

## RETRO REVIEW ESSAY

### Psy healing beyond modernity and professionalization?

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**Healing without Freud or Prozac: new approaches to curing stress, anxiety and depression without drugs and without psychoanalysis**, by David Servan-Schreiber, London, Rodale, 2004, £12.99 (paperback), ISBN 1-4050-6718-7; reprinted edition, 2012

One sees clearly only with the heart.

—Antoine de Saint-Exupéry, *The Little Prince*

Everything begins with emotions ... Human connection cannot be patented ...

—David Servan-Schreiber, pp. 22, 179

The central part of our being is the heart ... The heart is the centre of true intelligence, and thinking that operates without this centre can neither apprehend, understand nor develop technologies of the whole ... It is a blind assumption that the heart is only physical ... The heart is spiritual and physical simultaneously.

—Robert Sardello

This book boasts an impressive list of endorsers, among them Daniel Goleman (of emotional intelligence fame), Mihaly Csikszentimihalyi (of ‘flow’ fame), Antonio Damasio (of *Descartes’ Error* fame), Bessel van der Kolk (a leading authority on post-traumatic stress disorder [PTSD]) and Larry Dossey (pioneer in integrative holistic medicine). I therefore opened its pages with considerable anticipation, and I was certainly not disappointed.

Csikszentimihalyi goes as far as to assert that ‘[t]his book might well become the most important mental health landmark of this generation’. As I will argue below, I find it more helpful and illuminating to see this book as one more early harbinger of what is, slowly but surely, presaging a fundamental paradigm shift in our whole conception of health, illness and healing; and for readers of this journal, what is especially relevant are the implications for the therapy, counselling and Humanistic Psychology world of these momentous shifts – not least in terms of recurring wishes to formalize and statutorily regulate the therapy profession (House, 2003a, 2003b), just as, ironically, the very foundations of its psychologizing pretensions and worldview may be on the brink of being decisively undermined, as this book strongly and convincingly maintains. But more of that later.

In my experience, practising therapists tend to be highly sceptical about the healing or cure, through simple mechanisms or techniques, of what are apparently psycho-emotional problems. For example, I can personally remember being trained (or

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brainwashed? – Hinshelwood, 1997) into therapy's 'regime of truth' about what I now see as the highly dubious notion of the so-called 'flight into health', where we therapists are encouraged to embrace the (self-serving) assumption that if a client (patient) appears to feel or be better in a very short time, it is usually because they have either defensively and unconsciously 'flown' into health while leaving the underlying problem(s) and pain unaddressed, or they have achieved some superficial (but temporary) hope or relief from their symptoms, seizing upon the latter as a cure – or perhaps some combination of the two. What the book under review here demonstrates is that there might well be relatively 'instant' cures which *are* genuine, and about which we have as yet a limited understanding. Certainly, there is widespread cultural scepticism about the efficacy and appropriateness of both psychotherapy and of the medicalized response to emotional, mental or psychological distress or suffering (depending on your terminology preferences).

David Servan-Schreiber is described in the book as 'an award-winning psychiatrist and neuroscientist', and by Antonio Damasio as that all-too-rare beast, 'a traditionally trained psychiatrist who dares to think untraditionally'. He was a French physician and neuroscientist as well as a writer, clinical professor of psychiatry at the University of Pittsburgh School of Medicine, a lecturer in the Faculty of Medicine of l'Université Claude Bernard Lyon 1 and co-founder of the Center for Complementary Medicine at the university's Medical Center. I say 'was' because Servan-Schreiber died in 2011 at the tragically young age of just 50, from an aggressive malignant brain tumour (Duerden, 2011). Servan-Schreiber wanted to ensure that he had 'a successful death experience', and to write a final book that might help others to do the same. Hence, *Not The Last Goodbye* was published in France in June 2011 (Servan-Schreiber, 2011), going straight to the top of the bestseller lists. In the light of Servan-Schreiber's untimely early death, it seems particularly fitting to be retro-reviewing his other important and paradigmatically timely book again, exactly five years after his passing. With some 60 reviews on Amazon UK (4.5 star rating), *Healing without Freud or Prozac* does certainly seem to have made a significant impact on this side of the Atlantic, and this review will hopefully contribute further to that influence.

We learn in an early chapter of the book of how Servan-Schreiber had 20 years of experience practising medicine as a cognitive neuroscientist, being influenced not only by conventional neuroscience but also by Tibetan medicine and Native American shamanism. He describes how several experiences led him quite fundamentally to reassess and reformulate his beliefs about suffering and healing – not least, a trip to India where he observed traditional Tibetan medicine using practices like acupuncture, traditional herbs and meditation that were at least as successful at treating chronic illnesses yet without the many side-effects and financial costs of conventional Western medication.

What this book strives to do is to reconcile and integrate modern neuroscience with a more traditional understanding of the innate healing capacity of what is termed the 'emotional brain', and to show how the latter can be directly influenced by working on the physical body. Those who are highly critical of the one-sided materialism of the culturally fashionable neuroscientific *Zeitgeist* (e.g. Bennett & Hacker, 2003; House, 2014; Rose & Abi-Rached, 2013) should find this perspective highly conducive.

Servan-Schreiber's approach is well summarized in the following statement:

The primary task of treatment is to 'reprogramme' the emotional brain so that it adapts to the present instead of continuing to react to past experiences. To achieve this goal, it is

generally more effective to use methods that act via the *body* and directly influence the emotional brain rather than use approaches that depend entirely on language and reason, to which the emotional brain is not as receptive. (p. 21, original emphasis)

Here we find strong echoes of, and commonalities with, the work of such holistic practitioners as Groddeck, Reich, Boadella, Totton and the body therapies more generally, and also with the vital work on embodiment of the great French post-Cartesian philosopher Maurice Merleau-Ponty (e.g. Bazzano, 2014; Felder & Robbins, 2011). Moreover, Servan-Schreiber maintains that the emotional brain contains natural mechanisms for self-healing – an ‘innate ability to find balance and well-being’ (21).

More specifically, Servan-Schreiber describes a number of natural healing approaches which ‘all capitalize on the mind and brain’s own healing mechanisms’ (p. 17). The titles of several chapters reveal the extent to which this book challenges conventional medical-model thinking: ‘A New Emotion Medicine’ (Chapter 1), ‘The Heart and Its Reasons’ (Chapter 3), ‘Love Is a Biological Need’ (Chapter 11) and ‘Listening with the Heart’ (Chapter 13). It is hugely refreshing to this reviewer to see *the heart* being given the prominence that it warrants in this discourse (see, for example, House, 2016; Sardello, 2015), as clearly presaged by Rudolf Steiner a century ago (Steiner, 1910, 1922). Modern neuroscience is certainly in desperate need of Steiner!

I agree with Servan-Schreiber when he states that it is illegitimate to exclude treatments from mainstream consideration just because we do not understand their mechanism of operation. Indeed, it is precisely *because* modern medicine has such a one-sidedly materialistic, positivistic ‘understanding’ of human ill-health and healing that it is quite unable to comprehend, from within the logic of its own worldview, just how the kind of alternative treatments outlined in the book under review might work. The frightening extent of this medicalization is illustrated by the fact that, between 1993 and 2002, the number of anti-depressant prescriptions in the UK rose from 10.8 to 26.6 million (p. 18) – and nothing much has changed since (House, 2011; Kirsch, 2009).

The natural healing approaches described in the book are: eye movement desensitization and reprocessing (EMDR), heart rate coherence training, light therapy, acupuncture, nutrition, exercise, emotional communication, and connecting to something greater than oneself, and there is extensive referencing to the scientific corroboration of each of these healing approaches. Chapter 2, ‘Discontent in Neurobiology: The Difficult Marriage of Two Brains’, sets out the (then) latest neuroscientific research and theorizing about the cognitive and the emotional brain, providing an effective theoretical backdrop to the ensuing discussions. There is also an excellent index, and an extensive resources section (pp. 249–260) for those wanting to pursue these healing approaches further.

I personally liked the author’s explanation of why cognitive therapy often doesn’t work. For example, ‘cognitive control, if overused ... may lose contact with calls for help from the emotional brain’ (p. 39). In the case of trauma, for example, the author is clear that not only does conventional drug medication routinely not work, but ‘just talking about the trauma often fails to produce the necessary connection between the old emotional memory and a more appropriate view grounded in the present’ (p. 85) – hence the need to search for an alternative approach, in this case EMDR. Certainly, much is at stake here, for ‘the discovery of an effective way to

heal trauma may change the practice of psychiatry and psychotherapy' (p. 106). Yet 'when major breakthroughs occur before their theoretical underpinnings can be explained, they systematically encounter violent resistance from entrenched institutions' (p. 102).

It is certainly very revealing that some scientific developments are confirming that natural, non-pharmaceutical treatments for stress, anxiety and depression are indeed very effective (e.g. BBC News Online, 2005; Hope, 2005; Mabey, 2005; Walach & Kirsch, 2003) – though don't count on the pharmaceutical companies trumpeting such information to the general public or the medical profession ... .

## Discussion

What I think the 'paradigm encounter' (to coin a phrase) referred to above presages is a quite new approach to illness, suffering and healing, one that both incorporates and yet, crucially, qualitatively *moves beyond* the narrowness of approaches to illness that treat them in an entirely medicalized, physical way, or else crudely and uncritically 'psychologizes' all human illness and suffering, a tendency to which the evangelical psychological-therapy tendency at its worst is highly susceptible. This is yet another reason why the institutional professionalization (e.g. via statutory registration) of psychotherapy and counselling is so potentially dangerous, and at worst would become a conservative fetter on the necessary evolutionary developments in human healing. As Carl Rogers pointed out many years ago, such institutionalization would almost certainly ossify the field of human healing, and create massive professional vested interests favouring the professional 'psychologization' of human suffering, with the attendant danger that 'the physical' will become inappropriately and iatrogenically neglected, not least because of the self-serving and routinely unwitting 'regime of truth' that psychological therapy creates about itself (House, 2003c). As I have written elsewhere,

Therapy can routinely become a 'material-generating' activity, constructing a 'regime of truth' which self-fulfillingly creates a framework that serves to guarantee its own legitimacy, and outside the confines of which it is often exceedingly difficult for clients *or* therapists to think ... More generally, the quasi-legalistic form taken by the institutionalisation of therapeutic help cannot but cement therapy's 'professionalised form' in place ... . [T]he institutionalising of therapeutic help might well be harmful to the extent that it ossifies in place a large body of full-time 'career' practitioners whose registered professional identity, and all that goes with it, will be antithetical to the unhampered *freshness* and 'enabling naivety' that those practitioners unencumbered by therapy's 'regime of professional(ised) truth' enjoy. (House, 2003c, pp. 145, 146, original emphasis)

Some of the great healers of the past century have been able to recognize what I am saying here – Georg Groddeck (House, 1997), Wilhelm Reich and Rudolf Steiner immediately come to mind. In the case of Steiner, for example, he spoke the following extraordinarily insightful words nearly a century ago:

Since factors are active in the rhythmic system that are healing factors, there is a doctor continually present in the human being. In fact, the whole rhythmic system is a doctor ... In modern science ... it is not realized that the human being is continually becoming ill [Steiner, 1983: 28]; [and] it is helpful if one can look behind every so-called psychological abnormality and perceive what is not healthy in the physical organism of the person in

question. For in the true sense of the word there are no mental illnesses; *they are brought about through the fact that the physical does not release the spiritual.* (Steiner, 1971, p. 96, my emphasis)

In the light of these kinds of insights, it perhaps follows that we psy therapists should begin to be far more open-minded about the manifold possibilities for human healing to occur, which demands in turn that we open our vision to the kinds of approaches offered in the book under review. Not least, and as Bessel van der Kolk wrote in praise of Francine Shapiro's original book on EMDR, 'The speed at which change occurs during EMDR contradicts the traditional notion of time as essential for psychological healing' (cover endorsement, Shapiro 2001).

Neither, however, must we fall prey to what might be called 'the fad of the instant cure', for sometimes, at least, 'magic-bullet' cure-alls are, indeed, lacking in their own intrinsic therapeutic effect, and 'succeed' merely as a placebo effect or as a function of the infectious enthusiasm of the technique's originator. But here again, the question of what a so-called 'placebo' effect actually consists in also needs to be problematized, for what if the patient/client's own healing system is effectively and successfully triggered *through* or *in the course of* (carefully chosen prepositions!) a given treatment, even when the treatment *per se* can be 'scientifically' shown to be 'ineffective' on its own terms? And what if the very notion of positivistically separating out the effects of the treatment *per se* and the placebo effects that accompany it is itself an artificial and spurious distinction that a holistic vision exposes as being quite inadequate?

Elsewhere, I have argued that the positivistic approach to defining the efficacy or otherwise of health treatments is fundamentally inadequate, even from within the logic of its own worldview (House, 2005). For what we are beginning to witness is a 'paradigm war' between the empiricist epistemology and methodology of conventional scientific psychology, on the one hand, and on the other, 'New Science', new paradigm approaches that embrace a far broader definition of what 'science' consists in, and which this book begins to propose (cf. House, 2010).

No one, surely, would seriously question the contention that there might well exist therapeutic methods of unknown or doubtful validity, but it by no means follows from this that the embracing of the double-blind research methodology of controlled empirical research is the most appropriate response to such a possibility (House & Loewenthal, 2008). Yet this is the viewpoint from which the kinds of approaches presented in *Healing without Freud or Prozac* have been strongly criticized (cf. Lohr et al., 2003). The inauspicious track record of conventional medicine doesn't exactly qualify it to pronounce authoritatively upon the safety or otherwise of treatment practices that privilege clinical judgement and experience over 'objective' clinical trial methodology (CTM)! Moreover, that it can be shown that clinical perceptions can commonly be biased and distorted in various well-documented ways by no means demonstrates that such procedures will commonly be more harmful to patients than treatment decisions derived from dubious CTM-based data.

It is worth looking at the question of methodology and efficacy more closely, as *Healing without Freud or Prozac* will likely be subjected to strong criticisms from certain professional, academic and commercial vested interests for what will no doubt be condemned – lazily and inadequately, in my view – as its 'unscientific' nature; criticisms that I wish to pre-empt here, as I believe them to be quite unwarranted. Thus, a close examination of CTM (in which there is random allocation of

subjects to an experimental treatment group and a matched control group) and its narrow positivistic assumptions is woefully inadequate from a scientific viewpoint because:

- (1) its statistical methodology hides, through the comparison of means, what actually happens to *individuals* in the trial – meaning, for example, that there may easily be some people in *both* groups who are worse off after treatment;
- (2) CTM therefore ignores the different responses of different individuals to the same treatment, so that, as John Heron has argued, “[CTM] cannot help with the everyday question, “What is the treatment of choice for this individual patient?”” (1996, p. 198) (cf. Steiner 1907, who said that ‘all *general standard prescriptions* holding that this or that is healthy for the human being are nonsense’ – online, my emphasis);
- (3) CTM ignores the powerful effect of mind on the body and the latent phenomenon of self-healing (although note that I am at risk of my own Cartesianism in this statement!);
- (4) in true naively causal-empiricist mode, CTM assumes the validity of its mechanistic univariate approach, which separates out the single treatment variable from all other influences to assess its causal impact (as if real, lived life were like that);
- (5) CTM objectifies suffering as a ‘thingified’ process, reifying ‘external’ causal influence and ignoring subjective illness categories experienced and made sense of by the patient/client, and ignoring the meaning or ‘tacit intentionality’ (Heron) of the illness; and finally
- (6) CTM ignores the possibility that its so-called ‘statements of fact’ (including variable specification and measurement) may inevitably be theory- and value-laden, and can only be formulated *within a pre-existing (and self-fulfilling) set of theoretical assumptions* (Heron, 1996, p. 197, my italics; see also Bohart & House, 2008; House & Bohart, 2008).

It follows from this (to my mind) devastating critique of CTM that what is urgently needed is a paradigmatic meta-view that attempts to locate and account for our historically and culturally specific methodological procedures within the context of the evolution of human consciousness, if we are to gain a reflexive purchase on those methods and, hopefully, deepen and widen them. And the book under review here certainly offers some potentially fruitful avenues through which this might be achieved.

Such a critique is entirely consistent with what Rudolf Steiner himself says about the ‘truth-status’ of the healing process. In an implicit, extraordinarily insightful critique of positivism that was typically decades ahead of its time, Steiner argued that it is singularly inappropriate to invoke notions of ‘true’ or ‘right’, and ‘false’ or ‘wrong’ in the realm of human healing:

the concepts ‘true’ and ‘false’ ... are something formal, established by mere logic ... [they] are dreadfully barren, prosaic, and formal ... . Pertaining to the spiritual world, the concepts of ‘true’ and ‘false’ should be discarded altogether. As soon as we reach the spiritual world we must substitute ‘healthy’ and ‘ill’ for ‘true’ and ‘false’. (Steiner, 1983, p. 29)

On this view, then, positivist approaches in the realm of illness and healing are so obsessed with notions of true or false treatments that they actually miss the real (spiritual) point of what authentic healing really consists in. It is also interesting how so many of the insights in the book under review were quite explicitly prefigured by Steiner almost a century ago. For example, Steiner wrote at great length about the heart, and its relationship to the brain, stating that in human-evolutionary due course, the heart would become a routine organ of perception (e.g. Steiner, 1910, 1922); he gave very detailed indications about food and diet and their manifold and

subtle effects on the total human organism; and, more generally, Steiner's holistic approach to human health, integrating as it does body, soul and spirit (Steiner, 1999), is of quite unparalleled insight in the history of medicine, and his genius in detailing these insights is only just starting to be recognized by modern science.

While this book goes a long way, then, towards balancing the chronic one-sided materialism of modern medicine, it perhaps doesn't go far enough. Thus, there are places in the book where 'thingified' language is adopted, which is very much couched within old-paradigm materialistic thinking – e.g. 'Emotional disorders result from dysfunctions in the emotional brain' (p. 21); 'the neocortex makes plans for the future based on "symbols" that are only in the mind ...', and it 'controls' attention, concentration, moral behaviour and language (p. 36); and our need for connection with others 'is a need emanating from the brain itself' (p. 220). Yet this is not to be unduly critical, for in the new and faltering terrain of paradigm change, this is precisely what we will expect to see – excitingly new, even revolutionary insights at times, lapses back into the old ways of thinking at others.

I therefore believe that the thinking in this book is ripe to be taken even further. For example, in the emerging paradigm of a new 'spiritualized psychology', championed by *Self & Society's* own regular columnist Robert Sardello (e.g. 1999) among others, we find new and exciting ways of grappling with the perennial problems and challenges of human existence and evolving consciousness, which mainstream positivist psychology, through its narrow materialist worldview, has long since relinquished any purchase upon. As long ago as the late 1980s, Sardello – like Steiner, whose work he so admires – was also years ahead of his time in electing to leave his erstwhile profession, psychotherapy, for the principled and informed reason that its practices were quite irrelevant to, and a distraction from, what really matters in human development.

In his own work, then, Sardello has shed important new light on the issue of identity and the emotions, threatening comprehensively to undermine much that is taken for granted in the 'regimes of truth' of modern therapy and psychology. In relation to fear, for example, and contrary to the taken-for-granted assumptions of the humanistic therapies, Sardello bemoans how

we have completely personalized a domain [i.e. that of fear] that rightly belongs together with the surrounding world ... . The subjectivizing of feeling signifies a flight from the sensuous world ... . When our participation with the world is disrupted, feeling begins to feel like a quantifiable item ... . Psychotherapies are available to help us feel our feelings rather than to feel the world. (1999, pp. 137–138)

This kind of radical, spiritually informed thinking about human emotion promises to revolutionize the way we think about – and 'treat' – emotion; and once taken on board, as I believe it eventually will be, then our therapy practices can and will surely never be the same again. What really excites me is the prospect of a truly holistic, integrated medicine of body, soul and spirit, and the book under review certainly provides us with some important moves towards such a vision.

### **Concluding comments**

In this review I hope I have raised at least as many questions as I have answered. *Healing without Freud or Prozac* only confirms to me that a momentous paradigm shift in our notions of health, illness and healing is underway, and this admirable

book is one early harbinger of that paradigm shift. Certainly, once this shift really gains momentum, which it surely will in the years and decades to come, the kind of narrow ‘psychologization’ of human suffering that the psychological therapies at their worst propagate will become as outmoded as is the psychiatry profession’s narrow medicalization of human distress.

I would go as far as to say that it will be unethical for practising therapists and counsellors to continue to do their healing work without acquainting themselves with this emerging literature, and incorporating its findings into their practices. And the enormous (pharmaceutical) vested interests and professional parochialism of the psychiatry profession, which, five decades after the pioneering insights of Laing, Szasz et al., still largely ignores the devastating critiques of its own narrowly materialistic psychiatric worldview, should make those who would wish statutorily to professionalize and make a culturally sanctioned ‘institution’ of psychotherapy and counselling think long and hard before they pursue an avenue that would likely place a limiting fetter upon the healthy development of humankind’s evolving understanding of illness and healing in all its manifold complexity and subtlety.

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