



Whitepaper on Anthroposophic Social Therapy

The following principles were formulated in 2017 by the ‘Social Therapy Working Group’, a committee of the Anthroposophic Council for Inclusive Social Development at the Goetheanum. They are intended to serve both as a stimulus and as a means of practical support to anyone entering the field of anthroposophic Social Therapy or seeking to deepen the foundations of his or her own work in organizations devoted to this task. They do not claim to be complete and will be developed further in the future. Critical feedback, additions and suggestions are warmly welcomed (siegel-holz@lehenhof.de).

1. Anthroposophic Social Therapy (hereafter ‘Social Therapy’) offers support to adults who have *special support needs* for cognitive, psychological and/or physical reasons.
2. Rudolf Steiner’s Anthroposophy is an essential foundation for Social Therapy. More specifically, this means:
 - a. Social Therapy endeavors to achieve a deeper understanding of the human being. The starting point for this is the anthroposophical image of the human being.
 - b. It recognizes the reality of the spiritual and includes this recognition in its approach. It understands every human individual as a person with a healthy, indestructible spiritual essence and whose dignity is inviolable.
 - c. Its ethic has a Christian and humanist orientation.
 - d. It has a fundamental awareness of the social contribution of every human individual. No one is only in need of help, no one is only one who helps. Human beings are forever influencing each other, creating obstacles for each other, and enriching one another.
 - e. Social Therapy has its origin in the anthroposophical movement and is interwoven with it in a variety of different ways.
3. Social Therapy is oriented, on the one hand, towards the universal human need for relationships and social integration and, on the other, towards personal autonomy.
4. Without playing down the seriousness and profound impact of disability, Social Therapy focuses on the strengths and resources of an individual with a need for support. It tries to understand the human individuality lying behind a person’s disability.
5. The adult with a need for support is understood not as someone who needs lifelong remedial education. Instead, Social Therapy recognizes that the other one is an *adult*.



This means that he or she is striving to take responsibility for his or her life and – with support – can also do so.

6. In consequence of this, each adult should be *recognized as he or she is*. This takes precedence over any support that may be offered.
7. On the other hand, being an “adult” should not be understood as a state that is reached once and for all but as a process of development. This is the same for everyone. We are not grown-up but spend our lives engaged in this process. To have a fulfilling biography appears as a goal in this respect. What constitutes a fulfilling biography is a matter of each person’s subjective experience.
8. In childhood, this process of development is intentionally guided from without through education, socialization and instruction, whereas in the adult phase of life, it is primarily self-directed by the person concerned as a process of lifelong learning and growth. In Social Therapy, therefore, the emphasis is on opportunities for learning and development, rather than on pedagogical measures.
9. A significant aspect of Social Therapy is *the attitude of the accompanying person*, which needs to be characterized by interest, appreciation of worth, acceptance, friendliness and sincerity. Similarly, the accompanying person will not be able to fall back upon a professional role but will always be challenged to be fully present in his or her full humanity. In professional engagement, specialist knowledge, experience and intuition are of equal value.
10. A high significance is accorded to the situational encounter between the accompanying and the accompanied person. It is ideally a dialogue at eye level, founded upon respect and mutual appreciation of each other’s worth.
11. Initially, the support that Social Therapy seeks to provide is not so much in the form of direct measures on behalf of those concerned but consists in creating a *helpful and meaningful social environment*.
12. Significant aspects of such an environment are *living situations, work and culture*.
13. The social environment should be capable of being at once a *protective space* and also a *space for development*.
14. Such a social environment was originally to be brought into being by the *inclusive social-therapeutic community* that human individuals with and without a need for support form together. A variety of different forms of community have developed over the years.
15. *Participation* in public life with the aim of social inclusion is recognized as another important task.
16. The choice of *methods* that Social Therapy makes use of is open, so long as they safeguard human dignity.



17. There is a need for a *variety* of methods and types of living situations, work and cultural life in order to do justice to the diversity of individuals. This goes along with a genuine freedom of choice to decide for or against what is available in any particular situation.
18. Social Therapy does not understand itself in a limited way as *providing a service* for a customer in a market-economic sense, but views both the accompanying and accompanied person as individual personalities engaged in an authentic encounter. In this respect, the remuneration for a service does not have any direct connection with the support that is being provided.
19. Similarly, the social-therapeutic community does not aim to be an institution but sees itself as a *social space or community* that is developed, responsibly carried and formed by all members.
20. Social Therapy is an *open field of development*. It unfolds in the engagement with societal developments and professional expertise and in dialogue with academic social work.

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Freia Adam, Paulamaria Blaxland-de Lange, Sara Colonna, Hartwig Ehlers, Brigitta Fankhauser, Jon Geelmuyden, Juliane Gravenhorst, Andrea Kron-Petrovic, Achim Leibing, Henk Poppenk, Leonardo Schmidt, Stefan Siegel-Holz, Sonja Zausch