### AN OPEN CALL TU NTERVENTION THFRAPY PROVIDERS

swipe

#### ALL PROVIDERS

Whether you're a speech therapist, behavior analyst, occupational therapist, music therapist, or do less common forms of therapeutic interventions for autistic children (and other forms of neurodivergence), your fields are largely using the same approaches and evidence base

## NO FIELD IS IMPORTANT IN THE IMPORTANT I

The same biases that cause intervention therapies to be inappropriate— and even abusive— for autistic children are endemic in our society and culture. They are steeped in white supremacy, medicalization, and beliefs about what it means to have a "better life."

## ACADEMIA HAS AN EGO PROBLEM

In academia, trusting others based on their credentials and self-aggrandizement is the norm. The dedication to their "evidence base" is not a reflection of academic rigor or honesty. It is a reflection of falling in line to a culture of supremacy that is often far from reflective of best practices.

What if you found out that there actually is a robust evidence base for many things your field claims is "pseudoscience"? What is you found out that many other things that are widely understood to be "evidence based" have no reliable evidence?

What would you do if you learned that you have perpetuated misinformation and bad practices because of the toxic dymanics embedded in academia?

#### LET'S FIND OUT

Host autistic professionals and provide CEUs that broaden your professional community's insight into how the "evidence base" you've been indoctrinated to follow is replete with academic dishonesty. If you can host a CEU, then your ethics code allows you to have guests from outside your field as long as the issues discussed are within your field's framework and relevant to the field.

# WHAT TOPICS NEED TO





