

Camphill – An anachronism in modern Ireland?

Introduction

Camphill has recently celebrated its fiftieth birthday in Ireland. The first community, Glencraig, was established just outside Belfast in 1955. In the South, Camphill arrived to the Wexford coast at Duffcarrig, near Courtown, in 1976. Altogether, North and South, there are now seventeen communities of all shapes and sizes. Each has a distinct character, determined by the particular needs that it strives to meet.

I would like to discuss here the role of Camphill in modern Ireland. I live in a community in Dublin, so most of my experience relates to the situation in the South of Ireland. However, many of the issues and trends are broadly relevant also to Northern Ireland.

Outline of Camphill

First, a little background. Camphill is an international movement working with children, adolescents and adults with special needs. More than 5000 people live and work in over 100 Camphill communities in 23 different countries. As a pioneer movement in the field of social renewal, Camphill seeks to promote caring, lifesharing communities where children, adolescents and adults of all abilities choose to live, learn and work together, recognising the unique contribution made by each person.

Camphill as a movement is inspired by the philosophy and practical teachings of Rudolf Steiner (1861 - 1925) and Karl König (1902 - 1966), the founder of Camphill. The character and purpose of each community is distinctively formed by the constellation of its members. Schools for curative education, centres for further education and training of adolescents and young adults, and lifesharing communities or working environments for adults each have their own distinguishing qualities. Central to all are certain ideals that characterise the Camphill approach:

- Mutual respect between individuals of all abilities.
- Concern for the spiritual and mental as well as the physical health of each individual.
- Recognition of the importance of setting the working life within a cultural and artistic environment, with a home life that is community based rather than institutional.
- Community life based on Christian values, celebrating the Christian festivals of the year.
- A feeling of joint responsibility for all that occurs; and striving to place individual aspirations in a social context.
- A social ethic of mutual support where each contributes according to ability and receives according to need. Most co-workers do not receive a wage or salary, but are supported directly from community funds.
- Recognition of the need to avoid isolation; rather to work in the world, in partnership with others.
- Concern for the protection and sustainability of the natural environment.

How is Camphill different?

On the face of it Camphill is quite like any other service provider in the area of special needs. We contract with the health authorities to provide residential, day placement and respite services. We are subject to the same guidelines and legislative requirements as all service providers. As economic entities, we have our budgets and accounting mechanisms. Health and safety, insurance, vehicle management, etc are part and parcel of our daily work.

However, referring back to the ideals that characterize Camphill listed above, there are some fundamental differences between Camphill and many other service providers. A good place to start in examining these differences is with the very term ‘service

provider'. Not wishing to be too controversial, I think it's fair to say that a service provider implies an economic contract to supply certain services in return for an agreed payment. As the purchaser of the service, the HSE are obliged to look for value for money as defined by the efficiency and effectiveness of the service provider. In this particular relationship, the individuals with special needs are referred to as the 'clients'. Clients are customers of a service; their rights are safeguarded by the contractual and legislative requirements of the health authorities. Among the characteristics that define this system are professionalism, standardization, specialization and quality control.

Camphill, like all organizations, does of course need money to operate and it's appropriate to have a contract with the funding agencies. It is not the requirement for a contract of some sort that I am discussing but rather the nature of the relationship formed by this contract. While Camphill's relationship with the health authorities is generally a good one, there is clearly a certain disparity between the role of a service provider and that of creating a lifesharing community. The focus of lifesharing is on the equality of rights and responsibilities, the endeavor to create an inclusive home and work environment, recognizing the spiritual nature of all individuals and seeking to uphold this through mutual support. The lifesharing relationship is essentially voluntary. It is individually based and cannot be defined in contractual or legislative terms beyond that of a personal commitment. This focus on the individual applies to all members of Camphill communities. This includes people with special needs, both long and short-term voluntary co-workers, a small number of salaried co-workers and co-worker children. It is a revelation to many people that the individuals with special needs are indeed the pivotal people in each community. They provide the social gel that facilitates a group of individuals to form a community.

I like to think of the ideals that are striven for in our relationships in terms of the Enlightenment ideals of liberty, equality and fraternity. High ideals indeed! But they have formed the basis of Camphill life in an ever -expanding movement for nearly seventy years. Therefore they are eminently workable in real life and present a challenging basis for personal development.

Referring back to the characteristics of Camphill listed above, there is another facet of our life that doesn't sit easily with the service provider role. Camphill communities strive to be sustainable communities, defined as places that attempt to integrate the ecological, social, economic and spiritual aspects of life towards creating a harmonious and inclusive place to live. The role of living together with people with special needs has already been discussed. However, this role can be set within a broader ethic of seeking to create a society that cares for the individual and the planet. A truly sustainable society will seek to be inclusive, egalitarian and empowering. It will also endeavor to create economic relationships that don't undermine nature and that distribute goods fairly. A sustainable society will promote creativity and spirituality. By definition, these aims should not be confined to the members of particular communities but are part of a global endeavor. In the jargon of the environmental movement, society should develop in a way that promotes inter and intra-generational equity.

In Camphill, the realization of creating sustainable communities is most obvious in the organic and biodynamic management of land, the efforts towards resource efficiency and recycling, the promotion and use of renewable energy, ethical purchasing and creating curative living environments. However, less obviously, there is an attempt to completely refute many of the trends in evidence in modern Ireland. For example, the economies of most Camphill communities operate on a needs-based system. This is to say, the communities resources are allocated according to the requirements of the individual, as expressed by them and in light of the needs of others in the community. If you think about this for a moment, it is a revolution in human arrangements. Just think how it would be if this concept were more widely applied! The same thinking applies to the financial arrangements between Camphill and the health authorities. The overall budget is worked out according to the community need and divided by the number of places. Whereas the usual economic law is one of maximizing returns, the idea here is to provide for personal needs while being cognizant of society's ability to meet these needs.

Another aspect of Camphill life that runs counter to the norm is our attempt at non-hierarchical management. I say attempt because it is an on-going striving rather than a definite procedure. This is based on consensual approaches and a wish to empower all members of a community to be able to participate to the best of their abilities.

Responsibilities are allocated according to experience, ability and the wishes of the individual. There are no 'leaders' or 'managers' as such and most communities have a range of fora where views can be expressed and decisions made. The very act of lifesharing lends itself to an informal meeting of people.

What is the role of Camphill in modern Ireland?

I would suggest that the disparity between the orthodox service provider role and the ideal of a lifesharing community has been bridged to date by positive relationships between Camphill members (including the broader body of families and supporters) and health authority personnel. However, I would also suggest that the personal basis for the relationship is becoming increasingly problematic. On the one hand, the search for equality within Camphill doesn't lend itself readily to the emergence of strong leaders. Most agencies prefer to deal with designated managers rather than committees where the search for consensus can delay decisions. On the other hand, within the health authorities, the place for personal discretion appears to be increasingly replaced by a raft of regulation, re-organisation and control mechanisms. This trend is, I believe, in part a reaction to the abuses that occurred in a hitherto relatively unregulated system and also a reflection of the liberal management orthodoxy that predominates in public service provision. Neither trend bodes well for the maintenance of good personal relationships.

This situation seems to mirror general trends in Irish society. When Camphill first arrived in Ireland it offered a completely different way to provide living and working opportunities for people with special needs. Over the years, many other organizations have emerged to also fill aspects of this need so that the difference between Camphill and other organizations has, in many ways, shrunk. Indeed, in some quarters Camphill is now

viewed as an old-fashioned, institutional-type setting. In an age of ‘mainstreaming’ and ‘care in the community’, the traditional Camphill “village” is deemed obsolete. This is so obviously a misrepresentation of the situation to those of us who know Camphill but the suggestion seems to reflect the fact that the interpersonal relationships between members of the health authorities and the communities have reduced so that the ‘system’ no longer has personal knowledge of Camphill life. It also doesn’t take account of the fact that much of the new development in Camphill has taken place in urban areas and has sought to be innovative in meeting the needs of individuals in a modern, culturally diverse, country.

While societal trends do not appear to be working in Camphills favor at the moment, I believe that Camphill has a vital role to play in modern Ireland. Without blushing, I can make a claim that the distinctive Camphill way of life offers an alternative in a society increasingly in need of such alternatives. This goes for people with special needs and all those others living in and affected by Camphill. In seeking to create a sustainable society, as discussed above, Camphill is part of a Global movement that has sought to provide practical solutions to today’s problems. In some ways, such as the development of small-scale renewable energy, Camphill has been among the pioneers. In other ways, the contribution that Camphill has to make has yet to be appreciated.

As mentioned earlier, a sustainable society is an inclusive society. In relation to special needs provision, I believe Camphill’s role is to promote the lifesharing model. Far from excluding people from the mainstream, this is, in my opinion, meaningful inclusion. Not care in *the* community as if the wider community by nature will provide the care needed (a whole other article, I’m sure!) but care in *a* community. A particular community of people that have chosen to live together and care for one another.

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