

Chapter 5

Team Collaboration for the Best-Practice Treatment of NVLD across Three Systems: School-Based, Hospital-Based, and Family-Based

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ABSTRACT

Inspired by the parable of six blind men and an elephant, the authors have long been struck by the number of specialists who come into contact with children with NVLD. Each profession may emphasize a particular aspect of NVLD and may even have its own professional jargon to name it. Speech and language pathologists often refer to this condition as a semantic-pragmatic disorder; occupational therapists, as a developmental coordination disorder; and special educators, as a developmental math disorder. Many psychologists refer to these students as struggling with social skills problems; and Byron Rourke, a neuropsychologist, used the phrase “nonverbal learning disability.” The authors believe professionals do not communicate enough about how services and perspectives need to be coordinated. This chapter identifies a subtype model for NVLD. It offers a developmental perspective of NVLD across the lifespan, and emphasizes the need for teams and collaborators to organize treatment from three perspectives: hospital, school, and family. Finally, the authors address ways in which parents and other family members can best organize and manage these teams that will change over time due to the nature of the disorder.

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THE ELEPHANT AND THE BLIND MEN

Once upon a time, there lived six blind men in a village. One day the villagers told them, “Hey, there is an elephant in the village today.”

They had no idea what an elephant was. They decided, “Even though we would not be able to see it, let us go and feel it anyway.” All of them went where the elephant was. Every one of them touched the elephant.

“Hey, the elephant is a pillar,” said the first man who touched the elephant’s leg.

“Oh no! It is like a rope, said the second man who touched the tail.

“Oh no! It is like a thick branch of a tree,” said the third man who touched the trunk of the elephant.

“It is like a big hand fan,” said the fourth man who touched the ear of the elephant.

“It is like a huge wall,” said the fifth man who touched the belly of the elephant.

“It is like a solid pipe,” said the sixth man who touched the tusk of the elephant.

They began to argue about the elephant and every one of them insisted that he was right. It looked like they were getting agitated. A wise man was passing by and he saw this. He stopped and asked them, “What is the matter?” They said, “We cannot agree to what the elephant is like.” Each of them told what he thought the elephant was like. The wise man calmly explained to them, “All of you are right. The reason every one of you is telling it differently is because each one of you touched a different part of the elephant. So actually, the elephant has all the features that you have all said.”

“Oh!” everyone said. There was no more fighting. They felt happy that they were all right. The moral of the story is that there may be some truth to what someone says and that it all works best if someone can point this out to each or all of them so they can understand that they are all “seeing” the same thing (Linton, 1878).

INTRODUCTION

The above parable is widely thought to originate in Jain, Buddhist, Sufi, and Hindu lore. The English writer John Godfrey Saxe first translated it into English in the 19th century as a poem. (Jain lore, n.d.) The tale is not meant to imply that various professionals are either blind or unwise! However, over the last 20 years, the large number of professionals who touch the lives of children with a Nonverbal Learning Disorder (NVLD) but do not view NVLD in its broadest context has prevented clarity. Estimates are that 10–15% of students with a learning disability (LD) have an NVLD. Research within the last three decades is beginning to shed light on NVLD. Although not as much is known about this disability relative to the higher incidence disorder of dyslexia, information on how to diagnose and treat children with suspected NVLD is becoming more prevalent.

In our last book (Broitman & Davis, 2013), we invited representatives from most of these treating professions to write about their understanding of, supports for, and interventions with children and young adults with NVLD. We also emphasized the need for organized efforts over time to support these children, and the need for a coach, case manager, team leader, “wise (wo)man,” or other individual to take the lead in keeping the team organized and productive. In this chapter, we will first present a brief overview of the research on collaboration. Second, we will present our subtype model for understanding the needs of a student with NVLD. Our model is symptom specific and not concerned with etiology. However, as our previous work, Rourke (1995), and this current book make clear, it is very likely that

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