Please join the Council for the ATHENA Annual General Meeting on Sunday morning, August 2, in Chicago at the ATHENA National Conference, “Impulses, Working through Therapeutic Eurythmy to Address Stress and Anxiety”
Announcements, Articles, Reviews, and Reports

Letter from the President, Dale Robinson

Letter from Angelika Jaschke of AnthroMed®

Letter from the Editor, Maria Ver Eecke

Theme of National Conference

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Where does Anxiety Come From? Adam Blanning, M.D.

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Case Study on Depression, From the Library at AnthroMed.org

Case Study on Selective Mutism, Mary Ruud

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Renewal Course: Healing Aspects Addressing Trauma in Childhood, Adolescence, Biography, with Michaela Gloeckler, MD

ATHENA National Conference

Representatives in the particular Fields of Therapeutic Eurythmy

Early Childhood/Kindergarten – Open

Grade school – Mary Ruud

Clinical Settings – Mary Brian

Private Practice – Dale Robinson

Curative Education/Social – Gillian Schoemaker

Elder Care – Jeanne Simon-MacDonald

Crisis and War Zones – Truus Gereats

Dental Eurythmy – Polly Saltet

Eye Eurythmy – Barbara Bresette-Mills

ATHENA Newsletter

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Although welcomed, the viewpoints expressed in the ATHENA Newsletter are not necessarily those of the publisher.

www.therapeuticeurythmy.org

www.forumhe-medsektion.net
Dear Colleagues,

To all of you in the Mid-west and East who have had such a hard, long, cold, snowy and wet winter, I hope this issue of the newsletter finds you at last safe, well, warm and dry. To those of us in the West, having had such a mild winter, our difficulties lie ahead of us in the summer and fall months with the conditions and consequences of our extreme draught! Nature, exposing us to extremes is asking something of us. What can we learn from her – and the spiritual world living behind and working through nature? How can we live with the effects of extremes – with the stress and anxiety they may cause us? In this newsletter you will find articles and case studies dealing with stress and anxiety issues – all this in preparation for our National Conference in Chicago with Dr. Ross Rentea, from July 29 through August 1.

Bee keeping is one of my favorite hobbies and this year I had multiple swarms already starting in mid-March! With the increase in daylight and warmth the bees start building up their supply of honey, storing it first in the periphery of their hive and working toward the center. Meanwhile, the queen starts laying more brood, working from the center of the hive out toward the periphery. There comes a critical moment when they get crowded – there is no more space in the hive. The bees then start rearing new queens and eventually the old queen is driven out of the hive, swarming with a good number of her followers. On a soul level we have similar experiences to what we see in nature. With all that we take in and take on, with demands and responsibilities of life, we may easily feel that our inner space is being used up – information overload in our head, contracted and stressed in our feeling; we may even come to the point of being incapacitated. The need for renewal, to get away, to find more inner space, to expand, is then a natural reaction. Perhaps this may mean vacation for some of us, but there is also the danger – of not knowing what to do or where to go, of feeling raw and totally exposed, which can easily bring on fear and anxiety. What we see as a wonderful, natural phenomenon of nature in the bees can turn into an inner and outer crisis in us when stress and anxiety come into the picture.

‘Impulses, Working through Therapeutic Eurythmy to Address Stress and Anxiety’ will be the focus of our National Conference this summer. We will meet to renew and refresh ourselves, to share and deepen our experiences and understanding of stress and anxiety.

Studying lecture seven together from the Curative Eurythmy course (as preparation, also, for the Second World Eurythmy Therapy Conference in Dornach during Whitsun of 2016) we will see how spiritual (and psychological) impulses can work right into or out of the physical body to cause disorders or bring healing. There are many different ways of approaching patients who show signs of stress and/or anxiety. The causes may be very individual for different people and they are time dependent. When people find their way to us therapeutic eurythmists, with symptoms or illnesses resulting from stress or anxiety, how do we recognize this and are we able to treat them appropriately? Are we ready? This conference will be a great sharing and learning opportunity for us all. Directly following the conference will be our AGM on the morning of August 2, so do plan to be there!

‘Impulses’ first became part of the title of this conference, because we wanted to include the work of Jean Schweizer, one of our senior therapeutic eurythmists, who has developed out of her work in eurythmy, what she calls Impulse Entelechy. Although she would have brought something new and interesting, perhaps even contentious, Jean has decided to withdraw as a presenter, feeling this was not the best theme or venue for her work. She has been most successful working with new age, Indigo, and autistic children and plans to continue presenting her ‘Heart Motions of Impulse’, as she also calls it, to help these children overcome their obstacles and difficulties. For us there will still be lots of other impulses for our work.

Some new aspects of our National Conference this year: First, we will try deepening our experience by including First Class work (for members with Blue Cards). Secondly, we hope for a good turnout of anthroposophically-oriented doctors, for a greater collaboration and exploration of this ever increasing health problem of modern life. Thirdly, partially due to the breadth of the topic, but also to expose other eurythmists to therapeutic eurythmy and thereby to create advocates and maybe even stimulate their further training, we are welcoming the participation of our non-therapeutic eurythmy colleagues and invited guests. While many of the basic eurythmy exercises done in the classroom can be used to work with stress or anxiety issues, what greater perspectives are there and what more can we bring as therapeutic eurythmists? Through case studies and anthroposophical perspectives we will openly explore all these possibilities and find appropriate
solutions together. Lastly, for all of us lovers of eurythmy performances, at Ross’s special request, before and after each of his three evening presentations we are welcoming short solo or group eurythmy pieces by any of the eurythmists who might want to present some of their performance work. So, prepare and please join us!

Dale Robinson
ATHENA Board President

Waldorf Journal Project on Therapeutic Eurythmy
We are looking for written articles on therapeutic eurythmy, especially how it relates to children. We are asking for articles that are written by therapeutic eurythmists but also medical doctors, parents or teachers who know of or have experienced the effectiveness of therapeutic eurythmy. Patrice Maynard from the Research Institute has agreed to publish an edition of the Waldorf Journal Project on Therapeutic Eurythmy. The goal is to make therapeutic eurythmy more visible, to ignite interest, and bring awareness to the Waldorf community (of parents, teachers, administrators, and others). If anyone knows of a good article in another language please bring that to our attention as well. It is important to keep in mind that the language and content of the articles need to be accessible to people who do know little or nothing about therapeutic eurythmy.

Please send articles or ideas by e-mail to Susann Eddy: susanneddy7@gmail.com If you have only access to a hard copy or need to use the postal mail, please send it to Susann Eddy, 25525 Ormond Drive, Southfield, MI. 48033; phone number 248 376 1154.

LETTER FROM ANGELIKA JASCHKE
Dear Eurythmy Therapists,
Please support the success of the survey. The ARCIM Institute can only start the evaluation with the required 1,000 responses. But more than 200 are still missing!

We have to achieve this goal. Otherwise the great efforts of the ARCIM Institute to help us have been in vain. We still receive feedback from patients saying that they are really willing to support our initiative. And can you imagine how we will inform the world, if we don’t reach this goal?

Please, please do help us with all your might in order to avoid having to draw the curtain over this research project. With warm regards and the last best hope that we will succeed till the end of May!

Angelika Jaschke,
AnthroMed®

LETTER FROM THE EDITOR
Spring Greetings!
When I began to practice eurythmy therapy with children, I discovered that many of the children who showed signs of behavioral issues in the kindergarten classes were those with thin-skin constitutions. For whatever reason, early trauma of separated homes due to divorce or that of health issues related to environment, these children were overly sensitive. The teachers were concerned about ‘boundary issues’. The first time I met with one child, he hid under the table until I could gain his trust (food works wonders)! Although the parents were protective, each child benefited from the gestures of B, to strengthen one’s own sheath. The first six sounds of the evolutionary sequence are the most helpful with the incarnation process of young children, although I usually choose a combination of two to three consonants and one vowel sound. I found that the out-breathing of M with the in-breathing of L was the exercise that seemed to make the greatest difference for these children. [Please see Maria Walker Ebersole’s article in the Fall 2014 issue, where she suggests to work with “the breathing as a gateway for relief from and treatment of anxiety and PTSD” (Post Traumatic Stress Disorder).]

The world of childhood is threatened in today’s world, as many parents are stressed with long work hours. I have noticed that some parents no longer pray for their children. As we lose our connection to the child’s angel, it is no wonder that we may feel so alone in the monumental responsibility of adulthood. The following quotation is from a lecture given by Rudolf Steiner in Dornach, September 23, 1921, Cosmosophy Volume 1, Lecture 1, GA 207.

“The age of intellectualism dulled the sight of what lay in man’s inner being, but it was unable to do away with the fear. It thus came about that man was and still is under the influence of this unconscious fear to the degree of saying, ‘There is nothing at all in the human being that transcends birth and death.’ He is afraid of penetrating deeper than this life of memory, this ordinary life of thought, which maintains its legitimacy, after all, only between birth and death. He is afraid to look down into what is actually eternal in the human soul, and from this fear he postulates the doctrine that there is nothing at all outside this life between birth and death. Modern materialism has arisen out of fear, without having the least intimation of this. The modern materialistic world conception is a product of fear and anxiety.

“This fear thus lives on in the outer actions of
human beings, in the social structure, in the course of history since the middle of the fifteenth century, and especially in the nineteenth century materialistic world conception. Why did these people become materialists, that is, why would they admit only the outer, that which is given in material existence? Because they were afraid to descend into the depths of the human being.” How can we overcome feelings of fear and the stress associated with such a fast-paced life?"

The antidote to materialism in this age of the ‘Spiritual Soul’ is to consciously reconnect with the hierarchies. Jorgen Smit describes this clearly in the last chapter of his book, Lighting Fires, Deepening Education through Meditation.*

When we review our day, the pictorial imaginations that we create objectively become nourishment for the Angels. Our imbued speech is like air for the Archangels to breathe.

The Archai work in the warmth of our ego organization, which is a gift of the Exousiai, the Spirits of Form. These great spiritual beings were shouting with joy at the creation of the Earth in Job 38:4-7. Then the breath of life was given to the being of earth. In Hebrew, Adama means ground, soil, earth, or terra, while Eve or Chava means life. Exousiai is generally translated as ‘authority’ or ‘power’, but in the original Greek it literally refers to the power to exercise choice. “But as many as received Him, to them He gave the Exousiai to become sons of God, even to them that believe on His name.” (John 1:12, King James Version)

The gift of uprightness is both outward and inward, as the physical body learns to stand upright and through the flame of conscience (that flaming sword of the Cherubim at the Gate of Paradise), we gain upright moral strength. Whenever we overcome an obstacle in life, the Archai receive nourishment from us.

The spiritual beings look to us and wait for our good deeds, our purposeful words, and our living thoughts to be lifted up to them every evening. In fact, we can make a difference every day in their very existence. They wait for us to ask for help. Only through this inner work is there hope for the future.

Rudolf Steiner strongly stated that a great danger for the age of the ‘Spiritual Soul’ would be if, before the beginning of the third millennium (which begins with the year 2000), humanity were to ignore spiritual life and entirely miss the return of Christ in the etheric realm. **

Are not we the ones, along with famers and educators, who work most closely with this life force? As therapists, we know that healing is only possible through the Christ force. How may we strive to envision the Mystery of Golgotha in the etheric?

I close with these words by Rainer Maria Rilke, “You are not too old and it is not too late to dive into your increasing depths where life calmly gives out its own secret.” May we fulfill our task as care takers of our planet and begin to act responsibly in the world as the tenth hierarchy, as one humanity.

_Blessings on our work,_
_Maria Ver Eecke_

*Jörgen Smit was born on July 21, 1916 in Bergen, Norway and died on May 10, 1991 in Arlesheim, Switzerland. A teacher, a trainer of teachers, Leader of the Pedagogical Section and member of the Executive Council of the General Anthroposophical Society at the Goetheanum in Dornach, Switzerland, Jörgen was above all a superb speaker. During his lifetime he gave almost 5000 lectures and inspired thousands of people on all continents.

**For further reading, see Rudolf Steiner’s lectures, “The Work of the Angels in Man’s Astral Body”, Zurich, October 9, 1918, GA 182 and “Pre-Earthly Deeds of Christ”, Pforzheim, March 7, 1914, GA 152.

In the Primal Beginning is Memory,
And the Memory lives on further,
And Divine is the Memory.
And the Memory is Life.
And this Life is the Ego of Man
Which streams into Man himself,
Not he alone, the Christ in him.
When he remembers the Divine Life
In his Memory is the Christ.
And as the radiant Life of Memory
Christ will pour Light
Into every Darkness of the immediate present.

_—Rudolf Steiner_
Anxiety and Stress
Theme of National Conference

Anxiety disorders can become so severe that normal life and relationships become impaired. There are many types of anxiety disorders with their own unique sets of symptoms. Some of these disorders include panic disorder, obsessive-compulsive disorder (OCD), post-traumatic stress disorder (PTSD), social phobia (or social anxiety disorder), specific phobias, and generalized anxiety disorder (GAD).

Anxiety Disorders affect about 40 million American adults age 18 years and older (about 18%) in a given year, causing them to be filled with fearfulness and uncertainty. Unlike the relatively mild, brief anxiety caused by a stressful event (such as speaking in public or a first date), anxiety disorders last at least 6 months and can get worse if they are not treated. Anxiety disorders commonly occur along with other mental or physical illnesses, including alcohol or substance abuse, which may mask anxiety symptoms or make them worse. In some cases, these other illnesses need to be treated before a person will respond to treatment for the anxiety disorder.

Effective therapies for anxiety disorders are available, and research is uncovering new treatments that can help most people with anxiety disorders lead productive, fulfilling lives.

Please see the Stress Sheet for more information.

There are several recognized types of anxiety disorders, including:

- **Panic disorder:** People with this condition have feelings of terror that strike suddenly and repeatedly with no warning. Other symptoms of a panic attack include sweating, chest pain, palpitations (unusually strong or irregular heartbeats), and a feeling of choking, which may make the person feel like he or she is having a heart attack or "going crazy."

- **Social anxiety disorder:** Also called social phobia, social anxiety disorder involves overwhelming worry and self-consciousness about everyday social situations. The worry often centers on a fear of being judged by others, or behaving in a way that might cause embarrassment or lead to ridicule.

- **Specific phobias:** A specific phobia is an intense fear of a specific object or situation, such as snakes, heights, or flying. The level of fear is usually inappropriate to the situation and may cause the person to avoid common, everyday situations.

- **Generalized anxiety disorder:** This disorder involves excessive, unrealistic worry and tension, even if there is little or nothing to provoke the anxiety.

Symptoms vary depending on the type of anxiety disorder, but general symptoms include:

- Feelings of panic, fear, and uneasiness
- Problems sleeping
- Cold or sweaty hands and/or feet
- Shortness of breath
- Heart palpitations
- An inability to be still and calm
- Dry mouth
- Numbness or tingling in the hands or feet
- Nausea
- Muscle tension
- Dizziness

A Prayer

Refuse to fall down.
If you cannot refuse to fall down, refuse to stay down.
If you cannot refuse to stay down, lift your heart toward heaven, and like a hungry beggar, ask that it be filled, and it will be filled.
You may be pushed down.
You may be kept from rising.
But no one can keep you from lifting your heart toward heaven – only you.
It is in the middle of misery that so much becomes clear:
The one who says nothing good came of this, is not yet listening.

Clarissa Pinkola Este
From La Pasionaria, Collected Works,
Poetry of Clarissa Pinkola Estes
Stress and the Immune System
Robert Zieve, M.D.

If we were to seek one word to embody external life issues that give us difficulty, that word would be Stress. Many of us perceive stress as something outside ourselves to tolerate and work through, something that stands in the way of our happiness. The word ‘stress,’ like the word ‘money,’ has negative connotations. It has become our scapegoat.

The immune system, on the other hand, is deep and internal. Its home is in the blood, where white blood cells and other components stand ready to defend us, and in the mucus membranes of the intestines and respiratory organs where immune cells protect our boundaries of self and not-self. The immune system is at the core of our being. When it is weakened, which is becoming increasingly apparent in millions of people, we experience epidemics of chronic fatigue syndrome, fibromyalgia, Lyme disease, autoimmune illnesses like multiple sclerosis and rheumatoid arthritis, and finally cancer.

The immune system is stressed today by an ever-increasing accumulation of internal and external toxic elements. There are externally generated toxins from heavy metals (especially mercury, lead, and aluminum), petrochemicals, radiation, vaccinations, electromagnetic fields, pharmaceuticals, and microorganism imbalances. These toxins are very real, and represent an assault on the human ‘I,’ or ego forces. (They are the visible examples of the lies, intolerance, and wrong social laws that Rudolf Steiner spoke of as being the demons, phantoms, and ghosts in contemporary society.)

There are many things that can minimize the effects of these toxins on our immune systems. Examples include using non-toxic home supplies, eating organic and biodynamically grown foods, removing silver-mercury amalgam fillings, and turning off all the lights in our bedrooms at night.

Our culture’s obsession with suppressing fever in acute illnesses is a suppression of our immune response, and a suppression of the internal warmth or ego forces that make us human.

It is also important to refrain from being hyper-vigilant with information. Gertrude Stein is quoted as saying, ‘Everybody gets so much information all day long that they lose their common sense.’ People become ill in part because they are overloaded. Part of what we are overloaded with is information, which if not brought into our whole being in a rhythmic and willful way generates chaos and fear, which weakens our immune system.

At the same time we have been accumulating external toxic stressors, we have also increased our reservoir of internally-generated toxins. These may derive from a lack of connectedness to spirit, an overabundance of fear and a deficiency of deep trust, and over-intellectualized education and thinking.

Weaknesses in the fabric of our family souls that burden us to unconsciously carry the unresolved difficulties in our hereditary lineage are also internal stressors. Unresolved conflicts from chronic internal stress store in the hippocampus of the brain and weaken immune function over time. The chaos and lack of self-generated rhythm in our daily lives creates an internal environment where our immune systems become more susceptible to being weakened by external stressors.

These cumulative stressors weaken our organism’s capacity to self-regulate. Anthroposophically, self-regulation is an ego function of the human I. In Jungian terms, self-regulation represents a healthy working together of our own mature King/Queen, Warrior, Lover, and Magician. Self-regulation means that when we rise from sitting, our blood pressure and pulse adjust accordingly; or when we pass from cold to warm our hypothalamus regulates at a constant internal temperature. It also means that we are internally strong enough to generate healthy electromagnetic frequencies that inhibit microorganism overgrowth and maintain healthy cellular function, and self-regulate our thinking and actions.

We have become chronically habituated to stress today, and this has weakened our immune system functions. We have become too earthbound – too material in our will and too mechanistic in our thinking. A weakened immune system is unable to react and respond appropriately. A weakness of the will leads to a premature hardening and rigidity in our bodies and in our lives. As our immune system weakens over time, this rigidity may be seen in the narrowing of our visual fields in optometric testing, and in the rigidity and loss of mobility of our white blood cells under dark-field microscopy. Our head forces are overwhelmed and our will forces become deficient. Chronic immune deficiencies and cancer are what are termed ‘cold diseases,’ or weaknesses of healthy metabolism. Our metabolism is where both warmth forces and the human will reside.
Anthroposophy offers much that can strengthen our immune systems in times of stress. This may include practicing such prescribed eurythmy movements as the ‘B,’ which strengthens our boundaries. Taking anthroposophical remedies such as those made from gems and the ashes of trees strengthens our immune systems. These remedies are specifically combined to be representative of deeply archetypal patterns of self-regulation within us, as they are architecturally portrayed in the Goetheanum building in Switzerland.

If we as conscious beings learn to live with and accept stress as an integral part of life’s growth and development, then our immune system can function with healthy self-regulation, and protect the integrity of our being. The idea is to minimize the potential harm of accumulative stressors by altering our lifestyles and relationships so that they are increasingly guided and directed by our deepest spiritual forces. The strength that grows within us then generates a ‘field’ that communicates a spirit of symbiosis with all our microorganisms. This gives us the necessary strength to work with others in community to build new social and economic forms that are life-sustaining and transformative.

What can we do to meet stress and have healthy immune systems?
1. Be aware, but remain internally relaxed, quiet, observant and honest with ourselves
2. Be willing to change when necessary, especially subconsciously-driven habits that become our armor
3. Be centered in a feeling of trust in the goodness of life and in the ever-present support from unseen forces that guide and protect us.


Not everything that is faced can be changed, but nothing can be changed that is not faced.

James Baldwin

God grant me the serenity to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference.

Reinhold Niebuhr

UNDERSTANDING ILLNESS, ANTHROPOSOPHIC MEDICINES, STAYING HEALTHY

Where does Anxiety come from?

Adam Blanning, M.D.

Feeling anxious? Then you probably need to reconnect your thinking with your feet. Why is that true? Well, anxiety, in all its different forms usually means that we are thinking, watching, waiting, and can’t quite let go of that activity. Sometimes exaggerated sensing activity is healthy and appropriate—for example, if a dog jumped out and bit your leg, then you should be extra watchful and guarded if you have to walk by that dog’s house again. But if you became so worried that you never went for a walk, or find that when you do go for a walk you are still worrying about the dog long after you have arrived home, closed the door, even gotten into bed in your pajamas, then that watchfulness is no longer healthy. In a way, our nervous system gets stuck in the ‘on’ position and doesn’t switch off (another term for this could be hyper-vigilance).

A common way for this to happen is when your thinking/sensing activity gets cut off from the rest of what you are doing. Then your watchfulness takes on a life of its own, and doesn’t relax into a restful and restorative state when it should (like when you are in your pajamas). There is actually a related, precursor state that we fall into all the time: being busy the whole day and then at the end of it not being able to really remember anything you did. That’s a pretty common thing to do. But it means that your thinking was running way ahead of what your hands were doing. It actually also contributes to a sense of boredom, because in the middle—between our sensing/thinking life and our hands/willing life—is our feeling life. When thinking and willing are disconnected, then our feeling life suffers. Then we can find that we are busy all the time (thinking about one thing, fingers doing another) and on a fundamental level totally disengaged from what we are doing. But isolated thinking and willing can bring more than just anxiety, and boredom. Taken to the extreme, isolated thinking leads to dogmatism.

Math is a great example of ‘dogmatic’ thoughts being a healthy experience, because within the realm of mathematics there are certain laws that exist unto themselves as fundamental truths, regardless of any particular situation. Mathematical laws do not vary depending on each particular individual circumstance or application—and they shouldn’t. But what happens when
that dogmatism slips into other realms of life, and you know the solution to something already, regardless of the person or situation you meet in a particular moment? Well, one way to describe that would be ‘standing up for one’s ideals’—another, ‘fundamentalism.’ Because when we always already know the answer before we have even met the question, it probably means we are staying too much in our head and not really interacting with the world.

Willing can become an isolated activity, too. Willing, left unto itself (without thought or feeling) becomes activity/action/movement that does not give expression to a deeper intention. It could be small (a tapping foot that we hardly notice—gosh, that sounds like something we might do when we are anxious!), or random movement (just needing to get out of the office and move). Stuck willing can become a powerful drive, strong enough that ‘something needs to happen’—regardless of what the situation, whether it is convenient, helpful, or constructive. In fact in the extreme, isolated willing usually becomes destructive. It can come out as completely physicalized interaction (aggression, violence, even eroticism). The drive for activity is there, and has to be expressed, but no one is consciously holding the reins.

There is a lot of anxiety, dogmatism/fundamentalism, and aggression/violence/eroticism in the world these days. How to work with it? Here are three small suggestions:

• The next time you are in conversation, watch yourself to see if you are just waiting for the other person to finish talking, so that you can say what you already know. See whether the answer you have in your head really matches your interaction with the other person. Do you really need to have an answer? What if the best thing in that moment is to just listen and not give an answer? Building that feeling space helps to create a powerful bridge from what you are meeting in the other person, to the thoughts we carry inside ourselves. It helps connect the outside, to the inside. Try listening and simultaneously feel how your feet are resting very gently on the ground and you will see that it helps. Listening is really actually connected much more to the activity of our limbs than the activity of our head.

• Second, do something that originates totally from inside of you. Something that you are going to do, just because you want to do it as an expression of what you are really interested in. Think about it, feel it is a good thing, and then carry it out, even if it may seem silly or superfluous to the rest of the outside world (learning to play the banjo is an excellent example). That kind of activity is good for anyone’s soul. And it helps to build a cohesive movement of thinking, to feeling, to willing, from the inside, out. It helps your intention go all the way to your fingers and toes, and then into the world around you.

• Third, love your feet. Give them a little massage at the end of the day. A friend reminded me of this recently, and it feels so good. And the next time you are walking (probably racing from one thing to the next), slow down and really feel how you are moving your feet, how it feels to slowly lift your foot up, carry it through the air, and consciously place it on the earth. It also works really well if you are anxious before talking in front of a group of people—it will help you relax.

Adam Blanning, M.D., a native of Denver, attended the University of Colorado, both as an undergraduate studying English literature and for his medical degree. He completed a residency in family medicine, and then went on to teach family medicine at New York Medical College and the University of Colorado School of Medicine. In 2003 he founded the Denver Center for Anthroposophic Therapies. Dr. Blanning also works as an educational and developmental consultant for area Waldorf schools (Denver, Boulder, and Carbondale) and has lectured about anthroposophic medicine and child development throughout the U.S. and Canada. He is currently serving as vice-president of the Association for Anthroposophic Medicine and Therapies in America (AAMTA), sits on the board of the Physicians’ Association for Anthroposophic Medicine (PAAM) and teaches in its training courses. He is a founding member and core faculty for the Nurturing the Roots course in Waldorf early childhood therapeutic education.

Meditation for Courage

We must eradicate from the soul all fear and terror of what comes toward us out of the future. We must acquire serenity in all feelings and sensations about the future. We must look forward with absolute equanimity to all that may come, and we must think only that whatever comes is given to us by a world direction full of wisdom. This is what we have to learn in our times, to live out of pure trust in the ever present help of the spiritual world. Surely nothing else will do, if our courage is not to fail us. Let us properly discipline out will, and let us seek the inner awakening every morning and every evening.

Rudolf Steiner
CASE STUDY

“Burn-Out” – Anxiety – Menstrual Problems

Mary Brian

Medical Condition and Symptoms
This young woman “P”, aged 33, suffered from extreme fatigue, ‘burn-out’ and exhaustion and was dealing with very stressful personal issues. She felt constant anxiety and could not rid her mind of worrisome thoughts. She also experienced painful periods with cramps, PMS, and had two small fibroids. She experienced migraines related to barometric pressure, and allergic reactions in the fall. She had formerly been very active and would release her tension through running.

Description
“P” has dark hair, bright brown eyes, and clear rosy skin. Her face triangulates toward the bottom into a fine jaw, with a narrowing forward of the front teeth. She is of medium height, with a good figure, slightly pear-shaped toward the hips. Surprisingly to me, she speaks with a loud and energetic voice; she radiates soul warmth and enthusiasm.

Interaction of Ego-Astral-Etheric-Physical Bodies
The nerve-sense (formative) forces are not permeating the metabolic in the right way. The astral body is overactive and needs the warmth of the ego. The etheric needs strengthening, as she is very weak.

Aim of Therapy and Recommendations of Doctor
Support up-building forces. Then find the balance between nerve sense/rhythmic/metabolic systems.
Work with the breathing: Soul exercises.
Strengthen uprightness: Three-fold walking

Description of Movement
“P” movement is tense, tight, compact, and rounded. Her neck and shoulders are stiff; her hands are cold. The small of her back is arched. She holds tension in her stomach.

Therapeutic Eurythmy Exercises
1. To release tension and come into the present (3xs)
   Letting the arms gently rise outward, upward, then descend in a gentle “D” in front of the body, like falling mist, releasing energy out through the fingertips at the bottom. Then, stand upright, cross arms firmly (Eh), take a step backward, release.

2. Sympathy-Antipathy: to bring the ego into the metabolic region. Here, “P”’s movements showed how she works against herself. While her right foot came forward in “sympathy”, her hands formed a low “B”-like gesture, so holding the energy into herself (in the lower metabolic area).
   Conversely, while her right foot moved backward in “antipathy”, she put her arms forward. We practised letting the arms be relaxed at the sides and letting the feet speak.

3. Stepping different Rhythms and Three-fold Walking.

4. Describe a harmonious eight around the metabolic area with a copper ball, starting with the ball behind the mid back. The patient found this calming.

5. B gesture, with bending into knees and most importantly, to stand upright in-between. As the extreme curve in the patient’s back made her bend the upper torso forward while bending the knees, we practised this with the vertical support of the wall.
   The patient’s initially cold hands were always warm by this time.

6. We started working with L, M, and S. S seemed to be the most important, so we concentrated on this.
   Descending “S”: The gestures of the patient in the downward moving “metabolic S” were also revealing. Within the image of warmth, of downward flowing lava, the patient had great difficulty sustaining a downward movement of the arms.
   Near the end of the S gesture, the patient’s hands tended to come slightly upward and gather energy inward (toward the abdomen) with tight, hardened hands…then she would flick the energy downward at the end.
   To become aware of this movement was very interesting to the patient, as it made her realize how she holds tension in the abdominal area.
   We practised keeping a conscious downward flow of the S gesture, and overcoming her natural tendency was very helpful for the patient. (This was done with “O-legs”, in standing.)

7. H: to release tension in the stomach area. The H arm gestures were very gentle, and air-filled. Initially we tried jumping, but as the patient tensed up on landing, we found it better in standing with legs open to hip width. As the H arm gesture was released downward, the patient rose up on the balls of her feet (with knees a bit bent). Then feet back on floor, then feet together, arms in “rest” position, and “rest, rest, rest”.

8. To finish: B L B U feet
   B: “Angel Wings” Large comforting gesture
   L: Like a refreshing fountain, with rocking of feet, forward and backward.
   B: “Angel Wings”, as above
   U feet: Feet closely together, up and down on toes, 3xs.

Conclusion
The patient came for six sessions, and visibly calmed during the session time. She became warm and more penetrated in herself.
If there had been an opportunity for more sessions, the B exercise could have been developed into the Migraine-B exercise, and the U feet into Hope-U. It may also prove beneficial to do the M-head shaking exercise for the period cramps, and Ah-Devotion for the worrisome thoughts. However, too many exercises can be overwhelming and the challenge, I find, is to find just the “right” few exercises.

**Case Study**

From the Library at AnthroMed.org

Case 5: HIV-Related Severe Depression and External Fistula

**Patient:** Male, 40 years old

**Appearance:** The patient is slim and well-built; his head is large, with blond hair, very fair skin, light-colored eyes, well-formed hands and feet.

1) Physician’s treatment plan

**Clinical Diagnosis**

HIV syndrome with recurrent purulent fistula formation in the right inguinal region \[T4 = 500\]. Quotient: 0.5) Depression

**Spiritual-Scientific Diagnosis**

The physical body is well-structured. The soul life displays a high degree of abandonment to external impressions, which has the effect of covering over the etheric realm. Physical and etheric bodies are completely subdued by the dominant astral body. The I is pushed aside by the soul body, hence severe depression with panic and fear.

**Other Treatments Prescribed**

Stibium 6 infusion, Hyperforat (Hypericum herb), Helleborus potency 4 (once a week); Topical treatment of fistula

2) Eurythmy therapist’s movement analysis

**Movement Diagnosis:** At his first admission the patient would enter the treatment room hesitantly and shyly, with a tripping type of gait. All tasks set were carried out with a gesture of doubt and reticence, almost irony. Arm movements were fluid, yet empty, dynamic, but carried out without feeling. Legs touched the floor lightly, and the gait lacked firmness and steadiness. All walking movements were shy in nature. Things improved significantly right from the start of the second period in hospital, as the patient was now familiar with eurythmy therapy and liked it. Arm movements became more evocative and were executed with a greater sense of purpose. The connection of the legs to the earth was still somewhat tenuous. During the initial I A O sequence the patient displayed great willingness to bend over backwards, whilst not achieving the forward bend into the O, nor being able to form a straight line from his feet to his head. The upper torso was always bent too far back, with hips and stomach protruding too far to the front.

**Treatment Plan**

The patient needed soul-filled movements in order to find himself and establish a connection with the earth, with matter, through his legs. Furthermore the repercussions of the HIV infection on the soul life of the patient needed to be addressed.

**Treatment and Objectives**

The first exercise involved a large M, simultaneously carried out with legs and arms, from above downward and from below upward. Importance was attached to the meeting of the arms in the middle, at waist level; a unified and continuous flow of movement was attained. In the upright static position the body displayed said bend again. The N was introduced to stimulate the patient’s sense of touch. Here the position of heels and knees was helpful, enabling the patient to get a feel for the muscles of his legs and feet. In addition the overly mobile lumbar vertebral region was firmed up. The L, the gesture of transformation, proved difficult for the patient right until the last day of his stay. However, the initially excessive upward bend was brought into greater harmony with the movement downward and inward. The G was done in terms of the sense of balance, and via the X position of the knees and the related flexing of the thigh muscles, the posture attained was self-assured and steady; the patient reported himself that this gave him a sense of strength and security. In physiological terms the flexing of the upper arms with this specific G exercise relieved the strain in the neck region whilst strengthening the spinal region. Finally the pentagram was performed in space, and it was noted that both the oblique forward lines were not walked consciously, but run rather hastily. When it became clear that the patient formed the vowels, executed on the form of the pentagram, very cautiously and hesitantly and became rigid and breathless as soon as he was taxed in the slightest, we added a poem: “Der Abend” (evening) by Eichendorff. Vowels and consonants were now performed alternately in accordance with the content and meaning of the poem. It was astonishing how quickly the patient was able to perform this short poem in a true evening mood.

**Duration and number of treatments:** Seven treatments of 30 minutes' duration during patient's second admission.

3) Physician’s final report

**Clinical Diagnosis**

Soul-related symptoms such as fears and depression regressed almost entirely. Patient gained new resolve and confidence in dealing with other people. Antidepressants could be discontinued.
Spiritual-Scientific Diagnosis
The patient attained a more balanced relationship with others and himself as a result of the liberation of the astral body which was less fixed and not intervening so excessively. His will became stronger and he found new interests and new tasks.

Physician: Christoph Schnurer, MD.
Eurythmy therapist: Ursula Steinke
Ursula Steinke, Christoph Schnurer, MD., Friedrich Broz Gemeinnuetziges Gemeinschaftskrankenhaus Beckweg 4, D-58313 Herdecke, Germany

CASE STUDY ON SELECTIVE MUTISM
Mary Ruud
A parent with a child new to the Tamarack Waldorf School kindergarten approached me about her daughter who does not speak at all at school. The mother was seeking support services for her daughter. She was making an appointment with a specialist in selective mutism at the University of Wisconsin, but the specialist had just retired. I told the mother that I would be happy to work with her daughter in therapeutic eurythmy, because I had some experience with selective mutism. I was a selective mute myself from kindergarten until ninth grade.

A child with selective mutism can speak and will often speak at home but not in “selective” places, most often school. Once thought of as a mental illness or profound stubbornness, it was called elective mutism. Now it is understood that it is not intentional, but is a subset of anxiety disorders.

Selective Mutism (formerly Elective Mutism)
According to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition
A. Consistent failure to speak in specific social situations (in which there is an expectation for speaking, e.g., at school) despite speaking in other situations.
B. The disturbance interferes with educational or occupational achievement or with social communication.
C. The duration of the disturbance is at least 1 month (not limited to the first month of school).
D. The failure to speak is not due to a lack of knowledge of, or comfort with, the spoken language required in the social situation.
E. The disturbance is not better accounted for by a Communication Disorder (e.g., Stuttering) and does not occur exclusively during the course of a Pervasive Developmental Disorder, Schizophrenia, or other Psychotic Disorder.

The same day that the mother of the girl who just joined our kindergarten told me her specialist had retired, my colleague found an article on selective mutism in the newest Scientific American Mind Journal (May/June 2015). It describes a camp for children with selective mutism and went on to describe the disorder and how it is beginning to be a subject of notice and research. This led me to an online search and it is heartening that this disorder is more widely recognized and that it is considered an anxiety disorder rather than willful manipulation, shyness or trauma.

Years ago I worked with a child with selective mutism at the Waldorf school in Viroqua, Wisconsin. The school’s care group committed to a three-week study of this second grade girl. Each care group member agreed to carry a picture of the child into their evening meditation after the initial week’s description. During the second week, teachers shared what they had received from their meditations. It was the story, “The Hand-less Maiden” from Grimm’s Fairy Tales. In the story the girl’s father cuts off her hands. She loses the expression of her soul capacities with the loss of her hands. She later receives silver hands and becomes a queen. This story seemed to follow the idea of the time that selective mutism was due to trauma. The choice of activity decided on in the third week of the child study was to treat the child as if she were speaking and she was to have eurythmy therapy twice a week.

The girl was friendly and outgoing, although totally quiet, during eurythmy sessions. She enjoyed moving very much. We did lots of Rs as the focus was at the time on speaking. She also enjoyed small poems where she was able to be expressive in speech gestures while not in actual speaking. As her school years went on, she did begin to speak. Research shows that a safe and comfortable environment without pressure to speak can help a child overcome selective mutism.

At Tamarack Waldorf School, we have a girl in second grade, who has selective mutism. She will occasionally whisper to classmates but doesn’t speak. I worked with her in kindergarten with another child, because she was too shy to come by herself. We did R to stimulate speech, vowels with little verses and D to bring her into her legs. She now speaks to classmates at recess and whispers in class.

Some of the accompanying difficulties listed from the Selective Mutism and Anxiety Research Center (SMART www.selectivemutismcenter.org) are: picky eater, bowel and bladder issues, sensitive to crowds, lights (hands over eyes, avoids bright lights), sounds (dislikes loud sounds, hands over ears, comments that it seems loud), touch (being bumped by others, hair brushing, tags, socks, etc.), and heightened senses, i.e., perceptive, sensitive, self-regulation difficulties (defiant, disobedient, easily frustrated, stubborn, inflexible, etc.).

Within the classroom, a child with sensory difficulties may demonstrate one or more of the following symptoms: withdrawal, playing alone or not playing at all, hesitation in responding (even non-verbally), distraction, difficulty following a series of directions or staying on task, difficulty completing tasks.
When reading the descriptions of accompanying difficulties, I was struck how similar they are to Rudolf Steiner’s description of the ‘hysterical’, or what we call ‘thin-skinned’, child in the Curative Education Course.

“You have only to remind yourself how it is with you when you have grazed your skin at some spot. Suppose you then grasp hold of some object with the sore surface, where the skin has been rubbed away. You know how it hurts! The reason for your being so sensitive is that at that spot (where the surface is raw) you come up against the external world too vigorously with your inner astral body. Only in moderation are we able to contact the external world with our astral body (and ego organization). The child who from the first brings his astral body right out — such a child will touch and take hold of things delicately, just as though he had been wounded. Nor shall we be surprised to find in him this hyper-sensitiveness, this hyper-sensitive response to the world around him. A human being in this condition is bound to feel his environment much more keenly, much more intensely; and he will moreover have within him a much more powerful reflection of his environment. And now ideas will begin also to arise in the child which are painful in themselves. It comes about in the following way. The moment he begins to develop will in any direction, the child has to reach out into something in regard to which he is hyper-sensitive. And then as soon as the will begins to develop, a strange condition arises in the conscious part of him. He becomes super-conscious of the unfolding of the will; in other words, the unfolding of the will causes him pain. Pain is present in nascent state as soon as the will begins to appear, and the child tries to hold back the pain. This happens with great intensity. He makes restless, struggling movements, because he is trying to hold back the pain. Here, you see, I have given you descriptions of inner conditions which find their outlet in life in a clearly recognisable manner. A child wants to do something but feels a pain and cannot do it; instead of the soul-life flowing out into action, he has a terribly powerful inward experience before which he shudders — he shudders at himself. But now it may equally well be a question, not of an outward action, but of a concealed or disguised action in the sphere of thought — for the will lives also in the sphere of thought. When it is a question of an action in the life of thought, when it is ideas that should unfold, it may be that in certain forms of illness these ideas, at the moment they should develop, evoke fear, evoke anxiety and fear and are unable to arise in the mind.” (Rudolf Steiner; Curative Education, Lecture 4.)

This holding back, the moment of fear the inability to take action, in this case, to speak, is so familiar to the experience of selective mutism. It is as if there is a chasm to overcome or a wall to scale and it only grows larger each time speech is held back. Though all children are different and each has their own set of hindrances and gifts, this connection to Rudolf Steiner’s description of the child with a ‘hysterical’ constitutional type is a new insight for me.

As I begin with this new girl I will work with F, B, and A, the gestures we would use for the thin-skinned constitution to help in our work. An enclosing pentagram, exercises with the legs, the “I can, I can’t, I must do it anyway” exercises are possibilities. As each child is different, the work will develop according to her needs. Dr. Kamsler will give his insights when he visits. I look forward to this new challenge. I plan to continue to research this subset of anxiety.

As I think on myself as a child, I know I would have loved the opportunity to have done eurythmy. I found joy in movement: biking, swimming, horseback riding, skiing and dancing. So much can be expressed through movement for the child who has difficulty expressing speech. I consider myself so blessed that even as a child who could not speak freely, I have been given the opportunity to share speech as movement in eurythmy.

INTRODUCTORY PRESENTATION TO LECTURE TWO OF THE EURYTHMY THERAPY COURSE
by Dr. G. Merker and Dr. S. Sebastian given on May 2, 2008
Presentation by Dr. Gudrun Merker
Published in the ATHENA Spring 2009 issue
A selection from the original report

The Vowel Principle in Eurythmy
In the second lecture on eurythmy therapy, Rudolf Steiner elaborates on the vowel principle in eurythmy. The vowels reveal what lives within us as feelings and emotions. The prime focus here is to learn to sense what flows into movement when we utter a vowel; the most important thing is to feel its gesture and movement.

At the outset I would like to quote to you the words Rudolf Steiner gave 101 years ago at the Munich conference in relation to the deep-purple column of the fourth seal:

“Condense your feeling into light,
and you reveal the formative powers.
Concretize your will to being,
and you create in world existence.”

The U (oo) and its therapeutic effect
Let us now look at the U (oo). The blue dress of the eurythmy figure shows us that the movement requires very little activity. We need composure for the U (00) exercise. Sensing the parallels draws the peripheral light into the figure — in the yellow veil. In “withdrawal” and “holding in”, fear is expressed. Fear arises when the power in us which condenses our bones to parallelism and solidity, departs from its appointed place and flickers out.

When we have executed and sensed the parallelism of the U in different positions, starting from above, we should move the arms down through all positions without transition, then up again, doing so with increasing rapidity until the movement has become fairly swift. With this movement too, rapidity reaches through into the spirit and grasps it.
The lines of the arms of the eurythmy figure give a picture that looks like a section through a vortex, a “whirlpool” moves downward, sucks in something. It sucks in what we need when we are afraid, in order to counter this fear. With Goethe we can say:

“Cowardly thinking
Fearful uncertainty
Anxious complaining
Tremulous hesitancy
Averts no misery
Won’t make you free.

Against opposition
Yourself strongly preserving,
Never bending or bowing
But strength always showing
Calls down the arms
Of the good gods to you.”

These downward-moving arms invoke something. They call down to you the courage to reveal yourself as a human being, to stand firm, not to grow weary but to develop endurance and persistence. The fear which we have as spiritual beings on the earth is transformed by the U (oo) into the strength which forms the human figure.

INTERNATIONAL ANNUAL CONFERENCE OF THE MEDICAL SECTION AT THE GOETHEANUM
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Registration closes 9/3/2015

HEALING ASPECTS TO ADDRESS TRAUMA IN CHILDHOOD, ADOLESCENCE, AND IN BIOGRAPHY
With Michaela Gloeckler, MD
Renewal Week, June 28 to July 3, 2015
You determine to go forward... Shuddering seizes you, the hair on your head stands on end, your soul lies in your hand. – Hori

With these words written 3,000 years ago, an Egyptian combat veteran who signed his name “Hori” gave expression to his feelings of going into battle. More recently, in the aftermath of World War II, the term “shell-shocked” was used to describe soldiers’ feelings of withdrawal and aggression, numbness and emotional paralysis, loss of appetite, extreme fatigue, and so forth. By the end of the last century the diagnosis PTSD (‘post-traumatic stress disorder’) had entered the official DSM III professional lexicon, in which trauma was defined as an external factor leading to inner distress.

By now trauma is a household word, and no one living in today’s society is immune. It forms part of our present times—‘the age of the Consciousness Soul’—in which one’s soul-bodily constitution can become estranged from the spirit and experience itself as though walking through a ‘death landscape’. Like the condition of pain, traumatic experiences may initially be filtered through cognitive and emotional processes before becoming identified as an extreme threat to health.

Within the seriously traumatized person, however, a search for self may be concealed. Since the path of individualization is a painful process, it may be helped or hindered by traumatic experiences, especially those that stir our inner wish to transform ourselves, those around us, or indeed the world at large. Healing processes available through Waldorf pedagogy and anthroposophic medicine can help renew or re-ensoul the traumatized children and adolescents by working on their individual I-forces.

In this course we will discover how to develop an appropriate and effective understanding of trauma in these age groups. We will explore methods to help address the symptoms of trauma, from early signs of lost presence and joy in life to more advanced stages of the condition. Our essential focus will be on ways to strengthen the I-forces which are the source of re-integrating and harmonizing the more or less deeply disturbed soul-bodily constitution.

ATHENA NATIONAL CONFERENCE
Thursday, July 30 through Sunday, August 2, 2015
At the Christian Community in Chicago
“Impulses”
Working through Therapeutic Eurythmy to Address Stress and Anxiety in our Time with Dr. Ross Rentea

This conference, although primarily planned for physicians and therapeutic eurythmists, will also be open to eurythmists interested in exploring how eurythmy can work therapeutically with stress and anxiety issues to bring much needed relief and healing.

For more information contact: Dale Robinson
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