

Professorship Anthroposophic Healthcare



Effects of anthroposophic rhythmical body oiling therapy on symptoms of stress and wellbeing in children and youth with mild ID and psychiatric disorders

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KEYWORDS:

Anthroposophic rhythmical body oiling therapy

Effect-study

Stress and wellbeing

Children and youth

Mild ID

Psychiatric disorders



BACKGROUND: One of the main therapeutic instruments of anthroposophic nursing is rhythmical body oiling. This is gentle rhythmic application of specific plant oils for specific indications. The general aims of rhythmical body oiling are: balancing the physiological processes of the organism, restoring energy, and supporting the body's own healing process. Despite excellent clinical experiences, until now no outcome studies have been executed.

OBJECTIVE: To investigate the effects of rhythmical body oiling on symptoms of stress and wellbeing in 'problematic youth': children with developmental disabilities (mild intellectual disabilities, psychiatric problems and in most cases traumatic experiences).

METHOD: A quasi-experimental study with an experimental group and a control group. Experimental treatment: 12 sessions with rhythmical body oiling followed by bed rest and storytelling; a total of 30 minutes per session, two sessions per week. Control treatment: treatment as usual and, as in the experimental condition, 12 sessions with 30 minutes bed rest and storytelling.

PARTICIPANTS: 30 Children in the experimental group and 30 children in the control group (8-18 years of age), matched on sex, age and psychiatric classification. All children have a mild intellectual disability and psychiatric disorders (autism, ADHD, reactive attachment disorder, PTSD); some have multiple disorders. Most have a history with traumatic experiences (physical and/or sexual abuse; accidents). Children are in residential care or visit a daytime treatment facility.

Measured indicators of stress and wellbeing: Heart rate, respiratory rate, body temperature, heart coherence (also called heart rate variability, a stress related indicator, measured with a sensor at the earlobe and a specific computer program). All indicators were measured at the start and at the end of each session, in both the experimental and control group.

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| Results 1 | Heart rate/respiratory rate coefficient after each session in controls is around 4, in experimental group clearly 4+. This indicates better blood circulation and better diathermy . |
| Results 2 | Body temperature in experimental group after each session is 0.3° C higher than in controls. This indicates better diathermy . |
| Results 3 | Body temperature in experimental group increases 0.3° C in each session. In controls body temperature is constant. In almost all sessions the difference is significant ($p < 0.01$). This indicates better diathermy . |
| Results 4 | Heart coherence in experimental group after each session is in the 22-44 range, in controls in the 5-12 range. Differences after the second session are significant ($p < 0.01$). Stress reduction in controls is present, but small; in experimental group stress reduction is very large . |
| Results 5 | Heart coherence in experimental group raises 18-36 point in each session. In controls heart coherence decreases or increases from -1 to 5 points. Differences in stress reduction between experimental and control group are significant ($p < 0.01$) and very large . |

DISCUSSION: this outcome study provides first empirical evidence of the positive effects of rhythmical body oiling. This quasi-experimental study with an experimental group and a control group gives evidence that this therapy is *effective in stress reduction and improving wellbeing, in improving blood circulation and in improving diathermy*. Limitations of this study are that it has a quasi-experimental design and that it is a single-site and a single-therapist study. Now that there is evidence of positive effects of anthroposophic rhythmical body oiling therapy, further effect studies, preferably with a RCT-design, are indicated. In these studies participation of more therapists from more sites are required. Furthermore, these studies can investigate effects on client behavior.