum of five years? These issues are currently under discussion in the British Isles.

Our colleagues in South Africa, while working at their full-time jobs, are also preparing for an IPMT conference in January 2013. This will increase awareness and support for the evolving eurythmy therapy training.

A training course is being developed in Kiev.

In Vaihingen/Enz in Germany, a Eurythmy Therapy training will be on offer for fully trained eurythmists from January 2013. At the moment, there is no accreditation for the initiative of a further training in Eurythmy Therapy for professionals in the field of medicine.

An initiative which has been running for many years in Israel is now in contact with the Training Council.

In Brazil, they are beginning to think about a further eurythmy therapy training course. Gertrud Mau and Titia Jonkmans already ran one such course from

the Summer of 2001 to January 2005.

Through its collegial work the Eurythmy Therapy Coordination Team intends to maintain contact with professionals and training courses worldwide, so that relevant themes coming up, for instance, at the Council of Delegates may also be adopted in training courses. There is a need, for example, to establish a clear picture of the difference between hygienic eurythmy and eurythmy therapy.

On the other hand it is also important that the concerns and suggestions of students and tutors in training courses should reach everyone in the world of eurythmy therapy.

*Ursula Browning  
Coordination training  
in the Eurythmy Therapy Forum of the  
Medical Section  
at the Goetheanum, Dornach,  
Switzerland  
ausbildung@forumHE-medsektion.net*

#### USA / Copake Therapeutic Eurythmy Training in America - TETNA

The Therapeutic Eurythmy Training in North America began its fourth course in the Summer of 2011. It is a part time training over 3 years. We meet twice a year - for 5 weeks in the Summer and 2 weeks in February. It is hosted by Camphill Village, Copake in upper New York state. Our students have the opportunity to study and live in this therapeutic setting. There is a lively give and take between the training and the village as is exemplified by the weekly eurythmy groups which they offer to everyone who lives in the village. This is a highlight not only for our students, but also the village.

This course has 9 students. Although they are a very international group, all of them are currently residing on the North American continent. They have now been introduced to all of the therapeutic eurythmy exercises, so after the Summer session most of them begun their placements. These students will graduate in February of 2014. We plan on starting a new course in the Summer of 2014.

*Anne Ree, Seth Morrison  
E-mail: tetna@mail.com*

#### SWEDEN Läkeurytmi-Utbildningen i Norden

The Eurythmy Therapy training that started in August 2011 has continued this year with the two new block courses of four weeks each.

Block I took place in January with ten students. The theme was lectures 1-5 of the Eurythmy therapy course. Other subjects were: Rhythm, Awake and Sleep, Metabolism/ Digestion. Training in observation should help the students to improve their capacity to perceive the patient.

The second Block took place in August and had nine students. The central theme was "child development". A lot of examples from the eurythmy therapy work with small children, children from

preschool age and school were given. Common study was "Revelations of Karma" (R. Steiner) and continuing work with the eurythmy therapy course.

In January one student from Estonia received her diploma and likewise one of the earlier student from Sweden. In September the training had their IKAM accreditation granted by the Accreditation Mandate Group and will receive its certificate as an accredited eurythmy therapy training in Sweden from the Medical Section at the training conference in November.

*Dr. Anita Jülke Drufhagel*  
E-mail: [anijulke@gmail.com](mailto:anijulke@gmail.com)

*Renee Reder*  
E-mail: [renee.reder@gmail.com](mailto:renee.reder@gmail.com)

## NEW ZEALAND South Pacific Eurythmy Therapy Training Napier

In July 2012 we completed the second block of the South Pacific Eurythmy Therapy Training. The 12 students grow together as a group and learn and work intensively with each other. During this block, we introduced the soul exercises and had a longer working period about child development with lectures by doctors and eurythmy therapy, now after the second block there will be a second placement and many of our students will work at a school.

We want to give the word to one of our students, who wrote her impressions of the first block down for the New Zealand magazine Sphere.

*Heike Houben*

## Student's report

In January 2012 the Hohepa school in Napier hosted the first block of a unique eurythmy therapy training course in the Southern Hemisphere. Twelve students including ten eurythmists and two doctors from Australia and New Zealand, attended the course bringing the possibility of a new wave of eurythmy therapists for our region by 2014 when the training is due to be completed. As a recent eurythmy graduate in Melbourne, this was a wonderful opportunity for me to meet, work with and learn from the eurythmists, doctors and teachers in the course.

The faculty of teachers brought a wealth of experience and expertise to the training – Ute Stoll-Kuwilsky, Alfred Busch and Patrice Orange kept us going at a lively pace, always mindful of how we were managing our own care, health and wellbeing. This included plenty of breaks and a wealth of opportunities with guest therapists working with the students to introduce us to the wider therapeutic picture including speech with Astrid Anderson, oilings and external applications with anthroposophical nurses Tessa Therkleson and Lisbeth Kouwenberg, and guest doctors Roger Leitch, David Ritchie and Lakshmi Allamsetty. With them we covered topics from the human skeleton to modelling of the larynx and exercises in metamorphoses, the threefold and fourfold human being, the invisible man, embryology and the first three years of child development. Other experiences included rhythmical massage, visits to the Weleda shop, an evening with the New Zealand General Secretary Sue Simpson, also a fellow eurythmist, an outing to see Arthur Zajonc at the anthroposophical society in Hastings, a cello concert with Reinhild Cleff, the warm welcome and support of the Hohepa community and co-workers and the organisational support from Heike Houben, another eurythmy therapist who also works at Hohepa.

What did we learn about eurythmy therapy? For me, it opened out to an amazing world, where with anthroposophical me-

dicine and therapies, it offers real help to people who want to work with healing themselves and those in their care. Lakshmi challenged us to look at a child from the child's point of view, staying connected to them, asking deeper questions such as 'how can we respect their spiritual choice?' and recognizing illness or developmental obstacles as something that has to be worked with much consciousness from the inside to overcome illness or to help strengthen the body. In this way the meditative life of a therapist becomes necessary to develop a healing will - the will and courage to facilitate healing.

An important part of this work includes working with the soul and strengthening the I AM, helping to bring it more strongly into the body so that the human being can really find themselves, to wake up to who they really are. David observed that healing happens better when people are taking up their destiny and working with the soul processes., meeting the healing process with their own soul/spiritual work. Eurythmists, he told us, need to develop a very fine feeling for whether a person is more metabolic or nerve-sense in order to help restore the balance in the body. I now have a renewed appreciation of how important rhythm is to ongoing balance and health and why it is so important in the early years for health in later life.

Our eurythmy therapy teachers helped us to experience and practice many things, one of my favourites being overcoming gravity and entering levity. Have you ever wondered why in eurythmy therapy there is always (or often) jumping? It is the experience of levity, of the momentary space in lightly jumping where spirit can enter, where you are for a moment free, and it can be light and joyful, a space for the healing impulse to enter. My picture for this was the whales 'breaching' where they lift their massive bodies out of the water into the air in sheer joy, a beautiful example of lifting into space and experiencing that freedom. We worked strongly with the vowel and consonant sounds as they are represented as archetypal forms in the eurythmy figures and though this learning more about the organs and how they also have a psychological aspect.

We will be back in July for three weeks at Hohepa, then next year and a final block in January 2014. This training is very special as it is one-off, so we are all appreciating it and making the most of this wonderful opportunity in the beautiful land of New Zealand. We will try to keep you updated about the course and its progress in future articles.

*Leanne Sarah, eurythmy therapy student, Warburton, Australien*

*On behalf of the Carrying Group:  
Alfred Busch  
E-Mail: [ajj.busch@gmail.com](mailto:ajj.busch@gmail.com)  
Heike Houben  
E-Mail: [heike.houben@web.de](mailto:heike.houben@web.de)*



## GREAT BRITAIN

### Eurythmy Therapy Training in Great Britain

In April of this year 12 of our students graduated as eurythmy therapists and two others are continuing their practice placement work. We will take a new group of students in March of 2013 and plan to link with the therapeutic speech training once again, sharing medical lectures and giving the two groups opportunities to meet each other and experience both disciplines. Our training takes place in 5 modules over 2 years and is located in Stroud, Gloucestershire.

We are also currently exploring the idea of integrating more fully with the basic eurythmy trainings in this country. Our thoughts are to provide more foundation for eurythmy therapy as a professional pathway during the fourth year. This would be followed by a fifth year which would consist of the completion of the therapy training, with further modules, and include practice placements. The fourth year modules would also be open to qualified eurythmists who wish to enter the therapy training. This is a new model that addresses the fact that some students in their final year already know that they would like to become therapists. We are in dialogue with the eurythmy schools in Great Britain and hope to give more shape to our future plans within the coming year.

*On behalf of the Carrying Group: Shaina Stoehr Ursula Browning, Ingrid Hermansen eurythmytherapytraining@hotmail.com*

## Eurythmy Therapy Training for Doctors in England

The eurythmy therapy training for medical doctors and dentists in England now continues with 8 participants as one of the students from Warsaw who had supported the whole initiative right from the beginning got seriously ill and needs intensive hospital care before she, hopefully, will join us again. The participants come from North (Oslo), South (Athens), East and West. All appreciate eurythmy movement and enjoy the intensive eurythmy lessons with Andrea Damico Gibson and Katherine Beaven, especially performing little group forms together. We have now started off in the field of consonants with the third lecture of the eurythmy therapy course. Specific speech exercises with Christopher Garvey were impressive and helped a lot to give a living understanding of the lecture. So far three participants have given interesting contributions out of their experience with the observation of constitution and movement, two are dentists and one a school doctor. Next time we meet we expect first contributions from

the participants, each to one assigned sound. Individual therapy lessons with experienced eurythmy therapists are provided before or after the meeting. On every weekend we had also arranged the visit of an artistic performance of Eurythmy which means a lot to people coming from so far away!

We feel the need to prepare every weekend with an extra meeting in-between. There are still five weekends to come until January 2015 but already we know about interested participants for a second run.

*Wilburg Keller Roth  
E-mail: wilburgkeller@bluewin.ch*

## SWITZERLAND

### Eurythmy Therapy Training at the Goetheanum

In March of this year, fourteen students gained their diploma. It was the first course which we have given with the new training concept (part-time, in six blocks of 3–6 weeks each). Nearly all the graduates are already active in their new profession. The four from Japan are urgently needed there. Others are going to Sicily, the west coast of America, Finland, Poland, Germany and Switzerland. On the 5th August we welcomed a new group. Thirteen students began their training, full of enthusiasm. They come from Taiwan, Georgia, Rumania, Poland, France, Germany and Switzerland. For many of them who had already been working for many years as eurythmy teachers in schools, the motivation for studying eurythmy therapy was to gain a deeper understanding for what they are doing; also because our present time is crying out for eurythmy therapy for children.

The course began with two weeks working on medicine in the Anthroposophic Academy for Therapy and Art, where the different therapy trainings come together to study basic principles in medicine. There were then a further four weeks in which the developing eurythmy therapists deepened those medical studies, as well as working on the basics of the exercises given in the eurythmy therapy course.

Further blocks will take place in November (four weeks), April 2013 (four weeks) and Summer 2013 (six weeks). In between these, and after the last Summer block, practical placements will be undertaken; they will be completed by the final block.

*Angelika Stieber*

*On behalf of the Carrying Group: Kaspar Zett, Beate von Plato, Angelika Stieber*

*E-mail: kaspar.zett@gmail.com*

## GERMANY

### Eurythmy Therapy at Alanus University for Arts and Social Sciences

The MA studies in eurythmy therapy at Alanus University begin and end in September every year at Michaelmas. We have been fortunate to have various qualified guest tutors contributing to these courses and helping guide their students toward graduation. Many thanks!

This year two groups of students completed their MA studies and presented their theses.

On the 10th and 11th September, six of the twelve participants in the full-time course presented the themes they had chosen. Some of them had undertaken research on individual cases, such as early childhood developmental disturbances, lactose intolerance, hyperlordosis, neurodermatitis; measuring the development of warmth in eurythmy therapy by means of infrared thermography, using a heat-imaging camera; or the healing power of eurythmy, using the sound A.

It was interesting to find „measuring instruments“ for the individual case studies with which one could make a reading to show whether the therapy had helped the patient or not. These ranged from thermometers, blood pressure monitors, X-ray images, medical diagnoses and evaluated questionnaires, to a thermal imaging camera.

At the same time, eurythmy therapy movement diagnosis informed a perception of the constituent parts of the human being; observations of the three-fold organism; observing how individual sounds were carried out in relation to the three eurythmic media; and an approach incorporating the twelve senses — all in order to show what had changed between the beginning and the end of treatment.

This gave a wide panorama of effective factors and instruments for perception. There is a wide field here to research and describe.

From the 20th to the 23rd September, twelve out of the thirteen graduating MA





students on the part-time course presented their theses. They were trained eurythmy therapists who wished to attain a professional MA qualification. There was a wide range of themes, from individual case studies; to problems in childhood such as eye, hand and foot coordination; treatment of hyperactive behaviour; promoting the integration of the senses in children; „preventive eurythmy in the ninth year transition“; disturbances brought on by anxiety; as well as suspected cases of premature birth. There were studies on „Promoting Health in the Workplace“; and suggestions for eurythmy therapy based on Rudolf Steiner's lecture on „Overcoming Nervousness“. One participant worked on „Eurythmy Therapy in the Light of Modern Scientific Research“; and a participant from Japan presented a study on „Trauma Therapy in Areas of Japan Suffering from Natural and Nuclear Disasters“. This group gifted a cherry tree for Fukushima, which was planted in front of the wooden eurythmy therapy building. (As part of the Japan Project, a cherry tree will be planted for each of the 22,000 people who lost their lives in the disaster.)

Immediately after the MA graduation, the new full-time course began with twelve students from all over the world. Their next step is to merge the „inner individual eurythmy maps“ into a shared process for studying eurythmy therapy. The next two-year part-time MA course for trained eurythmy therapists started on the first weekend of October.

The next full-time graduations will be in September next year, before the long practical placements leading to accreditation.

We would like to thank Renée Reder, who was a co-carrier of the training. She has now moved to Portugal. All the very best for this new phase in your life and heartfelt thanks for your dedication over the last four years!

*On behalf of the Carrying Group:  
Annette Weißkircher  
E-mail:  
annette.weisskircher@alanus.edu*

## UNTERLENGENHARDT Eurythmy Therapy Training at the Paracelsus Centre in Unterlengenhardt

The new year of the eurythmy therapy training began on 16th September 2012 with a special festive celebration of the centenary of the first eurythmy course, which had taken place in Bottmingen near Basle.

Nine students from four countries came together for this full-time training over

1½ years. Apart from a classical training in eurythmy therapy, the focus of the course will be on training our perception, and on actual contact with life and work in a hospital.

The eurythmy therapy training is carried by a group of colleagues.

This year, two eurythmy therapists took on responsibility together for the eurythmy therapy aspect of the training.

They are Katharina Gleser, a eurythmy therapist from Kassel, who has been working as a eurythmy therapist for 24 years and has many years of experience in different trainings; and Irene Ott, a eurythmy therapist in private practice, who has been a tutor in the training for three years and a member of the carrying group.

We are very glad to have been able to find a seamless and „local“ solution.

The medical aspect of the training continues to be carried by Dr Gudrun Merker, Dr Mathias Sauer, Dr Sabine Sebastian and Dr Barbara Zaar. They are joined by two more senior doctors at the Paracelsus Clinic, Dr Konrad Bäuerle and Julia Veil.

**The Eurythmy Therapy Training for Doctors** is currently training its third group with around 45 doctors taking part. The graduation will take place in autumn 2013.

A further group is planned.

The training is carried by Dr Gudrun Merker, Dr Sabine Sebastian and Angelike Stieber, eurythmy therapist.

*On behalf of the Carrying Group:  
Katharina Gleser und Irene Ott  
katharina.gleser@arcor.de  
irga.ott@web.de*

## International Council of Eurythmy Therapy Trainers (27th October–4th November 2012)

The International Trainers Council is a group of the Medical Section responsible for eurythmy therapy and meets once a year in Dornach. During the Council's November conference, decisions are made by representatives of all the trainings worldwide through democratic voting. Between meetings whatever has been decided previously is taken as binding. New paths of training can be decided on and mandate groups formed to pre-plan these pathways in a differentiated way and elaborate them; in order then to establish them communally in the conference as new, binding, fundamental conditions. The agreements are binding for all the trainings — but there is flexibility in relation to changing needs.

This year the members of the Trainers Council met for a week-long retreat, to work on the parallel and related courses for doctors (GA 313 Anthroposophical Spiritual Science and Medical Therapy) and eurythmy therapists (GA 315 Eurythmy Therapy) in chronological order. The lectures were read, spoken about together and the relevant eurythmy therapy exercises worked on. Densely concentrated substance came about through combining the differentiated views arising from the medical and eurythmy therapeutic perspectives, and through the attempt to go through this process consciously.

Later, new initiatives in Cape Town (South Africa), Kiev (Ukraine), Harduf (Israel), Sao Paulo (Brazil) and Vaihingen-Enz (Germany) were presented by the mandate group, followed by conversation.

The training for eurythmy therapy trainers was further elaborated, as were steps toward deciding what it would be necessary for the trainers to include in a description of their methodology.



We wrestled intensively with the issue of protecting the being of eurythmy therapy: through the increasing numbers of courses and trainings, it is endangered in its effectiveness through those implementing it. What happens to the substance of eurythmy therapy as a „medicament“ if people with no basic eurythmic or medical training utilise elements of eurythmy therapy without having gained a basic professional qualification? How can the missing eurythmic skills, which are to be transformed through eurythmy therapy, be made good later, or in advance?

We also worked intensively on the question of further professional development courses in eurythmy therapy for the medical profession; including in conversations with Barbara Lampe and Isabel Martin, representatives of the further training initiative in Vaihingen-Enz in Germany. After a careful study of the project, the Council of Trainers were unanimous in the judgment that there are currently too many open questions to agree support for this intended further training in eurythmy therapy for members of the medical professions. We took into account fundamental issues, such for instance as the structure of the curriculum; criteria for receiving a qualification; and the realities of how graduates of the course might practise professionally.

It should also be said that Michaela Gloeckler will closely accompany the Vaihingen-Enz initiative as a pilot project, initially for three years, in order to make a decision — based on evaluation of the experiences made — as to the type of certification and the best way to take the project forward.

*AJ, Council of Eurythmy Therapy Trainers, Michaela Gloeckler*

## IKAM ACCREDITATION

### Training for Auditors

The mutual accreditation procedure for all therapeutic trainings in the Medical Section, which has been developed jointly since 2009 has brought about a three-year training for auditors. Trainers from nearly all professional groups apart from doctors have undergone a professional ability and competency training which concluded on 21st April 2012 with a specialist social and artistic examination. It was a very special occasion when Dr Rüdiger Grimm handed over Medical Section certificates to ten participants. Two further participants will do the exam later, making a total of twelve trained ICAM auditors.

We were especially pleased that Rüdiger Grimm, an ICAM coordinator, could find time to take part in this festive occasion, as the impulse for „collegial accreditation“ of the training institutes came from him in 2006 when he was on the Curative Education and Social Therapy Council.

The training was carried out by Ursa Neuhaus (nursing/adult educator); Brigitte Wessels (eurythmy therapy/supervisor and mandate holder for quality at

Öschelbronn Clinic); Lilla Boros-Gmelin and Raymond di Ronco (process facilitators from the Social Science Section); and Angelika Jaschke (ICAM coordinator for eurythmy therapy/mediator and supervisor).



As most participants brought a wealth of competencies with them through their own activities in trainings, a wonderful flowing together of experiences and a communal learning from each other came about at a high level. It was consistently found helpful that the professional groups of nursing, arts therapies, eurythmy therapy, rhythmical massage therapy and therapeutic and social pedagogy had come together to work jointly on the issue of supervision of trainings (continuing professional development of our anthroposophic therapeutic trainings). Meantime the ICAM Accreditation Handbook has been elaborated, including differentiated profession-specific needs and requirements.

In September 2012, the director of the further training for doctors, Guus van der Bie, indicated that it would affiliate with the ICAM accreditation process (in addition to other obligatory medical accreditation requirements).

Further annual professional development courses for auditors to share experiences will take place at Alanus University. Methods of training for those who wish to train as ICAM auditors in future will also develop from this work.

It was a very rich further training — based entirely on good, interprofessional collaboration between trainers. Visions of the future arose in me ... ! (AJ)

### Diploma Conferments in 2012

Järna, SE	January	2 students
Dornach, CH	March	14 students
Unterlengenhardt, DE	March	3 students
Stroud, GB	April	13 students
Alanus Hochschule, DE	September	13 students
Wilde latecomers/ Lila Valle	March	2 Students

### Training courses in 2013

will be held in Dornach, Alanus, Unterlengenhardt, Vaihingen/Enz., England, America, New Zealand, Sweden, South Africa.

Eurythmy therapy courses for doctors will be held in Germany, Great Britain, Georgia and Finland.

## DOCUMENTATION AND RESEARCH

### Preamble

Ten years ago the question of documentation and research in eurythmy therapy was new territory, whereas now many different research methodologies have been developed. As a professional group, we are called on to support various research projects and to transfer our practical knowledge onto specially prepared questionnaires.



These formalised questionnaires serve to research (for instance, within a quantitative study) individual medical and therapeutic topics, such as the prevalence of and indications for eurythmy therapy. The questionnaires are systematically organised and constructed according to the questions and those to whom they are addressed.

Their purpose is to analyse the professional field, and they provide a basis for professional positioning in occupational and educational politics.

Apart from all the formalised questionnaires and lists of criteria, it is urgently necessary further to train and develop our judgment-forming capacity in eurythmy therapy.

As someone who is responsible for trainings and courses in documenting eurythmy therapy, I am constantly asking myself the crucial question: what methodological basis is needed in order to recognise and designate the reality represented in work with a client.

In this complex context, competence can be promoted through reflection on one's professional activity in all its layers and levels; as well as through communication with professionals in one's own discipline and in interdisciplinary contexts.

Clearly this question cannot be answered here once and for all. It requires continual, fundamental research into our practice, not only taking into account perception of specifically eurythmy therapeutic movement, but also fostering a differentiated approach to the forming of concepts and judgment.

Besides all these formalities and research designs, the immediacy of the therapeutic moment needs to be protected and preserved. Work with the human being seeking healing must be protected, and

must be nurtured in its inner, therapeutic substance. I have deep respect for this work and carry it out with the greatest possible attention.

*Anja Meierhans*  
*Coordination Documentation/Research*  
*in the Eurythmy Therapy Forum*  
*of the Medical Section*  
*at the Goetheanum, Dornach,*  
*Switzerland*  
*dokumentation@forumHE-medsektion.*  
*net*

### Update on the Eurythmy Therapy Bibliography (2005–2012)

For some months now, I have again been busy on researching literature in order to update the Eurythmy Therapy Bibliography. Up to now, my research has been on the internet with the aim of finding published research and books.

The list currently shows 190 new publications, of which 40 are bilingual (making 230 individual entries). Even so by no means all sources have been included.

Thick books, which discuss a spectrum of recognised or possible treatments, have been published on a multitude of

clinical pictures, including by authors who are not anthroposophically inclined. It is very surprising how many of these books now discuss eurythmy therapy, recommend it or mention it as effective. At the same time, eurythmy therapy is more frequently mentioned or cited in research. Anthroposophic doctors too have begun to declare in research what other therapies were implemented — additional therapies were mostly passed over in silence in former times. Research studies now tend to speak predominantly of overall therapy concepts.

Eurythmy therapy now appears in many more books by anthroposophic doctors than before. You can see from this that the efforts and research of previous years (AMOS studies, CBM studies and so on) are beginning to lead eurythmy therapy out of its „esoteric corner“. Our own doctors refer to it much more openly in research publications on overall therapy concepts — this is a real step forward!

Thanks to Angelika Jaschke, a wealth of material has come about because she saw to it that the proceedings of the big eurythmy and eurythmy therapy conferences appeared in print — a masterpiece in relation to the establishment of our profession in the media, for which I would like to thank her warmly here!

Furthermore the Association newsletters and their authors — YOU, that is — are beginning to blossom: we are gradually going beyond the beautiful scenery, the kind hospitality, the way being moved

## BULLETIN COLUMN

### New Publication

Sabine Petersen: Eurythmy Therapy - A Short Introduction into the Anthroposophic Active Exercise Therapy

A systematic explanation of eurythmy therapy using short and concise picture. The book informs the interested reader without any previous knowledge about the possibilities of this multifunctional form of therapy.

84 pages, ISBN 978-3-8482-2348-0, it is available in bookstore since September 2012. Euro 6.90 at Amazon, CHF 8.40 at Ex libris.  
E-mail: lexa.r@gmx.de

### New Publication

Theodor Hundhammer: From Place to Word - a Way Towards the Potentials of Eurythmy Therapy

The correlation of the astrologic notions with our body and the application on the field of eurythmy and eurythmy therapy. Description of exercises for independent and unprejudiced experiments.

180 pages, ISBN 978-3-8482-2349-7, available in December 2012.

Further information: [www.bewegteworte.ch](http://www.bewegteworte.ch)  
E-mail: lexa.r@gmx.de

was so nice and our great gratitude, to where actual, substantial and professional comments are included. This means it has been possible to list them as official publications, which are so precious because they often represent the only written mention that may exist on a particular theme! Please keep this up! Similarly, the accreditation of Alanus University with its MA courses has led to a multitude of announcements. The only trouble is that I still do not have the theses themselves; there seems to be some sort of blockage somewhere...

One could assume that I will be able to find 400–550 sources by 2012, particularly if results from the international search are included. If one tracks down new publications up to 2013 or 2014, the number of new entries will with luck be of the order of those in the current Eurythmy Therapy Bibliography, which covers more than ninety years.

The list can currently be found at the following link, which you are welcome to pass on:

<http://www.liebe-zur-erde.eu/publikationen.html>

What have been completely missing up till now are publications in languages other than German. In this respect, translations of existing publications are just as important as original publications. A request to colleagues in other countries: send me a list of all the texts you know in which eurythmy therapy is mentioned, with the following information:

1. Author
2. Title of book or text
3. If published in a periodical: number; year of publication; page numbers from and to
4. Publisher; place of publication; year of publication; page number, if it is a book (page number from and to, if it an anthology)

I can input Cyrillic, Chinese, Thai and Japanese characters directly, if the text is sent me in that form (please include a note as to what language it is), in which case the sender is responsible for checking its accuracy. If there are sufficient, lists of foreign language entries will also be posted online.

I look forward to a lively correspondence to:

*Beatrix Hachtel*  
*BeaHachtel@gmx.de*  
*www.Liebe-zur-Erde.eu*

### **Themes of the MA Theses in Eurythmy Therapy at the Alanus University of Arts and Social Sciences, September 2012**

#### **On-the-job MA Course (for certified eurythmy therapists)**

Eurythmy Therapeutic Individual Case Study for Delayed Emotional Development (Hedwig Armstorfer)

Eurythmy Therapeutic Individual Case Study for Anxiety Disorders (Susanne Beer, Germany)

Project on Preventive Eurythmy in the Ninth Year Transition (Rubicon) „How many teeth does a hippo have?“ (Manja Wodowoz- de Boon, Netherlands)

„Overcoming Nervousness“ — Lecture by Rudolf Steiner on 11th January 1912 in Munich — as a Stimulus for Eurythmy Therapy in Relation to Methodology in Diagnosis and Therapy (Rosemarie Felber, Germany)

A Project for Promoting Eye/Hand/Foot Coordination and Gross Motor Skills through Eurythmy Therapy in Three Groups of Pre-School Children in Kindergartens (Hildegard Klima, Germany)

Eurythmy Therapy and Symptoms of Attention Deficit Hyperactivity Disorder — Evaluation of Scientifically Based Individual Case Studies for Treatment of Hyperactive Behaviours (Herbert Langmair, Austria)

Promoting Integration of the Senses in Children (Angela Tischbein-Madsen, Sweden)

The Effect of Eurythmy Therapy in the Preoperative Preparation of Patients (Liliana Pedrazzoli, Switzerland)

Eurythmy Therapy in the Light of Modern Scientific Research (Iris Poloczek- Jordan, Germany)

Eurythmy Therapeutic Individual Case Study on the Treatment of a Patient in whom Premature Birth is Suspected (Barbara Trapp, Germany)

The Effectiveness of Eurythmy Therapy — An Individual Case Study on the Theme of „Trauma Therapy in the Regions of Japan Affected by Natural and Nuclear Catastrophe“. (Emi Yoshida, Germany, Japan)

Promoting Health in the Workplace through Hygienic and Therapeutic Eurythmy (Andrea Windler, Switzerland)

#### **Full-time MA Course for eurythmists:**

Eurythmy Therapeutic Individual Case Study on Neurodermatitis (Jenny Blasweiler, Germany)

The Healing Power of Eurythmy - Using the Sound A (Vera Koppehel, Germany, Switzerland)

The Development of Warmth in Eurythmy Therapy — Research Based on Infrared Thermography (Elvira Menne, Germany)

Eurythmy Therapeutic Individual Case Study on Hyperlordosis (Verena Muspach, Germany)

Eurythmy Therapeutic Individual Case Study on Childhood Developmental Disturbance with Primitive Reflexes and Trauma (Corinna Sper, Germany)

Eurythmy Therapeutic Individual Case Study on Lactose Intolerance (Theresa Wuttka, Germany)

## Professional Associations

### Preamble

In Autumn 2010, Angelika Jaschke asked me whether I would like to take over the coordination of the Professional Associations in their work on the Statutes of IFAAET. That was the start of my collaboration with the Councils of the Associations. Getting to know each other in the work and building mutual trust between the Councils, Angelika and me led to my being able to take on the coordination of the Professional Associations last Autumn.



As representatives of the rights sphere, the Professional Associations form the middle between the areas of the spiritual sphere (training and research) and the economic sphere (Fields of Practice). Both these spheres must meet in rhythmic mediation in the rights sphere and find a balance.

This year the urgent necessity became apparent to define the boundary of eurythmy therapy with so-called hygienic eurythmy (also known as vital eurythmy). This task will be elaborated jointly with the trainings and with researchers, as they can contribute input based on matters of substance.

From the economic point of view, the focus is on maintaining workplaces for eurythmy therapists in the different Fields of Practice through an even clearer definition of the profession.

In the rights sphere of the Professional Associations these two areas can be combined through regulation and protection of eurythmy therapy's methods. This could form a legal basis in relation to trainings that do not conform to the required standards; on the other hand in relation to eurythmy colleagues and amateurs who offer eurythmy therapy without an accredited diploma and thereby impair the already fraught work situation of our eurythmy therapy colleagues.

Thus the areas of training and Fields of Practice impinge on the rights sphere, where it should be possible to sense the direction developments are taking, in order to create a balance between constricting, hardening structures and chaotic tendencies, both of which could prevent a lively development for eurythmy therapy.

All the Professional Associations are actively engaged in their own country with national issues. Coming together in a working community such as the International Working Group of Professional Associations for Eurythmy Therapy can bring about a mutual strengthening. When you see how similar tasks need to be fulfilled in every country, such as professional accreditation, promoting public relations work, **AnthroMed**<sup>®</sup> certification, a great deal of time and energy can be saved for Professional Associations by exchanging information and documentation such as guidelines, ethical guidelines, dossiers on health insurance and so on. Every country does not need to invent the wheel again from scratch and can take advantage of earlier work done by other colleagues and associations, adding their own new work to what exists already.

### A report from the International Working Group of Eurythmy Therapy Professional Associations

In the 15th conference of council members of the professional associations we set ourselves two tasks for the coming year. Every association should have its own website by September next year. Aðalheiður Ólafsdóttir of Iceland has offered her support and will assist associations in this respect.

When it came to the fundamentals of eurythmy therapy, we had a conversation as to how eurythmy therapy can demarcate itself from 'hygienic' or 'vital' eurythmy. More and more eurythmists, for instance, are taking exercises from lecture 5 of the eurythmy therapy course into their work with groups or individuals; thereby blurring the boundary between eurythmy and eurythmy therapy, thus harming the profession of eurythmy therapy, including public perception of it. The associations now wish to work out an agreed definition of the area between eurythmy therapy and hygienic eurythmy. A working group of people from different associations will be set up to work together on this theme and prepare international guidelines.



We also spoke about the threat to our profession from non-professionals through eurythmy therapy courses and trainings being offered without the precondition of a basic training in eurythmy.

We need to raise awareness in order for our profession to have a future. We wish to clarify the issue of whether eurythmy therapy can attain legal protection for its methods.

News that the Association for Therapeutic Eurythmy in North America has received an **AnthroMed**<sup>®</sup> licence was greeted with enthusiastic applause.

*Monika Eichele  
Coordination of Professional Associations  
in the Eurythmy Therapy Forum  
of the Medical Section  
at the Goetheanum, Dornach, Switzerland  
berufsverbaende@forumhe-medsektion.net*

## International Federation of Anthroposophic Arts and Eurythmy Therapies (IFAAET)



The first members' meeting of the International Federation of Anthroposophic Arts and Eurythmy Therapies (IFAAET) took place in Dornach on the 11th September 2012. IFAAET was founded last year by the Professional Associations for eurythmy therapy in Austria, Switzerland, Germany, Sweden, Great Britain and Ireland, Italy and Russia; and by the arts therapies associations of Austria, Switzerland, Britain and the Netherlands.

They were joined this year by ten further members: five Associations (Eurythmy Therapy & Anthroposophic Arts Therapies in Belgium; Anthroposophic Arts Therapies in Brazil; Eurythmy Therapy in France; Anthroposophic Arts Therapies in America and Canada; Anthroposophic Arts Therapies in Sweden); and the five countries Iceland and South Africa (both Eurythmy Therapy), and Japan, Russia and Croatia (all Anthroposophic Arts Therapies). IFAAET has thus expanded internationally, from Europe with its eleven members, towards the East, West, North and South, so that it now has 21 members. Korea (Eurythmy Therapy) and New Zealand (Anthroposophic Arts Therapies) are showing interest in joining.

Laura Ridolfi (Britain — Anthroposophic Arts Therapies) and Sigrid Gerbaldo (Italy — Eurythmy therapy) were unanimously elected to the council by the Members' Meeting. Laura took over the office of Vice President; Sigrid was appointed Secretary; Nurene Armajani Treasurer; Monika Eichele is President.



In its first year, ways of working together were developed; now responsible groups can be formed so that this new legal organism can carry out its task in the world.

The urgent survey of the state of the profession was initiated by sending out sixty questionnaires (24 responses). It became clear from the graphic diagram that Switzerland was the only country in the world where we are professionally accredited. There is hardly any public relations work at all. We are well represented in the Fields of Practice. When the survey has been evaluated, the results will be available in each country. The questions will be developed further in collaboration with

Associations and the different countries. The survey will be repeated every two years. In this way we hope in a few years to have obtained a picture of the development of the artistic therapies within anthroposophic medicine.

The first Conference for Complementary Medicine took place in Brussels on the 9th October, after six years of preparation. IFAAET was invited by the International Federation of Anthroposophic Medical Associations and Monika Eichele took part. Compared with the presentations, which showed that Complementary and Alternative Medicine is more efficient, cheaper and has fewer side effects than conventional medicine, it became clear that Anthroposophic Arts Therapies and Eurythmy Therapy are not visible and were only mentioned in passing in one presentation. This indicates IFAAET's tasks in the immediate future: presenting and describing the therapies publically so that they become known.

As members, all the Associations and Country Representatives are warmly welcome to collaborate in the further shaping of IFAAET and the development of our profession at the international legal level.

*Monika Eichele*

Website von IFAAET: <http://ifaaet-medsektion.net/en/>  
(under construction)

## ...some further thoughts on a higher understanding of the rights sphere

### The fourfold reality of law

Between the state prescribed legal dogma (based on Roman law) determining our often over-regulated everyday world; and the unregulated, chaotic conditions in which arbitrariness and lack of commitment are the determinants — there is a free space for actively shaping the law. A space of freedom for creative shaping, which gives us a possibility for development. Here is to be found our feeling for rights, which is inherent in every human being, as well as our consciousness of rights, which can develop in interpersonal relationships. From our own experience, we can distinguish different qualities of rights.

1. **Normative law** forms our legal system. It lends order through directives and prohibitions. It provides a foundation: „the same law for all“ applies; and it fosters consistency and gives security through mutual commitment.
2. On another level, human beings can develop an **active shaping of rights as an element of life**. New binding agreements can be sought and found communally. Subjective points of view are replaced and, in a mobile, flowing, process-oriented shaping activity, become binding agreements (contracts).
3. On the **level of values** there is no longer a „higher authority“ which can determine the individual's values and ideals. In this area, we have to find agreement on shared values out of our free will. Ideas on rights can be developed through moral phantasy; they can lead through processes of cognition to communal deeds, oriented toward action. Coming into being and dying away again are the carrying qualities here.
4. **All-embracing justice** springs from moral intuition and comes to realisation in the dignity of each individual. Here each person autonomously shapes the circumstances of their own life and becomes their own legislator. This level in our consciousness of rights is still difficult to grasp. This sentence of Rudolf Steiner's from the Intuitive Thinking as a Spiritual Path can help us gain a sense for it:  
„To live in love of action, and to let live in understanding of the other's will, is the fundamental maxim of free human beings.“ (AJ)

**Professional associations for eurythmy therapists were founded in following countries:**

- **Austria** ([www.heileurythmie.at](http://www.heileurythmie.at))
- **Finland** ([www....](http://www....) under construction)
- **France** ([www....](http://www....) under construction)
- **Germany**  
([www.berufsverband-heileurythmie.de](http://www.berufsverband-heileurythmie.de))
- **Great Britain** ([www....](http://www....) under construction)
- **Hungary** ([www....](http://www....) under construction)
- **Italy** ([www....](http://www....) under construction)
- **Netherlands** ([www.euritmietherapie.nl](http://www.euritmietherapie.nl))
- **Russia** ([www....](http://www....) under construction)
- **Sweden** ([www....](http://www....) under construction)
- **Switzerland** ([www.heileurythmie.ch](http://www.heileurythmie.ch))
- **USA** ([www.athenaeurythmy.co.nr](http://www.athenaeurythmy.co.nr))

**AnthroMed®**

ELIANT is increasingly succeeding in establishing anthroposophic pedagogy, medicine and agriculture as Non-Government Organisations in the political arena. Our political and legal representatives are making themselves heard more and more and it is no longer possible to „overlook“ us.

In anthroposophic medicine in particular we have the ten-year goal of bringing the all the professional and occupational fields worldwide under the international trademark **AnthroMed®**. This will make it clear that we are a worldwide medical movement comprising the system of anthroposophic medicine. The variety of our medical and therapeutic approaches will thus become visible; patients will be able to recognise that, as a world community, we stand behind the quality of this spiritual approach to medicine coming from the spirit of anthroposophy.

Through the Professional Associations we now have established clear quality criteria for eurythmy therapy which must be complied with for membership in each of the twelve Professional Associations. Fulfilling these criteria means that every eurythmy therapist can be authorised by their Professional Association to use the trademark.

At the international meeting of all the eurythmy therapy Professional Associations in Dornach on 11th September 2012, we were able joyfully to celebrate the awarding of the **AnthroMed®** licence to the Dutch and Swiss Associations. We were particularly moved to know that the Association of Therapeutic Eurythmy in North America has been able to work through all the criteria and become the first non-European continent to attain the international licence. Warm wishes to all our colleagues overseas! This represents a further step in drawing closer to our spiritual impulse in this common cause — with all our national and individual differences! That is where the future lies.

Six countries have now been licensed through their Professional Associations (Germany, the Netherlands, Austria, Switzerland, Hungary and North America [United States and Canada]). France, Italy and Sweden are preparing for this step.

It is now up to every individual eurythmy therapist to decide whether they wish to help join in shaping **AnthroMed®**, this edifice for the future.

We hope that all those not yet involved will find the necessary awareness and insight! (AJ)

*„When one dreams alone,  
it stays a dream.  
When many dream together,  
it is the beginning  
of a new reality.*

(Dom Helder Pessoa Camara)

**Practical information**



**Finally, the ideal power paste for cleaning the eurythmy copper rod got found!**

Available at:

Nicole Hollenstein, Ahornstrasse 5  
CH-4313 Möhlin - Tel. +41 (0)61 8514025  
[nhollenstein@sunrise.ch](mailto:nhollenstein@sunrise.ch)

and Britta Frank, Im Mattenberg 11  
D-79592 Fischingen - Tel +49 (0)7628 800688  
[prowin@frank-b-m.de](mailto:prowin@frank-b-m.de)

*Recommendation and regards,  
Margrit Hitsch-Schindler*



**New: Eurythmy Therapy in Anxiety case report: a DVD with high resolution video showing the eurythmy therapy exercises used,**

It can be purchased from the filmmaker at:  
<http://anikon.org/video-port>

## INTERNATIONAL REPORTS

### Preamble



In 41 countries eurythmy therapy is represented by our colleagues. Here are their reports. We got to know each other through reports going back and forth. I experienced a wonderful journey round the world through you. Now we can really set off, the newsletter acting as a mediator to bring the light of contact from person to person.

A special welcome message to new countries and their representatives: Katrin Vaik from Estonia, Beate Kosowicz just beginning in Poland and Gabriele Kurmann in Hong Kong where she is taking her steps. On behalf of all my colleagues, I wish you health, courage and confidence.

Thank you all for your time and efforts and I would like to send some joy and warm greetings to all of you until the next year, the „climate-topic.“

This is a quote from Johann Wolfgang von Goethe, from the article: „The Granite“ (1783), which came to me through a detour to Cape Town in South Africa, from Julia O'Leary.

„... Here at the oldest eternal altar, built directly on the depth of creation, I offer a sacrifice to the Being of all Beings. I feel the first, firmest beginnings of our existence; I overlook the world, her rockier and her gentler valleys and her distant, fertile pastures; my soul is lifted above itself and above everything and longs for the closer sky.

*Monika Margesin*  
Coordination newsletter  
in the Eurythmy Therapy Forum of the Medical Section  
at the Goetheanum, Dornach, Switzerland  
newsletter@forumhe-medsektion.net

### AUSTRALIA:

Josefin Porteous  
(> [josefinport@gmail.com](mailto:josefinport@gmail.com) <)

Australia is part of the original continent of Gondwana, and is recognised as the earth's fifth continent. This vast continent lies between the Pacific Ocean to the East and the Indian Ocean to the West; it has six states (including the island of Tasmania) and three territories. The east coast is the most densely populated, and has well-known cities such as Brisbane, Sydney and Melbourne, further to the south. There are great deserts in the West and North-West. Savannah and rain forest predominate in the tropical northern regions. The rest of the continent consists of level plateaus, marked by extensive, dry desert. The massif which includes Uluru (or Ayers Rock as it used to be known), the Aborigines' ancient holy place.

There are currently seventeen colleagues working in Australia; most of them in Waldorf schools, some also working independently. Most contact between them is by email, because of the vast distances involved. It is almost impossible for eurythmy therapists in this huge continent to meet together. (AJ)



### AUSTRIA:

Maya Kuesgen  
(> [maya.kuesgen@therapeutikum-linz.at](mailto:maya.kuesgen@therapeutikum-linz.at) <)

Last year, Anja Meierhans led us in a further training course on 'Documentation'. She is due to come again next year. This year I took over chairmanship of our professional association, and would like to thank Mareike Kaiser for providing me with such a good prior foundation, and for continuing to support me.

The following theme is increasingly coming to the fore for us: How can we define our professional profile in eurythmy therapy and gain a foothold in the public domain? In these critical times there is much work to be done to protect and safeguard the eurythmy therapy profession.

Austria is a country of much diversity, in both geological and geographical terms. Lying in Central Europe, it is surrounded by eight other countries whose cultures course through it. It is a meeting place of both western and eastern impulses and their attendant worldviews.



Geologically, Austria is very diverse, with a great many different rock strata. For example there is the high plateau of granite and gneiss, the Molasses Basin (a conglomerate of clay and sandstone), the Flysch Zone (marl, shale, sandstone), the limestone Alps (chalk and dolomite), the Greywacke Zone (of metamorphosed clay and arenaceous shale, iron ore, copper, magnesite...) and others.

The Vienna Basin is a tectonic syncline and connects the eastern Alps with the western Carpathians. The basin's bedrock corresponds to the geological zones of the Alps: composed, from South to North, of greywacke, crystalline limestone and flysch.

Steiner (GA 65) said of the Vienna Basin, home to the majority of the Austrian population: "The unity of geological diversity exists in this basin. It is, you can say, a microscopic imprint of the whole of the earth's geology."

All this is reflected in Austrian society – a rich diversity of qualities: "This whole multiplicity of life that challenges the soul. This diversity, that has to be experienced at first hand and cannot be dismissed in a few words or ideas, lives here - in these singular and in a sense closed-off natures.



**BELGIUM:**

Mia Lemaitre

(> [mialemaitre@gmail.com](mailto:mialemaitre@gmail.com) <)

Belgium lies on the North Sea in North-West Europe. We share borders with the Netherlands, Germany, Luxembourg and France. The country extends to 30, 528



square kilometres and has a little over 11 million inhabitants. The largest city is the capital, Brussels, which is also the seat of the European Parliament and the centre of the European Union. Belgium has 349 inhabitants per square kilometre, making it one of the most densely populated countries in Europe.

Wallonia, in the South, has more nature and agriculture, with beautiful hills, valleys and forests in the Ardennes, rising to its highest point, the Botrange, at 694 metres. The configuration of the landscape is marked by an interplay between limestone and the various rock strata. The coastal region of Flanders is flat and sandy; the land was reclaimed from the sea through canals and a drying-out process. In northern Belgium there is a central plateau with numerous rivers; there are also coalmines.

What is the outlook for eurythmy therapy in Belgium?

We have been fortunate to welcome two new colleagues into our small association.

Kristina Lucia Parmentier completed her training in Alfter; Marie-Claire Brugge-man in Stroud. There are now six eurythmy therapists in Flanders, but so far none in Wallonia.

Marie-Claire's aim is to work with people seeking new meaning and joy in their life, after difficult events in their lives. Her graduation thesis was titled „A Meaningful and Joyful Life without Drugs through the Activity of the I“.

Kristina Lucia's aim is to research how eurythmy therapy works in patients with sleep disorders, particularly in settings not based in anthroposophy. Her thesis was on „The Consonant Jumps in Eurythmy Therapy“.

Three of us work in education and eurythmy therapy. One of our main tasks is to raise awareness of the effects of our work. We are fortunate to have anthroposophically trained doctors in the area around Ghent and Antwerp.

We will meet again as eurythmy therapists after our Eurythmy Centenary on 20th October. We are looking forward to sharing experiences once more; and I will report on the meeting of national representatives at the Goetheanum. It was the first time I had taken part in this

meeting and it was a joy to experience, in this warm-hearted gathering, the different tasks of each country. I have met a great deal of perseverance in our profession. In countries with many eurythmy therapists it is possible to specialise; as also in places with specific tasks, like Arlesheim.

This is not yet the case in Belgium. In our practice we work with children, adults and people with particular support needs. With our new colleagues we may be able to extend the areas of application of eurythmy therapy.

**BRAZIL:**

Juliette Schardt

(> [juschartd@gmail.com](mailto:juschartd@gmail.com) <)

All the geologists agree: Brazil has an old landscape!

Earth movements and shifts, climate change from cold, through warm, to hot and dry have caused a

great deal of erosion. The new stratum laid down over the land through all these movements formed the Andes. Brazil is right where the old stratum still survives. This ancient stratum has particularly fertile soil. Whatever you plant there thrives!!!

Brazil is a very large and diverse country. If you go to the North it is always very hot; after all the equator is there. The land is sandy and gradually turning to desert under the influence of the deforestation of the Amazon rainforest. It is surrounded by a steppe landscape.

In the South there are miles of plateau land with hills and steeply dropping slopes. The Chapada da Diamantina is there, with its huge, beautiful waterfalls. Further south, toward the centre of Brazil, is the glorious mountain landscape of Minas Gerais, rich in noble metals and precious stones.

Further south are the beautiful granite mountains, with the Iguazu Falls. In the far South are the remarkable granite rocks which one can hack open to find the most delightful crystals — multicoloured agates and crystalline formations.

Were we to travel North again along the Atlantic coast, we would see a remarkable geographic phenomenon: on one side the beautiful, blue ocean; on the other the highland chain, where the granite formations have shaped sculpturally expressive mountains, which reach right into the north. All this makes up Brazil's paradisaal landscape.

Here in Brazil we do not have a professional association for eurythmy therapy. Instead we are part of the Brazilian Eu-



rythmy Association, which includes all aspects of eurythmy: educational, artistic, social and therapeutic. We call the association ABRE (Associação Brasileira de Eurythmia).

Between 2001 and 2004, the ABRE organised a eurythmy therapy training which had twenty graduates, fifteen of them eurythmy therapists, five physicians. Títia Jonkmans und Gertrud Mau were our tutors for eurythmy therapy, while Sheila Grande was responsible for the medical aspect of the training. In 2004, ABRE organised a course with Erika Leiste on eurythmy therapy in schools. Active eurythmy therapists have organised themselves into a group in São Paulo called the IAO Group. The group comes together once a month for intensive meetings and to work together. It still comes under the umbrella of ABRE and is a long way from any possibility of accreditation. Once a year we organise a mini congress for all the eurythmy therapists in Brazil to learn, share our experiences, get up to date and deepen our work.

The aims of our group are:

- to inaugurate a foundation or an association for eurythmy therapy
- to attain accreditation and legal recognition in Brazil for eurythmy therapy
- to start a new eurythmy therapy training course in 2014
- to deepen our knowledge of the needs of the country, through research projects
- to create the necessary conditions for organising deepening courses in eurythmy therapy in Brazil
- to foster closer relationships with tutors from other countries.

Our current situation:

There are fifteen active eurythmy therapists in Brazil, for eleven of whom eurythmy therapy is their main occupation, from which they support themselves. Five have other jobs as well. Only two eurythmy therapists are employed by an organisation. All the others work independently in various organisations, such as schools, kindergartens, curative education, medical practices and so on.

We work in all fields:

- with children, young people, adults and elderly people
- in psychiatry
- in eurythmy therapy for the eyes or the teeth (some of us)
- with eurythmy therapy in the field of prevention
- therapeutically
- with people suffering from drug dependency and other addictions
- giving courses in the different trainings: rhythmical massage therapy, therapeutic education, medical trainings, biographic counselling and artistic therapy.

The only criterion for joining the IAO group is to have completed a eurythmy therapy training.

We have a Google group for our internal communication, but no website. Our national representative mediates information from the Medical Section. We are not recognised by the national health insurance system.

This is enough for now! This report is a summary of all that goes on in the tropical country of Brazil.

#### CANADA:

Michael Chapitis  
(>[michael.chapitis@gmail.com](mailto:michael.chapitis@gmail.com)<)

Canada is the second largest country in the world, spreading over 6,000 km. between 2 oceans; the east which is on the Atlantic, to the west which is on the Pacific. The largest area of population stretches along the belt of USA. There, lies Canada's largest cities. From east to west we have the metropolis of Montreal, Toronto and then Vancouver. Although Canada is officially bilingual, french is spoken mainly in the province of Quebec. The largest stretch of the country goes from the 45th parallel up to the arctic. Besides the prairies, the key features are forest and lakes, including the five Great Lakes. A characteristic of Ontario the „Great Canadian Shield“ (granite and quartz) which joins together at Georgian Bay with the Niagara Escarpment (limestone). This is unique to the world. In the 1920's, the known artists „The Group of Seven“ painted this inspiring landscape.

Canada is a multicultural country with many immigrants and continues to be on one of the highest ranks by UNESCO. Besides the watery element, the quality of light is a strong entity of Canada including the large skies and vibrant red (Indian Summer) colours. The third outstanding quality is the open space.

In this huge country of Canada, one can count the number of eurythmy therapists on one hand. Here in Toronto we are two, I am in my fourteenth year. Most of the eurythmy therapy work is taking place in the four Waldorf Schools in southern Ontario. I work four days a week in the schools.

Located at the largest Waldorf School, there is a home for the elderly and a Christian Community and also an anthroposophic therapy center which includes four physicians and five therapists (painting therapy, massage therapy and eurythmy therapy). Our weekly meetings begin with eurythmy. There I work one day a week seeing 10-12 patients through the doctor's office for a seven week cycle. For the past several years, Pegasus Remedies has been hosting annual medical conferences with international speakers.



#### CHILE:

Veronica Ortuzar  
(>[ortuzar@gmail.com](mailto:ortuzar@gmail.com)<)

At the end of the world, beneath a night sky filled with stars you could almost touch, under the sovereignty of the Southern Cross, lies Chile — a country which hardly looks at its neighbours. It is cut off in the North by deserts, in the East by the high Andes with its volcanoes, in the South by the South Pole and in the West by the Pacific Ocean. Hence there are no dangerous animals and the climatic zones and landscapes are so different, clothed in the most manifold colours. It is as if God had taken everything left over from the other countries (other than a tropical climate) and packed it all into this long, narrow country.



I am still the only eurythmy therapist in Chile; I live in Santiago, the capital city. In Santiago there are many anthroposophic doctors, two therapy centres and a curative education initiative. The International Postgraduate Medical Training has been taking place regularly for some years now. In Chile we are in urgent need of more eurythmy therapy colleagues. There is so much to be done here!

The eurythmy therapy training had its first graduation this year. Some of this group of very gifted and committed eurythmists will take up the eurythmy therapy training and find their way into therapy work.

#### CUBA:

Miriam Caro  
(>[miriamcaro.cu@gmail.com](mailto:miriamcaro.cu@gmail.com)<)

#### The „Ytibo“ project in Matanzas

This project is described as „Agro-ecological Production for a Diabetic Diet“. Its name is „Ytibo“, derived from Ytibocaibau (Mother Earth) in the language of the original inhabitants of Cuba. The name was given in connection with the „Pacha Mama“, often mentioned by the Bolivian president Evo Morales.

This research project involves growing organic medicinal plants (calendula, chamomile and lemon grass), with the aim of producing high-quality natural medi-



cine. At the same time foodstuffs like millet, sesame, manioc, squash, rice and numerous spices are also grown. These are then processed into whole food in the diabetic centre's dietary kitchen. It has become apparent that an organic wholefood diet obviates the need for insulin in mild diabetes; while improvement in the condition of more serious cases is possible. Savings on insulin products amounted in a few years to several tens of thousands of American dollars for the Cuban health system. Quality testing takes place in the research laboratory of Matanzas Medical University and is supervised by the Cuban Health Ministry, as is the dietary kitchen.

Growing the herbs and nutritional plants on the farm of Miguel Quinteros, an organic farmer, comes under the Ministry of Agriculture. The work is thus supervised by two ministries.

Cuban experts are open to biodynamic farming and eager for knowledge, advice and expertise, even from overseas and from different cultural traditions.

During my time in Matanzas I have done hygienic eurythmy with people with alcohol dependency in a psychiatric self-help group; with people with diabetes; and with patients suffering from Parkinson's disease. In this way I have been able to mediate life-forces.

I worked in this agricultural and medicinal project in Matanzas for ten years, seven of them with a permanent residence permit. I am Argentinian with German roots. For family reasons I am living in Hamburg at present.

#### CZECH REPUBLIC:

Hana Giteva  
(>[hana.giteva@post.cz](mailto:hana.giteva@post.cz)<)

Czech Republic – a paradise where eurythmy therapy is able to ripen as well as the hops do ...

With a population of about 10 million, the Czech Republic is a paradise, Bohemia, in Central Europe. It comprises three historic lands – Bohemia, Moravia and Czech Silesia. Czech is the official language, but the three regions have their own traditions and distinct languages.

The mountain ranges along the borders give the country its clear topographical structure. It consists of a number of basins surrounded and divided by mountain ranges. In Upper Austria people tend to say: 'I'm driving down into Bohemia' and not 'to Bohemia'.



The Czech Republic borders on four countries - Germany to the west, Poland to the north, Slovakia to the east and Austria to the south.

The Bohemian Forest lies on the southwestern border of the Czech Republic, the Ore Mountains in the northwest (Klinovec, 1,244 m); the Krkonoše (Giant Mountains) in the north reach a height of 1,602 metres at the Sněžka mountain. Two important rivers 'mark' a flowing T sound on the map of Bohemia. The Vltava runs north to Prague from the south, and to the southeast of the Ore Mountains the Elbe extends to either side. The two rivers meet and merge not far from Prague.

Moravia includes part of the Carpathians to the east and the southern part of the Vienna Basin (Lower Moravian Vale). The Beskids and the White Carpathians mark the boundary to Slovakia in the east. The basins are most fruitful lands. Hops are grown in Bohemia (one of the traditional beer-brewing countries), as are wheat, potatoes, etc.

Eurythmy developed very fast once the Iron Curtain went and has now become part of many spheres of life. At present seven eurythmy therapists have gained their diploma. Just now we are celebrating the establishment of the Milos Brabinek Academy. The three-year part-time training in anthroposophical medicine started there on 28th September 2012, and eurythmy therapy will be part of this for the whole three years. We are thus able to go through the eurythmy therapy course eurythmically with the people of our country and make Czech physicians more familiar with this therapy. What more can one ask for?

#### DENMARK:

*Matthias Gorges*

(>[matthiasgorges@hotmail.com](mailto:matthiasgorges@hotmail.com)<)

After ten years of activity as a eurythmist and eurythmy therapist in Denmark, I was asked at the beginning of 2011, for personal reasons, to come to Dornach. Immediately I began to miss (and still do) the breadth and freedom of the Danish landscape and mood of soul. Wind and wave, storm and rain — and the splendid Scandinavian summer months, with their inexhaustible light and richness, provided the backdrop for creative and, above all, free activity. And we eurythmy therapists all knew each other, helped each other, studied together — yes, we relied on each other.

But the Danish soul always seeks a personal encounter with the other human being: studying together without tea, coffee and cake (or better still smørre-



brød) is unthinkable. Warm-heartedness and sociability play an important role. Contact with our fellow human beings is more direct — after all, only the queen is addressed with the formal personal pronoun „you“. On the other hand, it is more difficult to get things going.

So this is by way of being an obituary, somewhat lugubriously looking back at my time in the Forum; grateful to you all for the feeling of being part of a great world community. I have formed deep attachments (you know who you are) — but have perhaps not fully lived them. Thanks to you all!

This is an appeal to you, dear Danes, to continue the work and not to lose the thread to the Eurythmy Therapy Forum (unfortunately it is so damn hard to find a suitable successor)!

Still connected to the Northern Lights by a silken thread, I will in future continue to take an affectionate interest in life in and around the forum.

#### ESTONIA:

*Katrin Vaik*

(>[katrinvaik@hotmail.ee](mailto:katrinvaik@hotmail.ee)<)

Estonia, also known as Maria-Land, is by the sea. The North and West are washed by the waves of Baltic Sea; to the East the border with Russia is marked by the long stretch of Lake Peipus and Lake Worts. If you look at a map of Estonia, you gain the impression that the country lies in the lap of waters. To the South is the border with Latvia.

The landscape is largely flat with many lakes, rivers and upland moors. These upland moors are very interesting: nature reserves thousands of years old, with upland moor forests and pools, where the water levels are always higher than in the country's other lakes. The landscape becomes more hilly to the South till you reach the 'highest peak', Suur Munamägi (Big Egg Mountain), 318 metres high.

Estonia was graced with beautiful gifts from the last ice age: granite rocks from Scandinavia, scattered all over the country, ranging from small to the size of a house — the drumlin fields, which represent Estonia's main topography. The North-South movements of the ice often left closely packed drumlins, averaging 1½ kilometres long and up to 30 metres high. Carbonaceous shale is mined, for use in the country's power stations. Limestone is found in the North, beneath



a very thin layer of humus, while in the South the limestone is covered by strata of sand and clay.

The thinness of the humus layer has made it difficult for the inhabitants to grow enough crops to feed themselves. Continuous effort has enabled life in Estonia to progress. The Anthroposophical Society managed to come though all the difficulties and anxieties of the Soviet occupation.

The new freedom enabled the Anthroposophical Society to continue its work legally in the nineties. Doctors too have been able to train on a spiritual scientific basis. This has resulted in there being an association of anthroposophic physicians in Estonia with ten members. In Tartu they work together in the Jacob Therapy Centre while in Tallinn, and to an extent also in Tartu, anthroposophic doctors are working successfully in the state system. One doctor has a practice in Finland, and two others make short working visits there. For some years, the seven Waldorf schools have had a 'travelling doctor' who visits them periodically. I am particularly glad about this, as the physicians were often able to advise me. The pupils of only one of the Waldorf schools (near Tallinn) have been able to do eurythmy therapy, since I am the sole eurythmy therapist in Estonia. I also work with adults from an increasing circle of acquaintances.

We have a longstanding intention to found a therapy centre in Tallinn, and are certain that little Estonia is large enough to sustain a second centre of anthroposophic medicine.

#### FINLAND:

*Anne-Marie Somero*

(>[amsomero@welho.com](mailto:amsomero@welho.com)<)

Finland, the land of a thousand lakes.

Finland's surface area is slightly smaller than Germany's. It is one of the most northerly countries in the world, lying between

the 60th and 70th degrees of latitude: a third of the country lies within the Arctic Circle. The country extends 720 miles (1160 kilometres) from North to South. The longest border, with Russia, is 789 miles long (1269 kilometres). To the West, Finland shares a border with Norway and a meandering border with Sweden along a river. Finland lies on the Gulf of Bothnia to the West, on the Gulf of Finland to the South.

The most prominent feature of the landscape is its wealth of lakes. There are



officially 187,888 lakes over 500 square kilometres, of which 56,000 are larger than 1,000 km<sup>2</sup>. The country's largest lake is Saimaa at 4,400 km<sup>2</sup>. There are nearly 100,000 islands on lakes, so it is no wonder that many people have their summer home on their own island.

The bedrock in Finland consists predominantly of the pre-cambrian rocks of the Baltic Shield (gneiss, granite and schist). So we stand on solid bedrock. There is very little limestone in the ground.

Copper, nickel, zinc, chrome and gold are all found in Finland. Between the many lakes are forests and bogs. There are many fir trees, pines and birches. The earth produces wood and peat. In the forests live elk, bears and wolves. The national animal is the swan.

The eurythmy therapy situation:

Last autumn we founded the „Suomen eurythmiaterapeutit ry“ professional association, with seventeen members. We will continue to publicise eurythmy therapy with short articles and so on. Most eurythmy therapists work in Waldorf schools, kindergartens or curative education. None of us works solely privately, as we have no therapy centres. As we live very far from each other (125–500 miles or 200–800 km) we decided to meet up twice a year. We work on a case from the book by Rudolf Steiner and Ita Wegman *Extending Practical Medicine* — both medically and with eurythmy therapy — in order to immerse ourselves in a clinical picture, to educate ourselves, strengthen ourselves and give each other mutual encouragement.

#### FRANCE:

Yolande Marx

(>[yolmarx@akeonet.com](mailto:yolmarx@akeonet.com)<)

HEXAGON, surrounded by seas, tides and winds, formed by mountains, Pyrenees, Alps, Vosges, crossed the plain, looking at herself in the Parisian Basin chalky, brooding in her breast the fire of the 'Torbieres', volcanoes .. assembly stones, granite, volcanic rock, limestone, sandstone, carved, built in chapel, church, cathedral .. stones becomes images, memories ... Christianised geology... hexagon or consonant sounding and resonating here and there another voice, or accents revealing the dance, rhythm, melody of elements according to the region .. Eurythmisan ...

In this diversity, a few dedicates to live consonants and vowels, to find the rhythm for everyone to create space and to form it... distributed from east to west, from north to south, marking



the mercury and care given path of the hexagon, to meet despite all adversities, and still hope for anthroposofic medicine, for arts therapies, for therapeutic eurythmy and her recognition from the state. That the trial will comfort our willingness to continue and enhance a fruitful and warm interdisciplinary collaboration around our patients...

#### GERMANY:

Thilo Riebold

(>[thilo.riebold@googlemail.com](mailto:thilo.riebold@googlemail.com)<)

This country lies at the centre of Europe, bordered by many other countries and by two seas. It has a shape which, with a little imagination (!!!) and if you screw up your eyes (!!!), look a little like a torso!



Two seas rest on the shoulders of this torso, left and right of the neck, in air and levity, with the brilliancy of the light at your discretion (or one could say inspired by our Scandinavian neighbours). On the left is the North Sea with the East Frisian Islands, very much characterised by ebb and flow. They speak of the „stiff breeze“ which blows in your face, and of squalls which laid waste the land centuries ago. On the other side is the Baltic with its milder climate and home to the old commercial Hanseatic cities. There too is Rügen Island, with the most sunshine in Germany.

In the West are many cities where in the past people had gone to earn a living, for instance in mining during the period of industrialisation. Rich deposits were brought up into the light of day and then processed. Many people lived close together in the smallest areas, as they still do.

If you look East, the landscape broadens out and the population density decreases. There are big industrial zones here too, as well as agricultural areas. Eventually, on the sandy soil of Brandenburg and among its many lakes, we reach the new and old capital city. Is it the heart within the torso?

Big cities and little villages, delightful landscapes and dense traffic mark the lower part of the torso, bordered by the massif of the Alps, with their partial mantle of snow. This is where our German-speaking neighbours live.

The entire landscape is crisscrossed by rivers and streams, with lakes here and there — they all shaped the landscape, but played a bigger role in the past than today.

What does the eurythmy therapy torso look like? Where millions of years ago the Alpine massif was formed through the interaction of powerful forces, there is a focal point of activity. The special Northern light qualities, on the other hand, and the bright summer nights with their sense of ease, are the sources of many different initiatives. The mineral processing in the West, exploiting raw materials and formative forces to the uttermost, might perhaps have been an influence in founding the state-accredited training which has been running for a few years now. And hopefully the East, with its interplay of different and sometimes conflicting qualities, may also reveal its potential!

In big organisations or little pioneering endeavours, the work of our eurythmy therapy colleagues is as diverse as the country — and I doubt there will soon be any blank spaces left on the map...

#### GEORGIA:

Nino Waschakidse

(>[umn@access.sanet.ge](mailto:umn@access.sanet.ge)<)

Georgia is in the Middle East, although its inhabitants call it the balcony of Europe. At around 26,900 square miles (69,700 square kilometres), it is roughly the same size as Bavaria. Mountains and foothills cover 87% of the country. The 620 mile long Greater Caucasus mountain range (1,000 kilometres) along Georgia's northern border. Its peaks rise to between sixteen and a half thousand and nineteen and a half thousand feet (5,000–6,000 metres). In the South are the western ridges of the Lesser Caucasus and the edge of the volcanic Armenian highlands. The Colchis plain stretches as far as the Black Sea in the West; in the East the Transcaucasian Depression reaches to the Caspian Sea. Eastern and western Georgia are divided by the Lichi mountain range, which stretches from the North to the South.

From the Lesser Caucasus in the South, Georgia's longest river, the Kura (Mt'k'vari in Georgian), flows eastward for 220 miles (351 kilometres). The largest lake is Paravani, 6,800 feet (2073 metres) above sea level, with an area of 14½ square miles (37½ square kilometres). At 7,200 feet (2190 metres) below ground, the Krubera Cave is the deepest known cave in the world.

The western part of the Lesser Caucasus consists of folded sedimentary rock and Upper Cretaceous (60–80 million years



old); in the central and eastern regions (160 million years old) there is evidence of volcanic activity in the solidified magma permeating the folds. The mountain ranges have been rounded by erosion. The Lesser Caucasus only reached its present height of 10,000–12,000 feet (3,000–3,700 metres) with the formation of the Greater Caucasus.

Geologically, the Greater Caucasus is considerably younger at two million years old. Its central part consists of a granite core which descends toward the East. Around the core is a mantle of schist. This formed through metamorphosis of igneous and sedimentary rocks under the influence of heat and pressure.

Numerous mineral and hot springs, as well as the frequent earthquakes, show that the mountain forming activity is not yet quite complete; Turkey has been particularly badly affected by these earthquakes over recent years.

Seven eurythmists trained in Europe currently work in the capital Tbilisi which has one and a quarter million inhabitants. Four of them have also trained in eurythmy therapy. They practise this special therapeutic art in different fields of work. In the smaller cities of Batumi (118,297 inhabitants) and Gori (46,680), there are nine anthroposophic doctors who have studied eurythmy therapy. A group graduated this summer. We have planned regular postgraduate courses in eurythmy therapy for all eurythmy therapists and doctors, starting from autumn 2012. Intensive courses with visiting tutors Margret Thiersch and Dr Gudrun Merker are scheduled for next year (2013).

Our aim and concern is to gain official recognition for this special way of healing. Our vision for the future is to continue nurturing a close collaboration between doctors and eurythmy therapists so that it continues to flourish!

## GREAT BRITAIN + IRELAND:

John Browning

(>[johnlbrowning@fastmail.fm](mailto:johnlbrowning@fastmail.fm)<)

Great Britain and Ireland, two large islands with many smaller islands on their western and northern coasts. Water has played, and plays, a large role in the forming of the landscape, whether it be the seas around the islands, the rain falling from the skies or the ice of the glaciers. The older rocks are in the north and west in both Britain and Ireland. England's terrain mostly comprises low



hills and plains, especially in central and southern England. In the South-West there are the granite batholiths of the moors and Land's End (these are the deep roots of acid volcanoes) surrounded by sedimentary rocks; shales, sandstones, slates and limestones. In the South-East there are chalk cliffs with the chalk extending forty miles inland to the rolling Downs of Kent and Sussex. On the East coast there are the flatlands of East Anglia with its glacial tills which have produced its rich loamy soils. The central spine of the Upland Pennines, of mainly carboniferous limestone, stretches from Derbyshire to just south of the Scottish border, acting, in the north, as a barrier between Lancashire and Yorkshire.

Much of Wales is mountainous, particularly in three main regions: Snowdonia in the north west, the Cambrian mountains in mid Wales and the Brecon Beacons in the south. The mountains assumed their present shape during the last ice age, the Devensian glaciation; evidence of glaciation is conspicuous in the area round Snowdon. All geological periods are represented as outcrop; the influences of sedimentary and igneous competing in the landscape. (Cambria is a Roman word for Wales, and so it is Wales that gave its name to a geological system that is now known throughout the world). The Preselli hills in Pembrokeshire were the source of the bluestone at Stonehenge. Myriad valleys radiate down to the south coast with numerous wonderful waterfalls in them. A lot of coal mining took place in these southern valleys with quarrying for slate in the north west. The coast is a mixture of flat coastal plains, rocky outcrops, cliffs, estuaries and long sandy beaches.

Scotland is a mountainous land with a coastline ringed by hundreds of islands. The geomorphology was formed by the action of tectonic plates and subsequent erosion arising from glaciation. The major division of Scotland is the Highland Boundary Fault which separates the land into the 'highland' to the north and west and the 'lowland' to the south and east. There are many peninsulas on the West coast with sea lochs stretching far inland with high hills on their flanks. Lewisian gneiss in the Western Isles, gabbro on Skye, Devonian sandstone on the Orkneys, Quartzite in the Torridons and the hexagonal basalt columns on Staffa are among the sorts of rocks to be found. Peat covers many of the hills, with pools and stagnant water providing wonderful breeding places for midges as the warmer weather and the tourists arrive.

Ireland's indented coastline measures about 2,200 miles (3,600 km) including many great bays and sea loughs. Cliffs border a great part of the Atlantic coast, and some of exceptional grandeur rise 2,000 feet (600m) into adjacent mountainous ground. On the north coast of

Ireland the hexagonal basalt columns of the Giant's Causeway are similar to those on Staffa. A very large part of Ireland, that known as the central plain, is a huge irregular basin or saucer of carboniferous limestone seldom rising above 100 metres. In the south, the mountainous tracts and uplands of Kerry, Cork and Waterford are formed largely of Old Red sandstone or Devonian rocks. On the West coast there is 'The Burren' an extensive limestone pavement landscape with its own particular flora. Ireland is, like Scotland, a land of many lakes and rivers.

In Eurythmy Therapy the main event of the year was the annual conference and AGM which was attended by a third of the members of the association. All who came to it were enriched and enlivened through the work with Christiane Rust who works as a Eurythmy Therapist at the Ita Wegman Clinic. The theme was 'Sound sequences alternating between the polarities of consonant and vowel and their relation to the intervals'. We were very grateful that she came and was prepared to dive into English again and give all the sessions in English!

The substance of what she brought stimulated the Eurythmy Therapists in Stourbridge to continue working with the theme which, in turn, led to the South-West region re-commencing their meetings to share the fruits of this work and is now having study days on Tone Eurythmy Therapy led by Shaina Stoehr.

There are not any really new developments to report. Eurythmy Therapy continues to be strongly present in the Waldorf schools. The Eurythmy Therapy Training will start with its next group in March and the training for doctors continues. **AnthroMed**® registration should take place through the Council for Anthroposophical Health and Social Care (CAHSC).

## HUNGARY:

Maria Scheilly

(>[scheilly@axelero.hu](mailto:scheilly@axelero.hu)<)

Geological features:

Measuring 93,032 sq. km, Hungary lies in a basin enclosed by the Carpathian mountains and the Alps. At a rough estimate, Budapest is equidistant from Barcelona, London, Oslo, Stockholm, Helsinki and Moscow. Two big rivers flow through the country: one, the Danube (Duna) from the North-West and the other, the Tisza from the North-East. With their tributaries, like arteries, they bring life and fertility to the land. South-West of Budapest lies the great Lake Balaton, measuring 598 sq. kilometres.



The Hungarian Basin is an extensive low-lying plain that arose in primeval times through land subsidence. A volcanic zone formed at its margins, as witnessed by the widespread bauxite strata, where, at deeper levels, crude oil and gas can also be found.

The oldest rock stratum consists of mica, slate, granite and red sandstone. At a later period, when the inland Pannonian Sea filled with mud flowing down from the Carpathians and the Alps and gradually dried out, chalk formed, containing manganese ore and dolomite. Hydrothermal processes have also given rise to zinc, copper and lead deposits. Uranium is found in the Mecsek mountains.

Hungary has distinctive geothermal attributes: the solid earth layer (lithosphere) is only 24-27 km thick, around 11 km thinner than elsewhere, and thus closer to the magma.

For this reason copious warm springs can be found. Of the 219 mineral springs, 211 provide bathing water and 20 also drinking water.

'Hévíz' is the location of the world's only warm lake with a peat bottom. Measuring 4.44 hectares, it is Europe's largest warm lake. A distinctive feature of the lake are the beautiful "Indian red water lilies", *Nymphaea rubra* var. *Longiflora*.

The water is rich in calcium, magnesium, sulphur, radon and, due to the peat bottom, organic compounds also.

Ten eurythmy therapists work in Hungary, and this year they were granted the **AnthroMed®** quality trademark. They continue to work mainly in Waldorf schools, and only two colleagues work exclusively as eurythmy therapists.

The first students of the three-year anthroposophic medical training (director: Henrik Szóke) graduated in June 2012. They are now taking their qualifying medical exams at a Hungarian medical university.

Five physicians and ten therapists from this training course wish to continue to take part in regular eurythmy courses. The physicians in this group also wish to take the three-year physicians' training in eurythmy therapy.

This year we also started the further training course in 'eye eurythmy therapy' with Frau Margret Thiersch, and further courses are due to follow.

## ICELAND:

*Heiða (Adalheiður) Olafsdóttir*  
([>heidaol@hotmail.com<](mailto:heidaol@hotmail.com))

Last June after 6 years of studies I arrived back in Iceland. The work is exciting but also challenging, mostly due to the lack of other therapists and doctors.



I work in a couple of fields of practice. I give eurythmy lessons in a Waldorf kindergarten (children 4-5 y.o.), a Waldorf-school (class 1-10/ always two classes together) and in a home/farm for people with mental disabilities (once a week), for the school children and the people in the farm I give eurythmy therapy as well as to some private patients every week (all in all about 20 therapy sessions week).

At the annual conference in Dornach I decided as one of two eurythmy therapists in Iceland to found a group around an Icelandic therapy orientated initiative. This idea came out of my need for cooperation with other therapists and eventually also doctors in Iceland. During these days I also went to Basel to visit the Munster Dom where I bought postcards of the four evangelists and their four winged figurative symbols. Coming back home I showed the postcards to my young brother who immediately noticed we have the same images on our coins. But how do our heathen images come to relation with the four evangelists.

Iceland lies between America and Europe, or better said America and Europe meet in Iceland. The continental plates divide the country through its centre in two parts which distance widens with 2 cm every year. Where the two continents pull away from each other there is a lot of turmoil in the earth crust, which cause the known volcanic outbursts and the loved hot springs. So it is described in a simple way, but in reality the island is born out of the sea. Continuously but slowly the oceanic ground of the Mid-Atlantic Ridge reverts and rises, and in my "imagination" America and Europe move at each other in a chafe like manner in a never ending continuous way. Vatnajoekull, Europe's largest glacier in volume, covers 8% of the island. A mountainous desert landscape is given little or no shelter from trees. The elements prevail in Iceland, as can be seen in the gnomes, dwarves and trolls formed by the lava, these give the island a mystical character.

The question about the real location of Atlantis is not certain though Iceland has often been mentioned in that context,

for example, by Ita Wegman.

Hundreds of years before the official settlement, men lived on the island; these were highly spiritual Christian men (no written proof of this has been found though the combination of different literature show this to be so).

Travelling to Iceland about 1000 years ago was a difficult and dangerous undertaking as reflected in the description of "monsters" and natural phenomena in for ex. St. Brendan's Navigator (ca. 570 AC).

The settlement of the island officially took place around 870. Around 1200 (the time of the Edda and other treasured literature) it is described in Heimskringla how a Norwegian King sent a sorcerer to Iceland with the task to find out if an army could be moved to the island. The sorcerer took the shape of a whale and as he came to Iceland's shores he met four gigantic beings in each quartile of the island in the company of smaller one of their kind. In the east he was met with a mighty dragon, in the north a bird whose wings spread between the fjords mountains, in the west a gigantic bull and in the south a mountainous giant carrying an iron rod in his hand. These were the islands guarding patrons. Today, since 1919 these patrons are on our coat of arms.

Much has been left out, but while ending my report, I hope - despite the exuberance in the not so concrete text - you have been able to find some sort of a connection which can bring you further down road of "imagination" and even might have woken your interest for Iceland's "geology"!

## INDIA:

*Dilnawaz Bana*

([>abanabana123@rediffmail.com<](mailto:abanabana123@rediffmail.com))

India lies in the tropics, around 20° north of the Equator. It is thus hot and humid. The Himalaya is right at the top to the North (the cool head), with a large triangle in the South, surrounded by the ocean. There are thick jungles, a big desert (the Thar) and large agricultural areas. The seven largest rivers are named for Hindu goddesses and correspond to the country's seven classical dance styles. Nature is alive and fertile — the people too.

All that they need in order to live grows in India. Below the ground are beautiful jewels, semi-precious stones and minerals. One may truly say that India is a world in miniature and contains everything that is to be found in the wide world beyond.



I am still the only eurythmy therapist in India and work with doctors as much as I can. I also have opportunities to work in different trainings, such as the Waldorf teacher training and the International Postgraduate Medical Training organised by Michaela Glöckler. I also work with teachers and parents at the country's Waldorf schools. In November we are beginning a two-year eurythmy course in Bombay where specific aspects of hygienic eurythmy will be covered, especially for Waldorf parents. Eurythmy therapy will not be part of this short course. I have realised that eurythmy therapy is important for children, but that hygienic eurythmy is even more important for parents and teachers.

### ISRAEL:

Jan Ranck

(>[janranck@012.net.il](mailto:janranck@012.net.il)<)

Israel is a small land (approx. 20770 square kilometers, roughly the size of New Jersey) located on the Mediterranean Sea at the junction of Europe, Asia and Africa. The distance between the massive snow mountains in the north (snow only in winter) to the colored-sand craters in the south is only approx. 400 Kilometers, but the great variety of impressions along the way makes it feel much longer when driving through. As the "middle of the Earth" Israel contains in miniature something from the landscapes of the whole world and more -- in the vicinity of the Dead Sea (the lowest point on earth) the area resembles a moonscape. In fact it is speculated by some that it was from this point which the moon separated from the earth in the beginning of the earth evolution.

As far as geology is concerned, Israel is a land in which it is often necessary to dig through uncountable layers of cultural remains before reaching the actual bedrock. The past is so close to the present that dinosaur tracks can be seen just meters away from the Jerusalem Academy of Eurythmy. (It has not yet been ascertained whether their gait was three-fold...)

There is also hardly any geographical feature which is not connected with the cultural past. The Carmel Mountain Range in the north is known to contain the cave in which the Prophet Elijah hid; the Jordan, Israel's largest river, is known as the site of the baptism of Jesus of Nazareth; the large fresh-water Sea of Galilee (Lake of Gennesaret) is known as the fishing grounds of Christ's disciples; and on the Mount of Olives near Jerusalem there are trees so ancient that



they may have been there at the time of Christ's Crucifixion.

Returning to the theme of Geology – that is, the stones under ones feet: here there is also both great variety and the inescapable connection with the cultural past. To site only one example: the stone which is in the foundations of the Dome of the Rock on the Temple Mount in the Old City of Jerusalem and is known as the middle of the middle of the earth. According to the Talmud it was the first part of the earth to come into existence (or, as Manfred Schimidt-Brabant related, this is where the first condensations of warmth arose on Old Saturn). Near this place the earth was gathered from which Adam was created. On this stone sacrifices were made by Cain, Abel and Noah. Here Abraham prepared to sacrifice his son Isaac, and Isaac's son Jacob (later known as Israel) dreamt of the Angels climbing down and up from heaven. On this rock King David planned to build a Temple, which plan was accomplished by his son King Solomon. Here the Holy of Holies was built and inside the Ark of the Covenant was placed. From this rock the Prophet Mohammed is said to have risen to heaven accompanied by the Angel Gabriel, and to have prayed with Abraham, Moses and Jesus.

In conclusion: if this is the case with just one stone, perhaps it will be forgiven that the report ends here with a warm recommendation of the (unfortunately untranslated) book by Suchantke, Schmutz, Schad and Fackler "The Middle of the Earth – Israel in the focal point of natural and cultural historic development" - for that is how it is...

As to the situation of therapeutic eurythmy in this special country: In December 2012, during a visit by Michaela Glöckler, there will be a conference for anthroposophical doctors and therapists during which the question whether the time has come to found some sort of legally recognized association will be discussed. As reported previously, therapeutic eurythmy is on the list of therapies partially reimbursed by the national insurance when the patient purchases an additional coverage for alternative medicine. However, such sessions are very badly paid and until now none of the few eurythmy therapists in the country (11, but with several not practicing in the field) has taken up this possibility. The initiative of meetings between anthroposophical doctors and eurythmy therapists is entering its fifth year with a relatively constant attendance of 5 doctors and 5 eurythmists. The current theme is Anxiety and Depression. Quite a few doctors and therapists, among them two eurythmists, attended the medical section conference this autumn and at the next meeting in October impressions of the conference will be shared.

### ITALY:

Maria Teresa Fossati

(>[monika.margesin@msoft.it](mailto:monika.margesin@msoft.it)<)

This year small but significant steps have created the space for some important events in the country.

In June, the 6th course of eurythmy therapy for teeth with Mareike Kaiser took place in Milan, well attended by eurythmy therapists and dentists. Angelika Jaschke was with us. She told us of the extensive work of the HE-Forum, as part of the Medical Section. The soul space expanded space and the audience felt intensely connected to this great task.

We prepared to request the **Anthro-Med®** - quality mark: we got the national trademark protection for our professional association, AIET.

We will celebrate '100-years-eurythmy' from 6 - 9 December 2012 in Milan, within the annual meeting of the Anthroposophical Society, with demonstrations from the soul calendar and an evening performance from the pupils of the Waldorf school in Palermo.



Where do we live? But here: Italia, come sei bella!

A petite figure dancing in pure balance in the blue Mediterranean. As you can see on the map. The head of the country is surrounded by the snow-covered tops of the Alps. The width of the Lombard plains of the Po, in the cities of the north, is home of the most eurythmy therapists (about 13).

The body of the peninsula, supported by the „backbone“ of the Apennine Mountains, extends boldly into the Mediterranean, only few colleagues operate there. In Bologna, a steady job is held by one eurythmy therapist and Rome is supplied monthly with eurythmy therapy.

In the top of the "boot", the mountainous Sicily, with its fiery and powerful explosions, the Etna, a „fresh-baked“ colleague works.

So now three German colleagues together a „roman“, who lives in the heel of the boot, are holding the guard at the borders of the country, in the Aosta Valley (north-west of the Alps) in Sardinia and Sicily. The distance between Aosta and Palermo, about 1,200 km, is by-passed. The possibility of holding together is given.

**JAPAN:**

Kimiko Ishikawa

(&gt;eu.haus-erde@m3.dion.ne.jp&lt;)

This year we were meant to describe the landscape in which we work, but I had a sense that I ought to write about the situation here following the events of 3 March 2011! I therefore decided to write about the "present landscape" after the great catastrophe of the earthquake, tsunami and the accident at Fukushima nuclear power station. Almost 16,000 people lost their lives in the wake of this catastrophe, and 3,000 are still missing. 340,000 people took refuge in other locations.



The landscape of Japan has altered a great deal since 3 March 2011. The beautiful coastal landscape was simply wiped off the map. At Ojika peninsula, in Tohoku (North-East Japan) the land shifted 5.3 m eastwards – that is, towards the sea – and sank by 1.2 m.

Rebuilding the region where over 500 kilometres of coastal region were swept away by the flood is a long, slow process. The harbour, for instance, has gradually been rebuilt but no specific plans yet exist for rebuilding destroyed towns. Much therefore remains at a standstill and many people live in temporary accommodation. The mighty tsunami wave left 18,000 tonnes of ruins and wreckage behind, of which only 30% has so far been removed. 21,500 hectares of agricultural land have been damaged, and again only 30% of this has been recultivated. Wild birds can however be seen again in the recultivated areas, and people are trying to grow such things as cotton, which can also grow well in salt-contaminated soil.

The four Fukushima reactors still appear just as they did a year and a half ago since, due to continuing high radiation levels, work is greatly hampered. If there should be any interruption to the cold water coolant supply (e.g. if the cooling system stopped functioning) there is still the risk of a hydrogen explosion. Reactors 1 to 3 are still emitting radiation. Reactor 1, in particular, remains in an unpredictable condition. Outside Fukushima railway station, 0.6-0.8 micro-Sieverts per hour are being recorded, which is around 20 to 30 times more than in other regions.

Radiation-contaminated water flows 3000 kilometres out into the Pacific Ocean from Japan, and there sinks to the ocean floor. Complex radiation contamination affects soil, forests and rivers. People whom I often visit in Ichinoseki City, where I do eurythmy therapy and

preventive eurythmy, say that whereas formerly the woods and mountains were like a gift of nature, now they can no longer pick apples or pears there, or gather chestnuts. "Nature," they say, "has become our adversary."

Mothers were very anxious and many families evacuated to a radiation-free area. There are a great many families where the mother and children move away from Fukushima while the father stays put to continue earning a living – and thus families are separated. In other cases, children and mothers drive out to radiation-free regions every weekend to avoid radiation, and recuperate from their worries.

A trial on thyroid conditions found that 36% of children have cysts and lumps.

Since March this year, demonstrations are being held every Friday outside the Prime Minister's official residence about everything relating to this situation. On 29 June 2012, 170,000 people demonstrated on the streets when the Ohi Reactor started up again.

Finally, briefly, people often tell me that, through the eurythmy practised regularly in affected areas, they have found themselves again, or can overcome anxiety and find new courage for life. And we eurythmists and eurythmy therapists are planning a gathering next February to exchange thoughts on the theme, "How can we protect and strengthen our etheric forces?" We hope we can find in the etheric sphere the source of our shared work and community, so that we can make a contribution to the current situation in Japan.

**NETHERLANDS:**

Irene Pouwelse

(&gt;irenepouwelse@casema.nl&lt;)

Half of the Netherlands lies below sea level (and is actually withdrawn from the sea).

When you draw a line from Knokke (Belgium) to Hamburg (Germany) left of it lies under sea level (NAP, Normal Amsterdam Water Level), which means that this part would be flooded at high tide if there were no dykes (and water was not pumped away continuously).

This part mostly consists of clay soil. The part right from the line is mostly sandy (or peaty) soil.



The highest point of our country is the 'Vaalserberg' in the very south-east, 322.7 meter above NAP. The lowest point is in Nieuwerkerk aan de IJssel, 6.76 meter below NAP, in the west part, about 30 km behind the dunes of The Hague.

On many places in the Netherlands, both in the west (low) part and in the east (high) part, peat has been dug in the past to use as fuel. Most of it is gone now.

Our country lies in the centre of a delta area where three rivers flow into the North Sea: Rhine, Meuse and Scheldt. Situated along the sea our country has a moderate maritime climate with almost always wind and clouds. "Dutchmen like the wind in their hair." "Cycling (in Dutch: fietsen) against the wind makes you strong".

Even in the sky there is a lot of water, by which the famous Dutch skies arise. „Thanks to the wide horizon without mountains we bear to live together with so many people" once said one of our anthroposophical doctors. The social awareness is often strongly present.

When we try to compare the character of our country with its inhabitants we can notice the following:

- the soil is soft and offers our feet little footing: many people have flat feet
- because of all the water many children have to visit the otolaryngologist because of inflammations of ear, throat and lungs; our family doctor calls it "a reclaim problem". Also because of all the water rheumatism is widespread.

We are perhaps not rooted very strong and have a lot of interaction with the environment. However in thinking a lot is possible, like the wide skies; not much boundary, could make us chaotic or fleeting, but also creating new things.

In eurythmic movements the feet are often a week point, the forms however flowing. The interspace between the eurythmists is experienced as important and this is often trained intentionally. I think there is a lot of creativity; many small groups work with each other. We need to go on faithfully and steadfast to give it "hands and feet".

An instruction of Rudolf Steiner for Dutch eurythmists is the following:

In speech there are short vowels like à,ò,i,ù, which you can form with bowed arms or hands, by which the lightness of the speech can be expressed better. However this demands an alert consciousness to elaborate it exactly.

This year we got **AnthroMed®**, the label for the Anthroposophic Medicine. Our research work on cancer and depression in cooperation with Leiden University has reached the practical stage.



We are going to work with our programme and try to find out if it works and if it should be applied. We are looking for more representatives of the fields of practice. This year we are much concerned about our registration with the health insurances. They think that we have to take more training in the field of medical knowledge in order to be able to keep our accreditation. We do hope that we can make the best of that.

## NEW ZEALAND:

Heike Houben

(>heike.houben@web.de.<)

Around 200 million years ago, New Zealand (at that time just South Island, which was of much greater extent than it is today) belonged – along with Antarctica and Australia – to the primeval continent of Gondwana. About 85 million years ago, the Antarctic and subsequently the Australian plates split off. A separate flora and fauna developed in New Zealand, and broad, low-lying swamps formed, producing the great coal deposits of today. After a quiet phase, low-lying shelves rose up from the sea about 35 million years ago and formed today's North Island.

Today, New Zealand is situated where the Australian and Pacific plates meet. Although the two plates are not moving frontally towards each other, they exert a great influence on the country. Two forces emerge, with frontal and transverse actions. The frontal force forms shifts and faults that exert pressure on diverse rock strata and thus continually raise the ground level. The second, transverse, force – by means of which the Pacific Plate is still today pushing itself under the Australian plate – leads to frequent earthquakes in the country, some of which have radical effects on the landscape and also represent a continual threat to the population. (In Hawkes Bay we often wake up at night to find the house swaying back and forth or juddering like the washing machine on spin cycle.) The countries that border the Pacific plate belong to the Pacific Ring of Fire. New Zealand has some of the world's most active volcanoes, concentrated for the most part at the centre of North Island., in the Taupo region. Mount Ruapehu recently erupted for the first time in 130 years, sending an ash-cloud in the direction of Hawkes Bay. Besides the volcanoes, the powers of the earth are apparent in 67 thermal springs or geysers that lie along the Pacific Ring of Fire, and have been developed



and used for hundreds of years as bathing places.

Thus the mountainous regions of North Island are of volcanic rock while flatter areas (such as Hawkes Bay) are formed of sedimentary deposits (sandstone/limestone).

South Island is chiefly characterised by alpine fold mountains and glaciation. The bedrock is granite, gneiss, greywacke and mica schist. Here too the flatter areas are primarily sandstone. One of the few volcanic regions in South Island lies close to Christchurch. No one was expecting the severe eruption and volcanic activity last year which you will no doubt have read about in the media.

New Zealand is a country rich in natural deposits: coal, gold (prospecting is again underway), silver, platinum and all possible minerals.

It is a miracle that one actually feels so safe in a country exposed daily to the potential risk of natural catastrophes. The houses are built to withstand earthquakes, and the nearest volcano is usually a long way off. On North Island, sandstone makes it hard to get a foothold, but all in all we live and work as people do anywhere. The 12 eurythmy therapists are scattered across the country, most of them in big cities like Auckland and Wellington. 5 of them are here in Hawkes Bay, and a student on our eurythmy therapy training course will practise as a eurythmy therapist in Christchurch where – after the traumatic experience of the earthquake, and its still continuing after-effects – she will no doubt be very much needed.

## NORWAY:

Simone Wantz

(>simonewantz@gmail.com<)

A brief sketch of Norway's geology (Bente Katja Bø): "Norge" means the 'path or way to the North' – and this path unwinds deep into northern lands. If you cross the Arctic Circle and enter the Arctic, a further third of the country still stretches northwards before you. The coast is as long as the country, very indented and the longest coastline in the world. Grey-blue, cold Atlantic ocean hammers incessantly against beaches and islands, cliffs and mountains. Norway has a blue tinge. Over the infertile landscape rises an ice-blue sky, which is reflected in thousands of lakes like clear, blue eyes. The eyes of the people are usually blue too. Blue is the prevailing soul colour here.



The mountains rear up in mighty, mineral form, range upon range of blue mountains receding ever further into the distance ("blåne bak blåne"). The forest cathedrals of dark evergreens hem the feet of the mountains and ascend a few hundred metres; but crag and mountain dominate the landscape. As schoolchildren we learned that only 2% of Norway is cultivated land.

Large parts of Norway are mountain types originating in the earth's primeval eras: Precambrian, dating back 2,800 million years. They are called 'primary formations'. The most ancient of these primeval mountains are found in the Arctic North, the Finnmark area, in the Lofoten and Vesterålen islands - mountainous islands in the Atlantic, North of the Arctic Circle - and in the West of the mainland. Mountain peaks rise sheer from the ocean's surface, some of them over 1000 metres high.

Gneiss is as ancient as the land itself, and a major constituent of the primary formations. Other types of mountain, such as granite, arrived in later geological epochs. There is a wealth of minerals. Iron ore, copper ore, iron pyrite, silver and gold have been mined from deep within the dark bowels of the mountains. The glaciers of the Ice Age have carved deep incisions into the mountains and left behind deeply shelving inclines and peaks. When the ice melted, there were radical geological consequences: long moraine ridges formed, as nature's own stone fences.

Jotunheimen is a large mountain mass in southern Norway. In times of ancient Nordic culture, trolls were said to live in the 'Home' of the 'Jotun' or giants. You can still feel and experience something of this if you go there. Trolls appear in every crag and mountain. Heavy rock is piled on heavy rock. The ways are steep, hard-going, desolate and infertile.

"Troll, be sufficient to yourself!" said Henrik Ibsen. The challenge to us today, though is: To become oneself but not be sufficient to oneself alone!

Eurythmy therapy (Simone Wantz):

There is, no doubt, most going on in and around Oslo, but eurythmy therapy is also alive and well further South in Stavanger, Haugesund and Tønsberg; then in the West in Bergen; and North of Oslo in Hamar and Kapp; and, at times, also around Trondheim.

Of the 40 names and addresses on the list of Norwegian eurythmy therapists, around 20 (as far as we can tell) give a few sessions of eurythmy therapy each week – chiefly in schools and curative homes. As far as we know, 7 eurythmy therapists work between half- and full-time as eurythmy therapists. Recently some have also tried working freelance a little.

The shared work that began in 2011 is continuing. We meet on four Saturdays each year for shared practice, encounter

and dialogue. A "core" of 6-8 people has formed, and we hope that this work will grow (we need each other!).

We are still pursuing attempts to gain official recognition from the NNH (association of Norwegian natural therapists), and new questions have arisen as we do so: NNH expects its members to take a basic training in naturopathy. This would mean being a naturopath who works with eurythmy therapy.

A weekend celebration of "100 years of the eurythmy movement" was held in Oslo in May 2012. It was a wonderful celebration, at which eurythmy therapy was also presented in the form of an introduction, courses, discussions and presentation of a research study. A question often heard there was, "Why isn't eurythmy therapy better known in Norway?"

We hope that young, enthusiastic people will join us and use their energy to help further.

May joy and love for eurythmy therapy, and courage and will, strengthen our path here in the North and carry us on in to the future.

### PHILIPPINES:

Dr. Grace Zozobrado  
(>[graceeurythmy@gmail.com](mailto:graceeurythmy@gmail.com)<)

The Philippines is an archipelago, with 7100 islands. Not all of them are inhabited, since some should actually be called "islets" because of their extremely small size (a tent of a modern day Robinson Crusoe would be all that would fit!).



In the olden times the Philippines was referred to as the Pearl of the Orient. Discovered in 1521 by Magellan, who was in search of the Spice Islands, the country was named after the Spanish king, Philip.

The land itself is divided into three socio-political areas, which would closely be equivalent to the thinking pole in the north, a feeling middle area (where the language is also more of a singing character), and a will pole in the South, which is also where the Moslem population is mainly living.

The soil is rich, and depending on type of plants, agriculture is possible the whole year through. We grow rice, corn, sugarcane, coconuts, coffee, cacao, bananas, and vegetables. We say that we can put a seed into the earth on any day, and it will grow in a few days. Unfortunately, the Green Revolution of the 60's has destroyed vast areas of the country. And majority of the farmers have

forgotten what it was like when there were no fertilizers and pesticides. Only a few decades ago, the Philippines hosted many agricultural technicians from the neighboring Asian countries. They studied at the University of the Philippines College of Agriculture in Los Banos, and did researches at the International Rice Research Institute. Returning home, they made their countries into the agricultural wonders that they are now. Sadly the Philippines is now several decades behind in capacity. For instance, we even import rice from Thailand!

On the sunny side of things, the recent years have been bringing positive changes. With the start of the administration of President Benigno Aquino, the people are hopeful again that development will benefit the great majority, who belong to the less fortunate.

The Philippines is also blessed with mineral resources: gold, copper, manganese. And on the island of Romblon (which has been identified by geomancy expert, Marco Pogacnik, as the heart chakra of the Philippines), there is marble. With the Pacific Ocean to the East and the China Sea (now called West Philippine Sea) to the west, the country has rich fishing grounds. Wet markets with an incredible assortment of fish and other seafoods draw locals and tourists alike.

And when one speaks of land resources, one will have to mention the current unstable situation in the Spratly Islands/ Scarborough Shoals. Claimed by China, the Philippines, Vietnam, Brunei and Taiwan, these group of islands sprawled over a huge area to the west of the Philippines is where 60% of the ships of the world pass. Rich fishing grounds and oil fields have now made this important crossroad an area of conflict. We can only pray that there will be no escalation of the militarization in the area and that cooperation among the claimant lands will instead be the basis for future activities.

Yes, a country blessed by sun and wind and sea, but which has seen much devastation due to short-sighted and materialistic practices (which have resulted in landslides, flooding, deforestation, and unsustainable megacities) the Philippines is now waking up to the harsh realities. It can only be hoped that the pain of the past, which has now given rise to a growing consciousness, will move the country to act wisely now to ensure the future.

### PORTUGAL:

Fernanda Wessling  
(>[mfwessling@gmail.com](mailto:mfwessling@gmail.com)<)

Although Portugal is a small country, the geology is very diversified, and one can even say that most types of rock can be found here.



Along the coast there is sand, fine yellow sand, sandstone and sediment rocks, but granite can be easily found, and in some areas granite interspersed with marble.

In the middle and middle south we can find clay soils and big marble areas – not so long ago white marble was quarried in Alentejo and sold to Italy, where it was then again sold as "Carrara" marble, due to its high quality!

In the middle north and the north one finds granite and slate, sometimes quite near each other!

In the Islands – Madeira, Azores, one also finds a lot of basalt stone, due to past volcanic activity.

Casa de Santa Isabel is built at about 550 mts above sea level, on the north side of our highest mountain range – Serra da Estrela. Despite big slate areas, granite is predominant, and where I live and work, granite is very present, which makes for light and not so rich soil.

From the point of view of the work, the number of eurythmy therapists has had a 100% increase – we are now 2, since the beginning of September, which of course is very promising.

Pamela Lippke, from Germany is taking a sabbatical year and has joined our community for the equivalent time.

We shall continue working with our special (needs) people, and colleagues, whenever necessary.

### RUMANIA:

Konstantin Gruia  
(>[corabia\\_ro@yahoo.com](mailto:corabia_ro@yahoo.com)<)

Romania, a country in southeast Europe, is also known as Subcarpathia. The Carpathians developed as limestone and sand deposits at the bottom of a vast ocean in the Tertiary Period.



Present-day Romania is bordered to the west, north and northeast by these tall, steep mountains. The lowlands are to the south. Mineral resources consist in tremendous salt deposits in caves the size of vast cathedrals open to visitors. Oil, gold, silver, copper, lead and aluminium ores (bauxite) are mined

today. They developed due to volcanic changes. These riches are to be found mainly in the southern Apuseni mountains, the western Carpathians. Apuseni translates as 'where the sun sets'.

A great, fruitful lowland region lies to the south.

The Danube, Europe's biggest river, runs to the Black Sea in the southeast of Romania. The Danube Delta is a World Cultural Heritage region famous for numerous birds of many different species. The climate is very hot in the summer months and very cold, with much snow, in winter.

There are still the two of us representing eurythmy therapy. Nelu continues with her work in Simeria.

Family reasons forced me to discontinue my work at the Corabia school in Bucharest, the capital city. I am now living in the country, outside of Bucharest. Time will show where or how and when I can take up eurythmy therapy again. Every now and then I am able to visit 'my' Corabia school. They are carrying on as usual – with great difficulty. We are always struggling to survive there.

I continue to be in touch with Prietenia, the workshop for adults with special needs, sharing ideas with them.

Let us hope that this momentary break from eurythmy therapy will give me real strength and health in future.

## RUSSIA:

Tatiana Strizhak

(>[strikaza2004@yandex.ru](mailto:strikaza2004@yandex.ru)<)

Plains – endless plains – are the key image, and over them the arching dome of the heavens (cf. GA 158, 14 November 1914).

European Russia consists of the low-lying Russian plains (the world's second largest plains). These lie on the Russian plate which is formed largely of granite, and is divided into three regions: the northern, southern and central zones.

a) As in neighbouring Finland, the northern zone is bejewelled with numerous lake. One feels the action of water here. This zone boasts most forest, and nature is still wild and intact in places. This northern region is characterised by a special relationship with the winter season: it reminds us of nature's 'day' – its wakeful state, the sphere of human thinking. (Eurythmists live and work in Saint Petersburg and Syktyvkar.)

b) The South: warm seas (the Black Sea etc.), the Caucasus and the endless steppe – a treeless plain. This zone is closer in feel to the summer, nature's 'night', and reminds one more of human



sleep, the sphere of metabolism and the will. Where there is much moisture, the rich, black earth continually renews itself – the prerequisite for vegetation and agriculture. In areas of little moisture, aridity prevails in extensive, withered plains. (Eurythmists at Rostov-on-Don and in neighbouring Ukraine.)

c) In central Russia the opposite kind of terrain is found in the forested steppe: forests alternate with fields, plains with regions of high ground. Rivers cut their way through the wave-shaped relief of this zone and connect its different areas. Here, analogous to the human rhythmic system, Europe's biggest river (the Volga) forms. Fields are not as fertile as in the South. (Eurythmists in Moscow, Yaroslavl and Samara.)

Thus the personality qualities and traits which develop naturally to some extent in these different zones need to be enhanced and extended by consciously cultivated powers: by will in the North, by thinking (form) in the South and by the powers of the I in the central region.

The Ural mountains mark the boundary between European Russia and Asia. Further East the marshy plains give way to an extended peak district. In the midst of the neverending Siberian taiga lies a fresh-water sea (Lake Baikal). The development of Siberia still lies in the lap of the future. In Asian Russia the rivers flow northwards, leading the population away from the area of contact with Asia's ancient culture.

In European Russia, by contrast, the rivers mostly flow in a southerly direction, and for centuries have brought western culture into the country, connecting Scandinavia with Byzantium ("The Varangians' route to the Greeks").

News from eurythmy therapy work in Russia: reports from seminar students

1. In January 2012, Rudolf Steiner's "12 moods" were performed (as part of the fourth Russian Eurythmy Festival"). The performance marked the conclusion of 2 years of collaborative work by a group of Russian and Ukrainian eurythmists of diverse disciplines.

Realised under the direction of Margrit Hitsch, the distinctive aspect of this project is the fact that here, for the first time after a long interval, the "12 moods" are founded on correspondences between the vowels and the planets. This is what Rudolf Steiner originally intended for this piece, and it is thanks to Tatiana Kisseleff that these correspondences have been rediscovered.

2. Between 3 and 9 June 2012, Mareike Kaiser in Moscow gave the first seminar in dental eurythmy, on the theme of 'Exercises for anomalous bite'. Follow-up seminars will take place this winter with Dr. Haupt, who will explain the medical aspects of this condition, and then in

the summer again with M Kaiser, on the theme of "Exercises for anomalous bite in cases of misaligned teeth".

Astonishingly, extremely gentle, flowing motions are needed to act on the teeth - which are, after all, the hardest substance in our organism,. We very much enjoyed practising these movements, and felt how our teeth responded to them.

3. Between 18 and 21 July 2012, a seminar on "Social Eurythmy" led by Rachel Maeder from Ittigen took place in Moscow. The participants were eurythmists, physicians and Waldorf teachers. Rachel shared her experiences in old people's homes, industrial workplaces involving repetitive monotony, and with office employees. It became apparent how one can introduce people to eurythmy who, due to the nature of their work, look with some scepticism on such things as the art of movement and anthroposophy. She showed how their interest in each other, in movement and in the world can be kindled.

4. The book compiled by H. B. and E. E. von Laue, entitled "Zur Physiologie der Heileurythmie" ("The physiology of eurythmy therapy") has now been published in Russian. The book contains Rudolf Steiner's lecture "The Invisible Man in Us".

*This report is based on ideas by G. Kavtaradze and contributions by O. Rozanova, M. Romanova and M. Sazanova.*

## SOUTH AFRICA:

Christiane Wigand

(>[christianew@netactive.co.za](mailto:christianew@netactive.co.za)<)

"There is no separation between that which is shaped and formed by the human spirit and that which is shaped by the divine spirit of nature –there IS only divine consciousness." This saying by the original inhabitants of South Africa, the San and Khoi-Khoi, reveals the wisdom that was once present. The Cape Peninsula with its famous Table Mountain was the "Land of the Setting Sun", and native people paid homage on every eve of the summer solstice (21.December) with a pilgrimage to it.

Geology:

Table Mountain is one of the oldest mountains on Earth, six times older than the Himalayas in India and five times older than the Rocky Mountains in America. It's story begins 800 Million years



ago, when sandstone began to form under water. Magma rose from the Earth's core and formed hard granite. Around 300 Million years ago the mountain was still at sea level. Ice sheets flattened the layers of sandstone, which is today the Table Top. When the continents split apart, pressures built up in the Earth's crust. The layers of rock ascended, slowly becoming the one kilometer high mountain we know today. Between the Atlantic Ocean and False Bay, where all the suburbs have been built, lies drift sand, filled up by the early settlers to inhibit Table Mountain to become an island again. That is where we live and work.

Some facts:

In the wider context of Cape Town there are ten Waldorf Schools, one Christian Community, a house of the Anthroposophical Society (Sophia House), more than 20 Nursery Schools in Townships, one Waldorf Teacher and one Eurythmy Training.

Outside Hermanus (120 km east of Cape Town) there are two Camphill Communities (a farm and a school) and 35 km up the Westcoast of Cape Town is another one. On Whitsun Sunday there was a one hour workshop in Sophia House in Cape Town on the "Halleluia", led by Cobie Roelvert, a Eurythmist in Cape Town, culminating in a common doing with the world community at 1 o'clock!

Eurythmy Therapy.

In the last year the Eurythmy Therapists in the Western Cape have established to meet regularly once a term. In February we welcomed Angelika Jaschke in our midst – at a time when Elizabeth Kotzuba's cancer had progressed already thus far that she could no longer take part. (She died in Cape Town shortly before our delegates meeting.) Angelika experienced everyone of us in his/her work, and we practised together around the 7 Eurythmy Meditations. It was a very harmonious encounter.

There are quite a number (about 10) of Eurythmists interested in the Eurythmy Therapy Training, and Angelika encouraged us to prepare and to start a training course. A group of three colleagues has formed and is planning to give six block courses over three years, starting around Easter 2013.- In January there will be a week's course for anthroposophical medicine for doctors and health practitioners who are interested, because we will need this cooperation as Eurythmy Therapists. Michaela Gloeckler has offered her support and is coming out! We will be dependent on anthroposophical doctors from around the world for our Eurythmy Therapy Training and ask also here for financial help! For every support we will be grateful.

*Stephen Lloyd, Julia O'Leary,  
Christiane Wigand  
(christianew@netactive.co.za) or  
(southernrosssett@gmail.com)*

## SOUTH KOREA:

*Eun Sim Jang  
(>esjang@web.de<)*

South Korea lies between China and Japan, on the corner of Eastern Asia. The country is a peninsula, joined at one end to the northern continent, stretching out into the Pacific at the other.

The country has been separated North and South Korea since the civil war of 1950. The demilitarised zone is the political but also now the historically actual border between the two. Nevertheless, mountains in the north and East of Korea connect the whole country. Many rivers flow westward, where there are broad stretches of coast with coves and inlets and many small islands.

Seoul, South Korea's capital, is in the Western central part of Korea as a whole. A large river, the Han, flows through the middle of Seoul.

State education in the country is very much geared to the intellect. Hence Waldorf education began in 1995 with energy and enthusiasm; there are now more than a hundred Waldorf kindergartens and six Waldorf schools. There are three teacher trainings. Tutors come to us from different countries and we organise the trainings together.

More than twenty teachers have now been trained — in Germany, Britain, America, New Zealand and Canada. They work in kindergartens and schools in different regions.

Five eurythmists and three eurythmy therapists work in Waldorf schools. The anthroposophic art therapists have to struggle, but are busy in their fields of activity with much zip and verve. Perhaps we might be able to cooperate one day.

## SPAIN:

*Leonor Montes  
(>leonor.euritmia@gmail.com<)*

Spain has an area of roughly 195,000 square miles (504,645 square kilometres), and 37,190,000 inhabitants. Spain is bordered on three sides by the sea: the Atlantic Ocean, the Bay of Biscay and the Mediterranean. The Balearic Islands are in the Mediter-



anean; the Canaries in the Atlantic. Because of the vast plateau that is the Meseta Central, Spain has an average height of 2165 feet (660 metres). At around 2130 feet (650 metres) above sea level, Madrid is the highest capital city in Europe.

Although eurythmy therapists are mostly in the cities of Madrid and Barcelona, which have three or four each, others are spread out in different regions. The largest 'daughter' movement of anthroposophy in Spain is still Waldorf education, and nearly all eurythmy therapists work in schools as eurythmy teachers in addition to their therapeutic work.

An anthroposophic doctors' training course concluded in Barcelona; while in Madrid a new course begins this year. Because of the financial crisis in Spain, eurythmy therapists are not having an easy time; nevertheless we continue to work with enthusiasm, and always with good results.

## SWEDEN:

*Jane Schwab  
(>janehamptonschwab@yahoo.se<)*

Just beneath the surface, most of Sweden's ground consists of primeval solid rock i.e. 'bedrock'. The dominant rock types are granite and gneiss. The



ground contains also elements of rock such as sandstone and shale that have been formed by sediment deposits at the bottom of a primeval sea. The bedrock was eroded to a nearly flat disc or shield 600 million years ago. In northern and central Sweden, the primeval bedrock shield borders against a mountain chain, which consists of both bedrock and younger sedimentary rocks.

Movements in the earth's crust giving cracks in the bedrock, so called 'faults', have created everywhere hills and valleys. Lake Vättern with its surrounding hills resulted from such faults.

The most recent ice age, more than any other force, shaped our landscape. During many thousand years, an ice cover up to 2 km thick, moved with colossal weight and power over the surface. Mountain peaks were ground down and rounded. Cracks in the bedrock were dug out by the ice causing large U-shaped valleys. Throughout the country one can find: firstly, hillsides polished into rounded forms; secondly, long ridges of rounded stones i.e. 'eskers' left by the

retreating ice; thirdly, unsorted material from block to sand grains i.e. 'moraine', which is the most common soil type.

The melting ice placed a large part of what is now Sweden under water. Gradually the water level stabilized and the country rose slowly out of the sea and still continues to do so in many places. Thus a large part of the landscape has been sea bed and later seashore, on which the moraine was washed out by the waves.

- Eurythmy research: Annica Alvenäng MA, Elisabeth Broager Grön MA expand their research in Vidarkliniken on eurythmy therapy in the treatment of cancer, respectively exhaustion. Jane Schwab is in the last phase of the MA degree with Plymouth University on the theme of documentation
- Eurythmy therapy training: 9 students from Scandinavian countries have finished the second block of classes in August. The next step will be doing their first auscultation.
- The Swedish Eurythmy Therapy Association (LEF) elected a new president, Tiina Niskanen. Annica Alvenäng and Margareta Dahlström will continue this year supporting the council. Sidsel Enderud has become a new council member. Altogether, we are 8 council members.
- The council has concerns about the conditions for eurythmy therapists working in schools, since there is less and less possibility to work.
- **AnthroMed®** guidelines were adopted by LEF General Assembly in June without changing the statutes. The next step is to further clarify requirements necessary to apply for the label.
- Further education courses: Pirkko Ollilainen gave last May a well-attended course on anxiety, stress, fear, and fatigue. Now in October she continues.
- Vidarkliniken was accredited in June with the **AnthroMed®** label.
- The right to use Anthroposophic medicine in Sweden is still not clarified with the government; however an experienced lawyer is working on it together with a team of experts.

## SWITZERLAND:

*Gabriele Lang*  
(>[gabriele.lang@heileurythmie.ch](mailto:gabriele.lang@heileurythmie.ch)<)

Geographical and Geological Aspects

With 41,285 square kilometers a small country, Switzerland shares borders with the other European alpine countries France to the West, Austria to the East, and Italy to the South. The alpine range, 1200 Kilometers long, divides middle Europe between North and South. The Alps developed in a process stretching over 135 million years, beginning from the Jurassic to Cretaceous periods, the study of which can give deep insights into the very beginnings of the hardening process of the once very malleable surface of the earth. The first upward enfolding of the alpine range began more than 30 million years ago, creating the northern limestone and the southern dolomite structures. In a very early epoch the whole alpine area was covered by an ocean, which explains the large percentage of limestone deposits. On hiking trips one can often find manifold varieties of fossils. Mont Blanc, just across the border to France (and Italy), is with its 4810 Meters, the highest peak in Europe (excluding the Caucasus). The Dufour peak (4634 Meters) in the canton of Wallis is the highest in Switzerland itself, although the Matterhorn (4478 Meters) with its characteristic form is the most distinctive and well-known Swiss alpine landmark and the most beautiful and most often photographed mountain in the world.

The ice-ages and the subsequent melting of the glaciers approximately 10,000 years ago carved the landscape of the alpine countries with their deeply cut valleys, rivers and lakes. Large forests, meadows and pastures and the fields of the midlands predominate the landscape of present-day Switzerland.

New Developments for eurythmy therapy: In this alpine land with 4 (!) official languages, 216 eurythmy therapists of various nationalities support the developmental work of eurythmy therapy through their membership in the Swiss professional association (HEBV). In addition there are a number of active colleagues working here who are not affiliated with the HEBV. At the annual meeting in April two more colleagues joined the board of HEBV, a very fortunate development, as the work load can now be carried on four pairs of shoulders instead of just two. The restructured eurythmy therapy training in Switzerland began a new course this summer with 13 students from Tai-



wan, Georgia, Romania, Poland, France, Germany and Switzerland. This is the second course being offered on the new part-time basis. We are very fortunate here to have a great variety of further education courses every year. Most of these are conducted in German, but there are also regional working groups in the French-speaking part of the country. The Tessin, where Italian is spoken, still seems somewhat cut off from this stream of activity, perhaps through its geographical situation, located as it is on the southern side of the Alps.

The results of the questionnaire from the Eurythmy Therapy Forum show two problem areas for Switzerland. First, the cooperation between anthroposophical doctors and therapists is unsatisfactory, as too few patients receive eurythmy therapy prescribed from their physicians. Closely connected to this is the question of how eurythmy therapy can establish its proper position within the very broad field of other complementary therapies and art therapies being actively introduced throughout the country. In general, very few colleagues are able to earn their living exclusively with eurythmy therapy here; most must be very flexible and ready to travel to varying work locations.

In the meantime, several anthroposophical professions have already achieved an official status in their fields (i.e. art therapy, special education, pedagogy) and are now regulated nationally. On the other hand, health insurance companies are now becoming more and more restrictive in their payment for all our anthroposophical therapies. To meet this challenge, the HEBV is preparing a dossier to present eurythmy therapy properly as a method, which will soon be sent to all insurance companies.

In the face of all these challenges, we are very pleased that as of September 2012 every HEBV member can now receive the quality label **AnthroMed®** Eurythmy Therapy, through which she or he can show their work as belonging to and being an essential part of the anthroposophical medical movement as a whole.

## THAILAND:

*Hermann Wessels*  
(>[h.l.wessels@gmail.com](mailto:h.l.wessels@gmail.com)<)

This year no big flood and no riots. But actually nothing has changed. It's only a question of time when in one or the other way the difficulties come back.....

Therapeutic eurythmy work is going on; I even got in touch with an interested doctor.



**UKRAINE:**

Tatjana Gontscharenko  
(> [rb1968 \(at\) mail.ru](mailto:rb1968(at)mail.ru)<)

From Ukraine: to our great joy, the first part of the planned three-year eurythmy therapy training took place in Kiev on the 10th of September. All sixteen students had completed their basic eurythmy training in Kiev over the last ten years. There was a lot of preparation and the result was very beautiful.



The following eurythmy therapists are currently working in Ukraine:

- Zoya Mazur in Kiev — eurythmy therapist in a therapy centre and the Waldorf school;
- Tatyana Goncharenko in Dnipropetrovsk — doctor and eurythmy therapist at the Waldorf school, with her main focus on children with challenging behaviours, attention deficit hyperactivity disorder and all kinds of partial achievement deficits;
- Julia Jiltzova in Odessa: in private practice and at a therapy centre.

Geographically, Ukraine is a European country between Poland, Hungary, Rumania and Russia. In the West of the country are the Carpathian Mountains with their limestone formations, running from the North-West to the South-East. In the centre we stand on granite and iron, and there is coal mining. In the South, the Crimean peninsula pushes out into the Black Sea.

All three cities where eurythmy therapy has found a home lie on the Dnieper, Ukraine's greatest river: Kiev in the North; Dnipropetrovsk in the centre; and Odessa in the South — the city on the sea.

**USA:**

Maria Ebersole  
(> [mwalkerebersole@hotmail.com](mailto:mwalkerebersole@hotmail.com)<)

Over the past year there has been a great deal of activity to strengthen our profession in North America. ATHENA has been stable and consistently active for several years. Our membership is currently 56 full members, we have many associate members and school members as well. We are fortunate to have support, not only from the Rudolf Steiner Charitable Trust, but also from the WEF/Glenmede Trust and the Camphill Foundation. An appeal has gone out to specific donors to support a 'Children/families in need Fund' for therapeutic eurythmy.



In August the step was taken to apply for the **AnthroMed**® trademark for our members, an expression of the growing consciousness of the global dimensions of anthroposophic medicine, and our role as representatives within it. The aspect of agreeing on goals for ourselves regarding professional development has been inspiring: Mutual support thrives as colleagues meet in a growing number of local study groups in the different geographic regions, larger workshops and offerings through ATHENA or related organizations are offered consistently and business or tax seminars can also be pursued. Our wish is that this step will strengthen the quality of each practitioner and the therapeutic eurythmy overall, thereby ensuring its place among the healing arts and the anthroposophical medical work worldwide.

This August, the second year of the Eu-

rythmy Training for Dental Anomalies was attended by 20 eurythmists. It was an inspiring week full of rich collegial working together. The addition of dentist Claus Haupt as presenter this year broadened the scope of content. His detailed lectures on the development of the teeth and the relationship to the formative forces deepened the work with specific eurythmy exercises brought by Mareike Kaiser. This year included a few actual case studies of children in the community so we could work with a living picture of an anomaly. We observed and studied tooth impression molds to learn the characteristics of various bite situations. One participant presented her case studies from the previous school year as one step toward receiving official certification in dental eurythmy from Dornach. Other participants will be preparing presentations during the coming year.

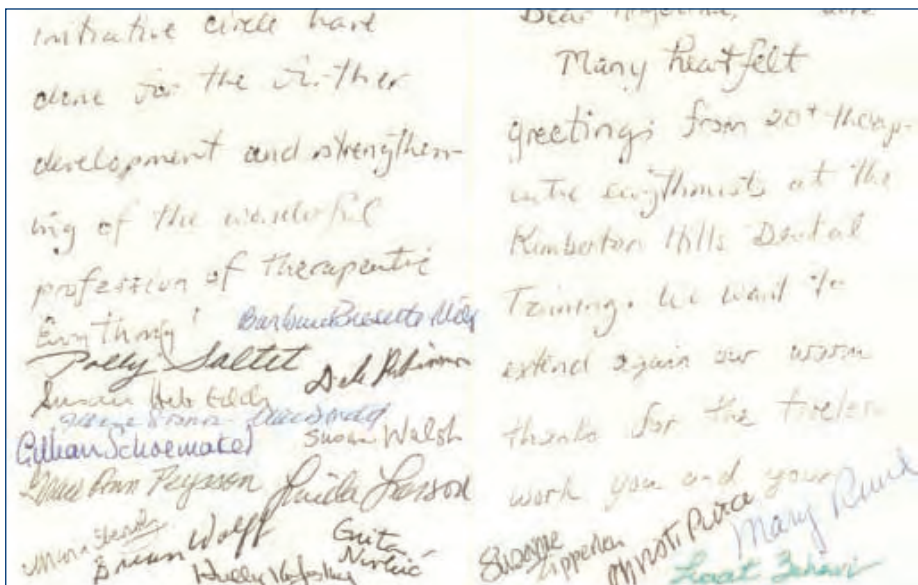
In collaboration with the Anthroposophic physicians and therapists, ATHENA also organized a lecture/demonstration in Spring Valley on Dental Therapeutic Eurythmy, which was attended by over 50 people.

We continue to strengthen our connection to and support of the Therapeutic Eurythmy Training in North America TETNA. Placement places for the current students are being worked on.

The situation remains that it is very challenging to make a living solely as a therapeutic eurythmy practitioner. There are currently only a few members who manage this. They live in areas where there are multiple anthroposophic institutions and established physicians who can refer patients. Others must rely on a combination of jobs in different fields. The question of health insurance is a challenge for those that have several part-time positions.

This year two new ATHENA Board members have joined, who live and work on the west coast. We see this as an opportunity to span this large continent with consciousness and mutual support.

ATHENA-Website:  
[www.therapeuticeurythmy.org](http://www.therapeuticeurythmy.org)



## FIELDS OF PRACTICE

### Preamble



In each of the six or seven fields of practice, subject-specific collaboration will become increasingly important in the coming years. New illnesses are developing at all ages and stages of life. For questions of eurythmy therapy to go deeper requires sharing between professional colleagues. The research projects which are beginning will succeed only if practising eurythmy therapists bring their experience into them.

I officially began working as joint co-ordinator for the eurythmy therapy fields of practice in May 2012. Looking back, I can see the embryonic beginnings of this work in the Delegates Conference at the World Eurythmy Therapy Conference in 2008, when the representatives for the fields of practice from Germany, in full sight of everyone, took their place on the great stage among those from different countries. Everyone present could see in which countries and fields of eurythmy therapy we are actually working with patients — whether eurythmy therapy is brought to a child of kindergarten age or a school pupil; whether patients are treated with eurythmy therapy in a clinic or in private practice; or whether one is working in social therapy or with elderly people. Work in the individual fields of practice is so varied and differentiated that working together as colleagues has proved very fruitful. This has been the experience over several years, for instance at the big conferences in Munich for eurythmy in schools.

This way of working together should also be increasingly possible between colleagues from different countries. At the seminars for eurythmy therapy for the teeth in countries outside Germany, it seemed obvious that there should always be time for questions on the work of the Eurythmy Therapy Forum. From these it became apparent that in the meantime, and very gratifyingly, forty-five colleagues from ten countries had put themselves forward as representative of fields of practice.

In order to realise this international work in the fields of practice, the representative of the fields of practice must know the names of their colleagues working in other countries in the different fields of practice. How else other than by means of a questionnaire could such a survey be carried out? Thus the first questionnaire was developed at the end of May 2012, and sent to 1300 colleagues. This first part of the questionnaire cannot be anonymous, of course.

My concern was that, if such a questionnaire had to be filled out, then the whole exercise should be worthwhile. In this way the further questions came about which would be relevant for the sharing work in the fields of practice. As this part posed mainly personal questions, it would understandably have been better to have had it without people's names being asked for. As a novice in this field, I apologise for my beginner's mistake.

So far 310 questionnaires have been returned from sixteen countries, for which I would like to thank you warmly. (More than 20%, but not yet a quarter!) I hope many more will still come in. I have them at home, either as hard copies or in digital format; they are kept confidential. I would like to say something about the last two questions, as many people are concerned, or have wishes, concerning the attainment or maintenance of high quality in eurythmy therapy. Many ask

for better collaboration with anthroposophic doctors, or for higher payments from the health insurance companies. (90 colleagues — out of the 310 responders — are able to live from their work with eurythmy therapy.) Many ask about public recognition. This brings up the question once more: is it down to us, because of our lack of courage perhaps, that we do not have the confidence to come forward in public life; or do we not know how to (because of lack of know-how); or do we not feel prepared through our training?

The next steps will be: to share the email addresses of the representatives of the fields of practice with each other; sharing the names of colleagues with the representatives of the fields of practice in their own country; further evaluation of the questionnaires; passing on the resulting suggestions and working on them.

*Mareike Kaiser  
Coordination fields of practice  
in the Eurythmy Therapy Forum of the Medical Section  
at the Goetheanum, Dornach,  
Switzerland  
praxisfelder@forumhe-medsektion.net*

### Early Years



2012 was characterised by international meetings. At Easter the World Kindergarten and Teachers' Conference took place. The theme was „The Path of the I into Life — End of the Line or Development toward Freedom?“ and participants worked hard to get to grips with it in a variety of approaches.

Those in the conversation working group on eurythmy therapy in the first seven years worked on the question as to how one could come to a deeper understanding of human developmental forces though work on the sounds, in order to grasp the variegated riddle of developmental disorder in its real depths. There was also a study on developmental disorders of speech in the Netherlands. It was particularly delightful to work with the colleagues from there.

We were fortunate to have been joined by Michaela Gloeckler in Frankfurt for our annual professional development course

for eurythmy therapists and doctors. She spoke about the challenges in the 21st century for a medicine that has its source in the mysteries and on its related impulse of eurythmy therapy. The theme was „inner and outer imitation. How can the universal, cosmic content of the sound be so enlivened that it can become effective in building up the body?“ We worked on it from the aspect of human studies, and also deepened the theme in practical work groups.

In the context of professional development, we looked at the methodology and content of the corrective therapy of the Institute for Neuro-Physiological Psychology. This is based on the materialistic basis of nineteenth century neurophysiology. It is spreading increasingly in the pre-school and lower school settings of our Waldorf educational movement. How can we make the transformation of consciousness that would take us from corrective to developmental therapy?

We were glad to be able to begin a working relationship with the training for kindergarten and school doctors.

There is real concern about the increasing trend toward bringing education under state control. This has meant a steadily rising need for therapy in the younger age groups. There is real concern that the fundamental forces of human development may no longer be able to lead over into age-appropriate forming of abilities.

*Elke Neukirch*

## Eurythmy Therapy in Schools



Last year we were engaged with seeking to embed eurythmy therapy more deeply in Waldorf schools. It is still not a matter of course that schools engage a eurythmy therapist. It is the same with learning support teachers. One can see that the area of learning support, of which the supportive measures of eurythmy therapy are also a part, is offered less and less by schools, as funding for the whole area of learning support can no longer be guaranteed. Alternatives may be offered, some of which undercut eurythmy therapy and the anthroposophical approach to learning support, as free competition is increasingly the aim. Action is needed here! However there are also schools in which eurythmy therapy could gain more standing and recognition.

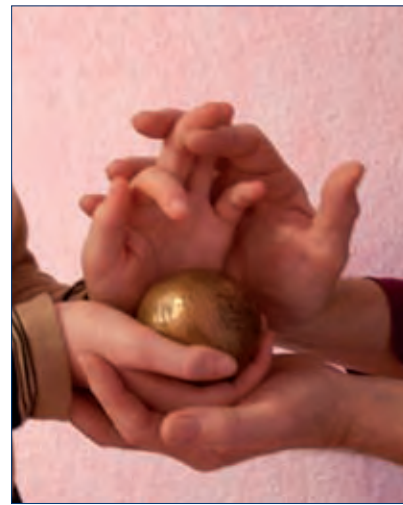
We meet three times a year in regional meetings, where we speak about the current situation and look for approaches to finding solutions. These meetings also involve continuing professional development, and for sharing professional matters.

A further conference on eurythmy therapy in schools took place in Munich in March 2012. There were around a hundred participants (eurythmy therapists and some school doctors). We are attracting increasing numbers from other countries.

The dialogue among eurythmy therapists working in schools is generally collaborative and intense.

*Kristine Rohde*

## Curative Education and Social Therapy



In special schools, „inclusion“ is currently an important issue requiring work and attention. The ideal of inclusion is to create conditions enabling every child to develop individually according to his capacities. The goal is a „school for all“ – as already embodied in the Waldorf School.

Waldorf special schools are currently required to revise their own model and engage with methods in-

volving individually tailored remedial support for children of the most varied kinds. Increased emphasis on therapy is also required, so that we can do our best for a growing number of traumatized children and adolescents.

In the field of social therapy, too, there is currently an emphasis on helping residents to manage their own lives. Increasing significance is now given to creating individually adapted forms of independent living in „sheltered housing“, along with supervision and support for couples.

Ultimately, realization of inclusion is a task for the whole of society, and an issue that affects not only people with „learning difficulties“ but also old people, those from a „migrant background“ and others. How can all such people be included in the social fabric?

At the same time, care of children and adults with psychiatric conditions is increasingly becoming a challenge for institutions and schools – and therefore increasingly figures in further training courses.

This year, the 6th professional conference for eurythmy therapists and physicians took place at the Sonnenhof in Arlesheim on the theme of „Psychiatric illnesses in curative education and social therapy“. The two preceding conferences had considered psychosis, neurosis and depressive illnesses. This year we tried to deepen our insight into those suffering from trauma and borderline personality disorder. Herr Walter Dahlhaus introduced participants to the theme in two lectures, the tenor



of which allowed us to gain an initial understanding of patients' mental distress.

In a very fine and subtle way, founded on her great experience, Frau Ursula Langerhorst practised with us the basic eurythmy therapy exercises in a form suitable for these patients. We gained a direct sense of the blessing that eurythmy therapy can give here.

In tone eurythmy, Frau Roswitha Schumm enlivened and refreshed us. We worked on diverse qualities of rhythm in form and gesture.

On the final evening, Herr Dr. Ingo gave us a very lively first insight into the cosmological aspects of organ diseases and into the future importance of these aspects for understanding human health and illness.

The days we spent together as participants this year were imbued with a very harmonious, calm and insightful mood. This was a very accurate reflection of what is needed for people who bear deep wounds in their soul and who in future will increasingly need our help.

*Carola Adam-Roettig*

### Private Practice



What are the implications today of placing eurythmy therapy in the world through private practice?

Whoever has completed the long journey from their basic training in eurythmy through to qualification as a eurythmy therapist will be confronted sooner or later by the question: how do I want to practise what I have learnt, what has become my profession? While the familiar possibilities of working with eurythmy therapy in Waldorf schools, curative schools and anthroposophic clinics, all of which offer a connection to the community of an organisation, the eurythmy therapist who chooses work in private practice takes courageous steps towards an unknown and unpredictable future.

Generally they are quite alone. Once they have found a space to work in, they seek to make contact with the surrounding doctors and medical practices, which often turns out to be quite a struggle. Then there is the actual point of the whole matter: the patients. Where are they to come from; who refers them; how are they to know that there is a eurythmy therapist there?

It is an arduous beginning for a eurythmy therapist in private practice — and yet we all manage it again and again. Courage and enthusiasm for the profession, certainty of the world's need for eurythmy therapy, particularly in our time now, encourages us to take a chance and surely calls helping forces to our side.

Wherever any of us may find ourselves in our work in private practice, with grateful patients and helpful doctors, we are united by the knowledge that this therapy belongs in the world today more than ever. Yes of course, there are many good therapies in the world today, but eurythmy therapy is and will remain something special; we need really to be aware of this. I wish you all, dear eurythmy therapy colleagues in private practice much joy, the grace of spiritual presence of mind during the therapy and — why not — much success!

*Marlene Purucker*

### Eurythmy Therapy in Clinics



In 2012, in Havelhöhe on the outskirts of Berlin, a meeting of eurythmy therapists working in clinics took place — the first for ten years.

The day filled with encounters, sharing experiences and insights, and encouraging each other to be mindful of the essence of eurythmy therapy — not to water it down in the daily round of life in a clinic.

We also looked at the question of working with eurythmy therapy in groups,

requested more and more frequently by our managers. For which clinical pictures does it make sense; for which does it not? In any case, this should be clearly distinguished from eurythmy therapy.

We shall meet again on 16th February 2013 at Herdecke. Please let me know if you wish to come.

This time the only other country represented was Switzerland — we would like to link up with colleagues from further afield!!!

With warm wishes from rod to rod,

*Eva Maas-Küstermann*

## Eurythmy Therapy with Elderly People



One can be amazed at the importance ascribed to this phase of life, when one looks at it from the point of view of spiritual science.

In a public talk in Berlin, given on 28th February 1907, Rudolf Steiner said: „When a human being attains an advanced age, what they develop in their inner life becomes able in the future to create the body and its organs; later on, it will also become co-active in the cosmos.“

For the past ten years I have been offering „sitting eurythmy“ in a centre for elderly people in Dortmund, in Germany. The participants are aged between 75 and 95.

The main aim is to move and permeate eurythmically what can still move — beautifully and with joy. Again and again that leads to remarks such as „that’s beautiful“, „that does me good“, „that’s refreshing“, „that warms me up“, „that’s loosens me up“, „the sharp pains I was having became milder“, „my headache has gone“, „I’m not feeling dizzy any more“, and so on...

We gear the movement to the season of the year and always begin with the week’s Soul Calendar verse. We take individual sounds from the verse, which help us connect with the content.

In the rest of the session we work on hygienic exercises and basic elements of eurythmy. At the same time we work on engaging the soul through imagining and feeling in doing; we also seek to activate the breathing, the organs, the back and the limbs. It is particularly important to give the feet and hands a good working-through. Taking up and developing suggestions from the group brings joy into our doing.

With our hands and arms we paint circles, ‚I‘-lines, triangles, spirals, lemniscates and five-pointed stars into the light-air; then carefully inscribe them into the aura of the earth with our feet. In this work with elderly people, we apply in a concentrated form the whole spectrum of hygienic eurythmy’s potential for healing.

Part of the meaning of growing old is that the spiritual is able to arise from the body, which is breaking down and decaying, and become a „co-worker in the cosmos“.

*Helga Loth*

## Eurythmy Therapy in Catastrophe and Conflict Situations

During the last year eurythmy therapy came to Libya. Even before schools had reopened after the civil war, we were able to approach teachers and mixed age-group project groups there with various artistic proposals.

Our arts therapist had to take into account the ban on images in Islam, which is construed in various ways in the different schools and taken either more or less seriously. Eurythmy and/or eurythmy therapy were offered in professional development courses for teachers and in the classroom. People suffering from sleep disorders mentioned the beneficial effect again and again.

Even now, after the end of Libya’s months-long civil war, there is still shooting at night, and this frequently reawakens the horrors that were experienced then. There is great joy, almost euphoria, at the successful liberation after 42 years of dictatorship. Nevertheless the children and their families have gone through hard times and anxiety is written in the faces of many of them.

stART international has been sending a team of therapists and teachers to Libya every month since October 2011, with the task of stabilising traumatised children and young people there. The Libyan Education Ministry’s great interest and goodwill have led to broadly conceived professional development courses for teachers, which have been received with open ears and hearts. Hundreds of teachers have implemented 5–10 minutes of movement exercises at the beginning of each lesson as they realise it makes the children more receptive. To be there when a nation transforms its education system is such a joy!

stART international was active again in Haiti this year where, nearly three years after the catastrophic earthquake, much help is still being asked for.



You are welcome to find out more on our website:

<http://start-international.org/index.php?id=3&lang=en>

As our work is much in demand, our organisation is constantly growing and we are looking for qualified co-workers. If you could imagine working with us and are a teacher or therapist with an anthroposophic background; if you have professional and life experience, and feel motivated by interdisciplinary and inter-cultural work — then I look forward to hearing from you. [m.faltin@stART-international.org](mailto:m.faltin@stART-international.org)

We have been able to find new colleagues from the different countries of the earth through the International Teachers’ and Kindergarten Conference in Dornach; this has made our teams more international, which we are very happy about.

*Myrtha Faltin*

## .... that's life

### Worldwide Hallelujah for 100 Years of Eurythmy — Whitsun, 27th May 2012

- ✿ I did Hallelujah alone at the station, at the end of one of the platforms. This was a special experience for me, as I had to wait for my departure time and had the opportunity to call up before my inner eye everyone who had supported me in any way in my intention of becoming a eurythmy therapist. After I had done Hallelujah, a flood of children's faces came to my inner eye, quite unexpected and unsummoned. They were all children with whom I had done eurythmy or eurythmy therapy. Afterward, deep joy and gratitude filled me. It was a moment in which I felt a moving communality. (Miejef Callens)
- ✿ Two colleagues in the clinic took up this initiative. In the week before Whitsun they offered a group practice session for Hallelujah, at 7.20am for co-workers and at 6.00pm for patients. The number of people taking part varied and, as the moment approached and our excitement grew, we wondered how many would be there on Whit Sunday at 1.00pm... There were actually more than sixty people who came to move together in a moving Whitsun mood. It was a great joy for everyone! (Raute Hilgard)
- ✿ Aban Bana and I were at our Waldorf teachers' seminar at Khandala in India, and we did Hallelujah with around eighty students and teachers! (Dilnawaz Bana)
- ✿ In the Andreas Hall at Vidaråsen, a social therapy community in Norway, with twelve people. (Simone Wantz)
- ✿ At the clinic, with an elderly Waldorf school craft teacher, who died in the summer. (Heiða Olafsdottir)
- ✿ Last May 27, Walter and I did the Hallelujah just outside the St. Anna Kapelle near Verscio. We did it so: Walter and I were 90 degrees apart „on a square“ and we moved 4 times to the next point so that we could do the Hallelujah facing North, South, East, West. (Grace Zozobrado)
- ✿ We did Hallelujah at Whitsun in the Anthroposophical Society with members and eurythmists. Other members did Hallelujah at home at the same time. (Nino Waschakidse)
- ✿ In Hungary, fourteen eurythmists and five musicians did Hallelujah on the stage together during a dress rehearsal for a eurythmy performance. (Maria Scheily)
- ✿ Eighty eurythmy therapists and doctors did Hallelujah together on Whit Sunday at the Whitsun Conference of the German Professional Association in Leipzig — movingly aware of the same deed happening around the world. (Angelika Jaschke)
- ✿ Alone at home, in the knowledge that there are many of us doing it at the same time. (Mareike Kaiser)
- ✿ A small group did Hallelujah in the centre of Helsinki. Another group did Hallelujah in a park with a view over the sea. Many others did it at home, or wherever they happened to be, in the forest for instance. (Anne-Marie Somero)
- ✿ Around Sweden there were groups and people who in families or with friends or alone took part in the event. 25 eurythmists and friends of eurythmy gathered together 27. May at Ytterjärna Culture Center (former Rudolf Steiner Seminar) for doing Hallelujah, in sunshine outside in the garden. (Tiina Niskanen)

- ✿ I did Hallelujah alone at the school in Seoul, South Korea, while preparing for teaching. (Eun Sim Chan)
- ✿ Cobie Roelvert, a eurythmist, facilitated an hour-long workshop on Hallelujah in the Anthroposophical Society's Sophia House in Cape Town, South Africa, which culminated in our doing Hallelujah at 1.00pm in a communal deed with the world community! (Christiane Wigand)
- ✿ At midday in Rudolf Steiner House, London, on the stage recommended by Rudolf Steiner for eurythmy, nineteen eurythmists (including seven eurythmy therapists), four speakers, a musician and a lighting designer, there to rehearse Cosmic Verse for Eurythmy (later shown at the Centenary Summer Eurythmy Festival at the Goetheanum), shared in a festive Whitsun celebration of Hallelujah. (David Macgregor)

### Conference in Tbilisi, Georgia, on the 100th Anniversary of Eurythmy „Eurythmy — an Art of the Future“

This year, at the annual Spring conference of the Anthroposophical Society in Georgia, we celebrated the 100th anniversary of eurythmy. This year's conference took place at the Waldorf school in Tbilisi. Many participants came from the Anthroposophical Society and from the school — parents, pupils, teachers — and from other anthroposophic organisations. It became a big community festival.

In her opening talk on the birth and development of eurythmy, Nino Waschakidse of Tbilisi spoke of all the dead friends whose love for eurythmy has made possible the first beginnings of this art in Georgia. There followed a demonstration by seven eurythmists of the first indications for eurythmy. It was possible to experience the lofty spiritual background of eurythmy, and this created a foundation for the whole conference. The following day was devoted to eurythmy in schools. In the morning, pupils from the Waldorf school gave a performance and Nunu Gobedshischwili gave a lecture on the educational aspect of eurythmy. In the afternoon, participants were offered various working and doing sessions on educational, social, hygienic and therapeutic aspects of eurythmy.

Then teacher training students showed some of their work with eurythmy. In conclusion there followed a plenum conversation on the tasks and aims of eurythmy in schools; participants — not only members of the Anthroposophical Society and parents but teachers also — experienced the conversation as important and something that would give impulses for the future.

The day was rounded off with an artistic performance by eurythmists working in Tbilisi: Medea Burnadse, Nunu Gobedshischwili, Miriam Dutschidse, Nino Waschakidse, Barbara Weber, Maia Karanadse, Lela Prangulaschwili as well as Boudewjin Fehres, a guest from the Netherlands.

In the breaks, refreshments in the form of a delicious buffet were provided in the playground by Class 11 students, and the participants were able to engage in lively conversations on their impressions of the conference.

On the Sunday, Boudewjin Fehres from The Hague gave a concluding talk on the future tasks of eurythmy. The conference closed with eurythmy. A peaceful and festive mood informed the participants, which made it possible for us to experience the being of eurythmy in and among us.

*Nino Waschakidse  
Council member of the Anthroposophical Society in Georgia  
Eurythmy therapist at the „Therapy House“*

## An approach to the Eurythmy Meditation "Steadfast I stand..."

(prepared for the delegates' meeting September 2012)

- Moving a circle with 12 steps, right way around, left way around; adding the circle with the arms in the frontal sphere.
- Moving a pentagon, right way around, left way around, 2 steps from place to place; arms find the points of the pentagon.
- Moving a pentagram, using only the right arm when starting to the right, only the left arm when starting to the left, 3 steps from place to place. (Suddenly one moves out of the eternal realm from before and starts breathing with every movement...)
- Move 3 steps to the "left foot": "Steadfast I'll stand in the world"  
2 steps to the "right foot": "With certainty I'll tread the path of life"  
3 steps to the "left arm" : "Love I'll cherish in the depth of my being"  
3 steps to the "right arm": "Hope shall be in all my deeds"  
2 steps to "the head": "Confidence I'll impress into my thinking"  
"These five lead me to my goal" - jump into the five-pointed star  
"These five gave me my being" - jump into closed uprightness with "reverence".  
*(One combines the astral sheath -pentagon- with the etheric -pentagram)*
- Standing: Step into your left foot, into your right foot, open the left arm and look into the open palm, the right arm and look into the open palm, both hands onto the forehead, jump into the five-pointed star, jump into "U" (legs) with "reverence"(arms).  
With the verse.  
*(One arrives at the physical body – out of the higher sheaths)*
- Add colours into every limb:  
left foot – violet blue,  
right foot – larkspur blue,  
left arm – dandelion yellow,  
right arm – seed green,  
head – peachblossom pink  
*(The colours add transparency from one's own soul activity)*
- From the head place of the pentagram move on the circle starting to the right until the place of the "left foot" - "Steadfastness" - back to the "head" with 3 steps.  
From the head place of the pentagram move on the circle to the left until the place of the "right foot" - "Certainty" - back to the head with 3 steps.  
From the head place of the pentagram move on the circle to the right until the place of the "left arm" - "Love" - back to the head with 2 steps.  
From the head place of the pentagram move on the circle to the left until the place of the "right arm" - "Hope" - back to the head with 2 steps  
Standing, concentrating on the space behind. "Confidence"  
Move straight forward, arms in the frontal sphere  
Move straight backwards, arms in "reverence".

*(This is a replica of the silent form before the Foundation Stone Meditation !)*

### Indication and working:

"The pentagram restores the form of the etheric body." R.St.

In this exercise the pentagram is combined with the pentagon, harmonizing the astral with the etheric body.

One does not move with the sentence, but has arrived and rests during the sentence, connecting oneself to eternal virtues. That has an uplifting effect.

The indication for this exercise is to do it with children turning 10 years old, a time, when the "Rubicon" needs to be crossed, a time of greater inner loneliness and separation from the world around. Rudolf Steiner gave this exercise in his "Guidance for esoteric schooling", as no. 12. At first he gave only the nouns "Steadfastness, Certainty..." to be contemplated with each limb, later the whole sentence was to be practised with the movements.

In my sequence here there is the path from the circumference to the centre and from the centre back into the circumference. One can use it thus depending on the patient and the specific need.

*Christiane Wigand  
Hermanus, South Africa  
christianew@netactive.co.za*

## South African Journey.....

It is good that my family is spread over almost all the continents in the world. My sister-in-law, for instance, lives in a suburb in the hilly vineyards round Cape Town; she provided a place for me to stay on my arrival to begin working with my colleagues in South Africa.

We began our work together, in the home of the Anthroposophical Society in Cape Town, with a weekend workshop in which six of the seven eurythmy therapists worked on the eurythmy meditations. The work together was intensive and we were able to get to know each other through our concern for eurythmy therapy, and share and exchange.



We considered the worldwide tasks of anthroposophic medicine, and eurythmy therapy in particular, from the perspective of South Africa.

In this way I got a good impression of the concerns and needs of this continent so far from Europe, as well as some of its different national, cultural and climatic features.

Elizabeth Kotzuba — the seventh in the group — was already seriously ill at that time. I was able to visit her however. She was a mainstay of the eurythmy therapy work in Cape Town. She died on 9th September 2012 and, from the other side of the threshold, will surely lend her support to new eurythmy therapy impulses.

For the following two weeks we had arranged that I would visit our colleagues in their different places of work in a gesture of intervention, where we would work at questions and share thoughts in relation to actual patients.

I visited many wonderful Waldorf schools with coloured, black and white children; kindergartens; a Camphill village offering social therapy (Hermanus); the large Christian Community; the teacher training seminar; and the Kairos eurythmy school, carried by Silke Sponheuer.



I had to cover long stretches between places, and our colleagues took it in turns to look after me, which they always did very kindly; they made sure that I managed to form an impression of their land of many extremes.

I saw (in passing) vast townships of many kinds. A sea of low, corrugated iron huts, crowded together, with dusty paths between them. My first impressions were bicycles, goats, chickens — and endless numbers of black small children. It is amazing suddenly to see, right next to a barbed-wire fence, a beautifully designed Waldorf school exclusively for the black children of the township. Eurythmy is a real gift to these children who take such an uninhibited delight in movement. They love eurythmy lessons and the element of eurythmy that educates the body is directly and immediately apparent.

Waldorf kindergartens are also increasingly being founded in the townships with black trained kindergarten teachers.

I had the impression that Waldorf education is made for South Africa. It meets a real need there — and manages to meet that need in harmony with local culture.

The original request for me to visit was in connection with the impulse to establish a eurythmy therapy training in South Africa — to answer the demand from the mainly young graduates of the eurythmy school. We therefore had many meetings with Julia O'Leary, Stephen Lloyd and Christiane Wigand. Titia Jonkmans had already spent some years preparing the ground for this. It was now a matter of elaborating it in practice and forming the content of the curriculum. It soon became clear that there are not that many anthroposophic doctors in South Africa. A request for the International Postgraduate Medical Training to hold a course in South Africa was therefore made to Michaela Glöckler, and it will take place in January 2013. This will enable an anthroposophic medical impulse to take its place among naturopaths, complementary doctors, homeopaths and therapists — which will stand the budding eurythmy therapy training in good stead.

On the last weekend, I was taken to the Little Karoo (an inland semi-desert/steppe), where I could get up close and personal with giraffes, rhinos, apes, zebras and gazelles, and experience the unbelievable heat, the hot midday storms and breath-taking starry skies below the Southern Cross — all this was my gift to take home with me.



Dear Colleagues in South Africa — I thank you from the bottom of my heart for your openness; for the good conversations; for helping me in my endeavour to understand this far-off land; for bearing with my often tenacious questioning; and for how we together created, in what was often hard work, a forming impulse for our common eurythmy therapy task in the unique situation of your country.

In solidarity — your Angelika

## International Further Training 2013

More information on [www.forumHE-medsektion.net](http://www.forumHE-medsektion.net)

Topic	Date	Place	Contact
<b>11th further training in the field of practice eurythmy therapy in the early years</b> „The traumatized child - wounds of the soul and the sources of healing processes“	Nov. 16 - 17	Frankfurt/ Main, DE	Elke Neukirch elke.neukirch@googlemail.com
<b>11th further training in the field of practice eurythmy therapy in schools</b> „The polarity of blood and nerves in children's development“	March 1 - 3	Munich, DE	Kristine Rohde kristine.rohde@arcor.de
<b>7th further training in the field of practice curative education and social therapy</b>	October 2 - 5	Arlesheim, CH	Carola Adam-Roettig adamroettig@gmx.de
<b>Further training in the field of practice elderly people:</b> Exchange among colleagues	February 23	Berlin, DE	Thilo Riebold t.riebold@freenet.de
<b>Further training: Eurythmy therapy for the eyes</b> „Work on the 3rd part of the Eurythmy Therapy Course taking ophthalmology into particular consideration“	February 8 - 9	Eurythmeum Aesch, CH	Michaela Trefzer michaela.trefzer@gmx.de
<b>Further training: Eurythmy therapy for the teeth</b> Course 7 Course 1 Course 6 Course 2 Course 5 / Course 6 Course 7 Course 2 / Course 3 / Course 4 Course 2 / Course 3 / Course 4	January 11 - 13 February 1 - 3 March 1 - 3 April 19 - 21 June 2 - 8 June 14 - 16 July 22 - 28 Oct. 28 - Nov. 2	Aesch, CH Aesch, CH Linz, AT Aesch, CH Moscow, RU Milan, IT Flensburg, DE Hamborn, DE	Mareike Kaiser mareike.kaiser@gmx.at
<b>Further training: tone eurythmy therapy</b>	Jun. 30 - July 3 Jul. 29 - August 2	Aesch, CH	Annemarie Bäschlin Tel. 0041 33 681 16 18
<b>Annual conference of the German Professional Association (BVHE®)</b>	May 17 – 20	Stuttgart, DE	Sekretariat@bvhe.de
<b>Austrian Professional Association „Documentation in the field of eurythmy therapy“</b> (Anja Meierhans)	January 25 - 26	Vienna, AT	Maya Kuesgen maya.kuesgen@therapeutikum-linz.at
<b>Swiss Professional Association (HEBV): Lung diseases with Dr. med. Olaf Koob and Pirkko Ollilainen, eurythmy therapist</b>	April 20 - 21	Arlesheim, CH	Gabriele Lang info@heileurythmie.ch
<b>Swedish Professional Association: Further training with Pirkko Ollilainen</b> on „Anxiety, stress, exhaustion“	October	Järna, SE	Tiina Niskanen tniskanen@yahoo.com
<b>Further training in summer: with Margrit Hitsch</b> „The O and its ambit“	July 4- 6	Dornach, CH	Roland Tüscher roland.tuescher@medsektion-goetheanum.ch
<b>Further training at the Alanus University:</b> Eurythmy in schools (Sebastian Junghans) Tone eurythmy Symposium II Tone eurythmy therapy (Shaina Stoehr)	January 7 - 11 March 8 - 9 March 11 - 15	Alfter, DE	Ephraim Krause, Tel. 0049- (0)2222- 9321-1274 ephrain.krause@alanus.edu

**Whitsun Conference 2013 in Dornach: „The enlightening of the heart“**

Meeting within the International Conference for Young Doctors for all antroposophic therapy methods: Future impulses for eurythmy therapy. Conference for young people in education and at the beginning of their working career  
May 18 - 25, 2013, Goetheanum, Dornach/Switzerland  
Contact: Swantje Harlan swantje\_harlan@web.de Registration: tagungen@listen.jungmedizinerforum.org  
[www.enlightening-the-heart.org](http://www.enlightening-the-heart.org)

## ... last but not least

### Closing date and distribution of the newsletter:

Deadline for all international reports, training and practice field reports for Newsletter No 11 is

23rd September 2013.

- General reports on **eurythmy therapy/Eurythmy Therapy Forum** send to Angelika Jaschke: [ajaschke@forumHE-medsektion.net](mailto:ajaschke@forumHE-medsektion.net)
- Reports of the **country representatives** send to Monika Margesin: [newsletter@forumHE-medsektion.net](mailto:newsletter@forumHE-medsektion.net)
- Reports from the **fields of practice** send to Mareike Kaiser: [praxisfelder@forumHE-medsektion.net](mailto:praxisfelder@forumHE-medsektion.net)
- Reports from the **professional associations** send to Monika Eichele: [berufsverbaende@forumHE-medsektion.net](mailto:berufsverbaende@forumHE-medsektion.net)
- Reports from **training** send to Ursula Browning: [ausbildung@forumHE-medsektion.net](mailto:ausbildung@forumHE-medsektion.net)
- Reports from **research and documentation** send to Anja Meierhans: [dokumentation@forumHE-medsektion.net](mailto:dokumentation@forumHE-medsektion.net)
- Reports from the field of **publicity work** send to Regina Delattre: [pr@forumHE-medsektion.net](mailto:pr@forumHE-medsektion.net)

The editors ask when possible that all contributions are submitted in German and English.

**Distribution:** The distribution of the newsletter to all eurythmy therapists in each country lies within the responsibility of the country representatives.

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**Reference: 1258 + country + year.**

We would like to express our heartfelt thank to Wala for their engagement in designing the advertising space on the back. This enabled us to print the latest newsletter in German and English.

### Note:

This years's photos were taken by Charlotte Fischer, Irmgard Sodenkamp. Some were sent to us by other people and publishing licences were purchased from databases for the rest of them.

### CONTACT:

Goetheanum  
School of Spiritual Science  
Medical Section  
Post Box  
CH-4143 Dornach / Switzerland

Website:  
[www.forumHE-medsektion.net](http://www.forumHE-medsektion.net)

E-mail:  
[ajaschke@forumHE-medsektion.net](mailto:ajaschke@forumHE-medsektion.net)  
[info@forumHE-medsektion.net](mailto:info@forumHE-medsektion.net)

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Editors:  
Angelika Jaschke  
Monika Margesin

Layout:  
Regina Delattre

Proofreading:  
Monika Eichele  
Irmgard Sodenkamp  
John Browning  
Regina Delattre

Translations:  
David Macgregor  
Regina Delattre

# WHAT I DO IS UNIQUE

Sibylle Strofus, WALA gardener

As unique as  
WALA Medicines.

It all starts with healthy  
medicinal herbs – and  
results in natural, reliable  
and effective medicines.

