

Characterizing and Balancing Polarities

Some Thoughts and Themes

Stephen Spitalny

In a series of lectures recently published as *Education for Special Needs: The Curative Education Course*, Rudolf Steiner focuses on four polarities. He describes some rather extreme situations, but thinking about these polarities is helpful for seeing tendencies in the young children that we meet every day. This article draws on these lectures, on conversations with teachers, doctors, curative eurythmists, and curative educators, and on my own experience. I especially want to acknowledge Sunny Baldwin and Dr. Christa van Tellingen, (with whom I worked during a week-long course at Rudolf Steiner College in 1995) as well as the resources listed at the end of this article, especially the Thomas Weihs book.

If we can understand the essential gesture of each polarity, then we can try to support a more balanced development. Labeling children is not the intention of this article, and when discussing a child with colleagues or parents, I strongly recommend describing observations rather than using the following terms as fixed categories. These polarities are gestures that can help in our own empathetic connection to the children and can be thought of as shorthand for our own inner working. Each of these four polarities describes a situation where there is an imbalance in a particular realm of the human being. That perhaps is the underlying approach in a pedagogy that attempts to remove hindrances and obstacles to a child's development. The warmth of the adults in general is of benefit for the children. There can be no development without warmth.

Is there a particular polarity that I need to address to support this particular child's development? These polar behaviors reflect what is going on in the child's body; if we can help the body achieve balance, all aspects of the child's life become more balanced.

My intention is to characterize some situations, describe what is going on in the child, and offer pedagogical suggestions. I am not suggesting we become medical diagnosticians; yet thinking in medical pictures can stimulate our work and bring insight. Work-

ing together with an anthroposophical physician can be especially helpful!

These four polarities are the theme for the Pedagogical Section conference in Kimberton, Pennsylvania this June, and this article provides background for early childhood teachers who will attend the conference or participate from afar.

What follows is sparse and is only offered as a beginning, an outline. My own shortcomings in language are apparent, particularly in the use of words such as 'should' or 'need to.' Please read with an open mind and check for yourself if this can be useful in our work with young children.

LARGE-HEADED/SMALL-HEADED

This constitutional polarity is based on the physical form of the child, but describes a polarity in the realm of behavior. (see Chapter 2 in *Developmental Insights*; ed. by David Mitchell)

Large-Headed

Also called the 'cosmic child', the basic gesture is of the soul not deeply incarnated, but still in the cosmos. This is a dreamy child. Of course, the young child naturally lives with large headed tendencies, but this describes an extreme.

These children tend to have a roundness to them; round, rosy cheeks, curly hair, round face. They can be oversensitive, or even aggressive if made to be in activities they don't want to join. They also may react with anger if others don't go along with their fantasy, their dream. They have mature language skills, numbers are weak.

The imagination is active, a strong fantasy life. They carry their cosmic dream world with them. They have a royal quality, and may be a bit aloof. They play in their own dream world. They stand by and watch other's activities, rather than participate. These princes and princesses have high self-esteem.

These children are often born later than their due date. One could imagine they have a reluctance to be

born, a reluctance to enter the earthly world from out the cosmos. Their large head is too warm, too full of metabolic forces, and it needs to be cooled down. The nerve/sense system is not as strong as the metabolic forces which flow into the head. The child's willing pushes up into thinking.

Pedagogical Approaches

The basic approach is to help them come out of the cosmos to earth. Find ways to spark their interest in nature, in the world. Bring nature to their consciousness. Describe your observations for them. Describe what is really there, not fantasy pictures. "Look at this," "See these red and yellow leaves," "Feel how smooth this is," etc. If the adult can be interested in nature with enthusiasm and warmth, then the child can take it up through imitation.

At home, a cool cloth (not cold) to their face in the morning can be a help, perhaps with some rosemary oil as well (externally). Salty foods can be beneficial.

Bring their limbs into movement, and get both hands into action, e.g., folding cloths, finger knitting, washing dishes, playing in the mud, digging

The task is to bring them into activity without compromising their royalty, that is without adult authority. Use fantasy around the activity so they can live into it. Find ways to get their interest and involvement without direct instruction, demands, or commands.

Let the large headed child behave royally. There is nothing that can be done about their attitude. It is natural for them to be a princess or prince. They can be offended if they are expected to work. Be tactful and creative in engaging them. Pushing them can lead to withdrawal or anger. Give them time enough to achieve what is wanted.

Small-Headed

In the small headed, or earthly, child, the soul is over-incarnated resulting in an awake and intellectual child. The nerve/sense system is stronger than the metabolic forces, hence the nerve/sense activity pushes down into the limbs. They are clumsy, move around a lot, are fidgety, and have minimal concentration.

Details are given much attention, and there is a tendency to take things apart. At home they may be drawn to 'Legos' or similar activities. Small headed children are generally not very articulate with language, yet are good at numbers. They are quite intellectual and tend toward an less active fantasy life.

Generally, their digestion is poor with irregular bowel movements and they don't sleep very well. They are impulsive. Their over-active nerve/sense system drives them. They have an outer excitement, yet an minimal inner fantasy life. They do like to be involved and to help.

Pedagogical Approaches

The small-headed child can be reached by the warmth of love. Warmth in general is of benefit (for all children). Literally wrap them up with cloths and blankets. They need warming. Humor and enthusiasm on the adult's part also warms their heart. They have real limitations in what they are capable of, and our understanding of them helps. Help them down to their will and feelings since they live in thinking. Approach them not so much with words, but with gestures and deeds. Imaginative pictures speak to their feelings.

We can also encourage their natural compassion and guide them toward helping other children. They like to participate when they feel needed. All young children do, but particularly the small-headed children learn by repetition. Building up processes are what they need. They need to organically build up their body. Building, building, building. Watercolor painting helps soften and loosen these children. They are too intense and rigid. The flow and movement of the color helps loosen them.

A warm hot water bottle on the stomach at night warms the liver and improves metabolic processes such as the liver's building up cycle, which is at night (3pm-3am). Sugar stimulates the metabolism. It is best from flower or fruit. Fruity dessert is especially good after the evening meal. Lavender in the morning is wonderful for these children, for instance in a warm washcloth on the face.

OVERACTIVE (HYPERACTIVE)/UNDERACTIVE

This behavioral polarity is observable in the level of activity of the child, and in the activities in which the child participates.

Overactive

The behavior is the picture of normal development in a child some years younger than themselves. Their extreme love for the world brings them into such activity. "Constitutionally, there is frequently a predominant activity of the astral body here which is not sufficiently mastered by the ego. The result is that the children run after everything and are fascinated by everything which meets their senses" (Goebel and Glöckler, p 29).

These children have an intense feeling of selfhood, and an imbalance between sympathy (connection) and antipathy (detachment). They are flooded with sympathy. The sympathy makes them outgoing and active. It can generate aggression. It is their love for the world that makes them so active. They are not vicious or cunning, but suffer from a lack of self-control and inhibition. Other terms for this imbalance are ADHD, hyperkinetic, and maniacal (Rudolf Steiner).

This situation is often caused by encephalitis in early infancy. Encephalitis is an inflammatory condition of the brain. Some situations of inflammation of the brain are said to result from immunizations or vaccinations. The encephalitic incident can be caused by childhood diseases such as chicken pox, measles, mumps, rubella, whooping cough; or as a virus in itself. Some situations of inflammation of the brain are said to result from immunizations or vaccinations.

Thomas Weihs said these children have all had some kind of disease that affects the brain accompanied by fever and creating inflammation of the brain. If it was measles or chicken pox, for example, it was accompanied by fever and inflammation of the brain. The "blood rushes with great intensity into the brain and floods it with warmth and metabolic powers" (p 71) during the brain's formative stage. The brain's 'natural' state is of cool and stillness, not the warmth and activity that is brought by this condition. When the inflammation subsides, the brain is left with the results, a scar in the child's development. Childhood diseases can lead to this condition when the child is not given a quiet environment with reduced sense stimulation during the sickness.

Over-exposure to movies, TV, videos, and computers can cause this condition as well, particularly in the first three years. From birth to two-and-one-third years the etheric body builds the nerve/sense system. Assaults to the nerve/sense system while it is being formed gives the same damage as encephalitis.

A hyperactive child typically has well-developed large motor skill, but impairment in their fine motor skill. There is often noticeable rocking movement, when standing, sitting, crouching, or lying. This child tends to over breathe, to have a very intense style of breathing. It is difficult to fall asleep, and they often wake up in the night. Their sleep rhythm is disturbed. They have a fussiness around food.

Like an infant, they are delivered to their impulses, drives, and desires. These children present a picture of the normal development of a two year old in their behavior. The impulses are intense, the activities are largely over-emphasized and overdone with much energy and exuberance. There is a lack of reflection and little seeming uncertainty.

Some hyperactive children establish warm, direct contact with adults and other children, while some may suffer from a lack of contact and relationship. They take every bit of the adult's energy!

Hyperactive children can seem deceitful, lying, and malicious. They perform destructive acts with so much speed, skill, and cunning that it seems impossible they are not premeditated.

Pedagogical Approaches

Positive outlets must be found for the child's energy by bringing the child to a control of his movement. A balance is needed between sympathy and antipathy. A basic guideline is to recognize that the force which drives the child to aggressive and destructive behavior is one of sympathy and warmth. Approach them with warmth, love, sympathy, and goodness, rather than reasoning, logic, "truth," and "right and wrong."

The warmth effect is important, the warmth of the ego activity of the adult. Then the child can draw this ego warmth in to harmonize and regulate the metabolic processes.

The child needs reassurance of teacher's and parents' love, and inclusion in the rest of the group or family. Don't send this child out alone.

Strengthen the forces of detachment. One way is to keep stimulation to a minimum. They especially need a sheltered, consistent environment and for the adults to pay strict attention to regular eating and sleeping times.

Their senses are already over stimulated. T.V., videos, movies, radio, and computers are especially harmful. These intensify the over-stimulation, and the ego cannot assimilate all the sense experience. The uncontrolled activity of the astral body is intensified and concentration is further undermined. Concentration and attention are ego functions and require the bringing to rest of movements. In dwelling on one or a few pieces of information the child can build up concentration capacity. The adult's power of concentration in shared activities supports the child's under-developed ego functioning. Storytelling gives them an opportunity to be engaged with their attention. Create a whole mood of reverence and quiet around the story.

Simple puppet shows are good as well. With these children, it is especially important not to dramatize, not to play up the emotional aspect of the story.

They have a strong desire to help others. Make use of this. Develop their cooperation. We can direct their energy into fetching and delivering, especially when it is something that really needs doing.

Beeswax modelling can be a good activity, as can bread kneading.

Food should be mixed and light. Keep sweets to a minimum. It is especially important for these children to be kept from foods with chemical additives.

Regular warm abdominal wraps (compresses) for a half hour after lunch and before bed (can be left on overnight) are helpful. A story at this time is wonderful, but especially not TV, tapes, etc. In the wrap the following can be used; chamomile (harmonizing), yarrow (stimulates the liver), caraway (for gas), and oxalis (relaxes cramps). This draws in ego activity for the control of the metabolic processes. Consult with a doctor for this and other remedies.

Underactive (or Developmentally Delayed)

Hardness and denseness of the physical body doesn't allow thought and intention to become movement. The body bears heavily on the soul, which is too weak. The etheric body with its building up process and its dreamlike consciousness is strong. The child is involved in much day-dreaming, and not so much in outer activity. The world goes by too quickly for them since their attentiveness is not strong.

The physical body is too dense, and the four bodies don't fit and work together. In a number of cases the causes are fetal alcohol or drugs, fetal nicotine, and injury.

The sense impressions are received by the head, yet the body can't respond. Often even speech is impaired. Thoughts don't come down into the hands, hence, floppy and inactive hands. They look and act younger than their age.

Thomas Weihs describes that often in early infancy the child experiences a "lack of oxygen supply to the very tender and fast growing brain...usually associated with a constriction of the blood supply" (p71). This is opposite to the situation that leads to hyperactivity.

Other terms used are "underactive" and ADD, and the less pleasant "retarded" and "feeble-minded".

Pedagogical Approaches

Bring them into movement and activity. One can work with archetypal movements and gestures. Be aware that we are bringing them cosmic movement, that there is a connection to the cosmos. Bring the cosmos to this individual. We are working strongly with the gesture of the periphery to the center. Find ways to support and encourage self-motivation.

Food that is salty and spicy stimulates their taste and smell senses. Regular time to awaken is important, but they should be given enough time to get up, perhaps an extra half hour. It takes these children a long time to be all there. A cool sponge bath or face wash in the morning with rosemary is helpful. (see Goebel and Glöckler, p. 28) A doctor can help with constitutional metal therapies.

THICK-SKINNED/THIN-SKINNED

This polarity also characterizes the realm of behavior, though it has an organic, a physiological basis. I have found this a particularly relevant polarity for work in the kindergarten.

Thick-Skinned (Epileptic)

In the thick-skinned child, the ego and astral body are not able to penetrate and strengthen the physical and etheric bodies and the ego is not able to make a proper connection with the physical, natural world. "Cramps always occur when the etheric body atrophies and the astral body acquires a direct influence over the physical body, without the mediation of the etheric body. Thereby the ego becomes unable to connect itself directly with the forces in its physical surroundings (especially gravity) through the senses" (Goebel and Glöckler, p 29). This child is too much in the physical body and needs help connecting with the world and the four elements. A question that can help in characterizing a specific child is: Which element is particularly hard for this child to connect with?

There is a buildup of tension from the inability to accept and cope with experiences and deal with them effectively. This leads to a dreamlike relationship to the world.

The physical organism that the soul tries to enter is too heavy and dense. The soul cannot come successfully or sensitively through into a relationship with the world. The effort to do so creates an inner struggle, a tension which is released in the seizure, after which the soul returns to newfound peace and tranquillity.

In the epileptic, an organ, not always the brain,

provides a block to the ego/astral body fully penetrating the body to the forces of the earth. The ego/astral gets stuck. A denseness, a congestion develops in the organ. When the pressure builds up to a sufficient level, there is a seizure. The ego/astral leave the body and go into sleep. After waking, the ego and astral can pass all the way through. The seizure relieves the condition that caused the seizure. The seizure is the cure. It creates a softening of the organ. Again pressure begins to build from daily life, and the ego and astral are pressed out of the organ. And on and on....

Seizures most often occur on waking or falling asleep, as the ego and astral body cross the threshold to or from the body.

The epileptic creates antipathy in us. They are volcano children. They exhibit explosive behaviors, and emotional seizures. They can be very tense, and show this pushing, pressuring in many ways. They have an inner gesture of tension. The pushing is an attempt to release the tension. The explosion, the bursting out, is a release.

Pedagogical Approaches

Find ways to release the tension all the time every day. And find ways to connect them to the world and the elements. Draw them a bit into consciousness of what is around them. Beeswax is an activity requiring squeezing, squashing, etc. Kneading bread is also particularly good. It is important to cultivate and support sense experiences through stimulation of taste and smell; swimming and other physical activities that involve balance, touch, and warmth; and music. (See Goebel and Glöckler, p. 29.)

Curative eurythmy exercises involving weights on hands or feet help.

Starting activities is not as much a challenge as finishing things properly. They go quickly into tasks without quite knowing what to do. Help them to finish tasks and projects. All epileptics need to be kept warm, even to perspiring. They need always to be dressed warmly. Especially important is genuine warmth and enthusiasm in the teacher which warms thick skinned children. Warming herbs in their food is a help, especially the labiate family which includes rosemary, lavender, and thyme.

In lecture three of *Education for Special Needs: The Curative Education Course*, Rudolf Steiner describes particular types of after-seizure experiences and what they signify in relation to three of the elements. All of these epileptic children need warmth. They are not so connected to their own fire. Helping the child to

connect with the particular element that they have difficulties connecting with is important.

Thin-Skinned (Hysteric)

The gesture is of a physical and etheric body too permeable to the astral body and ego. The astral body and ego flow out too strongly into the surroundings. The thin-skinned person has difficulty 'containing' herself. Rudolf Steiner describes a "soreness of soul."

There is little resistance in the hysteric's body. The astral body and ego stream out into the world, the world is painful, and they draw back. They meet too strongly the forces of the earth and they experience pain.

Their tendency is to take delicate hold of things. They tend to perspire heavily and are often bedwetters. The hysteric child appears very young. Others experience great sympathy for them (up to a point).

The voice and body gestures of the hysteric say that everything is so important, everything is an emergency. Little hurts are truly very painful for them. We need to act sympathetically toward them.

Hysterics are very sensitive to the world around them. They are very aware of the people around them and are especially sensitive to others' feelings and what others are doing. They often have allergies of various kinds. Sometimes they have a tendency toward depression. A characterizing question is: How does this child live in his or her senses?

A high-pitched screech is a clue that they are gone. They need help to be brought back into themselves, into focus, into concentration. Their screeching is a picture of their streaming out of consciousness.

A typical statement of the hysteric child is: "I want to but I can't."

Pedagogical Approaches

Their basic need is understanding. They need the courage to meet the world. Boundaries are important, as they need to be contained. Hysterics need encouragement or help starting tasks. Once started they can usually keep going.

"I want to, but I can't," can be met with, "Let's go together." Then sit down beside them and begin your own work. "I can't,". "Oh yes, start like this," (while working on teacher's own work). Don't do it for them, but help them to get themselves started. Bring them to an attitude of "I think I can." It is best not to fall into sympathy and do their work for them. They tend to have low self-esteem, yet don't verbally praise them. Silently, inwardly, recognize their progress

with genuine appreciation.

Rhythm is important since change and transitions are especially hard for the thin-skinned child. Be careful of startling them and causing shock. Our reactivity is not helpful. But do plan little challenges. Planned, conscious action is therapy for them.

Keep this child near you, within reach. Then you can be there to moderate when they stream out, and you can find a more contained situation for them. Direct eye contact is too much for these children. Talk to them without looking in the eyes, talk over them, and they will be more able to do what you are asking of them.

The "Button-up cure" of Else Göttgens is helpful. Help them to button, zipper, and snap their clothing to help contain themselves. Also, help them to shut doors and drawers, after use.

Their hair, if long, needs to be contained, braided. They need layers of clothing, and long sleeves and pants. Moor lavender oil is helpful.

Seeds are particularly helpful as part of the thin-skinned child's diet. Baths with oil of lavender or St. John's wort are beneficial, particularly on a rhythmic basis. A doctor can offer remedies that can help the astral forces be brought in control in the metabolic region. (See Goebel and Glöckler for specific suggestions.)

SULFUR/IRON POLARITY

This is connected to protein production in the body and to how the child processes memory. It is more difficult to recognize in the young child than the other three polarities. Protein is built up of amino acid chains and sulfur bonded together. Memories are stored in the protein structure of the body, particularly in the organs. (This section is based on notes from Dr. Christa van Tellingen and Sunny Baldwin lectures.)

Sulfur Rich/Iron Poor

The child seems forgetful. Sense impressions are absorbed and can't be recalled. The memory is like a swamp. Impressions are saved, but certain ones get lost and cannot be brought back up. The child often feels an inner agitation, which can show as depression, frustration, or anger.

The hair color of the sulfur child tends toward blonde and red. Graying hair is sign of sulfur richness. Iron is deficient in the sulfur/iron interaction and therefore there isn't a balanced protein production.

Pedagogical Approaches

We need to find a way to help sense impressions be recalled to achieve a balance.

Rhythm helps release ideas from sulfurous protein; rhythm of the day, rhythm of the spoken word. The same sentence, poem, tasks, day after day, help develop the capacity to recall. Repetition helps to restructure the body's protein structure. They need to do, to participate in activity.

In their diet, they need salt from root vegetables. They should avoid eggs, onions, brassicas, and garlic. Iron is a helpful remedy. Check with a doctor.

Sulfur Poor/Iron Rich

Iron is rich in terms of balance with sulfur in protein production.

Thoughts keep coming back and coming back. We call it 'fixed ideas,' but really the sense impressions do not affix into the limb system. The ego organization in the metabolic/limb system is unable to hold impressions, and they keep coming back to the head. We might call it paranoia, or obsession. They seem fixed in their thinking, compulsive in their ideas.

A child with too much iron is usually dark-haired.

Pedagogical Approaches

We try to help their sense impressions penetrate to their limbs. The whisper of the adult can evaporate their fixed ideas, it loosens the fixed idea. Whispered words and impressions can be held by limb system.

In their diet they need fruits and sugars (not refined sugars). The smells of cooking, of ripe fruit, are helpful.

FOR FURTHER STUDY

Goebel, Wolfgang and Michaela Glöckler; *Anthroposophically Oriented Therapy in Pediatrics* Drs. Goebel and Glöckler are very specific about medical therapies including remedies and curative eurythmy. Holtzapfel, Walter; *Children's Destinies*

Mitchell, David, editor; *Developmental Insights* (especially Chapter 2)

Steiner, Rudolf; *Education for Special Needs: The Curative Education Course*

von Heydebrandt, Caroline; *Childhood: A Study of the Growing Child* (see section on large and small headed children)

von Zabern, Bertram; "Concerning Restless Children" from *AHE Newsletter*

Weihls, Thomas; *Children in Need of Special Care*