

**Submission by the Gifted Children’s Association of BC, Advocacy Committee
to
The Select Standing Committee of Children and Youth
Neuro-diverse Project**

The Board of Directors for the Gifted Children’s Association of British Columbia (GCABC), a parent advocate and support group representing parents from across BC, is pleased to be able to make this submission to the Select Standing Committee’s Special Project on Children and Youth with Neuro-diverse Needs. The Advocacy Committee of the GCABC is making this submission for two reasons. First, gifted children are increasingly becoming understood as being “Neuro-diverse”. That is, gifted children have brains that function differently than their “average” peers, and these differences can have dramatic impacts on the children’s educational and social-emotional needs, as well as needing specialized support from community services. Secondly, the GCABC represents many parents who have children that have giftedness as PART of their experience of having a special need. Children who are gifted may also have many other diversities, with learning disabilities, ADHD and ASD being three of the most common. Within our community these children are called “twice exceptional” or 2e, and these are the children and families who often have the greatest need of supports as they work hard to understand and seek supportive services who understand all of these complexities within their children.

Response to Question #1

As the Special Education Policy Manual (2016) states, “A student is considered gifted when she/he possesses demonstrated or potential abilities that give evidence of exceptionally high capability with respect to intellect, creativity, or the skills associated with specific disciplines. Students who are gifted often demonstrate outstanding abilities in more than one area. They may demonstrate extraordinary intensity of focus in their areas of talent or interest. However, they may also have accompanying disabilities and should not be expected to have strengths in all areas of intellectual functioning.” (p. 53)

After years of published studies and research, there is no single definition for giftedness approved by all professionals. However, giftedness is usually measured in three ways: by individual achievement; by IQ, or how an individual understands things rather than what knowledge they have; and by talent, when individuals show above-average ability in a specific area such as arts or athletics (Tetreault, Hasse, & Duncan, 2016). In other words, giftedness is best understood as individuals experiencing and responding to their surroundings differently than most of the population.

According to *Gifted Research and Outreach Inc.* (GRO 2016) these differences stem from being neuro-diverse:

Giftedness is an 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 counselling for them to develop optimally. (Tetreault et al., 2016)

From this definition it follows that gifted children have a variety of strengths and challenges that can present themselves in complex and often misunderstood ways. The policy manual also states the importance of identification and adaptations within the educational system to address the complexities of their learning needs. “Early identification of students who are gifted is an important element in planning and delivering appropriate educational programs for these students. Some gifted students whose abilities are not identified and addressed early may exhibit secondary emotional and behavioural difficulties.

District screening and identification procedures should be in place to ensure consistency of access to programs designed to support gifted students.” (Policy Manual p. 53)

Neuroscience of the Gifted Brain

The neuroanatomy of gifted individuals is different from that of the general population in six different ways, which research indicates play a significant role in intensifying their experiences:

1. Increased original brain volumes;
2. Greater connectivity across brain regions;
3. Brain that operates more efficiently;
4. Greater sensory sensitivity;
5. Expanded brain areas dedicated to emotional intelligence; and
6. Expanded brain areas that respond more actively to challenges. (Tetreault et al., 2016).

Furthermore, individuals with a higher IQ have an increased volume of gray matter in various regions of their brains. Gray matter is a part of the brain used to compute information, and it is what the cortex is composed of. The regions with increased volume of grey matter include the frontal lobes, which handle complex decision making; the temporal lobes, which handle auditory processing and language interpretation; the parietal lobes, which are responsible for taste, temperature, and touch sensation; and the occipital lobes, which handle visual information (Tetreault et al., 2016).

Additionally, the brain areas associated with processing emotional information are expanded in gifted individuals. The expansion and enhanced connectivity of the anterior cingulate cortex and frontal cortex could be responsible for gifted individuals’ intense drive to satisfy their intellectual curiosity. It can also explain why individuals with a high IQ often experience more intense emotional responses, such as depression and anxiety.

If gifted children are not placed in an appropriate environment in which they can be challenged and supported based on their needs, they can face hardship (Tetreault et al., 2016). 42 years ago in the United States, the Department of Education commissioned the first report to congress on gifted children. The Marland Report (1972) noted that “gifted children can suffer psychological damage and permanent impairment of their abilities to function well which is equal to or greater than the similar deprivation suffered by any other population with special-needs served by the office of education.” Despite this report and many other published studies on the psychological and physiological effect of giftedness on individuals, much of the medical and psychological communities are not aware of how giftedness impacts a person’s overall health and well-being (Tetreault et al., 2016).

Response to Question #2

Children in this category are not well-identified. In some cases, parents seek assistance from the medical community and pediatricians recommend psychological assessments, but this is not universal - far from it. When students enter the school system, some are identified by teachers who possess a background and /or training in responses to giftedness. Identification is usually through student behaviour, achievement or questions raised by parents. Between the 2001/2 and 2016/17 school years 69% fewer gifted students were identified (BC Teacher’s Federation, 2017). Over this same period there was a pattern that all students with what is considered a “high incidence” special need were less likely to be identified (average 35% decline), but compared to the 11 other special needs categories, the drop in the number of identified gifted students was by far the most extreme.

This could be improved by providing professional development or training within university programs to professionals who work with these populations. For educators, this could be accomplished by updating

the BC Special Needs Policy Manual and providing in-service for post certification teachers and including a greater emphasis on Special Education needs in pre-service teacher education. Medical and mental health professionals also need to have training opportunities to identify and work with gifted and twice exceptional children.

Response to Question #3

Aside from the gaps named above in awareness and recognition of giftedness by educational, mental health and medical professionals, there are other gaps related to availability of assessments and barriers related to costs. Schools and School Districts are not able to employ sufficient numbers of psychologists to meet the variety of needs for all special education student assessments that provide the detailed information that will allow teachers to respond adequately to the student needs. Additionally, gifted students who experience mental health issues related to anxiety, social emotional needs, concomitant learning challenges and social challenges require counselling services that are not available in the system. Parents are increasingly seeking expensive assessments from private practitioners and too often, these assessments are not accepted by schools despite the valuable information they provide that assists both understanding and response.

Another major barrier is the system of reporting special needs within the education system. At this time there is only one special need that is allowed to be reported per student. This means for children who have been identified as gifted AND have a learning disorder, ADHD or ASD the educator has to “choose” which of these special needs to report to the Ministry of Education. This usually means that the complex child is not recognized nor served in a way that understands all of the complexities they are managing, and the services often fall short. This could be improved by modifying the reporting system to allow for children to be listed as having all of the special needs they are experiencing, rather than only one.

Response to Question #4

Unfortunately, the experience for families with gifted children across their child and adolescent years is quite variable. Despite calls from researchers and professionals for assessing and supporting gifted children’s educational and socio-emotional needs prior to them entering Kindergarten, this is rarely done. Parents often feel that their child is “normal” until they enter school. And this is where many problems begin. For example, gifted children who have already learned the alphabet and sometimes how to read are asked to sit still with their peers while the peers learn these. One analogy that often helps people understand the experience is that the gifted child is akin to a Ferrari that is sitting in a traffic jam. And imagine if the Ferrari had ADHD as well. Or if the gifted child with ASD was brilliant at puzzles and math, but had deficits in other learning areas and was misunderstood as having no “gifts”. This pattern often repeats itself across the school years as there are different experiences with what is needed as an assessment, educational and service “match” vs. what is provided to the child. If this match is not well done, this places the child in a vulnerable position and often results in poor educational and mental health outcomes (Neihart, Pfeiffer & Cross, 2015).

Response to Question #5

Recognition that the gifted designation is within the special needs spectrum. While giftedness shares many factors with other designations, it is different as these children are not seen as ‘disabled’; they are neglected when the health care and educational systems consider supports and interventions for the special needs community. At best they are ignored as the understanding and support needed to meet their neuro-diverse profile is largely ignored. As a case in point, this special project has not received, as of the date of this response, one presentation from the meetings scheduled across the province (information obtained from the recordings posted online) regarding this special education population.

Conclusion

As our societies rush to fix every response and behavior does that not fall within a narrow definition of “normal,” a grave disservice is being done to all populations who fall outside of this definition. The neurodiversity movement aims to provide understanding of an outlier population. An understanding of the differences and physiology of the outlier population known as gifted is imperative and long overdue. It is important to understand this definition and the ways in which their neurology functions and differs from much of the population (Tetreault et al., 2016). More specifically, our goal is to shed light on these facts and the effects they have, especially the fact that this population needs the same level of support and attention as other populations with different diagnoses to enable them to live a complete and meaningful life and to reach their full potential. This will prevent them, in the long run, from experiencing other emotional and mental challenges.

Respectfully Submitted

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