

Commitment, Compromise and Communicide

Inner and outer challenges for the Camphill movement in the UK

My first exposure to an “anthroposophical” concept was when, as a 17-year-old volunteer in Camphill Aberdeen in 1970, I overheard the German housemother telling the Scottish cook that we shouldn’t eat too many tomatoes, because “they make holes in the astral body...” Up till then my experience had been limited to a conventional academic education in London, and suddenly I was immersed in community, working with severely damaged children and trying to understand anthroposophical curative education. I thought it was all weird and crazy, but by the time I left seven months later, I had an inkling that perhaps these people knew a few things I didn’t – which was remarkable, because at that age there wasn’t much I didn’t know...

This first Camphill experience proved to be a lasting inspiration: after university I re-joined the movement and in the late 70s became co-founder of the Pennine Camphill Community in West Yorkshire. Those were heady, expansive times for Camphill, with new communities of different kinds springing up all over the British Isles. The generation of co-workers who had been teenagers during the 1960s found in Camphill a radical alternative to institutional social care, to wavery, to social fragmentation and to hierarchical management. I was inspired by the courage and insight of Camphill pioneers such as Thomas and Anke Weihs, Henning Hansmann, Peter and Kate Roth and many others. Those community ideals, and the potential for new social forms pioneered in partnership with people so often excluded from the mainstream, stayed with me during my subsequent career in organisation development, and inspire me still today.

Returning to involvement with Camphill four years ago – as trustee and then Chair of The Mount community in Sussex – I found a movement in severe stress, significantly damaged and under attack both internally and externally. Many communities were struggling to attract and retain vocational co-workers prepared to live full-time with the learning disabled (and each other, often more challenging!) and work without fixed salaries, normal employment benefits, or prospects of getting onto the housing ladder. In many places, the previous pattern of mostly unwaged co-workers supported by a smaller number of employed staff had been reversed. Some communities had failed to keep up with increasingly demanding legislation and regulation, which required vastly more administration, record-keeping, monitoring and reporting

than had previously been the case. There were accusations of co-workers exploiting the lack of management supervision, overspending and in some cases providing inadequate safeguarding for residents.

Without having investigated each alleged incident, my firm conviction is that, although there was certainly a degree of complacency in some communities, based on the much-admired history of excellent care provided in Camphill – and perhaps an element of anthroposophical arrogance (“We Know Best”) – significant breaches of care standards were isolated and rare, and allegations of financial self-indulgence much exaggerated. Nevertheless, the apparent lack of compliance with the expectations of commissioners and regulators, and the consequent financial risks due to falling referrals, alarmed some trustees in the communities’ governing charities. At The Mount, the Board which I later joined had felt compelled to bring in external management with expertise in current social care practice. This created tensions within the Community which took several years to resolve, during which the new General Manager gradually learned about – and came to admire – the core values of Camphill, and the co-workers and staff went through an accelerated process of learning, which enabled them progressively to adopt and adapt best-practice principles of twenty-first-century provision, and re-establish a high degree of self-management.

Other communities were not so fortunate in terms of the management imposed on them. The Camphill Village Trust (CVT) – the largest of the charities, responsible for nine communities in England and Wales – has been in deep conflict for several years now, culminating in a number of court cases initiated against the Trust by co-workers, disabled residents and their families. CVT trustees and executives stand accused of breaching the Charity’s founding constitution, manipulating the membership of the Trust in order to preserve their power base, and willfully destroying the central ethos of the Camphill way of life – in fact, of “communicide”.

This shocking situation came about as a result of the governance of the charity falling into the hands of a group of trustees who appeared to have no real understanding of or sympathy with the essential identity and principles of Camphill. These trustees allowed themselves to be influenced by one or two highly intelligent and manipulative individuals who were determined to change fundamentally the nature of the CVT communities. The Trust introduced

a series of “reforms” which caused deep distress among many residents, relatives and supporters. These included the introduction of managers with no Camphill or anthroposophical background, and abandoning the long-standing agreement with HMRC (UK tax authority) which allowed co-workers non-employed status. All the co-workers were told they had to become employees – within a conventional management hierarchy – or leave. Shift workers were brought in to support and then replace co-workers, who were also told they would not in future be able to share their lives and households with their disabled friends.

Children were no longer allowed to live together with the residents. Wide-screen TVs replaced active, participatory cultural life in the communities. Organic food, often from the community’s own land and communally cooked, started to be replaced by ready meals and fast food. Anthroposophical therapies were replaced by basic National Health Service care. The health and well-being of residents has deteriorated, with increases in obesity, diabetes, mental illness and the prescription of psychotropic medicine, all of which had previously been well below national levels for the learning disabled. The continuity of supportive relationships in family settings with co-workers was lost, causing deep distress to many disabled residents. They had been equal partners in shared life and meaningful work; now they became recipients of care, with certain “activities” provided for them. All this was imposed with no meaningful consultation with those directly affected.

CVT’s care workers are paid little more than the national minimum wage, whilst the Trust’s “Chief Executive” – a new role which had never before been needed – is paid more than £90,000 per year. In this context, the irony of accusations about excessive co-worker costs (average c. £15k p.a.) seemed to be lost on those in power. The young volunteer co-workers, whose enthusiasm, energy and idealism has always been an important contribution to the Camphill way of life, were left isolated and confused, first given responsibilities for which they were unprepared and unsupported, and later banned from all “commissioned care” activity. It was heart-breaking to read and hear their disappointment and disillusionment with these experiences.

Faced with increasing outrage and resistance from residents, families and supporters of Camphill, the behaviour of the CVT regime increasingly resembled that of a totalitarian state: opponents were vilified, excluded, subjected to spurious disciplinary charges, suspended or paid to leave with gagging orders. Some of the residents from Botton Village – the last outpost of significant resistance

– travelled to London to protest outside Downing Street. A brave group of co-workers held firm in Botton, supported by large numbers of local and more widely-based friends who created a substantial organisation, Action for Botton, to uphold the way of life of this much-loved village community. Meetings were held, funds raised, a website created, support gained from professionals, politicians and the wider Camphill movement. At one point the co-workers were more or less under siege, their funds cut off and buildings locked against them. Food parcels were sent in for them from supporters.

Attempts at mediation, brokered by the General Secretary of the Anthroposophical Society in Great Britain and facilitated by a leading anthroposophical conflict expert, failed to produce any real change to CVT’s stance or actions. Eventually legal action had to be instigated – a kind of “asymmetrical warfare”, since the litigants – co-workers and families of residents – had to pay the legal costs from their own pockets, and incurred significant further financial risk, whereas the CVT executives and trustees could use the charity’s substantial assets to defend themselves – against their own “beneficiaries”. Following a preliminary hearing in the High Court, legal mediation was initiated to try to reach a resolution before a full trial. This is now in process, with progress being made in some aspects, but it is too soon to predict the outcome. Astonishingly, although the Chair of the CVT trustees has recently resigned, most of the trustees and the key executives remain in place in spite of having created a devastating conflict, destroyed the reputation of a once highly-regarded charity, incurred huge legal and professional costs and alienated large numbers of stakeholders. It seems inconceivable that a sustainable solution will be achieved without a far-reaching regime change.

What can be learned from this deeply distressing story – an anthroposophical charity betraying its founding principles, and being taken to court by the very people it is designed to support? I believe there are some important lessons for all of us who support Camphill – and similar communities – and want to see anthroposophical social work continue to contribute to a more human future society:

1. We need to explore and experiment with *new forms of legal structure and governance*. The long-standing default option of “Company limited by guarantee, registered as a charity” may no longer be fit for our purposes. There are variants on this structure, as well as alternatives such as Community Benefit Societies, Community Interest Companies and Cooperatives, which may be more suitable to secure community self-determination and self-management.

2. We need to embrace developments in social policy and ensure that our practice remains exemplary both spiritually and in the eyes of the authorities. Easier said than done, of course, but if we recognise what is positive in policies such as “personalisation”, “care in the [wider] community” and “safeguarding”, there is always the potential for transformation – for example, standing up for the rights of the disabled to live in an intentional community or shared household if they so choose.
3. We need to articulate, promote and lobby for what is unique and valuable in the Camphill shared living model, including the important distinction between “community *with*” and “provision *for*” the disabled, who do not need or want to be regarded as passive recipients of care, but rather as partners in common life and work. In an era where care has become a

commodity, semi-commercially provided via “personal budgets”, we can demonstrate the life-enhancing value of non-transactional, mutually supportive relationships between so-called able and so-called disabled community members.

To follow this final requirement, a new Alliance for Camphill has recently been created and has already held a successful briefing event in the Palace of Westminster (UK Parliament) for Members of Parliament, government advisors and policy makers. The aims and principles of the Alliance are set out below: membership is open to anyone who supports them. Applications for membership can be sent to stevebriault@gmail.com. It won't make holes in your astral body....

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The **Alliance for Camphill** is a formally constituted independent association of individuals who support the core principles of the worldwide Camphill movement; specifically:

- a. Self-managing intentional communities, schools and colleges based on the image of the human being and society articulated by Rudolf Steiner and Karl Koenig;
- b. Collaborative collegial working, including non-salaried, vocational status where this is freely chosen by co-workers and acknowledged as legal and compliant by the authorities;
- c. In the case of adult communities, partnership in life and work with (rather than primarily care provision for) people of all abilities and support needs;
- d. Living arrangements including shared households based on individual needs and preferences;
- e. Full and appropriate engagement and empowerment of stakeholders in governance, supportive and advisory structures.

The Aims and Purpose of the Alliance are:

- a. To promote the above principles as an important contribution to society and to the dignity and freedom of human beings with all types of ability and disability;
- b. To campaign, lobby, represent and where appropriate negotiate in defending, preserving and further developing communities based on these principles.
- c. To provide positive practical and financial support to individuals and groups working to uphold the core principles, and to request, collect and distribute funds freely given to support these aims.
- d. To collaborate with other groups and organisations whose aims and approach are compatible with those of the Alliance.

