




The Psychological and Emotional Dimensions of Gifted and the Potential for Misdiagnosis

Seminar Topics

- The Gifted Brain
- Psychological and Emotional Dimensions of Gifted
 - Overexcitabilities
 - Asynchronous Development
 - Perfectionism

The Gifted Brain

How is it different?




Neurobiology of the Gifted Brain

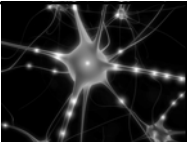
- Superior frontal cortex activity
- Larger and unfolded parietal lobe
- More of certain types of neuron cells
- More dendrites and synapses
- MRI studies show a positive correlation between brain size and IQ

Brain Characteristics of the Gifted

- Special form of bilateralism
- Heightened inter-hemispheric communication
- Enhanced cooperation and integration of information between the hemispheres
- Less compartmentalization



The gifted brain has more connections



- Needs few repetitions to retain material.
- Makes connections across subjects and classes.
- Divergent thinking brings new, sometimes “far out,” connections and solutions.

These are our future problem solvers.

Psychological and Emotional Implications:

- Intensity – anything worth doing is worth doing to excess
- Sensitivity – physical and emotional
- Idealism – strong desire to make things right
- Perfectionism - as they try to impose a sense of order to the world and their lives
- Activity – verbal and/or physical (busy brains, busy bodies)

Health Implications:

- Allergies
- Asthma
- Hypoglycemia (gifted brains burn more energy while learning new material).

---See: Misdiagnosis and Dual Diagnoses of Gifted Children and Adults; Webb, Amend, Webb, Goerss, Beljan, Olenchack

Characteristics and Behavior Patterns of Gifted that lead to misdiagnosis

- Intensity and sensitivity (“Overexcitabilities”); may overreact; gets angry easily, or cries if things go wrong
- Idealism—impatient with failures; experiences keen disappointment; cynicism and depression; feelings of aloneness
- Impatient with others and self; intolerant and critical of others
- Oversensitive to criticism

Characteristics and Behavior Patterns of Gifted that lead to misdiagnosis

- " Difficulty seeing things from others' viewpoint
- " Perfectionism—very self-critical; unwilling to take risks; oversensitive to criticism
- " Creative—engages in non-traditional behaviors
- " Judgment lags behind intellect (asynchronous development)
- " Non-conformity; challenges others and traditions; refuses to accept authority; disrupts status quo
- " Strong-willed behavior; frequent disagrees strongly with parents, teachers, peers, supervisors; gets in power struggles; is stubborn; gets angry

Characteristics and Behavior Patterns of Gifted that lead to misdiagnosis

- Neglects duties or people during periods of intense focus
- " Advanced, numerous, and/or diverse interests; appears scattered "
- “Visual-Spatial” (“Right Brain”) non-linear learning styles
- " Disorganized learning or job functioning style; leaves tasks unfinished; lacks interest in details; hands in messy work
- " Narrow interests or overly focused; reluctant to move to new topics in discussion

Characteristics and Behavior Patterns of Gifted that lead to misdiagnosis

- " Boredom with routine tasks (particularly if educationally or occupationally misplaced); resists routine practice; refuses to do rote homework or busywork
- Underachievement due to excessive conformity with peers
- " Asynchronous development; shows scatter of ability levels
- " Poor handwriting
- " Unusual sleep patterns
- " Peer relation problems
- " Jokes or puns at inappropriate times

Emotional Dimensions of Giftedness

- **Extra Perception**- being highly perceptive to stimuli (sounds,sights,touches,tastes).
- **High Involvement**- unusual preoccupation with interests, tasks, materials, and questions.
- **Super Sensitivity**- super sensitive to ethical issues and concerns. Highly moralistic and quick to judge others.

Emotional Dimensions of Giftedness (continued)

- **Perfectionism**- feeling that nothing is ever "good enough" (so they may not hand it in).
- **Asynchronous Development** –when intellectual and verbal development are ahead of physical and emotional development.
- **Multipotentiality** – having many abilities makes choosing a major or career path difficult.
- **Low self-esteem or depression** – susceptibility to depression, anxiety, and loneliness.

Dabrowski's Overexcitabilities

- **Psychomotor** – An unusual need for physical activity and movement. (ex. Rapid talk, pacing, hand gestures).
- **Sensual** – Greater than normal perceptiveness of sensory experiences; unusual awareness and enjoyment of sensation.
- **Imagination**- Inventiveness, the ability to visualize clearly, metaphorical speech, dreaming, fantasy and magical thinking.
- **Intellectual**- The desire to question, to analyze; the ability to delight in the abstract and theoretical, in logical thinking, puzzles and problem solving
- **Emotional**- An intensity of feeling and of relationships; preference for few close friends rather than many acquaintances; natural empathy and compassion.

Dabrowski said

"One who manifests several forms of overexcitability sees reality in a different, stronger and more multisided manner" (Dabrowski, 1972, p. 7). Experiencing the world in this unique way carries with it great joys and sometimes great frustrations. The joys and positives of being overexcitable need to be celebrated. Any frustrations or negatives can be positively dealt with and used to help facilitate the child's growth.

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Psychomotor OE

- heightened excitability of the neuromuscular system
- "capacity for being active and energetic" (Piechowski, 1991, p. 287)
- love of movement for its own sake, surplus of energy demonstrated by rapid speech, jealous enthusiasm, intense physical activity, and a need for action (Dabrowski & Piechowski, 1977; Piechowski, 1979, 1991)
- may talk compulsively, act impulsively, misbehave and act out, display nervous habits, show intense drive (tending towards "workaholism"), compulsively organize, or become quite competitive

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Psychomotor OE

- When feeling emotionally tense:
 - Talk compulsively
 - Act Compulsively
 - Display Nervous Habits
 - Show intense drive
 - Compulsively Organize
 - Become competitive
 - Act Out

This Psychomotor OE child has the potential of being misdiagnosed as Attention Deficit Disorder: Hyperactive Type

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Problems associated with Strengths

Strength	Problems
High energy, alertness, eagerness; periods of intense efforts.	Frustration with inactivity; eagerness may disrupt others' schedules; needs continual stimulation; may be seen as hyperactive.

Sensual OE

- heightened experience of sensual pleasure or displeasure emanating from sight, smell, touch, taste, and hearing (Dabrowski & Piechowski, 1977; Piechowski, 1979, 1991)
- have a far more expansive experience from their sensual input than the average person
- have an increased and early appreciation of aesthetic pleasures such as music, language, and art, and derive endless delight from tastes, smells, textures, sounds, and sights
 - Because of this increased sensitivity, they may also feel over-stimulated or uncomfortable with sensory input.
- sometimes have difficulty with sorting out all they hear, feel, or smell
- sensitivity makes them easily distractible

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Sensual OE

- When emotionally tense, some individuals high in sensual OE may overeat, go on buying sprees, or seek the physical sensation of being the center of attraction (Dabrowski & Piechowski, 1977; Piechowski, 1979, 1991). Others may withdraw from stimulation.
- Sensually overexcitable children may find clothing tags, classroom noise, or smells from the cafeteria so distracting that school-work becomes secondary.
- These children may also become so absorbed in their love of a particular piece of art or music that the outside world ceases to exist.

This Sensual OE child has the potential of being misdiagnosed as Sensory Impaired/Sensory Integration Disorder

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Intellectual OE

- have a marked need to seek understanding and truth, to gain knowledge, and to analyze and synthesize have incredibly active minds
- intensely curious, often avid readers, and usually keen observers.
- able to concentrate, engage in prolonged intellectual effort, and be tenacious in problem solving when they choose.
- relish elaborate planning and having remarkably detailed visual recall.

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Intellectual OE

- frequently love theory, thinking about thinking, and moral thinking.
- This focus on moral thinking often translates into strong concerns about moral and ethical issues-fairness on the playground, lack of respect for children, or being concerned about "adult" issues such as the homeless, AIDS, or war.

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Intellectual OE

- quite independent of thought and sometimes appear critical of and impatient with others who cannot sustain their intellectual pace.
 - This intellectual intensity seems to cause the greatest difficulty at school and home when children become so excited about learning and thinking that they interrupt or blurt out answers at inappropriate times or are too honest about or critical of others' ideas.

This Intellectual OE child has the potential of being misdiagnosed as Oppositional Defiant Disorder or Obsessive Compulsive Disorder.

Problems associated with Strengths

Strength	Problems
Ability to conceptualize, abstract, synthesize; enjoys problem-solving and intellectual activity.	Rejects or omits details; resists practice or drill; questions teaching procedures.
Inquisitive attitude, intellectual curiosity; intrinsic motivation; searching for significance.	Asks embarrassing questions; strong-willed; resists direction; seems excessive in interests; expects same of others.
Thinks critically; has high expectancies; is self-critical and evaluates others.	Critical or intolerant toward others; may become discouraged or depressed; perfectionistic.

IMAGINATIONAL OE

- Imaginational OE reflects a heightened play of the imagination with rich association of images and impressions, frequent use of image and metaphor, facility for invention and fantasy, detailed visualization, and elaborate dreams (Dabrowski & Piechowski, 1977; Piechowski, 1979, 1991).
- They often mix truth with fiction, or create their own private worlds with imaginary companions and dramatizations to escape boredom.

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Imaginational OE

- They find it difficult to stay tuned into a classroom where creativity and imagination are secondary to learning rigid academic curriculum.
- They may write stories or draw instead of doing seatwork or participating in class discussions, or they may have difficulty completing tasks when some incredible idea sends them off on an imaginative tangent.

This Imaginational OE child has the potential of being misdiagnosed as ADD inattentive type.

Problems associated with Strengths

Strength	Problems
Creative and inventive; likes new ways of doing things.	May disrupt plans or reject what is already known; seen by others as different and out of step.
Diverse interests and abilities; versatility.	May appear scattered and disorganized; frustrations over lack of time; others may expect continual competence.

Emotional OE

- is often the first to be noticed by parents. It is reflected in heightened, intense feelings, extremes of complex emotions, identification with others' feelings, and strong affective expression (Piechowski, 1991).
- physical responses like stomachaches and blushing or concern with death and depression (Piechowski, 1979).
- have a remarkable capacity for deep relationships; they show strong emotional attachments to people, places, and things (Dabrowski & Piechowski, 1977). They have compassion, empathy, and sensitivity in relationships.

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Emotional OE

- are acutely aware of their own feelings, of how they are growing and changing, and often carry on inner dialogs and practice self-judgment (Piechowski, 1979, 1991).
- are often accused of "overreacting."
- compassion and concern for others, their focus on relationships, and the intensity of their feelings may interfere with everyday tasks like homework or doing the dishes.

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Emotional OE

• Children

- Temper Tantrums
- Displays of rage
- Emotions Extreme

• Adolescents

- Involved in social causes
- Idealistic – saving people or things
- Cynical or angry
- Existential Depression

This Emotional OE child has the potential of being misdiagnosed as Bi-Polar, Depressed.

Problems associated with Strengths

Strength	Problems
Sensitivity, empathy for others; desire to be accepted by others.	Sensitivity to criticism or peer rejection; expects others to have similar values; need for success and recognition; may feel different and alienated.

Asynchronous Development



“Giftedness is asynchronous development in which advanced cognitive abilities and heightened intensity combine to create inner experiences and awareness that are qualitatively different from the norm. This asynchrony increases with higher intellectual capacity. The uniqueness of the gifted renders them particularly vulnerable and requires modifications in parenting, teaching and counseling in order for them to develop optimally.”
(The Columbus Group, 1991)

“To have the intelligence of an adult and the emotions of a child combined in a childish body is to encounter certain difficulties.” (Hollingworth, 1942)

“In addition to being out of sync in their own development, gifted children are out of sync: with family relations, both parents and siblings, socially with age-peers and older, and with schools and the larger community.” (Kearney, 1991)

Understanding the Gifted Perfectionist



Perfectionism

- Perfectionism is part of being gifted.
- Expectations are extremely high for gifted students.
- School, society, family and self can contribute to the idea that peak performance should be the norm for students selected for gifted programs.
- Although it can breed excellence it can also be destructive, leading students to think that the only efforts worth making are those that end in perfect achievement.

Delisle, pg. 34 Guiding the Social and Emotional Development of Gifted Youth



Theories on Perfectionism

“Many perfectionistic children are the products of relaxed, easy-going parents with realistic expectations.... It seems possible that certain children are simply *born* with the combination of temperaments that create the need for an orderly environment, or conversely, an aversion to chaos.” - Barbara Kerr, 1991

Theories on Perfectionism

“Perfectionism is also a function of asynchronous development of the gifted child. When the mind develops faster than the body, the reasoning and values of the child are more like those of his or her mental peers than like those of age-mates. The child sets standards for him- or herself based upon this advanced awareness.

Diagnosis, Misdiagnosis, and Dual Diagnosis

ADD/ADHD

- Misdiagnosis
- Dual Diagnosis
- Case Study: Chad

Diagnostic Criteria

- Six or more of the following symptoms for **inattention**. Symptoms have persisted for 6 months or longer.
 - Often fails to give close attention to details or makes careless mistakes
 - Often has difficulty maintaining attention in tasks & play activities
 - Often does not seem to listen when spoken to directly
 - Often does not follow through on instructions and fails to finish schoolwork, chores etc.
 - Often has difficulty organizing tasks and activities
 - Often avoids, dislikes or is reluctant to engage in tasks that require sustained mental effort
 - Often loses things
 - Is often distracted by extraneous stimuli
 - Is often forgetful in daily activities

Six or more of the following symptoms of **hyperactivity-impulsivity** that have persisted for 6 months or longer

● **Hyperactivity**

- Often fidgets with hands or feet or squirms in seat
- Often leaves seat in classroom or in other situations
- Often runs about or climbs excessively in situations where it would be considered inappropriate
- Often has difficulty playing or engaging in leisure activities
- Often acts as if "driven by a motor"
- Often talks excessively

● **Impulsivity**

- Often blurts out answers before question is even completed
- Often has difficulty awaiting turn
- Often interrupts or intrudes on others

ADD/ADHD: Incompatible or Contradictory Features

- **Is easily distracted by his environment when uninterested in a task, but he tries to avoid disturbing others**
- **Delays response when spoken to, but gives thorough responses**
- **Intentionally fails to finish tasks (especially repetitive or memory tasks)**
- **When he blurts out an answer, it generally is correct**

ADD/ADHD: Incompatible or Contradictory Features

- **Interruptions of conversation are to correct mistakes of others**
- **Can be easily redirected from one activity of interest to another activity of equal interest**
- **Passes attention tests, and can shift attention readily, if motivated to do so**
- **Returns to a task quickly after being distracted or called off of a task**

Gifted or ADD/ADHD

Gifted

- Symptoms specific to a specific setting
- May be inattentive because schoolwork is not challenging or tied to the child's real life

ADD/ADHD

- Symptoms occur in most settings, though the child may do well temporarily in novel situations
- Inattention arises because of short-term memory deficits, problems remembering instructions or sequences

Gifted or ADD/ADHD

Gifted

- Easily distracted because classwork requires little effort
- Excess fidgeting is self stimulation to overcome boredom
- Speaks out of turn because she already knows the answers to questions and is eager to move on

ADD/ADHD

- Easily distracted because unable to maintain focus, particularly when faced with challenging tasks.
- Fidgets because of inability to control body; often out of seat, wandering around classroom
- Speaks out because of inability to regulate her behavior and appreciate the consequences for her actions

Gifted or ADD/ADHD

Gifted

- May not complete work because it is repetitious and seems meaningless. Refusal to do work is a specific choice
- Shows improved behavior when given appropriate classroom challenges and grouped with intellectual peers

ADD/ADHD

- Does not complete work because he cannot organize his time, does not understand the assignment, or misplaces the materials needed
- Shows improved behavior in a quiet, structured, predictable environment

Gifted or ADD/ADHD

Gifted

- Concentrates on a task to master it. May have difficulty moving between activities because of great interest in one topic. When interrupted, child can return easily to the task.
- Makes consistent effort in classes that interest her and with teachers who provide appropriate challenge. Makes good grades in interest areas

ADD/ADHD

- Concentrates intensely on a task because of inability to shift focus. Cannot move easily between activities because of difficulty in refocusing attention on a new subject. When interrupted, child does not return easily to the task.
- Effort is inconsistent in every class, and grades are usually substandard because of inability to concentrate on class discussions and homework. Acting out causes problems with teachers and other students.

Anger Diagnosis

- **Misdiagnosis or Dual Diagnosis**
 - **Oppositional-Defiant Disorder**
 - **Conduct Disorder**
 - **Intermittent Explosive Disorder**
 - **Disruptive Behavior Disorder NOS**
 - **Narcissistic Personality Disorder**

Diagnostic Criteria for Oppositional Defiant Disorder

- **A pattern of negativistic, hostile and defiant behavior lasting at least 6 months. Symptoms would include 4 or more of the following:**
 - Often loses temper
 - Often argues with adults
 - Often actively defies or refuses to comply with adults requests
 - Deliberately annoys people
 - Blames others for his or her mistakes
 - Is often easily annoyed by others
 - Is often angry and resentful
 - Is often vindictive.

OPPOSITIONAL DEFIANT DISORDER: Incompatible or Contradictory Features

- **Defiance is limited to one setting (e.g., school or one particular teacher)**
- **Does not defy most or all adults**
- **Argues effectively with adults or, if allowed, will debate the topic in a well-informed manner**
- **Unintentionally annoys or ignores people, and/or is unaware of doing so**

OPPOSITIONAL DEFIANT DISORDER: Incompatible or Contradictory Features

- **Is often concerned about the feelings of others and shows compassion**
- **Is often bothered by environmental stimuli, such as noise or light**
- **Has been a frequent target of bullying or teasing " Is frequently criticized for being too sensitive or too idealistic**

Conduct Disorder

- **bullying others,**
- **intimidating others,**
- **initiating physical fights,**
- **physically cruel to others and/or animals,**
- **destruction of property,**
- **deceitful,**
- **violation of rules**

Intermittent Explosive Disorder

- several discrete episodes of failure to resist aggressive impulses that result in assaultive acts or destruction of property
- grossly out of proportion to any precipitating psychosocial stressors
- “Gifted meltdowns” may be misdiagnosed as IED

Ideational and/or Anxiety Disorders

- **Obsessive-Compulsive Disorder (OCD)**
- **Obsessive-Compulsive Personality Disorder (OCPD)**
- **Asperger’s Disorder (aka Asperger’s Syndrome)**
- **Pervasive Developmental Disorder**
- **Schizoid Personality Disorder**
- **Schizotypal Personality Disorder**
- **Avoidant Personality Disorder**

Obsessive Compulsive Disorder

- **Excessive intellectualizing**
- **An extension of perfectionism**
- **Related to guilt feelings**
- **Primarily an adult diagnosis**
- **Important to distinguish between the anxiety disorder and the personality disorder**

Obsessive Compulsive Disorder

- **Obsession** (recurrent and persistent thoughts, images that are intrusive, excessive inappropriate and cause anxiety) and
- **Compulsions** (repetitive behaviors or mental acts-counting- that the person feels have to be performed to relieve the anxiety.

Obsessive Compulsive Personality Disorder

- The person is preoccupied with orderliness, perfectionism and mental and interpersonal control at the expense of flexibility and efficiency. They tend to be overly rigid, obstinate, perfectionistic and difficult to work with.

Obsessive Compulsive Disorder: Incompatible or Contradictory Features

- Gifted children’s fixated activities are toward a goal.
- Compulsive activities in children with OCD tend to be pointless.
- The OCD child recognizes the rituals as pointless and they are generally disturbing and disruptive of functioning.
- The gifted person on the other hand often does not see a certain ritual as excessive or unreasonable. She may describe the thoughts or behaviors as reasonable and rational.

Asperger's Disorder

- **Can be misdiagnosed as “quirky gifted”**
- **True Asperger's behaviors are not situation specific**
- **Is on a continuum**

Diagnostic Criteria for Asperger's Disorder

1. Severe and sustained impairment in social interaction, lack of social reciprocity
2. development of restricted, repetitive patterns of behavior, interests and activities. Inflexible adherence to nonfunctional routines
3. Causes impairment in social, occupational, etc. areas of functioning
4. They often lack empathy, prefer routine, difficulty interpreting social cues, often shows motor clumsiness.

Similarities

- excellent memory for events and facts
- verbal fluency or precocity
- talks or asks questions incessantly
- hypersensitivity to stimuli
- concerned with fairness and justice
- uneven development (asynchrony)
- absorbed in a special interest

Differentiating

- Asperger's kids lack empathy and will continue to demonstrate social ineptness with a wide range of peers. Children who are gifted and not Aspergers are socially facile with certain peers.
- The second revolves around examining the child's insight into how he or she believes others see them. Gifted children often have insight into social situations. Asperger's children do not.

ASPERGER'S DISORDER: Incompatible or Contradictory Features

- Has relatively normal interpersonal relationships with those who share his or her interests
- Extensive knowledge with intense interest, but without other Asperger-related behaviors
- Is comfortable with abstract ideas, unstructured situations, and innovative activities
- Any atypical motor mannerisms are largely under conscious control and are associated with stress or excess energy
- Does not show motor clumsiness

ASPERGER'S DISORDER: Incompatible or Contradictory Features

- **Has insight into the emotions of others and into interpersonal situations**
- **His emotion is generally appropriate to the topic or content**
- **Can display empathy and sympathy on many occasions**
- **Readily understand the meaning of metaphors or idioms like “Don't put all of your eggs in one basket”**
- **Speech patterns and sense of humor are more like that of adults**

ASPERGER'S: Incompatible or Contradictory Features

- Understands and uses humor that involves social reciprocity, rather than solely one-sided humor, word play, or rote recitation of short memorized jokes
- Is aware of how others perceive him and how his behaviors affect others
- Tolerates abrupt changes in routine, or only passively resists in the face of such changes
- Attention difficulties or distractibility result from events or actions in the environment, rather than solely from his own thinking or ideas

Mood Disorders

- Bi-Polar Disorders
- Cyclothymic Disorders
- Dysthymic Disorder
- Depressive Disorder

Case Study: Jennifer

Bipolar Disorder

- The DSM-IV TR characterizes Bipolar Disorder as a condition in which the patient has significant mood changes that last from weeks to months at a time.
- Patients will experience at least one manic episode where the mood is an elevated one; followed by a period of normalcy or balance for at least two months before an onset of a major depressive episode.
- These mood changes cannot be due to schizophrenia, schizoaffective disorder, psychotic disorder or delusion disorder.
- The mood changes also cannot be a direct result of substances taken, such as sleeping pills or prescribed amphetamines.

BIPOLAR DISORDER: Incompatible or Contradictory Features

- The mood swings occur several times each day
- The extreme emotions occur in response to specific events or stimuli, not as an overall pervading mood
- The moods and behaviors occur only at certain times of the day, several hours after a meal or after eating certain foods
- The extreme emotions occur primarily when the child is overly tired
- The extreme emotions are related to a longstanding passionate interest area for the child
- The emotions and behaviors do not cause significant impairment in relations with others or in personal performance

Diagnostic Criteria for Depression

- *Five (or more) of the following symptoms have been present during the same two week.*
 - Depressed most of the day, nearly every day, as indicated by either subjective reports were observation made by others.
 - Markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day.
 - Significant weight loss (when not dieting) or weight gain.
 - Insomnia or hyper insomnia nearly every day.
 - Psychomotor agitation or retardation nearly every day.
 - Fatigue or loss of energy nearly every day.
 - Feelings of worthlessness or excessive or inappropriate guilt nearly every day.
 - Diminished ability to think or concentrate, or indecisiveness, nearly every day.
 - Recurrent thoughts of death or suicide, or read current suicidal ideation without a plan, or a suicide attempt or plan.

DEPRESSION (EXISTENTIAL)

- Very likely among highly gifted
- Issues of meaning, purpose, and belonging
- Feeling alone in an absurd, meaningless world
- Existential awareness without insight

Stress, Idealism and Depression

- High ideals result in feeling of obligation (pressure) to make contributions to the world.
- High ideals/aspirations lead to a need to be "on top" in grades; desire to please parents and teachers.
- Their apparent high potential leads others to expect more of them.
- Sense of time pressures/limitations (can't fit in everything they want to do).
- High ideals result in feeling of obligation (pressure) to make contributions to the world.

Idealism, Unhappiness, Depression, and Resiliency

- Most gifted children are idealists, yet their idealism can actually increase the likelihood of depression.
- Gifted children are often frustrated in their idealism and vision of how things should be.
- They are exposed to internal and external stresses that could make them more at risk for unhappiness and depression.
- Some are unhappy and depressed. But on the other hand, gifted children are resilient and often are better at coping.

CONSIDERATIONS IN DIFFERENTIATING CORRECT DIAGNOSES FROM GIFTED BEHAVIORS

- Take a developmental history to look for early milestones or precocious development.
- Evaluate whether the person's current school or personal behaviors or test results suggest high intellectual or creative potential.
- Consider whether the behavior patterns are ones that are typical for gifted children or adults.

CONSIDERATIONS IN DIFFERENTIATING CORRECT DIAGNOSES FROM GIFTED BEHAVIORS

- When examining the DSM-IV-TR diagnostic criteria, consider the child's or adult's developmental level in terms of giftedness, and whether these could account for behaviors that otherwise would fit the diagnostic criteria.
- Examine carefully the context in which "problematic" behaviors occur, and whether those behaviors could be explained most parsimoniously as stemming from a gifted/creative person being in an inappropriate situation.

CONSIDERATIONS IN DIFFERENTIATING CORRECT DIAGNOSES FROM GIFTED BEHAVIORS

- Consider whether the "problematic" behaviors are found only in certain contexts, rather than across most situations.
- Evaluate the extent of the situational contribution to the difficulties.
- Note whether the "problematic" behavior patterns are greatly reduced when the person is with other gifted persons or in intellectually supportive settings.

CONSIDERATIONS IN DIFFERENTIATING CORRECT DIAGNOSES FROM GIFTED BEHAVIORS

- Consider whether there is more frequent "cycling" of problem behaviors than would be expected for such a diagnosis.
- Evaluate the extent to which specific situations may markedly ameliorate the "problem behaviors" for gifted persons.
- Evaluate the extent of impairment caused by the behaviors. Are the behaviors really problematic ones that impair personal or interpersonal functioning, or are they quirks or idiosyncrasies that cause little impairment or discomfort?

General Strategies to address Overexcitabilities

DISCUSS THE CONCEPT OF OVEREXCITABILITY

- Share the descriptions of OEs with the family, class, or counseling group.
- Ask individuals if they see themselves with some of the characteristics. Point out that being overexcitable is OK and it is understood and accepted.

FOCUS ON THE POSITIVES

- Jointly discuss the positives of each overexcitability when you first introduce the concept, and continue to point out these merits. Benefits include being energetic, enthusiastic, sensual, aesthetic, curious, loyal, tenacious, moral, metacognitive, integrative, creative, metaphorical, dramatic, poetic, compassionate, empathetic, and self-aware.

CHERISH AND CELEBRATE DIVERSITY

It is vital when discussing OEs that individuals realize that overexcitability is just one more description of who they are, as is being tall, or Asian, or left-handed. Since OEs are inborn traits, they cannot be unlearned! It is therefore exceedingly important that we accept our overexcitable selves, children, and friends. This acceptance provides validation and helps to free people from feelings of "weirdness" and isolation.

CHERISH AND CELEBRATE DIVERSITY

Another way to show acceptance is to provide opportunities for people to pursue their passions. This shows respect for their abilities and intensities and allows time for them to "wallow" in what they love, to be validated for who they are. Removing passions as consequences for inappropriate behavior has a negative effect by giving the message that your passions, the essence of who you are, are not valuable or worthy of respect.

USE AND TEACH CLEAR VERBAL AND NONVERBAL COMMUNICATION SKILLS

It is vital to learn good communication skills and to teach them to children. Good communication skills are useful on multiple levels, from improving the chances of getting what you want, to nurturing and facilitating growth in others. Regardless of one's motivation for learning these skills, the outcomes will include less stress, greater self-acceptance, greater understanding from and about others, and less daily friction at home, school, work, or in the grocery store.

CREATE A COMFORTING ENVIRONMENT

- Intense people need to know how to make their environment more comfortable in order to create places for retreat or safety. For example: find places to work or think which are not distracting, work in a quiet or calm environment, listen to music, look at a lovely picture, carry a comforting item, move while working, or wear clothing which does not scratch or cling. Learning to finesse one's environment to meet one's needs takes experimentation and cooperation from others, but the outcome will be a greater sense of well being and improved productivity.

HELP TO RAISE AWARENESS OF ONE'S BEHAVIORS AND THEIR IMPACT ON OTHERS

Paradoxically, overexcitable people are often insensitive and unaware of how their behaviors affect others. They may assume that everyone will just understand why they interrupt to share an important idea, or tune out when creating a short story in their head during dinner. It is vital to teach children and adults to be responsible for their behaviors, to become more aware of how their behaviors affect others, and to understand that their needs are not more important than those of others. The key is to realize that you can show children and adults how they are perceived, you can teach them strategies to fit in, but they must choose to change.

REMEMBER THE JOY

- Often when overexcitability is discussed examples and concerns are mostly negative. Remember that being overexcitable also brings with it great joy, astonishment, beauty, compassion, and creativity. Perhaps the most important thing is to acknowledge and relish the uniqueness of an overexcitable child or adult.

Interventions for Asynchronicity

Coping with Asynchronous Development

- Be aware of the gifted child's uneven development and the special needs that result.
- Promote an environment that meets the educational, social, emotional, and intellectual needs of gifted children.
- Value the child for who he/she is, not for who (or what, in some cases) they are not. Provide opportunities for the child to spend time with other children of similar interests and abilities to help them feel accepted for who they are.

Coping with Asynchronous Development

- Consider single subject acceleration.
- Help the child accept differing abilities. Point out that all people develop differently and have varying skills, capabilities, and talents.
- Reassure gifted kids that no one expects them to have exceptional ability in every area.
- Help children learn needed social skills by role-playing with them.

Interventions for the Perfectionist

Recommendations to the Perfectionist

- Be selective with your tasks
- Remember that it's OK to be less than perfect
- Set reasonable, attainable goals
- Have at least one "safe" activity
- Realize that a lot of successful people have experienced failure
- "I would prefer for ___ to occur, but can accept that it won't" rather than "I should have made ___ happen." (Schuler)

Coping with Perfectionism

Don't Take It Personally

- Separate self-worth from products
- Grade reflects how their work matches to grading criteria; it is not a reflection on student's worth
- Share rubrics with students and discuss how they are used

Know When to Quit

- Make sure students know not to work forever – there needs to be a stopping point
- Have clear expectations – consider including maximum as well as minimum requirements
- Monitor student progress throughout project time frame

Coping with Perfectionism

Match the Time Commitment to the Value of the Assignments

- Weight assignments appropriately
- Encourage students to put most effort into assignments that count the most

Set Goals and Focus on Improvement

- SMART goals – specific, measurable, achievable, realistic, timeframe-provided
- Incremental improvements can lead to achievement – a huge leap is not necessary

Coping with Perfectionism

Study the Lives of Eminent People

- Realize the path to success is not an easy one
- Persevere in the face of obstacles
- Revising and refining is part of the process
- Failure can be constructive

Enjoy Each Day

- Participate in community service projects (make a difference)
- Engage in hobbies and pursuits that are enjoyable

Notable Failures

- Louisa May Alcott was told by an editor that she would never write anything popular.
- Walt Disney was fired by a newspaper editor because "he had no good ideas."
- Thomas Edison's teachers called him "too stupid to learn." He made 3,000 mistakes on his way to inventing the light bulb.
- Charles Goodyear had many failures and was sent to debtor's prison.
- Lee Iacocca was fired from the Ford Motor Company.
- Abraham Lincoln was defeated in six elections, failed twice in business, and suffered a nervous breakdown.
- Charles Dickens, Claude Monet, Isadora Duncan, and Mark Twain never finished grade school.
- Babe Ruth struck out 1,330 times.
- Formula 409 got its name from how many times it took to get the product right.

Coping with existential depression

- Listen, Listen, Listen
- Share similar experiences
- Touch
- Bibliotherapy
- Take action

What are the Consequences of Failing to Nurture the Social Emotional Needs of the Gifted

- Repeatedly, we see factors for children and adolescents who are at risk for emotional difficulties stated in the press. Dirkes (1983) provided symptoms of undesirable levels of anxiety in gifted children, including:

- decreased performance
- expressed desire to be like teen-agers
- reluctance to work in a team
- expressions of low self-concept
- excessive sadness or rebellion
- reluctance to make choices or suggestions
- extremes of activity or inactivity

- a change in noise or quietude
- repetition of rules and directions to make sure that they can be followed
- avoidance of new ventures unless certain of the outcome
- other marked changes in personality. In addition, we find other danger signals for gifted children and adolescents that indicate they may be seriously depressed or suicidal
- self-imposed isolation from family
- self-imposed perfection as the ultimate standard, to the point that the only tasks enjoyed are the ones completed perfectly

- deep concern with personal powerlessness
- narcissism -- total preoccupation with self and with fantasy
- unusual fascination with violence
- eating disorders
- chemical abuse
- rigidly compulsive behaviors (Schmitz & Galbraith, 1985)

Here's to the Crazy Ones



Here's to the crazy ones. The misfits. The rebels. The trouble-makers. The round heads in the square holes. The ones who see things differently. They're not fond of rules. And they have no respect for the status-quo. You can quote them. Disagree with them. Glorify, or vilify them. But the only thing you can't do is ignore them. Because they change things. They push the human race forward. And while some may see them as the crazy ones, we see genius. Because the people who are crazy enough to think they can change the world.

Websites for Gifted Resources

- * www.sengifted.org
- * www.hoagiesgifted.org
- * www.TAGFAM.com
- * www.nagc.org
- * www.ditd.org
- * www.txgifted.org

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