

Review Article

Humanising Science and Medicine: Critical Paradigmatic Conversations by **Richard House** with 14 others, **InterActions**, **Stroud, 2025, 418 pp, ISBN 978-1-915594-08-2, price (paperback) £24**; available from Wynstones Press at <https://tinyurl.com/2kkzfm27>

Reviewed by **Judy Barber**^{1, 2}

The cover illustration for *Humanising Science and Medicine* is a painting by Raphael of Greek philosophers standing together in conversation – apposite for a book of deeply philosophical conversations. This is indeed humanising because in life we learn and develop in conversation.

Humanising Science and Medicine is a series of written conversations recorded in the last few years. I found them magical because they are relational spaces between bright minds. One of the contributors, child psychiatrist Dr Sami Timimi, ‘liked this conversational exchange/discussion style interview more than just an “odd short question” style interview!’ It is a relief discovering such thoughtful writing from people who are talking sense about crucial topics, considering philosophy, society, politics and individual sentient people. We are invited into the world of scientific activity. It is rich, complex and academic. It took me a while to latch on to the vocabulary, but what a treat it is reading science that isn’t as dry and linear as discreet academic articles alone tend to be. I found affirmations of what I already knew or sensed, and doors opened in my thinking. It is so important to strive to think on these levels, continuing to expand our conceptual vocabularies. We mustn’t stay separate from the academic world, mustn’t glaze over or be shrunk down by limiting and controlling language. Richard House’s book is a seminal work, a magnum opus that is the antithesis of that which we have been told to do in recent years, namely to ‘trust the science’.

I am not a doctor, a professor or a scientist, but my mother was an industrial chemist and, later, a biology teacher; and my father was an engineer and a young friend of George Orwell, with whom he corresponded for years. No doubt they helped me to develop as a thinker, and I am accustomed to and I seek out real conversations and writing in which

science is normal, a tool for discovery, and for challenging sloppy reasoning and fixed beliefs. All this, and my own work with healthy food and natural wellness, make this a book I am very glad to have. I tell you this because we all bring our own life experience to these conversations, and here and there I felt I wanted to join in. When I go to a talk, the Q&A at the end can be crucial. Whether or not I ask a question myself, that process often answers something that was surfacing in me, perhaps only half-formed. It also brings fresh thinking and somehow rounds things out. In a sense that's the process House uses, having himself already digested the oeuvre of each contributor's research and thoughts. His reflections on each contributor's material, topics, trains of thought, paradigms and his asking further questions that then elicited the evolving wisdom of the other was very helpful for consolidating my learning. We can reap the benefits and feel engaged ourselves with living thinking. I couldn't resist adding something of my own here and there, in part to illustrate this kind of engagement. I can't study all this without being involved myself. Perhaps this hints at Goethean Science, which is brought in Chapter 12 in the conversation with Dr Katherine Buchanan.

As these chapters are already condensed from the life work and evolved thinking of each contributor, further condensing seemed too exacting a task, and probably not a useful one. Instead, I have selected something of what stood out for me in each chapter, with interesting quotations to give you a sense of what is in store when you read this book.

Foreword by Dr Tess Lawrie

Dr Tess Lawrie's Foreword to the book puts *Humanising Science and Medicine* in the context of the growing numbers of people who are 'questioning the idea that "the science" and its associated institutions, favoured of mainstream information sources, are reliably objective'. As a medical doctor, Lawrie had been a World Health Organisation consultant who became disillusioned with this and other bureaucratic 'academic' institutions. She knew something serious was up when there was no reliable evidence for declaring the Covid 'pandemic', nor the worldwide interventions.

Dr Lawrie sees the current system as a profit-driven system thriving on disease and not health, and believes (as do I) that we must 'do the science' ourselves, taking control of our own health. The World Council for Health (WCH), which she helped found, is very different, being a growing coalition peopled by over 250 different grassroots advocacy groups for informing individual decision-making – a 'people's messenger' rather than an authority dictating policy to benefit corporate funders. I find Dr Lawrie's introduction to the book heart-warming because it underlines the real possibility of the unfolding of a 'truly human future informed by a reliable, ethical, uncaptured science', and endorses the value of the nitty-gritty of Richard House's conversations in *Humanising Science and Medicine* in enabling this unfolding.

CHAPTER 1

‘Paradigms, Paradigms’ – Dr Martin Cohen (interview conducted in 2021)

In particular times and places, paradigms can feel more solid than the sets of assumptions they actually are. This interview was conducted in 2021 during the Covid experience. It is as important for what House writes in his questions as much as it is for the contributor’s responses (this is true in all the conversations in the book). For example, House refers to Cohen writing of a ‘self-referential bubble of experts merely following other experts’. They both saw dishonesty in this. House said he had lost count of the number of times he had heard the ‘expert’ discourse being uncritically invoked by politicians and media commentators. Science can only really be understood if we see it as already the history of science, always with the shifting prisms of the beliefs and understandings of the time. Already the Covid panic can be seen with hindsight. Cohen writes of quickly shifting attitudes to mask-wearing and its likely efficacy, referencing the philosopher of science Thomas Kuhn, that ‘There is no cool, clinical science that sifts facts; rather there is this fetid swamp of bias and vested interest, which coalesces around certain viewpoints.’ And regarding nutrition, he writes, ‘Salt, sugar, fat, meat... they all have their turn as the big bad enemy’. Regarding paradigms, Cohen states that ‘Pigs cannot fly, even if some studies are published indicating that they can. But paradigm theory shows that the limits are surprisingly generous!’

CHAPTER 2

‘Science for Heretics’ with Professor Barrie Condon

It’s the *quality* of thinking throughout these conversations that is so valuable. For example, Condon wrote about the DSM, the *Diagnostic and Statistical Manual of Mental Disorders*, over a series of editions, with regard to homosexuality. It had been classified as a mental illness. After a furore by the Gay Liberation Front, that was altered, but only after a DSM referendum decided it was only a mental illness if the ‘sufferer’ was troubled by their orientation – and coined the term ‘homodysphilia’. They later swapped that for ‘ego-dystonic homosexuality’, and then dropped that too. That they had to keep voting didn’t do anything for the psychiatric profession! This was still separating out homosexuals, and Condon pointed out that unhappy heterosexuals didn’t have an ‘impressive new word to describe it. Why should homosexuals be so lucky?’

He mentioned the vitriolic debate about bereavement lasting more than two weeks being classified as major depressive illness, and the growing feeling that ‘the DSM’s simple disease-model approach may be fallacious and the categories phantasms... We don’t know where the mind comes from and have little or no evidence for how it arises from flesh and blood, with many psychiatrists doubting the organic existence of mental illnesses and seeing them as reactions to external events and environments.’ House wrote

that Barrie Condon ‘would be just the kind of person I would like to get stuck in a pub with!’ I think so too!

CHAPTER 3

‘Dissent in Science and Medicine’ – Professor Brian Martin in conversation

Examining dissent in itself is interesting. When active in the environmental movement, Brian Martin learned about cases of scholars who taught or did research on environmental issues coming under attack. He wrote a paper, and in seeking comments was sent more stories, becoming attuned to the signs of the suppression of dissent. That led him on to studying academic disputes. He reflects on the motivations of those who suppress dissent: ‘like nearly everyone, they have the best of intentions. They see themselves as defending against attack from dangerous views and damaging actions.’

With regard to whistleblowers, when the focus is on the person speaking out rather than the suppressed topic, Martin covers scientific controversies including Covid, nuclear power, pesticides and fluoridation, in each instance finding evidence of suppression of dissent, saying that where there are powerful groups with a stake in the outcome, suppression is to be expected. In terms of justifying actions, Martin likes the ‘two-minds model’ and Johnathan Haidt’s image of this as our ‘elephant and rider’ – the elephant being intuitive, fast and judgemental while the rider is logical and slow, weighing options and calculating. Those who support mask-wearing see this as caring and those who oppose it do too. In either case, their rational rider minds search for evidence.

CHAPTER 4

‘Postmodern Illness?’ – Professor David B. Morris in conversation

In part House and Morris come from different angles in this chapter about moving on from the rigidity and limits of modern Western medicine, but they are on the same page with House quoting Morris: ‘The medical literature regularly refers to “mechanisms” of disease. I would rather see researchers assume that humans are organisms, not machines, and that human diseases involve processes, not mechanisms. Would this change in assumptions lead to better health care? If so, as I believe, then I am all for it... Evidence-based biomedicine mostly *ignores* or *excludes* solid evidence concerning affective, cognitive, spiritual, and cultural dimensions of human health and illness.’ It is refreshing to read how thoughtfully and thoroughly Morris responds to House’s questions. I wholeheartedly agree with Morris that ‘Any system of medicine is no better, in my view, than how it *treats* patients – by which I mean more than merely the medical treatments it offers – but rather depends on how it *sees* and how it *values* patients’ (his italics).

CHAPTER 5

“We’re All Feyerabendians Now!”: Where Science and Society Meet’ – Associate Professor Ian James Kidd in conversation; invited commentary by Dr Onel Brooks

Good books lead to other books, and I will be reading Paul K. Feyerabend. I feel personally validated and strengthened by reading about Feyerabend because his thinking ranges beyond the confines of ‘pure’ science. He followed his interests in so many directions, as have I, and most likely have you. It is fitting that a chapter of *Humanising Science and Medicine* is devoted to a deep conversation about a particular person with unique perspectives. Science can’t be separated out from the human beings involved and their cultures. Perhaps that is why this chapter is the most complex one in the book.

I resonated with Kidd: ‘it’s a false dilemma to choose between “head and heart”. First, we usually need both; and secondly, any attempt to draw any stable distinction is likely to fail.’ Commenting on how this plays out, he writes, ‘Close attention to the actual history and practice of science shows that there is no such thing as *the* scientific method, in the sense of fixed, singular and context-invariant methodological rules that apply whether one is studying sunflowers or supernovae’ (his italics). ‘What do we find’, argued Feyerabend, ‘is a messier, more complex assemblage of formal and informal methods, *ad hoc* adjustments, experimental fudges, creativity and imagination, and a fair bit of contingency and luck. This is clear to anyone who’s actually performed scientific research.’ I wonder whether we are all, indeed, Feyerabendians now.

CHAPTER 6

‘The Western Medical System Is Not Based in Genuine Science’

Dawn Lester & David Parker in conversation

It’s interesting that it took an accountant –and an engineer to research for ten years and write a book called *What Really Makes You Ill?* – one that questions (even the title is a question) basics such as germ theory. Lester and Parker were amazed to discover that it has never been proven that any bacterium or virus is the cause of any disease. This led them ‘to raise the inevitable question of why we are all so ill-informed about the true nature of illness, despite the efforts of many physicians and others who have written about the problems within the medical establishment’. They discovered plenty of evidence for the causal factors of illness being inadequate nutrition, exposure to toxins, exposure to EMFs and excessive emotional stress. This flies in the face of so much in Western medicine, in which germ theory is embedded and pharmaceutical drugs predominate.

They write further that ‘modern medicine can only be described as appalling with respect to its ability to be a health-care system’, and they go so far as to say it’s fortunate that it is ‘becoming obvious to ever-growing numbers of people that it’s a failing system’. They

conclude that ‘we have all been indoctrinated into a false belief-system that claims that “modern medicine” has all of the answers to our health problems’. I appreciate that Lester and Parker don’t pull any punches, and have the wit and courage to express their views, including pointing to how those with vested interests want people to feel helpless and to look to authority. By describing the human body as ‘an amazing self-regulating and self-healing organism. Lester and Parker are indeed writing towards humanising science and medicine.

CHAPTER 7

‘Towards a Paradigmatic Transformation in Modern Biomedicine’ – Vincent Di Stefano in conversation

In this conversation, Vincent Di Stefano shares from his extensive knowledge of ‘natural medicine’. This is particularly helpful for me as it is my passion and area of expertise, especially nutrition; and I appreciated his expertise and clinical experience. He reminds us that, rather than being merely ‘carriers of symptoms requiring remediation... there is the issue of what it is to *be* a whole being... more than our biology’ (his italics). Di Stefano asserts that the ‘holistic sensibility also seeks to engage with the meaning of such notions as soul, spirit, mind as integral to understanding the whole person in their lived context’, and that this ‘involves an ongoing relationship that offers far more than a simple course of treatment’. House asks: ‘...how important deliberate attempts to obliterate complementary, natural and indigenous medicine have been in the course of the inexorable rise of biomedicine, in relation to other healing practices?’; and Di Stefano writes about moves towards *integrative medicine* that ‘consciously operates out of a holistic paradigm, and returns the depth perspective to the clinical encounter’, and of doctors ‘who accept the centrality of diet and life-style, and also the role of psychological, social and spiritual elements in the creation of both health and illness’.

Di Stefano further writes that, ‘What you seem to be pointing towards, Richard, is the notion of cultivating... a state of consciousness capable of discerning the hidden and opportunistic webs of influence that encourage conformity to norms of medical and social expectation. These webs include the vast bio-industrial-pharmaceutical-technological infrastructures through which immense amounts of money move, and by which people are kept in a state of perpetual vigilance regarding their health through attention to such things as cholesterol levels, blood pressure, and the next bowel, prostate, breast or pap screening test.’ He asks how people are to wake up to these exploitative capacities, and to become conscious of the value of taking responsibility for their own health. Di Stefano is concerned about the ‘dominant cultural ethos that sanctions a collective somnambulism in virtually every dimension, extending from the state of the environment to our own bodies, and that offers reassurance that all is well and that we are being well looked after by “the powers that be”’.

CHAPTER 8

‘The Limitations of “Medico-Scientific” Psychology, Mental Healthism and “Cure”’ – Dr Bruce Scott in conversation

The book’s contributors all have fascinating biographies, and Dr Bruce Scott’s honesty about his life is ideal for this conversation. He writes about his own ‘dark night of the soul’ struggles using the cognitive model of depression, concerned about becoming a ‘fly in a bottle’ and looking for a ‘cure’. After a year of psychotherapy, Scott realised there was no formulaic cure, but that the presence of the analyst witnessing and sharing her own fragility brought him to knowing there wasn’t a cure for his human state. This was part of his liberation ‘from the medico-scientific-technological way of seeing mental distress’. Scott compares that way of seeing and wanting to get rid of suffering, with religious-spiritual ideas/practices that instead use it as nourishment.

This is an intense conversation unfolding in House’s own ‘home territory’ of psychology and counselling. They go wide, with House, for example, being interested in Scott writing about ‘the political left predominantly adopting the cultural hegemony of mental health; the psychopathologising of everyday life and a reverence for therapeutic culture’. House was shocked and dismayed by the political left’s abject response to the Covid crisis. Scott responded about ‘happiness being demanded by the so-called radicals of “mental health” campaigns’ buying into ‘the capitalist and neoliberal imperative of the adapted individual, alienated by the modern metaphysics of the self’.

For House, the biggest elephant in the room is that we are ‘being cultured out of a religious/spiritual world view’. Scott thinks that ‘human civilisation is on a precipice mirroring some dark dystopian science-fiction movie – except that it isn’t a movie any more’. However, Scott also reckons that this is ‘a most spiritually enlivening time to be alive. We are presented with the choice of standing by our principles of justice and on being on the side of the good, or selling out and siding with evil.’

CHAPTER 9

‘Towards a More “Humanistic” Psychiatry?’ – Dr Sami Timimi in conversation

Sami Timimi’s story about being failed for referencing R.D. Laing in a course essay reminded me of my daughter’s experience preparing her project for AS level Psychology. She was ready with sufficient participants to replicate Rupert Sheldrake’s successful experiment showing more telepathy between identical later-split twins and non-twins, but was told that she couldn’t do it because it wasn’t suitable. Who sets such criteria? Why the perceived need to set parameters? House responds to Timimi’s experience of his essay being failed by referencing philosopher Thomas Kuhn’s work, showing ‘all too

clearly how an old paradigm will fight to the death to maintain its hegemonic power and way of seeing the world’.

House wants to know whether psychiatry is still insulated in its old paradigm. Timimi concurs, and finds it quite frustrating that ‘The institutions of psychiatry... have failed to challenge the “dumbing down” of the intricacies of the human condition and its troubles into simplistic (what I call “MacDonalised”) constructs that are amenable to being placed into discreet categories, with their particular corresponding technical interventions’. For example, Timimi feels that diagnoses like ADHD (attention deficit hyperactivity disorder) ‘reflect an ambivalence that neoliberal Western culture has towards children that is often manifest in the tendency to problematise “childish: behaviours and then “medicalise” them’.

Sami Timimi also writes of organisations developing aspects of more humane, person- and community-centred services. We can only join with Richard House in hoping that this kind of work will help to turn the tide towards a more humanistic orientation for psychiatry.

CHAPTER 10

‘Towards a “Scientific Revolution” in Modern Medicine’ – Dr Thomas Hardtmuth in conversation

In this conversation, Thomas Hardtmuth, a German anthroposophical doctor, lays out that “‘Autonomy’ is understood in the salutogenic sense as *the ability to self-regulate and thus experience self-efficacy in one’s own life*’. Hardtmuth continues to explain that this ability to self-regulate on the spiritual/cultural level is called ‘resilience’ in the mental realm, and ‘immune function’ on the biological level. He maintains that these levels can’t be separated, as in any human being there is always an essential self as the ‘*organising architect*’.

House helpfully reiterates this in the exchange, and by reinforcing the three elements as an inseparable *holistic* human phenomenon is well placed to ask whether it follows that it is not appropriate to treat just one of these three levels ‘without addressing the other two levels as well’. Hardtmuth agrees, saying that the disease process cannot be reduced purely to the biological level, and that doing so creates room for fatal error, including the error of seeing viruses in terms of a battle with the body, without taking into account the conditions in which particular viruses flourish. The scientific revolution they agree needs to come is a medical science *of living connections*, with uniqueness and individuality at its core.

CHAPTER 11

‘Climate, Covid and Conspiracy: Interrogating “The Science”’ – Peter Taylor in conversation

Peter Taylor’s work on climate change makes perfect sense. It would be small-minded to consider that humans alone affect the planet when climates have changed so often in the past. House asked Taylor about his book *Chill: A Reassessment of Global Warming Theory*. Taylor has a strong academic background (all these folk have), had advised government at all levels, local, national, European Commission and the UN, and had worked on a government project on renewable energy. When those people didn’t act on his findings he became an activist with Greenpeace.

When he wrote his book *Chill*, his former environmental movement allies turned against him and, as they couldn’t fault his science, made personal attacks. According to Taylor, there is now a network of scientists who have concluded that about 75 per cent of current global warming is from natural cycles, and who are concerned to correct the bias of the institutions and the United Nations – but his former allies won’t acknowledge or invite discussion on environmental issues! House liked the distinction Peter Taylor made between ‘real science’ and ‘institutional science’ in which institutions, politicians, businesses and funding head in a particular direction. Taylor writes, ‘This phenomenon of vested interest works both ways – science becomes hooked on the “gravy train” of publicly approved climate finance, and the funding bodies tend to fund research that supports prior commitment to computerised projections. The rot includes science journals conspiring to block or retract offending papers, and universities sacking scientists with dissident views.’

CHAPTER 12

‘Science in a Different Key’ – Dr Katherine Buchanan in conversation

Katherine Buchanan’s biography towards becoming an independent evolutionary biologist, ecologist, mentor and tutor is fascinating and outstanding. I found it very helpful in better understanding practical Goethian science.

Buchanan’s doctoral research involved camping every summer in the Alps while studying the evolution and population genetics of two races of grasshopper. In months of phenomenological observation, she got to know the landscape, the grasshoppers and the associated ecology very well, to the point where she could intuit aspects of her research questions. This was already Goethean science, blending careful observation with an inner experience of the living character of nature – Goethe’s ‘delicate empiricism which makes itself utterly identical with the object’. However, her doctoral supervisors insisted she stick to standard scientific ecological methods. She did so, in order to get her Ph.D., but the grasshoppers deepened her observational skills and understanding of ‘interfluence’

and inter-species communication, teaching her the importance of bringing qualitative and artistic approaches to her work' what Goethe had called 'imagination, inspiration and intuition' long before she discovered, studied and worked with it in such important ways. Buchanan's chapter brings to mind my mother's notebooks of beautiful, slowly drawn botany drawings from her degree studies in the 1930s – and what she gave me by being so attuned to nature all her life.

Goethe asked, 'can a mechanistic, materialistic approach that focuses only on many individual structures... ever explain living organisms, or the life of Nature as a whole?'. He thought not. Buchanan writes that 'we cannot and would not wish to abandon science, nor indeed did Goethe or [Rudolf] Steiner wish to do so. They were both scientists (as well as artists). They wished to *re-envision* science or at least to complement it, or to evolve it – not to abandon it.' (her italics)

It is fitting that Katherine Buchanan's is the final chapter in *Humanising Science and Medicine* because it places the human being fairly and squarely in the centre of science and medicine, and because it describes a healthy approach for the future of science, one that is already available. There is hope!

Conclusion: A Working Manifesto for Humanising Science and Medicine – Richard House

House writes a neat 10-point summary, and his 'manifesto' is an experience in itself. Selecting something in it that interests me greatly, I chose to pick out point 7: **Specifying the proper place of science and medicine in society**. House writes that, 'For Rudolf Steiner, both medicine and science belong in the free cultural sphere of society, and both are substantially distorted and harmed if contaminated by either the political or the economic sphere... Thus, the pharmaceutical industry would not be able to unduly influence the work of scientists or university departments; and governments would not be able to censor research findings to suit their partisan interests and narratives.' That's certainly what I would vote for.

Afterword by Professor Gloria Moss

Professor Gloria Moss states baldly that, 'In an era of rampant authoritarianism, it is vastly refreshing to find each chapter reviving the forgotten art of conversation', calling the dialogues 'a joy to read'. As an aide-memoire, she gives samples of insights in particular chapters, which is helpful towards a coalescence of thoughts and information when reading such a large book. Highlighting that in 2020, Ofcom (the UK government-approved regulatory and competition authority for the broadcasting, internet, telecommunications and postal industries) announced that any media platform contradicting the Covid narrative offered by the government and their scientific advisor-

experts would face sanctions, Professor Moss concludes that, ‘Solutions must be found’. She says Richard House’s suggestion of a ‘bottom-up democratisation of science’ overlaps with her engagement in developing Truth University (www.truthuniversity.co.uk). I had no idea such an institution existed, already with conferences, a solid faculty and study pathways to Diploma and Masters levels. Moss believes we are at a turning point, needing to challenge the dominance of legacy universities and to ‘strive to see the flourishing of a new university, divorced from government control... and allow new wisdom and knowledge to trickle down to children’. Richard House’s book is well placed at this turning point.

Postscript by Dr Andrew Wakefield

Back in the 1980s and subsequently, this previously well-respected doctor was vilified for presenting his concerns, and those of about a dozen other doctors, about a possible connection between the MMR combination vaccine and autism. Thankfully, he continued his research in the USA. From reading *Humanising Science and Medicine*, he writes, ‘But for me, the discussion here is not about who was right and who was wrong. It’s about how, in the real world, the System deals with scientific dissent – the lifeblood of unfettered science. This book should be an essential part of the training of future scientists.’ I could not agree more. I hope we readers can find individual ways to help that happen, and to guide it into the hands of the many who don’t consider themselves scientists.

I feel we *all* need this level of understanding to deal with the tenets of mainstream medicine. Reading *Humanising Science and Medicine* is itself a salutogenic process towards finding one’s personal holistic way in times when so many are in the sway of controlled narratives around how to ‘fix’ things on the biological level, and helpless in the tides of whatever societal paradigms are current. Being told in the media, rather patronisingly I feel, to ‘trust the science’ has seemed increasingly superficial and skimpy, frequently without the ring of truth. So often my intuition – and intuition is best not ignored – wasn’t trusting their narrative. Having read *Humanising Science and Medicine* my intuitions feel vindicated. In the course of reading these people’s wisdom, I had moments when I felt as if I had to stand on my toes to see in through their windows, or as if walking along the streets around the colleges in Christminster, like Jude the Obscure in Thomas Hardy’s novel.

One final point. For a book that covers so much ground, the detailed high-quality index is a very considerable research resource, and I am going to find rummaging through it useful indeed.

Whether or not science is your thing, I urge you to let yourself in off the street and into these academic conversations. This is knowledge and thinking we should all be able to access for ourselves.

1 **Judy Barber**, Ex-Further Education lecturer and Steiner school teacher, natural wellness and food educator, Hippocrates Health Educator, Companion with the Spiritual Companions Trust, professional coach, author of *Good Question! The Art of Asking Questions to Bring about Positive Change*; *Good Raw Food Recipes for Energy and Wellness*; and *The Slow Coach Approach: How Good-Hearted Leaders Can Create Positive Change – Surprisingly Quickly*. Judy works in a Camphill Community.

2 A shortened version of this review article appears in *New View* magazine, 118, Winter 2025, pp. 100–3 [<https://www.newview.org.uk/>]

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