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Judith Herman (1992) explained that 'traumatic memories' have a number of unusual qualities in that they are not encoded like the ordinary memories of adults in a verbal, linear narrative that is assimilated into an ongoing life story. The 'frozen and wordless quality of traumatic memories' stems from the fact that the situation has not been satisfactorily liquidated until the victim has completed an inward reaction through the words and the organization of the recital of the event. Almost hundred years ago Pierre Janet (1917) spoke of the person's need to 'assimilate' and 'liquidate' traumatic experience, which, when accomplished, produces a feeling of 'triumph'. Over recent years Hart et al (2006) brought his seminal work back to the attention of the mental health community.

This case study shows how the author's research into differential ability patterns (Kurz, 2000) helped to challenge a misdiagnosis by four mental health professionals. IQ test results at age 7, 22, 25 and 30 showed poor working memory and concentration test performance against the backdrop of a superior Verbal IQ. The imbalance helped explain the developmental trajectory including a teenage suicide attempt, re-victimisation proneness and misdiagnosis through mental health professionals lacking differential ability profiling skills. Assessment by a specialist eventually attested a moderate degree of Dyslexia and extraordinarily poor auditory working memory. Information processing issues wrongly diagnosed as 'indicative of a schizophrenic personality disorder' turned out to be indicative of a specific learning disability for which appropriate accommodation must be made under the relevant disabilities legislation.