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When was the last time you met a total stranger? How did you quickly work out how to relate to this person? My approach with people not known to me is to look for recognizable patterns in their behavior and speech to give me clues about what to expect from them. Their level of cognitive function is just one of those fleeting assessments. I suspect that I am not alone in relying largely on people’s use of speech and language to indicate their overall cognitive ability. Global developmental delays usually affect speech and language, and the majority of learning disabilities interfere with the development of speaking and language.

Nonverbal Learning Disability (NLD) is the exception to this. For those with NLD, superficial social conversation and language may well be some of their best skills, usually far outstripping nonverbal and practical abilities. The initial social advantage of good speech is swiftly lost when their nonverbal deficits prevent more complex understanding and follow-through. Observers who rely on speech as the indicator of cognitive ability will conclude that such a person is lazy or uncooperative. Indeed, teachers who are unaware of NLD frequently conclude that such students “could do better” and label them as “lazy” or “unmotivated.” Perhaps the saddest outcome is that an undiagnosed student with NLD will share the language-based expectations of teachers and relatives and be mystified by his or her failure to perform at that level. It is little wonder that unrecognized NLD is frequently accompanied by low self-esteem, depression, and anxiety, particularly in adolescence.

This is a scenario known only too well to the editor and author, Dr Barbara Rissman. Barbara has been known to me for many years as an educator, educational researcher, musician, and above all else, mother of a young woman with severe NLD. I have had the privilege of working with Barbara and her daughter through the long and challenging process of recognizing the NLD, understanding its impact and implications on daily living, and surviving the psychological fallout of such a devastating reality. Rather than shying away from the challenge or feeling victimized, Barbara has confronted the problem head-on and dealt with it openly. She has sought to discover what is known about NLD and to improve the dissemination of this knowledge to clinicians, educators, parents, and individuals whose daily lives are affected by NLD.
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This book is the outcome of that vision and effort. It is timely because knowledge of NLD has lagged painfully behind all the work that has explored language-based learning difficulties. My wish is that this book will enable earlier recognition of the condition and more specific assistance in the hope that future sufferers will not inevitably face overwhelming anxiety and depression.

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Lyndall Kleinschmidt (MB BS, FRANZP) is a Consultant Child and Adolescent Psychiatrist who is currently the Medical Director for the Child and Youth Mental Health Community Services, Children’s Health Qld Hospital and Health Service, Brisbane, Australia. Dr Kleinschmidt studied medicine, adult psychiatry and child and adolescent psychiatry in Brisbane and Melbourne and child and adolescent psychiatry and psychotherapy at the Tavistock Clinic in London, UK. She was Chairperson of the Faculty of Child and Adolescent Psychiatry of the Royal Australian and New Zealand College of Psychiatrists, Qld Branch, 1999-2003. She has worked in public and private community mental health sectors in general child psychiatry and specialty populations, including children of refugees, children in state care and children in the child protection system. Her priority in her work is to understand the dilemmas for young people with enduring psychological difficulties and their families; to minimize distress and maximize functional outcomes.