

## <u>@milton\_damian</u> Timimi wrote it 11 years ago:

https://www.bmj.com/rapid-response/2011/11/03/these-guidelines-risks-exposing-children-unnecessary-harm

<u>@milton\_damian</u> Importantly, the highlighted claims in his conclusion I think have merit, inline with my own understandings of the present literature & I would generally struggle to argue against.

as psychiatric diagnosis has a close to a zero effect size impact on treatment choice in comparative studies.

We can no longer avoid these conclusions: Formal psychiatric diagnoses are not valid, use of psychiatric diagnosis increases stigma, using psychiatric diagnosis does not aid treatment decisions, long term prognosis for mental health problems has got worse since using diagnostic based constructs, it imposes Western beliefs about mental distress on other cultures and therefore is institutionally racist, and most importantly alternative evidence based models for organizing effective mental health care are available (See Timimi, 2011 'No More Psychiatric Labels' campaign). These guidelines are dangerous, pseudoscientific and they should be withdrawn.

Timimi S, Gardiner N, McCabe, B. (2010) The Myth of Autism: Medicalising Men's and Boys' Social and Emotional Competence. Basingstoke: Palgrave MacMillan.

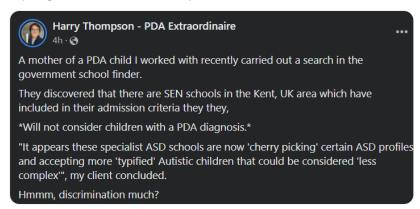
Timimi, S. (2011) No More Psychiatric Labels: Campaign to Abolish Psychiatric Diagnostic Systems like ICD and DSM.

@milton damian Most importantly why I do sound like Timimi?

General answer is for good reasons.

"I ask "academic, activist, or advocate?"—and my answer is that I am all three. You cannot belong to a community that suffers from violence, marginalization, and suicide and not be." Botha 2021, p9

<u>@milton\_damian</u> Why am I so passionate about PDA? As autistic persons we are so systemically crapped upon. That PDA really should be a beacon of virtue in research & practice standards. Simply far from the case. "PDA Profile of ASD" supporters are substantially responsible for this case study.



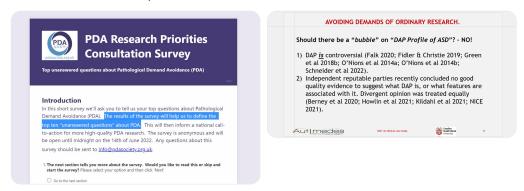
<u>@milton\_damian</u> Why are these vulnerable CYP diagnosed with PDA & their caregivers being exposed in this?

Because of aggressive lobbying & manufactured hype surrounding "PDA Profile of ASD", because generally "PDA Profile of ASD" supporters they think they know better than everyone else.

<u>@milton\_damian</u> It is why "PDA Profile of ASD" supporters make bold claims which are independent of the historic-ongoing academic debates on PDA & its notoriously small poor quality evidence base.

<u>@milton\_damian</u> E.g, by PDA Society "The results of the survey will help us to define the top ten "unanswered questions" about PDA."

We have answered questions in PDA research? 4 independent recent reviews of evidence, is do not know what PDA is, or what features are associated with PDA.



<u>@milton\_damian</u> So why has the PDA Society made this bold misleading claim, because it thinks it knows better than other (non "PDA Profile of ASD" supporting) topic experts on PDA.

Whenever I sound like Timimi, It is reasonable for me to do so & based on good reasons.

@milton\_damian @threadreaderapp Please could you unroll?

Thank you in advance.

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