# Our focus in this issue —Getting a proper diagnosis

## Screaming and No One Listening: Advocating for the 2e Child

By Dan Peters and Julie Mills *(pictured here)*

How one child’s story exemplifies the plight of twice-exceptional children in today’s educational system, exacerbated by fiscal cutbacks and affected by RtI.

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## Finding the Right Diagnosis in Gifted Children

By Paul Beljan


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## Using Qualitative Methods to Avoid Misdiagnosis of 2e Children

By Linda Powers Leviton

How gifted and twice-exceptional children have been ill-served by the trend toward viewing potential diagnoses through a narrowing lens.

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## Understanding, Diagnosing, and Coping with Slow Processing Speed

By Steven Butnik

Where slow processing speed comes from; how it can be identified; and what students, teachers, and parents can do to reduce or eliminate its impact.

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It’s somewhat fitting that our May/June issue has the theme “getting a proper diagnosis” because in the U.S. the new version of the American Psychiatric Association’s *Diagnostic and Statistical Manual* comes out this month.

However, in this edition of the newsletter, we’re not going to get into the issue of whether diagnoses should be behavior-based or biologically-based. And we’re not going to get into the utility of labels for twice-exceptional children, except to say that in some cases — as in requesting services or accommodations — diagnostic labels may be necessary.

In this issue, three professionals offer perspectives on different aspects of the diagnosis of 2e children.

- Psychologist Dan Peters, with the help of parent and professional Julie Mills, describes a problem with getting a school to recognize twice exceptionality, and their efforts to advocate for the 2e child.
- Pediatric neuropsychologist Paul Beljan explains how he differentiates between a number of common prospective diagnoses based on what he sees — or doesn’t see — as he evaluates 2e kids.
- Psychotherapist/assessor Linda Powers Leviton describes a common “one-size-fits-all” approach to diagnosing 2e students and an alternative to that approach that she believes yields better results.

Also in this issue, psychologist Steven Butnik provides his commentary on slow processing speed in 2e children — how to spot it, conditions it may be associated with, and how to address it.

Along with the usual Sylvia Rimm column, news, and events, you’ll find a “Parent’s Perspective” column — a feature we haven’t had in the newsletter for a while. This one makes up for our lapse, offering plenty of insight from Patricia Seres. (Fans of gifted and 2e groups on social media sites such as LinkedIn will recognize her name.)

Finally, we’re pleased to offer a poem that is especially relevant and poignant for those who raise, educate, and counsel the twice-exceptional. The poem is both a child’s apology to her teacher and an affirmation of her own 2e identity. We hope you find it as touching as we did.

Thanks for subscribing!

— Linda C. Neumann and J. Mark Bade
Glen Ellyn Media
May, 2013
Screaming and No One Listening: Advocating for a 2e Child

By Dan Peters, PhD, and Julie Mills, LCSW

Dan Peters: Since the reauthorization of the Individuals with Disabilities Act (IDEA) in 2004 and the inception and implementation of RtI (Response to Intervention), the landscape for and the experience of 2e students has drastically changed. Prior to these changes, students who were struggling in school were regularly referred for comprehensive assessments to look at the totality of their cognitive and academic functioning. Learning and processing disorders were identified by the pattern of a child’s scores and abilities. The assessments revealed discrepancies that existed and, when a diagnosable condition was found, qualified children for special education services. Thus, comprehensive evaluations served as the tool for identification of learning and processing disorders, and they guided individualized education planning.

The overall goal of RtI makes sense. Its purpose is to identify students who are struggling, provide interventions to help them in the classroom, and eliminate the time spent waiting in line for an evaluation that might qualify them for special education. Thus, with RtI more students have access to intervention than just those who receive special education services.

So what’s the problem? With the implementation of RtI and the continued fiscal cuts in education, comprehensive assessment and the availability of school psychologists have been greatly reduced. Under RtI, children are considered to be struggling in class if they are performing “below grade-expected levels,” which in some states is defined as low as the 12th percentile.

Furthermore, RtI is dependent on a teacher recognizing that a child is struggling. Very few teachers receive training in gifted education, let alone the concept of twice-exceptionality — that a child can be both gifted and disabled. Since gifted children with learning and processing disabilities compensate by means of their advanced thinking, they often score within “grade-expected levels.” Unfortunately, this performance is far below their ability and signifies a problem.

My colleagues across the U.S. are seeing the same thing — gifted kids with a long history of underachievement, frustration, burn-out, depression, and anxiety who are not getting identified as having a disability; or, if they are assessed and identified, they are not receiving a qualifying diagnosis to get an IEP (Individualized Education Program) or Section 504 Plan. Lives are being affected, kids are struggling, and our greatest minds are being wasted.

I have had the privilege of working with a family who was willing to share just such a story. While this is one family’s unique story, it is also the story of the 2e child in our modern-day educational system. This is the story of “Aaron,” as told by his mother.

Julie Mills: When my happy-go-lucky son was in kindergarten, he enjoyed school just as he had enjoyed preschool. However, with homework being assigned in kindergarten, homework time often resulted in tantrums. We were not alone. Other parents of boys in Aaron’s class described similar experiences in their homes. So, my husband and I figured this was common behavior for boys when it comes to homework.

Every year, the frequency and severity of the tantrums diminished slightly to the point that by middle school Aaron did his homework without a major argument. In retrospect, I wonder if the tantrums were related to his twice exceptional (2e) issues, which we discovered much later.

Dan: It’s very common for gifted individuals, particularly boys, to have difficulty with writing. It can be a relative weakness, meaning their visual-motor skills lag behind their thinking abilities; or it can be suggestive of a processing disorder called dysgraphia. In both situations, the child is extremely frustrated because either he cannot get the ideas and words in his head onto the paper or doing so is a laborious process. These struggles often result in tantrums and meltdowns over “simple” homework.

Julie: I recall seeing a chart on the wall when Aaron was in second grade. It showed how students were performing on timed math facts tests. Many of the students, I noticed, were quicker than my son. When I asked about this, the teacher assured me that Aaron understood the concepts better than many of his classmates. Looking back, I wonder if a more experienced teacher would have warned me to keep an eye out in future years for the possibility of processing issues.

When we received Aaron’s second-grade state test scores, we saw that he scored in the bottom 25th percentile for writing strategies. Was his antipathy toward doing homework surprising given that writing was so challenging for him?

Then came third grade, when writing paragraphs and stories became part of...
Advocating for a 2e Child, continued

the curriculum. Aaron’s struggles with writing were now more apparent to us. However, at this point and at others over the years, Aaron’s teachers rarely expressed much concern when we met with them. As for my husband and I, we thought Aaron’s writing seemed very poor; but having only one child, we didn’t know if it was out of the ordinary.

Nevertheless, our concerns led us to try a few strategies to help Aaron improve his writing. Among them were sending him to a summer school writing class and having someone at school work with him on writing for an hour a week. Finally, in eighth grade we sent Aaron to a different school, a very small school where his teacher could spend more time with him. She astutely noticed that there was a disparity between what my son said during class discussions and what he wrote. While his thoughtful comments demonstrated insight into the material, his writing was meager and poor. Her observations led to a student study team meeting and to an assessment by the resource specialist and occupational therapist. When their testing showed no cause for his difficulties, we proceeded with testing by the school psychologist. While this testing still revealed no causes for Aaron’s struggles, it did show him to be highly intelligent. Issues with executive function, especially related to organizational skills, were raised as possible causes of my son’s difficulties; but now it was time for high school, so there was nothing left to pursue at this school.

Dan: Aaron’s teacher did the single most important thing a teacher can do for a 2e child — recognize that there was a discrepancy between his thinking abilities and his academic output. It is also positive that Aaron was assessed. However, it’s when the testing data is interpreted that things usually hit a grinding halt. At this point, as in Aaron’s case, a 2e child’s “average” performance is seen as evidence that “he’s at the level we expect him to be for his grade.” The child’s high reasoning scores, on the other hand, tend to be minimized or ignored.

Julie: That fall, while attending the annual California Association for Gifted conference, I went to a seminar on 2e. When some of what I heard sounded like Aaron, I asked the presenter, Dr. Dan Peters of Summit Center, if he thought my son could be 2e. Dr. Peters explained that with twice exceptionality, people are often misdiagnosed or the diagnosis can be missed altogether. A key to getting a correct diagnosis is for the person doing the assessment to understand giftedness.

This new information led my husband and me to consider further testing for Aaron. We had Summit Center do the assessment; and, to our surprise, we found out that our son has dyslexia, dysgraphia, and other processing disorders.

Aaron had always been able to read and was above benchmarks for fluency in elementary school (although he never liked to read on his own), so he had not been specifically tested for dyslexia in the past. The rest of the testing he went through in middle school was very similar to what Summit Center did, and so were the scores. The school’s test showed a great disparity in Aaron’s intelligence versus his fluency and speed at doing reading and math. This pattern indicates a processing disorder. Just as Dr. Peters said, since school staff members were not knowledgeable about issues regarding gifted students, they missed that Aaron had a processing disorder.

Dan: We conducted a neuropsychological evaluation of Aaron to better understand his learning profile. I will highlight some of his scores to show the key issues.

### IQ Scores

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<thead>
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<th>Area Tested</th>
<th>Ranking</th>
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<tr>
<td>Verbal Comprehension</td>
<td>99.8&lt;sup&gt;th&lt;/sup&gt; percentile</td>
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<tr>
<td>Processing Speed</td>
<td>27&lt;sup&gt;th&lt;/sup&gt; percentile</td>
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There were more than three standard deviations between Aaron’s ability to verbally problem solve and ability to copy and write quickly.

### Reading Scores

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<tr>
<td>Accuracy</td>
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<tr>
<td>Rate</td>
<td>25&lt;sup&gt;th&lt;/sup&gt; percentile</td>
</tr>
<tr>
<td>Fluency</td>
<td>9&lt;sup&gt;th&lt;/sup&gt; percentile</td>
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### Writing Scores

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<tr>
<td>Sentence Combining</td>
<td>9&lt;sup&gt;th&lt;/sup&gt; percentile</td>
</tr>
<tr>
<td>Contextual Conventions</td>
<td>16&lt;sup&gt;th&lt;/sup&gt; percentile</td>
</tr>
<tr>
<td>Contextual Language</td>
<td>16&lt;sup&gt;th&lt;/sup&gt; percentile</td>
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In other testing, Aaron showed weaknesses in executive-functioning — the ability to plan, organize, and shift attention — and in auditory processing.

Julie: Getting the correct diagnosis had been a long journey. From the time my son was four, he’d been assessed by a speech pathologist; by an audiologist for hearing loss; by a specialist checking for nasal tonality; and by an ear, nose, and throat doctor related to speech issues. He also underwent testing to assess for attention deficit disorder; an occupational therapy assessment for writing; and assessment by a resource specialist and two psychologists. All but the speech pathology assessment were recommended to us by other professionals due to their concerns about my son.

Except for the assessments by the speech pathologist and Dr. Peters, none of the other assessments ever revealed any significant findings. Had we been on a wild goose chase? I now wonder if my son’s many issues, which had led to all of these assessments, were related to the dyslexia and dysgraphia.

Finding out the cause of my son’s difficulties has been a turning point for us. With tutoring for dyslexia, Aaron’s writing has begun to improve dramatically. His grammar is better and he’s able to express his ideas in more depth. His English teacher, noticing the improvement, commented that she looks forward to reading his writing. She noted that the ideas in Aaron’s papers are so good that she’d like him to comment more in class to raise the level of class discussions. What a dramatic change from someone who struggled to put a sentence together!

While Aaron’s writing still needs improvement, we are so happy to have finally found what works. Without knowing the cause of the problem, we were unable to provide the proper remedy. All of the effort we put into trying to teach my son how to write correctly was futile without dealing with the underlying cause, his dyslexia.

Dan: Time and time again, we see families who have gone through the same ordeal — multiple evaluations and consultations with educators and professionals who are unaware of the signs of twice exceptionality. They don’t know that the discrepancy in a child’s abilities, along with the child’s emotional and behavioral reactions to particular tasks, tell the story about his or her learning challenges. In all cases, accurately identifying learning and processing disorders and understanding the child’s learning profile mark the beginning of effective and targeted intervention. The end result can then be increased self-confidence and academic success for the child.

Julie: Despite our successes, however, we still have a long way to go to get Aaron the support he needs at school. Immediately following the dyslexia diagnosis, we provided the school with the 20-page Summit Center neuropsychological evaluation report; and we arranged a meeting with the school to request a 504 Plan for accommodations. The meeting was held two weeks into my son’s sophomore year. There we heard that, because Aaron was doing so well in school, he didn’t qualify for a 504 plan. He would have to be performing below average to qualify.

I responded with these points:
• The law states that a student’s disability must substantially limit his or her learning, but does not state that one needs to perform below average.
• Based on Aaron’s IQ, in the top 99th percentile, he should be expected to achieve very high grades. His most recent semester GPA was 2.66 (based on how colleges calculate it) — not what would be expected for someone with his IQ.
• Aaron’s executive-function challenges leave him with weak organizational abilities. As a result, he misses assignments and forgets to turn in completed homework, lowering his grades.
• To achieve the grades he has, Aaron puts in a tremendous amount of effort, receives a great deal of parental support, and gets tutoring. Under the law, tutoring is supposed to be taken into account when determining whether a student qualifies for special education.

The school responded by agreeing to meet again in two weeks, when there would be more data — grades and teacher familiarity with Aaron — on which to make a decision. At the meeting, the 504 coordinator for the school district was present, along with the principal, the assistant principal, and two of Aaron’s teachers. So was Dr. Peters, who attended both meetings to present Summit’s assessment of my son and help us convince the school of the need for a 504 Plan.

At this meeting, the school agreed that my son has dyslexia and dysgraphia, but not that it impaired his learning enough to qualify for a 504 Plan. We disputed the school’s statement that Aaron’s performance had to be below average to qualify for

### Additional Scores

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<tr>
<td>Visual-motor</td>
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<tr>
<td>Motor tasks</td>
<td>1st percentile</td>
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Advocating for a 2e Child, continued

the plan. We cited evidence from the U.S. Department of Education’s Office of Civil Rights, responsible for enforcing 504 Plans, along with evidence from previous cases across the country.

No matter what we said, they disagreed. When I stated that I thought the goal of education is to help all students reach their full potential, I was told that’s incorrect. The 504 coordinator explained that if they had to do that, schools would have many more 504 Plans than they could handle.

This second meeting ended with the district denying a 504 Plan for Aaron. In a follow-up e-mail, the 504 coordinator told me “how proud” I should be that my son’s grades were mostly B’s. The truth was that Aaron’s grades were erratic — mostly B’s interspersed with failing marks.

Dan: While 504 Plans were once relatively easy to get for a child with a legitimate learning or processing disorder, the trend has changed. In this case, and in others, the school acknowledged and agreed with our diagnoses (which allowed them to put a check in the first box), but said they could not mark the second box, which stated his disability was affecting his academic performance beyond what would be considered typical grade performance. When I asked how low Aaron’s grades needed to be for him to be qualified, they told me it didn’t work that way. I said surely it must, and asked again what Aaron’s grades needed to be for him to be seen as “not meeting grade-expect levels.”

We did not get an answer. So Aaron’s parents were faced with a daunting, yet common, question: Do we pull away all the support Aaron is given so that the school can see his real performance, or do we continue to support him so that he doesn’t fail?

Julie: Following the 504 denial, we met individually with Aaron’s teachers to ask for accommodations in each of their classes. Most were happy to give him extra time. Some looked for creative ways to help him, offering to do whatever they could to help. Ironically, the least accommodating teacher was the one who has dyslexia himself. While he said that he gives everyone accommodations of extra time, he insisted that my son had to write all of the class notes, even though Summit Center’s report recommended against this due to the dysgraphia. Despite posting all of his class notes on his website, this teacher still required my son to handwrite them for notebook checks. He explained to us that Aaron should do what he, himself, had done to get through school — work extra hard. We were not asking anyone to spare our son from working hard, we were asking for accommodations to give him the opportunities to learn and express his knowledge on a level playing field with his classmates.

We are now in the process of preparing to appeal the 504 denial. I have talked to special education attorneys and advocates, and we are working on our next steps. Among the reasons to continue to fight, aside from mandating accommodations in his classes, is to increase the likelihood of getting accommodations for the SAT. Without an official 504 Plan, chances of getting extra time on the test are unlikely.

So while we have traveled a long way down the path on our learning disabilities journey, we still have a long way to go; and I am sure there will still be many more hills to climb. Sadly, instead of being embraced by the school and receiving support for our son, we face an uphill battle to get him the services to which we believe he is entitled. This battle is not over yet, and we will continue until our son gets what he needs.

Dan: Aaron and his parents are among good company. Their story is unfortunately typical. I speak regularly to colleagues around the country who tell me similar stories about their 2e clients and students. All children have a right to a free and appropriate education (FAPE). In the case of many 2e students, their education may be free, but is it appropriate? Are their learning and processing disorders getting identified? Are they receiving specialized intervention under the Individuals with Disabilities Act (IDEA)? Are their civil rights being violated?

If your gifted child is struggling in school, you have the right to request a comprehensive evaluation (in writing). If you are denied, do not give up.

—DP

W
Feature Topic

Advocating for a 2e Child, concluded

Recommended Resources


“Twice-Exceptional Students: An Endangered Species,” by Barbara Gilman, Dan Peters, Mike Postma, and Kathi Kearney, Gifted Education Communicator (Summer, 2012)

Wrightslaw (special education law and advocacy website), www.wrightslaw.com

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Dan Peters is a licensed psychologist in California. He is the co-founder and executive director of the Summit Center (http://summitcenter.us), which specializes in the assessment and treatment of children, adolescents, and families, with special emphasis on gifted, twice-exceptional (2e), and creative individuals. In addition, he is the co-director of Camp Summit for the Gifted, Talented, and Creative, a summer day camp in the San Francisco area (www.camp-summitforthegifted.com). He is also the co-author, with Susan Daniels, of Raising Creative Kids (Great Potential Press, 2013).

Julie Mills is a licensed clinical social worker in the San Francisco Bay area. She works for her county’s Behavioral Health Care Services as the clinical liaison for transition age youth programs, alcohol and drug perinatal programs, and tobacco cessation programs. She is also known for her advocacy skills. When it comes to her son, she will not give up until she gets him what he needs.

Accepting a Child’s Diagnosis

Although it was upsetting to learn that Aaron has dyslexia, Dr. Peters also shared with us all of the strengths associated with the way a brain with dyslexia processes information. Then, after reading the book The Dyslexic Advantage, by Drs. Fernette and Brock Eide, we understood more clearly how our son’s brain works and we became more hopeful.

Now, when I looked at an old piece of Aaron’s artwork, I saw it with new eyes. I had always thought it showed how he thinks “outside the box,” but now it helped me to understand how Aaron’s brain works differently than most people’s. The picture, shown here, is a drawing of a catfish. In their book, the Eides said that spatial processors, like Aaron, see and process things from all angles. Now I understood why he drew the fish from a front angle when most people would draw it from a side angle. This was an epiphany for me and for my son.

A main reason we chose Aaron’s high school is for its highly regarded Engineering Academy, which begins in tenth grade. Aaron has been intent on being an engineer for several years. According to Summit Center’s testing, he excels in the kinds of skills necessary for engineering and would likely make an excellent engineer.

The Academy’s esteemed reputation attracts three times as many student applications as there are spaces available. As part of the application process, students must take an exam in ninth grade that includes an essay and math test. Unfortunately, due to Aaron’s poor writing abilities, he was not accepted. I spoke with the director of the Academy about Aaron’s strengths, but the director said there was nothing he could do.

According to Drs. Fernette and Brock Eide, there is a high incidence of dyslexic engineers whose dyslexia causes them to both process things differently and to be exceptional engineers. It seems ironic that acceptance into an engineering program would be based on writing an essay when many of the best candidates for the program are likely to be eliminated due to their difficulties with writing.

—JM
Finding the Right Diagnosis in Gifted Children

By Paul Beljan, PsyD, ABPdN, ABN

As a co-author of the book *Misdiagnosis and Dual Diagnoses of Gifted Children and Adults*, I have been inundated with requests from parents of gifted children justifiably wanting an accurate diagnostic workup of their children. The diagnoses they ask about most are:

- Short-term memory deficit
- Processing speed deficit
- Auditory processing deficit
- Sensory integration deficit
- Working memory deficit.

My first step in making a differential diagnosis (choosing one diagnosis over another) or ruling out a previously-made diagnosis is to consider “base rates.” Physicians use base rates as a statistical model of clustering symptoms and factoring them against the age, gender, weight, etc, of a patient to quickly reduce many possible diagnoses down to a few likely diagnoses. For example, if in a 20-year-old male with fever and abdominal pain the base rate of appendicitis is 5 percent and the base rate of colon cancer is .01 percent, a physician might tend to focus first on confirming or ruling out appendicitis as a diagnosis.

**Short-term Memory Deficit**

Considering base rates, let’s take the easiest diagnosis to rule out first, short-term memory deficit. Short-term memory is information retained in the brain and retrievable from it over a brief span of time.

Consider how significantly impaired a child would be with a short-term memory deficit. That child could be given the same magazine to read every hour and would not remember it. Learning would be completely impaired.

Applying base rates would indicate to us that if the child had never had a severe blow to the head, had never been asphyxiated, and had never had any other disease process involving the brain, the likelihood of having a short-term memory deficit would be nearly zero. Therefore, if a child can tell me what he or she had for breakfast, I can pretty much rule out a short-term memory deficit. I next begin to look at what causes a child to seem to have that disorder.

Encoding involves listening to or watching information that one intends to store in memory. Psychologists and educators know that, in order for information to be encoded into short-term memory and then moved into long-term memory, an individual must first pay attention to the information meant for encoding. I administer several short encoding tests. If a child performs well on even one of those tests, the child does not have a short-term memory deficit.

As my mentor, Dr. Leonard Koziol, used to say, “You cannot fake a skill if you do not have it.” What that means in this diagnosis is that a child with a short-term memory deficit cannot do well on any task of encoding. However, in the unimpaired population there are degrees to encoding expression. In other words, a child might earn high scores on some encoding tasks, indicating intact capacity, while earning lower scores on other encoding tasks. This variance in scores, which could result from intermittent ability to sustain attention, may be misidentified as a short-term memory deficit.

In class, gifted children are often bored or involved with their own entertaining thoughts. Furthermore, gifted children express ADHD at the same rate as the rest of the population. If either of those conditions — boredom or ADHD — prevents a gifted child from paying attention to information meant for encoding, then that information will not be encoded. The result is a child who seems to have a short-term memory problem; in actuality the child was simply not listening or was distracted. Problem solved.

**Processing Speed Deficit**

Processing speed deficit is the next easiest problem to rule out. First, consider my favorite from a David Letterman “Top 10 List” from years ago: “How do you know you have a dumb dog? There is a long delay between Bow and Wow.” This exemplifies what speed is all about and how rarely a true speed deficit would occur in a gifted child.

Due to space limitations (and a lack of interest among most folks), I am going to skip the neurological processes involved in cognitive speed. What I am talking about when using this term is the pace by which neurons communicate messages from one area of the brain to another. For example, imagine a train backing up to link cars. It hits the first one and we hear a successive bang, bang, bang as each car links. We can think of a message moving through the brain in much the same way.

Suffice it to say that just as with encoding, people cannot fake cognitive speed if they do not have it. Three tests on the Wechsler Intelligence scale...
Finding the Right Diagnosis, continued

for Children, fourth edition (WISC-IV), can rule out a speed deficit. Two of them are the WISC-IV Symbol Search (SS) and Coding (Cd) subtests. They are part of the Processing Speed Index (PSI), and many gifted children perform poorly (earn a low score) on them. On the timed Symbol Search subtest, the child is instructed to find and match (or cancel) a given symbol in a row of symbols. The Symbol Search task is simple and does not load working memory because each cancellation stimulus (target symbol) is novel. No errors should occur as the answers are in front of the child.

The Coding task is more complex than Symbol Search. It measures cognitive speed and learning automaticity (incidental learning), and it is further complicated by having the child quickly and accurately make novel number and symbol blends on paper. Many gifted children tend to be perfectionists who recheck their work. Double-checking work on these subtests causes the child to earn correct responses, but less of them, ultimately rendering a lower score. The lower score is often incorrectly interpreted as slow processing speed because the test is part of the PSI. The problem is that the child chose to work slowly, which should not be interpreted as a speed deficit. Frequent attention errors and a dislike for paper-and-pencil tasks can also cause lower scores, and are not attributable to speed.

Determining cognitive speed simply requires comparing the Symbol Search and Coding subtests just discussed to a third WISC-IV subtest, Block Design (BD), which is part of the Perceptual Reasoning Index (PRI). The BD subtest provides red and white blocks for the child to quickly put together to match a design displayed in a stimulus book. The subtest starts by allowing 45 seconds to complete some tasks and later allows 120 seconds to complete more difficult items. A child can earn bonus points for speed. When I review testing protocols (the actual test package the examiner uses to keep scores and make notes), I look first at the child’s times, not the outcome score. Gifted children frequently yield fast times (under 10 seconds) on the 45-second items and earn bonus points for fast completion on the more difficult 120-second items.

What does all this mean? A child may earn low scores on the Symbol Search subtest or the Coding subtest, which would seem to indicate slow processing speed. However, achieving high scores on the Block Design subtest would rule out a cognitive speed deficit. Conversely, if Symbol Search is high and Block Design is low, there can be no speed deficit; something else has to account for the intact (fast) versus the low (slow) score. If both scores are low, we must do more testing to find the issue. [For more information on the subtests of the WISC-IV, see “Wechsler Intelligence Scale for Children IV, in the March, 2008, Issue of 2e: Twice-Exceptional Newsletter.]

Working Memory Deficit

Working memory is housed in the orbital-medial portion of the frontal lobe of the brain. It can hold multiple bits of information in real time and use those bits to self-direct planning and organization for problem solving and behavioral self-direction. Working memory allows for “future memory,” which is one’s ability to keep in mind a future goal while at the same time paying attention to planning and organizing in the service of completing that goal (Goldberg, 2001).

Unfortunately, as working memory has entered the public lexicon, its meaning is often incorrectly explained and its complexity overlooked. For a psychologist or neuropsychologist who has a proper understanding of working memory, it is relatively easy to measure using various neuropsychological tests. In my experience, children who are gifted often have profound capacity for working memory. It seems to be a major feature in intelligence. Generally, a gifted child who does not have ADHD can reliably express working memory capacity.

However, inattention, distractibility, and impulsivity all undermine a child’s expression of working memory. For example, children with ADHD, gifted or not, cannot reliably and consistently express working memory for as long as they want and whenever they want. This variable expression causes a “Swiss cheese” effect in academic and behavioral performance. Sometimes the child performs quite well; while at other times, the child cannot execute a previously expressed skill with the same efficiency. These children are often identified as willful or oppositional because when they are experiencing an “ADHD moment” and their working memory is undermined, they cannot do things that they were able to do before.
Finding the Right Diagnosis, continued

**Attention and Executive Functioning Deficits**

Much like working memory, ADHD and executive functioning have entered the public vernacular. As a result, their complexity has been watered down and, at times, their very existence denied.

ADHD involves many elements of the brain and neurochemistry that must work together. Children who have ADHD do not know when they are being inattentive or impulsive; therefore, they cannot tell themselves to get back to task or stop engaging in a behavior.

We wrote the *Misdiagnosis* book because too often a gifted child’s intellect is overlooked when the child is brought to various professionals to have idiosyncrasies explained. Parents are relieved to find that the idiosyncrasies are normal expressions of high intellect and that there are known methods of dealing with those issues. I make the same argument for ADHD. If ADHD, which is very common, is not considered when thinking about many of the commonly expressed idiosyncrasies of the gifted, then it goes untreated. Treating phantom short-term memory loss, cognitive speed issues, and auditory processing and sensory integration symptoms without considering or testing for ADHD can be just as damaging to a gifted child as diagnosing the child with a psychiatric disorder and not testing for giftedness.

**Central Auditory Processing Disorder (CAPD)**

Parents of gifted children often have questions involving possible central auditory processing disorder (CAPD). Children with CAPD have difficulty processing and making sense of how language sounds, especially when competing sound is present. When carefully evaluated, CAPD often is a receptive language disorder, meaning the child does not understand language, regardless of competing sounds.

When I work with a child with a receptive language disorder, it is painful to observe. I evaluated one child, for example, who seemed very oppositional and irritated with me. His responses and affect seemed completely out of context to the evaluation situation. Upon further testing, we realized he had a receptive language disorder and was frustrated by not understanding what was being asked of him.

A receptive language disorder does not come and go; it is static. CAPD on the other hand is always described as the child not being able to attend to the speaker or sound when competing voices or sounds are present. That descriptor sounds like ADHD to me; and when I test children diagnosed with CAPD, they almost always have ADHD. In fact, children I have worked with who have been diagnosed with CAPD tend to perform very well when language testing is done one-on-one, with no distractions present. This phenomenon also occurs with children who actually have ADHD, but are diagnosed with CAPD. I evaluate children in a quiet room with minimal distracters. I prompt them with, “Look at me, here comes the next...(fill in the blank).” This minimizes the chances that children with ADHD, or supposed CAPD, will miss what information is coming.

Consider the description of CAPD given earlier and think about how impaired someone with this disorder would be across all areas of life. Also consider how low the odds are that CAPD would occur when disease, brain injury, etc., are ruled out. Yet, a very high number of parents report it in their child based on an audiology evaluation indicating that the child has difficulty identifying a given sound while competing sound is present.

While we all are annoyed when someone talks in a movie theater, most of us can prioritize our attention to the movie and habituate the whispering to the background. Children with ADHD; however, have more difficulty prioritizing attention. They cannot allocate their attention reliably and consistently for as long as they want and whenever they want. As a result, they sometimes cannot pay attention, not to say they can never pay attention.

In my assessments, I routinely administer various attention and executive-functioning tests to determine whether attention systems or receptive language are the culprit in a child who is thought to have CAPD. The tests include language reception, encoding, and recall tasks, along with visual and auditory attention measures.

**Sensory Integration Disorder**

I have had the privilege of discussing sensory integration disorder (SID) — also referred to as sensory processing disorder — with several prominent neuropsychologists. They concur that SID basically means the child’s sensory system is working well, but parts of the brain that mediate such processing have not yet matured. (That is, the frontal lobe and neostriatal system have not developed to the extent that the subcortically perceived sensory stimulus can be inhibited or put in the background of experience.) As a result, a child in this situation is unable to inhibit or modulate sensory experience; it does not mean the child’s
Finding the Right Diagnosis, concluded

sensory system is impaired (Koziol 2010 & 2011). We might think of the child as having a “toggle switch” instead of a “dimmer knob” to modulate sensory experiences. The dimmer switch comes with continued development of the frontal lobes. To help a child manage and work through this uncomfortable experience, we often recommend occupational therapy intervention. [To see what role occupational therapy can play in this situation, see the September, 2012, issue of 2e: Twice-Exceptional Newsletter.]

Nearly every child who has come into my practice with the diagnoses of SID, as well as CAPD, actually had ADHD-inattentive type. When that disorder was treated, the symptoms of SID and CAPD were significantly reduced. It’s important to keep in mind that, at this time, there is no agreed-upon origin of these issues. It’s the “chicken or the egg” phenomenon. If ADHD is diagnosed and the child receives occupational or audiological treatment for SID or CAPD, does that mean the child never had ADHD? Maybe not. Often, the treatment for these issues is also inadvertently developing functioning in the frontal lobe of the brain; therefore, the improvement in frontal lobe functioning is what reduces the expression of all three disorders.

Conclusion

When parents come to me with questions concerning short-term memory, processing speed, auditory processing, sensory integration, or working memory, my recommendation is to consult a pediatric neuropsychologist who is versed in giftedness. That professional looks at all elements of functioning, as opposed to professionals who may specialize in just one area and may tend only to look for and find issues within their area of specialty. It takes a whole brain to function, so the whole brain should be evaluated to rule out erroneous diagnoses.

References

Paul Beljan, is a pediatric neuropsychologist in private practice in Scottsdale, Arizona, and co-developed the MC² neurocognitive program used in his practice (http://www.paul-beljan.com/). Among his areas of specialty is the pediatric neuropsychology of learning disorders, gifted intelligence, and attention deficit/hyperactive disorder. Beljan is a co-author of the book Misdiagnosis and Dual Diagnoses of Gifted Children and Adults (Great Potential Press, 2005).

One More Camp Listing

Here’s another summer possibility for keeping Canadian 2e kids in the Ottawa area engaged this summer. (Once again, please note that we at 2e Newsletter do not endorse any camps or programs.)

Bright Math Camp, Carleton University, Ottawa, Canada, July 8-12, 2013, for children entering grades 4, 5, 6; July 22-26, 2013, for children entering grades 7, 8, 9. This program, now in its 22nd year, provides what is described as “a unique out-of-school learning opportunity for children with a drive to explore, to question, to reason, and to discuss a range of sound mathematical topics.” Also included are study skill strategies and, on one day of camp, an hour of swimming. Accommodations at a cost may be available on campus. See: www.ncf.ca/~au680/index.htm.
Using Qualitative Methods to Avoid Misdiagnosis of 2e Children

By Linda Powers Leviton, MA

In the last 40 years, the diagnosis and treatment of childhood social, emotional, and learning challenges has become a major industry. Over time, the lens of potential diagnoses has been narrowed to focus on achievement, with attention, behavior, and performance representing the default evidence of a disability. All children have faced greater jeopardy of misdiagnosis because our ability to assess problems has been limited by our assessment tools, often causing us to miss some or all the factors that might affect behavior and performance in a given setting.

The gifted, and particularly twice-exceptional (2e) children, who are unable to demonstrate their gifts because of their challenges, have been the least well served by this trend. Their potential has been questioned, or even ignored, because of misdiagnoses or refusal to even assess for a problem. Daily I speak to parents who are distraught because they know their child is suffering and unable to fulfill his or her potential. Schools will not assess these children because they are not academically behind their age peers, often scoring in the average range on standardized tests.

The “One Size Fits All” Approach

Schools, pressed to provide services for children who lag behind their age peers, often promote a common (though misguided) belief that the gifted “will be fine without any help.” Or worse, they discount a child’s potential gifts as being an inflated parental perception with statements like these: “The IQ test showed average abilities, so your child is average,” or “All children are gifted.” These mistaken conclusions hurt not only our children, but invalidate everyone who has observed the anomalies, the asynchronous development, the overexcitabilities, and the sensitivities that a 2e child demonstrates all the time. Is this denial, or just a failure of imagination? In either case, the toll it takes on both child and parents is appalling.

Coming from a clinical background and experience with the gifted and twice-exceptional that spans almost fifty years, I have always been skeptical of a “one size fits all” approach to education, assessment, or treatment of this complicated group. When I started assessing these children using standardized tests, I began to see how limited quantitative protocols (like the Wechsler Intelligence Scale for Children) can be in fully understanding these complex and unique individuals. I listened to parents describe, often tearfully and defensively, how children taught themselves to read as toddlers, or exhibited exceptionally precocious perception and reasoning abilities, yet were frustrated by the environmental or teaching challenges that met them when they started school.

Getting an Accurate Assessment

Growing up with 2e siblings and being mentored by Dr. Linda Silverman (one of the earliest to identify, research, and write about twice exceptionality), I was well aware of the complexity and quixotic political climate that accompanies this identification problem. As a marriage, family, and child therapist who also once taught and administered gifted programs, I saw the solution to the problem of misdiagnosis as at least partly contextual. I knew from experience that both the testing environment and the assessment process played important roles in properly assessing a child.

In all fairness, it isn’t easy to visually distinguish lack of attention due to boredom from the inability to attend due to ADHD. Both look the same from the teachers’ point of view. And a school psychologist, with limited time to test a child, may not understand that emotional factors, such as trust and developing rapport, can affect a child’s performance on a standardized test, or that achievement can be seriously hampered by hidden processing challenges.

Accurate assessment of hidden problems is especially challenging because children experience the world from their own perspective based on their sensations and perceptions. If they see double or can’t think when there is background noise, they usually assume everyone has the same problem. How many times does it take being told they are “just lazy” to believe that their inability to achieve stellar grades is their own fault? Years of hearing the pain and frustration that results from misdiagnoses and misunderstanding of my gifted clients has led me to explore additional ways of assessing gifted children.

The Role of Qualitative Assessment

The late Dr. Annemarie Roeper, gifted scholar and educator, spent her life working to understand the qualities that made gifted children unique and fulfilled. She developed the Annemarie Roeper Qualitative Assessment technique to help parents appreciate their children’s gifts and needs more fully. I worked with her for two years while developing what I called the Whole Child Assessment (WCA), another qualitative...
Using Qualitative Methods, concluded

way to understand these children, assess their hidden challenges, and create environments that would optimize their gifts and accommodate for their handicaps.

The WCA process involves analyzing information gleaned from parent reports, interviews, and observation, as well as analyzing quantitative information to understand the full picture of what a child needs, both at home and at school. In conducting the WCA, I synthesize information such as learning style, personality idiosyncrasies, behavior, and current skills to understand the whole picture of what the child might be experiencing and capable of doing. If useful, I also administer standardized tests with the intention of analyzing the areas of weakness, a process perfected by the Gifted Development Center in Denver, which I represent. Is this a foolproof way to avoid misdiagnosis? While there is no guarantee that this approach won’t miss something, it is certainly more comprehensive than relying on less information that can be both misleading and lacking in important pieces of information.

Over the years, my appreciation for the complexities of the gifted experience has grown exponentially. Social, emotional, and educational needs and deficits seem to grow in proportion to IQ. For instance, once vision or auditory processing issues are addressed, children who have tested below average suddenly achieve IQ and achievement scores three to five standard deviations above the norm. Their behavior and self-esteem improve commensurately. At best, it isn’t useful to simplify our understanding of these children by narrowing the way we define and assess them. In fact, it can be a recipe for misdiagnosing and disenfranchising a population that might otherwise contribute significantly to the future of our world.

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Using Qualitative Methods, concluded

Using Qualitative Methods, concluded

Whole Child Assessment: General Process (Individualized as Needed)

1. Initial Interview
   - Initial contact with parents (by email, phone, or in-person)
   - Parents complete forms, histories, scales, anecdotal history, and inventories.
2. Session One: Parents (by email, phone, or in-person)
   - Review and discussion of all information submitted
   - Clarification of questions
   - Exploration of hopes and expectations
3. Session Two: The Child (in-person only)
   - Welcome and introduction
   - Honoring the child with choices for interaction that include:
     - Who? Alone with me; with family members (siblings or one or both parents) included.
     - What? Play (what type — imaginative, games, or activities — and who initiates it); demonstration (of interests, achievements, skills); discussion (interactive, expository, projective, cognitive, emotional); art activity (joint, individual, expressive or interpretive); physical activity (competitive, cooperative or demonstrative)
     - When? Timeframe for each interaction
     - Where? In child’s home (bedroom, outside, playroom); in my home or other office
     - How? Interactive; passive; initiating
   - Observing the child’s environment
     - Home: bedroom, play areas, work areas, etc.
4. Session Three: Feedback to Parents (by email, phone, or in-person)
   - School (if parents contract for classroom observation)
   - Engaging the child in the activities chosen
   - Discussing child’s interests and concerns while interacting
5. Written Report (optional)
   - Approximately 6 weeks later
   - Meeting to discuss details, answer questions
   - Amendments depending upon intended use

— LPL
Understanding, Diagnosing, and Coping with Slow Processing Speed

By Steven M. Butnik, Ph.D.

It’s not unusual for gifted students to have slow processing speed. Of itself, slow processing speed is not a formal learning disability, but having it can frustrate students, teachers, and parents. As a clinical child psychologist specializing in assessing and treating students with attention deficit disorders and other learning problems, I often hear parents tell me their very bright child isn’t finishing her classwork or that homework takes hours and hours to complete. Through observation or formal assessment of their child, these parents have been told that the child has slow processing speed.

Understanding the role of slow processing speed is essential. Gifted students with processing speed problems who are “missed,” misdiagnosed, or mistaught may become discouraged, depressed, undereducated, underemployed, or worse. By contrast, when these twice-exceptional (2e) children are understood and well-addressed educationally, they can become treasures who shine in unique ways.

In this article I will explain what sort of struggles children with slow processing speed experience; where slow processing speed comes from; how it can be identified; and what students, teachers, and parents can do to reduce or eliminate its impact.

The Signs of Slow Processing Speed

At home, parents easily see slow processing speed in areas outside of homework. Aiden’s mom asked him to get dressed ten minutes ago and when she checks on him, he hasn’t even begun — and he has to be at the bus stop in five minutes! Nancy’s family is in the car waiting for her and she, as usual, is still in the house, looking for her book. At school, Jack didn’t finish writing his assignment in his planner when the bell rang, so he left out important information because he couldn’t afford to be tardy again for his next class. When Emily didn’t finish her classwork, her teacher sent the unfinished work home to be completed along with her usual homework. These children all have slow work pace, which leads to problems at school and at home. They need the understanding and help of parents and teachers so that they can succeed and so that their self-esteem is not damaged.

Understanding the source of the problem in children like these is a critical part of knowing how to help them. Thorough medical and psychoeducational evaluations are necessary because there are many sources of slow work pace. It can be associated with physical illness or injury such as low thyroid, epilepsy, or traumatic brain injury. It might be related to other physical problems such as lack of adequate sleep or reaction to medications. It might also be part of Attention Deficit Hyperactivity Disorder (ADHD), learning disorders, and/or emotional factors. We’ll take a look at some of these possible causes.

Slow Processing Speed Associated with ADHD

Children with the predominantly inattentive subtype of ADHD may have a sluggish cognitive tempo. They typically daydream, stare off, and appear spacey. They may be mentally foggy, underactive, slow moving, and lethargic. Their work is often slow and error prone. Their brain activity shows patterns of under arousal in the portion of the brain associated with focus and planning.

In addition, children with ADHD typically exhibit poor executive functions, brain-based behaviors that contribute to effective functioning. A useful model of executive functions (See the figure below.) has been developed by Thomas Brown, Ph.D., a psychologist at Yale University. These are the functions, according to Brown, that are impaired in attention deficit disorder syndrome.

Some children take more time to complete tasks due to trouble with activation. A student may not begin a task due to problems organizing time or materials, or due to reluctance, uncertainty, lack of confidence, or anxiety. Other children may take more time to complete tasks because of problems maintaining focus. While time is passing, these students may be distracted or daydreaming, drawn to other, more interesting stimuli.

**Effort** includes processing speed as well as mental stamina. When effort is a problem, the child’s work pace is very slow and he may complain that his “brain is very tired.” When the problem is emotional, on the other hand, children find it hard to regulate their feelings. They might melt down when starting to work or encountering a frustrating task; or they may refuse to work, be argumentative, or have tantrums.

Problems in working memory can add to the time it takes a child to complete tasks. After reading a paragraph, a child with poor working memory may forget what she just read and need to read it again; or he may stop working on a class assignment because he forgot the directions. Finally, when action is a problem, the child has trouble sitting still, fidgets with objects, or may want to stand or walk around when working.

An additional issue that children with ADHD face is having a poor sense of time. For them, time seems to go more slowly during the tasks they feel are boring while moving more quickly for tasks they find interesting. When planning work tasks, a child with ADHD may underestimate how long the task will take; and when playing, the child may be unaware of how much time has passed. Taken together, poor executive functions and poor time sense can make homework take hours to complete and create major stress.

**Slow Processing Speed Associated with Cognitive Functioning and Learning Problems**

Processing speed is an element of intelligence, as measured by many tests of cognitive ability, including the Wechsler Intelligence Scale for Children (4th Edition). Scores for both the Working Memory and Processing Speed subtests make up the WISC-IV’s Cognitive Proficiency Index. These abilities are separate from the WISC-IV’s General Abilities Index, a measure of core intelligence derived from an individual’s Verbal Comprehension and Perceptual Reasoning Indices (verbal and nonverbal abilities).

Many 2e children show substantial differences between their verbal abilities and working memory capacity and/or between their nonverbal abilities and processing speed. Working memory and processing speed scores are often low in 2e children.

The WISC-IV’s Processing Speed Index is calculated from the Coding and Symbol Search subtest scores. A supplemental subtest is Cancellation. These three subtests, described in the next paragraph, rely on rapid visual/motor analysis and output. Because processing speed can be affected by a number of factors, it is not a unified construct like other parts of the WISC-IV. See the figure below.

Each of these three subtests taps different abilities that contribute to the Processing Speed score. **Coding**, which requires children to draw symbols, is heavily influenced by grapho-motor demands. Children with poor handwriting or dysgraphia may struggle with this task. **Symbol Search** has less emphasis on motor output but requires rapid differentiation of abstract symbols. **Cancellation**, the supplemental Processing Speed subtest, makes use of concrete images rather than symbols.

Tests of educational achievements make use of processing speed on subtests that measure academic fluency. For example, the Woodcock-Johnson Tests of Achievement include three subtests of fluency:

- **Reading Fluency.** For three minutes the student quickly reads simple sentences and answers yes or no to each.
- **Writing Fluency.** Using three words and a picture, the student quickly writes simple sentences for seven minutes.
- **Cancellation:** Marking whether a target symbol occurs in a search group.
Slow Processing Speed, continued

- Math Fluency. The student rapidly performs simple calculations for three minutes.
  
  2e children who have trouble activating, are inattentive, or have sluggish cognitive tempo may struggle on all of these tasks. 2e children with slow motor output would have less trouble on Reading Fluency but would do more poorly on the Math and Writing Fluency tests. Working memory problems would likely have a greater impact on Math Fluency than on the other fluency tasks.

  Slow processing speed is not a learning disorder. To be considered to have a learning disorder, a student must have the following:
  - Average or better intelligence
  - Patterns of substantial processing differences
  - A significant difference between abilities and achievements.

  However, research has shown that processing speed is linked to reading development and reading performance. Specifically, processing speed may be a factor in these situations:
  - Reading disorders such as dyslexia
  - A subset of reading disorders in which individuals display marked difficulties with verbal and visual processing speed
  - Grapho-motor problems (dysgraphia). Individuals with dysgraphia have serious trouble forming letters and numbers; their handwriting is slow and labored; they may have trouble with spacing between words; they mix upper- and lower-case letters; etc. Because neatness only comes with their taking much time, their written work can be very strained and painful.

Slow Processing Speed Associated with Emotional Interference

  In addition to cognitive and attentional variables, a number of emotional factors can increase how much time it takes for students to complete work. When students are anxious, their processing speed can slow due to self-doubt, uncertainty, second-guessing, and self-consciousness.

  Obsessive-compulsive disorder (OCD) can cause even more slowing. Here are some examples of how children with OCD might behave in this context:
  - One child has developed a “rule” that if he hesitates when reading, he “has to” reread the entire passage.
  - Another child spends inordinate time when writing, laboring to form letters and numbers so that they are “perfect.”

How to Address Slow Processing Speed

  After a thorough psychological and educational evaluation, a plan can be developed to reduce the impact of slow processing speed. Intervention strategies fall into three categories: school-based, home-based, and child-based.

  **School-based Strategies**

  A public schools’ child study committee can provide an evaluation to determine a student’s eligibility for accommodations and modifications. If a formal learning disorder is identified, an Individual Education Program (IEP) can be provided, following provisions of the Individuals with Disabilities Education Improvement Act. Students without formal learning disorders, but who are having trouble learning due to ADHD, may receive services under Section 504 of the

The Difference Slow Processing Speed Can Make

  A few years ago, the parents of a gifted high school junior, Sean, sought an evaluation because he earned a surprisingly low score on the Critical Reading portion of the SAT. My evaluation showed Sean to have a very superior Verbal Comprehension Index (in the 99th percentile), but a significantly lower Processing Speed score. This situation had a significant impact on his measured Reading Rate, a key academic skill. The evaluation also revealed that Sean had ADHD, predominantly inattentive type. An anxious youngster by nature, Sean’s slower processing speed caused him additional anxiety, which slowed his work pace even more.

  These findings were shared with the Educational Testing Service, and they granted a request from Sean’s school for additional time for the next SAT. Sean was in my office when he checked online to find his score. With the additional time, he was able to finish the Critical Reading portion, and his score was 100 points higher! His grin was priceless.

—SB
Slow Processing Speed, continued

Americans with Disabilities Act. Schools may also provide services before determining formal eligibility through Response to Intervention (RtI). [For information on RtI, see the November, 2012, and January, 2013, issues of 2e: Twice-Exceptional Newsletter.]

Regardless of the category of services for which the gifted student qualifies, it’s important to prevent slow processing from interfering with a child’s success. Teachers should be aware of how slow processing speed can affect the performance of bright students and strive to differentiate their instruction. Gifted students with slow work pace should not be denied gifted education opportunities.

To provide suitable interventions, a teacher or school needs to determine the source of the problems and tailor interventions to the individual student’s needs. To the right are examples of interventions that can address them.

Other school accommodations or modifications may include:
- Increased time to complete tasks including quizzes, tests, and exams
- Providing a method of prompting the student to increase time awareness
- Eliminating unnecessary clerical tasks (e.g., transcribing math problems from a textbook to a work sheet) and making use of brief response formats

<table>
<thead>
<tr>
<th>Type of Problem</th>
<th>Examples of Interventions</th>
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<tbody>
<tr>
<td>Activation</td>
<td>Investigate the cause. For example, see if the student:</td>
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<tr>
<td></td>
<td>• Is engrossed in another activity</td>
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<td></td>
<td>• Is confused about what to do</td>
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<td></td>
<td>• Has missed the instructions</td>
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<td></td>
<td>• Is anxious about failing</td>
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<tr>
<td>Emotional factors</td>
<td>• Encourage.</td>
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<tr>
<td>(i.e., “It’s too much...”)</td>
<td>• Support.</td>
</tr>
<tr>
<td></td>
<td>• Provide help getting started</td>
</tr>
<tr>
<td>Cognitive factors</td>
<td>• Develop a plan.</td>
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<tr>
<td>(i.e., “I don’t even know where to begin.”)</td>
<td>• Break a task down into smaller chunks.</td>
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<tr>
<td></td>
<td>• Use graphic organizers</td>
</tr>
<tr>
<td>Focus/attention</td>
<td>• Reduce distractions.</td>
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<td></td>
<td>• Provide white noise.</td>
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<tr>
<td></td>
<td>• Recognize on-task behavior</td>
</tr>
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<td></td>
<td>• Prompt the student when she drifts.</td>
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<td></td>
<td>• Provide incentives for completion of work.</td>
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<tr>
<td>Working memory</td>
<td>• Repeat directions.</td>
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<td></td>
<td>• Encourage questions.</td>
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<td></td>
<td>• Give gentle reminders.</td>
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<td></td>
<td>• Provide templates of completed work, written copies of directions, word banks, etc.</td>
</tr>
<tr>
<td>Handwriting</td>
<td>• Determine if dysgraphia is present.</td>
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<td></td>
<td>• Give advance copies of teacher notes.</td>
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<td></td>
<td>• Provide access to word processing and/or speech-to-text software (such as Dragon’s Naturally Speaking).</td>
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<tr>
<td></td>
<td>• Have another student share copies of notes.</td>
</tr>
</tbody>
</table>

- Eliminating timed tests such as “Mad Math Minute” tests
- Reducing the number of tasks required to demonstrate competence (such as 5 math problems instead of 25)
- Monitoring time spent on homework and adjusting assignments as necessary.

Home-based Strategies
Parents should become aware of the impact of slow processing speed on their child’s daily living and develop plans to reduce that impact. Because students with slow processing speed often have major problems with homework, parents should work with the teacher to determine how much time the student should spend on each homework assignment and what to do if the time is exceeded. The goal is to avoid homework battles. If handwriting interferes with work pace, some of the school-based suggestions in the table can be implemented at home.

Parents should avoid personalizing, punishing, and reacting emotionally, remembering that slow processing speed is not purposeful and can improve. Parents can help by providing more structure, using schedules, timers, clocks, alarms, and incentives. With older children, it can pay to involve them in the problem-solving process.

Children with ADHD may benefit from stimulant medications such as Ritalin, Concerta, Adderall, or Vyvanse. This type of medication may not directly increase actual processing speed but can often help with activation and focus, increasing a child’s work pace. Once a child is properly diagnosed, parents can explore the medication option.
Slow Processing Speed, concluded

with their child’s pediatrician or medical specialist. It’s also important for parents to monitor and address any sleep problems that may occur and to encourage sound nutrition as well as frequent, vigorous exercise.

Child-based Strategies

Because some very bright students with slow processing speed do not see themselves as smart, it’s important to help them understand the nature and pattern of their abilities. It may help to remind them that all people have strengths and weaknesses and that having a slower pace does not mean one is not smart. One student loved that I referred to him as an intellectual tank — not very fast, but extremely powerful.

Some students make good use of timers and alarms to help them track time. A teenager I worked with began using an alarm clock in the bathroom to remind him to get out of the shower. It can also help to conduct a time study. Parents can use a stopwatch to determine how much time it takes the child to complete routine tasks like doing a chore or getting dressed for school. These times can be used as goals to work toward and rewards can be provided when the student completes a task within the allotted time.

Conclusion

When they go unrecognized and their needs go unaddressed, gifted students with a slower pace can feel discouraged and demoralized. However, once they are understood and efforts are made to help reduce the impact of the slower pace, these students’ best abilities can shine. Parents may need to take the lead and arrange for evaluations, educate those involved in their children’s lives, and provide their child with unwavering support and encouragement.

Steven Butnik, Ph.D., is a licensed clinical psychologist and co-director of ADDVANTAGE, PLLC in Richmond, Virginia, a private practice dedicated to evaluating individuals with attention problems and other learning problems. In addition, he is trained to perform quantitative electroencephalography (qEEG) and neurofeedback as well as to offer an evidenced-based training program to improve working memory in individuals with ADHD. Dr. Butnik has written and spoken about various ADHD and learning issues, served as a consultant for a University of Virginia study investigating the roles of multiple ADHD assessment instruments, and was appointed as a reviewer/consultant for the Journal of Attention Disorders in 2008.

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“In My Own Way”

One of our subscribers, a teacher who taught this young poet last year, sent this poem by the fourth-grade girl. According to the teacher, the girl “is gifted, has ADHD, and is one of the bubbliest, brightest, creative girls I’ve ever had the honor to teach.”

It seems that this year might not be going as well as last for the young lady. Our subscriber says, “Her mother sent me this the other day and it broke my heart. She gave me permission to share it.”

I am sorry
for everything.
For bad tests,
forgotten things
for long-borrowed pencils,
for homework
disorganization
and all my other faults and mistakes.

I am not worthy of forgiveness.
I only hope you will,
when I ask it so nicely
with this poem.
You may forgive and you may not.

I only hope I’m good enough
for you to be a little bit kinder
and a little bit soft,
to like me
like you like cows;

to trust in me your faith
so I may blossom as a friend,
an equal
and not be forgotten.

A friend, a teacher
and so many things
I hope you will be
to me
after reading this poem
and understanding that I try my best,
I really do.

I try to be like you
but language arts and social studies
are not where I stand.
I stand in math and science.
I try to please you,
but I can’t.

It really is hard being me;
not like other girls
with their writing so neat.
I try, I do, but my writing never meets
with my fleet of ideas
and my day dreamy ways.
I know you do not understand them.

I am a person with creativity
and skill,
who needs time to let her creativity drill.
I love to write like this,
but never do.
I love creative projects
where I can do big things,
where I shine
in my own way.

Written in class one day, after teacher yelled
at me, but I don’t remember why.
—April 2013
2013 Annual Conference: July 19-21, Orlando

Why Attend?
Understanding giftedness in children, young people and adults can be challenging. Gifted individuals have different needs—intellectually and emotionally. They can battle depression, performance fears, anxiety and social frustration. Parents and families, adults and health care professionals need information, resources, and support. The SENG Annual Conference is an excellent source for education and connecting with others in the gifted community.

In addition to gaining a better understanding of those around you who are gifted—youth, family members, yourself—you will make life-long connections and friends with others who have similar experiences.

We encourage you to bring your gifted children to this family-oriented event at the Orlando World Center Marriott, complete with interactive programs for children and teens ages 8 to 17. This program features a Disney Youth Education Program on Saturday. It’s a great way for them to socialize with other gifted children while learning about themselves.

Conference Highlights
• Special Welcome Session Speaker: Temple Grandin, Different, not Less
• Expert Keynote Speakers: Edward R. Amend, PsyD, The Many Faces of Giftedness; Tarek C. Grantham, PhD, Recruitment of Culturally Different Students for Advanced Programs: A Focus on Creativity and Equity
• More than 70 educational sessions on key themes that include:
  • Misdiagnosis and twice exceptional
  • Education
  • Parenting and grandparenting
  • Gifted adults
  • Multicultural outreach
• SMPG Master Facilitator Training and Train-the-Trainer Workshops
• Several APA-approved CE programs for mental health care professionals to better equip you for your work with gifted individuals

Find more information at the SENG website!

SENG
Supporting Emotional Needs of the Gifted
PO Box 488
Poughquag, New York 12570
(845) 797-5054
www.sengifted.org
Happenings in the 2e Community

The news from the past month or so seems to center around the recent Conference on Dyslexia and Talent. Read on...

The Doctors Eide
The latest news from Drs. Fernette and Brock Eide is that Dyslexic Advantage has been approved as a 501c3 nonprofit organization. “We’re thrilled with this,” says Fernette Eide.

One of the first actions of the non-profit was to hold the Conference on Dyslexia and Talent, a meeting that took place April 19-21 in Norwalk, Connecticut, bringing together accomplished dyslexics from diverse fields, neuroscientists, and leaders in the dyslexia community. Attendees shared experiences and worked together “to make a better world for dyslexic students and adults.”

The Eides have released the first videos from the conference at a new Youtube channel for their non-profit; see http://youtube.com/dyslexicadvantage.

The Eides say that they plan to have a second event next Spring in Silicon Valley.

Dan Peters
After attending the April Conference on Dyslexia and Talent, psychologist Dan Peters felt compelled to share his experiences at the conference and also to reveal something that, until now, only a few people knew about him. In an article posted at his practice’s website, Peters, father of three sons with dyslexia, also relates how his experiences at the conference brought back some vivid memories of his childhood. Maybe you can guess what his revelation is, but he has written a compelling and very personal article to enjoy and admire. Go to this shortened url for the article: http://goo.gl/WJwbf.

Susan Baum
Also attending the Conference on Dyslexia and Talent was Susan Baum, member of the 2e: Twice-Exceptional Newsletter Editorial Advisory Board.

Baum, along with Robin Schader and Tom Hebert, presented a paper in April at the 2013 meeting of the American Educational Research Association in San Francisco. The title of the paper was “The Effects of a Holistic Learning Model Designed and Implemented for Twice-Exceptional Students,” and it focused on using a strength-based, talent-focused approach with twice-exceptional learners.

Watch for Baum to present these sessions at Confratute this summer (July 13-19):
- Talent-centered Model: Understanding and Responding to the Needs of Twice-exceptional Learners
- The Writing Challenge: Helping Twice-exceptional Students Find Their Voices.

Chicago-area Event
The Center for Talent Development has scheduled its summer “Opportunities for the Future” conference for June 29, on the Northwestern University campus in Evanston, Illinois. CTD calls it “a stimulating afternoon designed to help academically gifted students and their parents plan for the future.” Adults attend a keynote address and subsequent sessions; students grades 4 through 12 attend workshops that cover exciting areas of study and career opportunities; supervised activities are provided for children age 4 through grade 3. Visit CTD online for the full conference agenda and registration information: www.ctd.northwestern.edu/outreach/familyconference.

Poll Results
We recently closed the poll we’d been running about the availability of support groups for parents of twice-exceptional children. Our question was, “What’s your situation when it comes to a local, live support group for parents of twice-exceptional children?” Responses broke down this way:
- Have one available, am active in it — 12 percent
- Have one available, am not active — 6 percent
- Do not have one available, would probably participate — 80 percent
- Do not have one available, would probably not participate — 2 percent.

Looks like there’s lots of interest in local, live support groups — and not much out there to choose from.

The current poll on our home page asks about readers’ memberships in national groups such as CEC, GHF, NAGC, and SENG. So far, it looks as if “no group” is winning. Tell us what you belong to at www.2enewsletter.com.
ONE IN FIVE KIDS suffers from some sort of mental disorder, according to the US Center for Disease Control, at a cost of $247 billion per year to society. The leading disorders in terms of prevalence are ADHD, ODD, depression, anxiety, and ASD. Causes for the increased rate of childhood mental illness include increased diagnosis but also environmental factors (chemicals, social trends, etc). Read more at this shortened url: [http://goo.gl/YBX2](http://goo.gl/YBX2).

TED TALK ON EDUCATION. If you like your edification laced with humor, check out a recent TED talk on education in the U.S. and how, in spite of high spending, we have a dropout crisis and an epidemic of disengagement. The speaker is Sir Ken Robinson, and he discusses individual differences that affect learning; innate curiosity; the point of education (getting people to learn, not just passing on information); standardized testing; and how countries like Finland succeed educationally. It’s a 20-minute talk, but if you can’t spend the time to laugh along, there’s also a transcript. [http://goo.gl/89wv](http://goo.gl/89wv).

CHILD MIND INSTITUTE. Remember that this organization records some if its live, Manhattan-delivered workshops on topics of interest to the 2e community. You can see what’s available at the moment by visiting [http://goo.gl/ylLt3](http://goo.gl/ylLt3) and checking to see if there is a “view recorded events” link under each of the major topics there (ADHD, Learning and Development, Pedastric Psychopharmacology, and so forth). Separately, the Institute now has on its site a page called “Parents Guide to Getting Good Care” [http://goo.gl/G3sMz](http://goo.gl/G3sMz). The Institute describes the guide this way: “In this guide we take you through the steps to finding the best professional (or team) to treat your child. Along the way, we offer things to look for to insure that you’re getting quality care, and questions to ask to evaluate both the clinicians and treatments they offer.”

HOW RITALIN WORKS. A review of imaging studies of Ritalin (methylphenidate) shows that the drug appears to “normalize” activity in certain brain areas in children who have ADHD. The areas are diverse, and include the frontal lobes, basal ganglia, and cerebellum. Affected areas control inhibitory responses, selective attention, and time perception. [http://goo.gl/bqB19](http://goo.gl/bqB19).

ON PARENTING. A cultural anthropologist explains at Slate how parents around the world view their role and their children in different ways — and differently from American parents. From the article: “…ethnotheories are distinct enough, at least to an outsider, that they are apparent in the smallest details. If you look just at the words parents use to describe their children, you can almost always predict where you are in the world. In other words, your most personal observations of your child are actually cultural constructions.” Find out how American parents are different from parents in other countries. [http://goo.gl/1sBC2](http://goo.gl/1sBC2).

EDUTOPIA has posted an article extolling the benefits of the “abundance model” for education over the deficit model, and relating both to the role of standardized testing. The abundance model is logically the best way to reach twice-exceptional students. Here’s what the article says about it: “Meet the child where he/she is academically, socially, and emotionally then utilize those jewels through personalized instruction to help that student grow.” [http://goo.gl/hBRqu](http://goo.gl/hBRqu).

LD PREVALENCE. Up to 10 percent of the population is affected by specific learning disabilities (SLDs), such as dyslexia, dyscalculia and autism, translating to two or three pupils in every classroom, according to a new article. The article also notes that specific learning disabilities also co-occur far more often that would be expected. As, for example, in children with attention-deficit/hyperactivity disorder, 33 to 45 percent also suffer from dyslexia and 11 percent from dyscalculia. And remember that SLDs do not include conditions such as ADHD and Asperger’s. [http://goo.gl/bMy12](http://goo.gl/bMy12).

LD @ 50. A professor of education from Landmark College ruminates about the LD movement, founded 50 years ago in Chicago, noting some parallels with the Civil Rights movement. Twenty-three years later, Landmark College, the first college in the U.S. for kids with LDs, was founded. [http://goo.gl/Zw2uy](http://goo.gl/Zw2uy).

GIRLS AND ADHD. The Atlantic has published a first-person account by a young woman with ADHD. In a way, it’s a counterpoint to recent articles about overly liberal diagnoses of ADHD, because the author points how undiagnosed ADHD can be harmful, drawing on her own experiences and her own self-perception that her symptoms were actually “embarrassing personal failings.” There are also a lot of stories in the article about what it’s like to be a girl with ADHD — as when the fire inspectors at Yale told her that her dorm room was the messiest they’d seen in 20 years. [http://goo.gl/Idlk8](http://goo.gl/Idlk8).
Dear Dr. Sylvia

Daughter Overcomes Disorders

Q I am a single mum to a 7-year-old who has been diagnosed with attention deficit hyperactivity disorder (ADHD), dyslexia, and post traumatic stress disorder. Teachers complained about her short attention span, and her inability to differentiate left from right. She had therapy from ages 3 to 6, but we stopped recently because, as the only bread winner in the family, I really needed to rejoin the work force. My daughter is now in a top primary school, chosen purely because it’s near my house. Many people thought she wouldn’t be able to survive there; however, she topped her class by scoring 100 percent in all her subjects (English, Math, and Chinese). I am wondering if she falls under the label of twice exceptional? How can I tell and what can I do to ensure she is working to her full potential?

A Your example is a splendid one of how children who have a history of genuine disorders can overcome their early challenges to function at a gifted level. It’s also an important reason to focus on children’s strengths, not just their problems. Your daughter has apparently learned to differentiate left from right and that may never be a problem again. As for her short attention span, her inattention could have been related to her lack of challenging work, though, obviously, I’m in no position to diagnose any child based on a letter. Either way, she is paying good attention at school and rising to her challenges.

If your daughter continues to exhibit disabilities, she might be categorized as twice exceptional. Otherwise, she could be identified as gifted. You could request that she be tested to determine both her IQ and her achievement test scores as compared to students in her own grade as well as to those in the grade ahead of her. That information could then be used to determine if she should be grade skipped or provided with additional enrichment within her grade. If you have a gifted coordinator within your school district, that person could assist you in obtaining services, whether within the school or from a private psychologist. Otherwise, the principal could be helpful for planning an evaluation and further enrichment.

I’m also betting that you are a great role model to your daughter. Although being a single mom can be very difficult, when your daughter observes how responsibly you manage both your work and your parenting, she can’t help but admire your ability to “do it all.” As she watches your strong effort, she apparently sees reason to make her own strong effort.

Dr. Sylvia Rimm is a child psychologist and clinical professor at Case University School of Medicine, author, newspaper and magazine columnist, and radio/TV personality. For free newsletters about ADHD, learning disabilities, and parenting gifted children, send a self-addressed, stamped envelope for each newsletter to P.O. Box 32, Watertown, WI, 53094. Read Dr. Rimm’s articles for parents and teachers and submit family questions online at www.sylviarimm.com. All questions are answered.

Resources for Parents and Educators

Spotlight On 2e Series

► Writing and the 2e Learner: Issues and Strategies
► Caring for the Mental Health of the Twice-exceptional Child
► Parenting Your Twice-exceptional Child
► Understanding Your Twice-exceptional Student
► The Mythology of Learning: Understanding Common Myths about 2e Learners
► The 2e Reading Guide: Essential Books for Understanding the Twice-exceptional Child

Guiding the Twice-exceptional Child:
A Collection of Columns by Meredith Warshaw

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Race-to-the-Middle and the Twice-ignored Child

By Patricia Seres

Articles and books written in response to the No Child Left Behind (NCLB) legislative focus and funding of public education decried how it has left behind the brightest children in America. Then the combination of the Great Recession budget reductions, along with the research theories suggesting our country was falling behind academically, resulted in a government initiative called “Race-to-the-Top” (R2T). The dual focus of R2T is on grade-level standard achievement testing and on “closing the achievement gap.” R2T, as well, has failed to address the high-IQ child, often referred to as gifted. Furthermore, R2T’s focus on high-stakes standardized testing with rigor in grade-level curriculum, and its lack of emphasis on best-practice instruction for divergent learners, now leaves the twice-exceptional (2e) child twice ignored.

The 2e child is a minority within a minority. With estimates placing the number of intellectually gifted children at anywhere from 2 to 6 percent of the student population, twice-exceptional children are an even smaller percentage. Though these children show great potential and can be extremely successful, with proper best-practice interventions and supports, they are often misunderstood by both general education and special education staff. Their varying exceptionalities, beyond the high IQ and its accompanying characteristics, include everything from dyslexia, to having a visual-spatial learning style, to being a creative-thinker or a hands-on learner, to having high-functioning autism, to having ADHD. Each exceptionality has its own very specific needs beyond the standard curriculum.

Now, not only have gifted classrooms and curriculum been cut, but special education budgets have been reduced, squeezing all into a middle standard that provides little or no appropriately differentiated instruction or measurements of knowledge for 2e children’s giftedness or for the specific nature of their disability or learning difference. With no best-practice emphasis for gifted education and no best-practice emphasis for learning disabilities or learning differences, the 2e child has both exceptionalities ignored. In implementation, the result is both intellectual and emotional abuse to the 2e child and extreme frustration for the parents.

With comments from school staff ranging from “This is PUBLIC education,” to “We can’t serve ALL children,” and “FAPE means free public education for your child, not the BEST education,” parents are left on their own to figure out appropriate strategies. That may mean paying for private interventions if they can find (and afford) them, hiring tutors to keep a child afloat in a contrary educational system, and fighting a bureaucracy that seems intent on destroying rather than nurturing their child’s potential.

For parents, knowing of their 2e children’s intellectual brilliance, sensitivities, creativity, and motivation to learn and succeed, and then watching them come home in tears due to being simultaneously bored and overwhelmed, is heart-wrenching. For the children, working hard, doing the mounds of inappropriately designed grade-level work, and then getting a D because the measurements are poorly designed for them leaves these children asking “Why even bother?” and feeling like “No matter how hard I try, I’m going to fail.”

Parents are then left to wonder: Why is my child not considered part of the “public” of public education? Why is it that my child is excluded from “ALL”? Why are only the middle-average students given an appropriate education and opportunity to reach their potential, and why does Race-to-the-top only serve them?

Even for the high-IQ child with no other exceptionality, the standard achievement focus is a poor match. I see many gifted children losing interest in school due to an overabundance of grade-level busywork that lacks intellectual challenge and an onslaught of assessments that are poor measurements of knowledge. I hear the ever-enlightening words of children who say, “They’re just making it harder, not more interesting,” and “There’s nothing to go to school for any longer. It’s just tests and more tests.”

My fear is that the slim school budgets and high-stakes testing in our county have reduced our local schools to standard test centers, with few opportunities for creative thinking or hands-on learning. Our prior gifted-contained classrooms are now places filled with grade-level “rigor” where high-IQ students have few peers. When gifted services were eliminated post-recession, in spite of the rules in my state requiring them, our school officials said, “We plan to mainstream the gifted children in groups of three to five to raise the bar for high achievers,” and “We plan to level the playing field to require high-IQ students to qualify for advanced classes based on annual state test scores,” with no recognition of learning need. We also heard quotes like “Just because a child has a high IQ doesn’t mean the child is gifted,” and “Gifted education is elitist.”

Twice as discouraging for the 2e child, whose disability (rather than strengths)
**National and International Events in 2013**

June 10-13, 2013, 5th Annual Hormel Foundation Gifted & Talented Education Symposium, Austin, Minnesota. By the Hormel Foundation, the Minnesota Department of Education, and Austin Public Schools. For educators, counselors, administrators and parents to gain greater understanding of the unique needs of gifted and high-potential learners. More information at [www.austin.k12.mn.us/educationalservices/GTsymposium/default.aspx](http://www.austin.k12.mn.us/educationalservices/GTsymposium/default.aspx).


July 10-13, 2013, 5th Annual Hormel Foundation Gifted & Talented Education Symposium, Austin, Minnesota. By the Hormel Foundation, the Minnesota Department of Education, and Austin Public Schools. For educators, counselors, administrators and parents to gain greater understanding of the unique needs of gifted and high-potential learners. More information at [www.austin.k12.mn.us/educationalservices/GTsymposium/default.aspx](http://www.austin.k12.mn.us/educationalservices/GTsymposium/default.aspx).


Please note: For state association conferences relating to giftedness, see Hoagies’ website, [www.hoagiesgifted.org](http://www.hoagiesgifted.org). For additional conferences on learning differences, see the website of the Council for Exceptional Children, [www.cec.sped.org](http://www.cec.sped.org).

**Parent’s Perspective, concluded**

Parent’s Perspective, concluded

seems to be the primary focus, teachers have their hands tied to the test. We have intellectually gifted dyslexic children with an aptitude for higher-level math concepts removed from advanced math classes, based strictly on an annual standard test score of word problems written to confuse. Imagine pushing Albert Einstein, Thomas Edison, Benjamin Franklin, Alexander Graham Bell, and Steve Jobs, all gifted dyslexics, out of advanced STEM classes, to make room for a child with an average IQ who does well with rote memory and performs well on grade-level standard tests. That’s what we are seeing currently in our district, yet this is precisely the wrong direction if our country truly wishes to increase innovative problem-solving and creativity.

Referencing Rebecca Mann’s article on “Gifted Children with Spatial Strengths and Sequential Weaknesses,” we are pushing out the very children who could raise our country’s math achievements and innovation if they were served well with both a free and appropriate public education (FAPE) as well as appropriate measurements.

My experiences have led me to believe that the good intentions of R2T are being lost in implementation, and that we are “losing our minds,” as much as we were with NCLB. I see us leaving behind our high-IQ divergent thinkers and our twice-exceptional children. The result is a lost generation of brilliance, creativity, and innovation. We are losing the ones with the natural strengths to innovate and think outside the box — creatively and across disciplines. We are losing the ones who, according to Daniel Pink’s A Whole New Mind, have the strengths needed for the next generation of careers — the ones that many of our public schools are refusing to serve appropriately and, in many cases, are pushing out of their doors. I firmly believe that nothing that has the word standardized, or common, or core is going to be positive for divergent learners or for those who are not statistically “standard.”

Patricia Seres is a parent of two gifted children, one who is gifted with dyslexia. She is also a board member of a state gifted advocacy group and is active in advocacy for dyslexic students. She is a former television and advertising executive, with a degree in theology, and currently resides in Saint Augustine, Florida.