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Sami Timimi, *V iskanju normalnosti: Nov pristop k razumevanju duševnega zdravja, stiske in nevroraznolikosti* [*Searching for Normal: A New Approach to Understanding Mental Health, Distress and Neurodiversity*], Chiara, 2025; 408 pp.: ISBN: 978-961-720-558-9

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The book was published in English in 2025 and has so far also been translated and published in Slovenian and Spanish, while editions in other languages are in preparation. The author is a child and adolescent psychiatrist and psychotherapist with several decades of clinical practice in a wide range of institutional settings, and he has an extensive professional bibliography. His book is critical of existing (Western) psychiatry, both as a practice and as what he at times calls a “(pseudo)science”. The author draws much of his argument from the work of other prominent authors who have, in recent decades, critically examined psychiatric doctrines and ideologies – figures such as Robert Whitaker, Peter Gøtzsche and Joanna Moncrieff. His book is characterised by a warm and compassionate tone, an evident concern for the wellbeing of the children and adolescents who sought help from him or whom he personally knew and treated, and by insights drawn from his many years of clinical experience working with children, adolescents and their caregivers.

In the first part of the book, the author addresses the basic assumptions or conceptual premises underlying today’s dominant, strongly biomedically oriented psychiatry. He asks what mental health is, what normality is, and indeed what psychological experience itself even is. In his view, all these concepts



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and their definitions are markedly subjective and culturally relative, leading him to conclude that “when it comes to mental health or illness/disorder, we actually don’t know what we’re talking about at all” (p. 43). Psychiatric diagnoses, along with their classifications and descriptions of the conditions they denote, proceed from the assumption that mental states can be clearly delineated, yet psychiatry has no objective criteria available for determining them. Because of this lack of knowledge – and even more so because of the complexity of human beings and their embeddedness in the social world – diagnoses also tell us nothing about the causation of the states diagnosed, which leads the author to conclude that “there is no such thing as a psychiatric diagnosis” (p. 50), by which he of course means diagnoses that are supposed to represent an objective determination of a condition and an understanding of its causation that would enable meaningful treatment. Related to this state of affairs is the finding that psychiatry has been unable to develop evidence-based treatment methods, which is one of the key requirements of modern medicine. Nevertheless, psychiatry legitimises itself through the language of science and by upholding concepts that lack sufficient scientific grounding – something the author calls psychiatric scientism (p. 55). A consequence of this, and also a reason for well-founded doubts about psychiatry, are research findings showing that the actual effectiveness of core mental health services is worrying as almost all indicators of collective mental health have moved in the wrong direction, even though access to mental-health services has improved considerably.

The author draws attention to the remarkably rapid increase in the scope of certain psychiatric diagnoses, which he links to the “stretching of concepts” of (ab)normality – both vertically and horizontally – that is, through the establishment of new diagnostic categories and the broadening of criteria for existing ones. He connects this development to the process of commodification of illness or mental distress and of the solutions offered for it – in other words, to the introduction and intensification of market mechanisms in diagnosing and offering (marketing) solutions such as medications and other forms of treatment. He notes that even trauma (p. 77) and other forms of distress can be marketed, and that diagnoses (whose validity he otherwise does not recognise) have become psychiatric brands (p. 79). As the field of (ab)normality expands and becomes commodified, a “positive feedback loop” (p. 81) emerges: the spread of pathology concepts, together with public campaigns urging people to watch for symptoms in themselves and to seek professional help for their psychological distress, further increases the scale of that (diagnosed) distress.

In the book’s middle section, the author focuses specifically on the diagnoses of ADHD and autism. He uses developments surrounding these two

diagnoses to illustrate the observations and theses set out in the first part of the book – namely, theses about the lack of grounding and reliability of diagnoses, their commodification, and the emergence of a positive feedback loop. He describes in detail the historical development of these two concepts/diagnoses, analyses gender and age differences, the search for new target populations, “mutations of diagnoses” (p. 103), and their promotion. In assessing whether the concepts of these two disorders are supported by evidence in the sense of biological markers, he focuses particularly on twin studies, genome studies and brain-imaging research. In all of these, he finds no evidence for the biological basis of either so-called ‘disorder’. In the case of ADHD, he warns of the harm caused by pharmacological therapy, which is being prescribed en masse worldwide and is rapidly increasing. Regarding autism, he describes how what was initially an extremely rare disorder/diagnosis has been reshaped into a spectrum and has become an increasingly popular consumer product as well as a global phenomenon and a brand. As with these two diagnoses, the author also examines the trend towards the view that treatment of mental health problems should begin as early as possible.

The final part of the book is devoted to the socio-cultural and political context of the phenomena described above. Here he moves away from the internal problems of psychiatry as a science and turns instead to cultural and cross-cultural considerations, and above all to an analysis of the neoliberal political and economic system, which brings strong individualisation, competitiveness, globalisation, consumerism and the commodification of happiness, as well as the privatisation and monopolisation of services and products. He introduces all of this through the concept of the “mental health industrial complex” (p. 207), which links the new (TikTok) culture of self-diagnosis with a particular “merging” of pharmaceutical giants with professional associations, academic authorities and state regulatory bodies – a process aided by the cultivation of various professional/scientific myths (for example, the myth of chemical imbalance as the cause of mental disorders) and by propaganda about mental health and the need for systematic, institutionalised care for it. In a separate chapter, he discusses the colonial dimension of psychiatry, which exports its new products – diagnoses (e.g. depression) and forms of treatment (primarily pharmacological) — to less developed countries of the so-called Third World, as well as to the transition countries of Eastern Europe. A key aspect of all this is that psychiatry strictly individualises mental problems and disorders, attributing them to individual weaknesses, illnesses, deficits, and insufficient personal effort and self-care, while implicitly denying any causal role played by narrower or broader social factors – not least the neoliberal system itself.

Although the author's central attention is devoted to pharmacological approaches to treating mental 'disorders' (Timimi mentions that psychiatric practice there was in his experience simply a conveyor belt of giving, changing and adding medications, until the patient was at the very edge of the permitted number of drugs a psychiatrist is allowed to prescribe), he also devotes some explicit attention to psychotherapies. These, too, are becoming brands and market commodities, and he singles out cognitive behavioural therapy in particular as the "queen of brands" (p. 194) among psychotherapies, with its pronounced message that a person – through their own negativistic thoughts – is somehow to blame for their own distress, or that they can overcome it simply by changing the way they think. Although the author notes that research shows "no therapy is better than any other ... while actual real-life effects remain sadly small" (p. 205), he has considerably more praise for systemic approaches and systemic philosophy, which incorporate to a greater extent the social context and the relationships within a person's immediate social environment. Within this philosophy, he advocates for a narrative approach – that is, for building a relationship between the therapist and the person in distress, which, according to the findings of many studies, contributes the largest share of therapeutic success (the so-called "common factors" of psychotherapy; p. 190). Such an inclusive approach to people is meant to move beyond the consumer model of help, which often pushes a person in distress into the role of patient, turns their experiences into symptoms, and, through the accumulation of diagnoses, potentially into a psychiatric career. Conversation, within a good relationship, should provide a framework for creating meaning that can encompass optimism, faith in resilience and development, and trust in the possibility of change.

The author begins most chapters of his book by describing one of his own cases, followed by a conceptual discussion of problematic aspects of contemporary psychiatry. At the end of each chapter, he then explains how the treatment of these cases (that is, of the children or adolescents concerned) developed and concluded under his care, without recourse to diagnoses or other conventional psychiatric concepts and treatments. This adds value to the book and conveys the message that the author's reflections and proposals are applicable, achievable and beneficial.

The book makes an important contribution to the search for alternatives to the current functioning of the mental health system, which many consider to have reached a dead end. It will be relevant to professionals working in the field of mental health, as well as to anyone concerned about the rapid growth in the scope of diagnosed mental disorders and the polemical and conflicting views on how the field of mental health should develop in future.