

Various topics

Standardisation of an anthroposophically oriented questionnaire for progress documentation of therapeutic processes and treatment assessment

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Objective

Standardisation of an anthroposophically oriented questionnaire for progress documentation of therapeutic processes and treatment assessment.

Introduction

Therapeutic outcomes reported by anthroposophical medicine are capable of empirical evaluation with scientific methods. Moreover, anthroposophical medicine has itself developed evaluation tools (medical: Kiene et al. 2005; quality of life: Beer et al. 2001) which adhere as far as possible to viewing every patient as a unique individual. New in the present line of study, to the author's knowledge, is the attempt to use the conceptual background of anthroposophical medicine to develop a questionnaire for progress documentation and treatment assessment which can also be used outside the realm of anthroposophy.

Methods

The original questionnaire proposed by the author was developed further through a multi-stage expert feedback process (Delphi-system) involving amongst others A. Warning (anthroposophical medicine, Alanus University), P.C. Endler (research methods) and H. Lothaller (questionnaire development and statistics, both Graz Interuniversity College).

Results

The questionnaire presented here is intended for use by anthroposophically oriented therapists and researchers and primarily for the purpose of reviewing the use of anthroposophical therapies (e.g. rhythmical massage, eurythmics, ...). However it can also be used for assessing any other method of therapy or treatment, be it conventional or complementary. The questionnaire was developed on the basis of the conceptions of anthroposophical medicine (e.g. anabolic and catabolic processes, the elements of water, air, fire and earth, etc.). It thus permits a detailed observation and assessment of the progress of therapeutic processes from an anthroposophical viewpoint (21 items). However, no explicit mention of these concepts was made in the questionnaire in order not to unnecessarily limit its potential range of use. The questions primarily refer to bodily feelings and chronobiological processes but also to habits, preferences and goal orientation. Answers are mostly to be entered in a conventional linear scale. The combination of two linear scales yields outcomes within a fourfold typology which can be interpreted from an anthroposophical viewpoint.

Conclusion

The first phase of standardisation can be considered accomplished. Several treatment assessment studies will help to validate the questionnaire.