Parenting Your Twice-Exceptional Child: Developing Talent and Accommodating Needs

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Nurturing Potential | Inspiring Excellence
Twice-exceptional
“A student is considered *twice-exceptional* when he or she is identified as gifted/talented in one or more areas while also possessing a learning, emotional, physical, sensory, and/or developmental disability”

(from Assouline, Foley Nicpon, & Huber, 2006)
~ 300,000 twice exceptional (2e) students in the US (Baum & Owen, 2004); exact number unknown.

- No formal system exists for tracking prevalence rates
- Identified for GT, not as possessing a disability/diagnosis
- Identified for special programming/accommodations but not for GT
- Not identified as GT or as needing accommodations
Gifted with ASD: What do we know?
DSM-V changes for autism

One autism spectrum disorder

Two (instead of three) symptom domains
  social communication impairment and repetitive/restricted behaviors

Controversial, particularly for mild cases, but initial findings say the new criteria are reliable and valid
ASD/GT identification conundrum

GT and ASD have some similar characteristics

• intense focus on certain subjects
• uncooperative behavior
• difficulty making friends (Cash, 1999).

Because of these overlapping attributes, some children are diagnosed as either having ASD or being gifted, when in fact they should be diagnosed as having both (twice exceptional).
Figure 1: Comparison of General and Specific Skills

- Written Expression
- Reading Understanding
- Math Computation
- Reading Speed
- Math Problem Solving
- Word Reading
- Spelling
- Nonverbal Reasoning
- Verbal Reasoning
- Overall Reasoning

Socialization

Low | Average | High
WISC-IV Working Memory and Processing Speed Indices were both significantly positively correlated with achievement in math, reading, and written language. Unexpected findings were that ASD diagnosis, Verbal Comprehension Index, and forms of academic acceleration were not related to the achievement measures.

Despite the restricted range of cognitive abilities, students diagnosed with Asperger syndrome had significantly higher Verbal Comprehension Index scores than did students diagnosed with autism. However, students with autism had significantly higher scores on tests of math fluency and written expression than did students with Asperger syndrome.

- Teacher reports: clinically elevated scores on the Atypicality, Depression, Withdrawal, and Adaptability subscales.
- Self-report scores: average range.
- Parents/teachers of adolescents reported greater adaptability and fewer symptoms of atypicality than those of children.

The girls demonstrated virtually identically superior cognitive and achievement performances. Analysis of additional measures specific to ASD, adaptive behavior, and executive functioning can reveal important distinctions that are helpful in understanding the need for unique interventions specific to ASD.
## Schema of Gifted Students with Social Difficulties

<table>
<thead>
<tr>
<th>Student Characteristic</th>
<th>Type A</th>
<th>Type B</th>
<th>Type C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cognitive Ability</td>
<td>High</td>
<td>High</td>
<td>High</td>
</tr>
<tr>
<td>Degree of social Impairment</td>
<td>None to Mild</td>
<td>Moderate</td>
<td>Severe</td>
</tr>
<tr>
<td>Possibility of Disability</td>
<td>Minimal</td>
<td>Moderate, Potential for Misdiagnosis</td>
<td>Strong Possibility of Misdiagnosis and/or Missed Diagnosis</td>
</tr>
<tr>
<td>Diagnosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Need for Intervention</td>
<td>Minimal</td>
<td>Moderate, Potential need to clarify degree of impairment; intermittent counseling</td>
<td>Extreme behaviors require expert approach to assessment and intervention</td>
</tr>
<tr>
<td>Focus of Intervention</td>
<td>Educational opportunities that represent challenge and support academic and social emotional development</td>
<td>Understanding of mismatch between high cognitive ability and lack of intellectual peers; some perceived social weaknesses could be viewed as strengths</td>
<td>Social skills intervention based upon information obtained from the assessment</td>
</tr>
</tbody>
</table>
Results of our research

1. Gifted students with ASD exhibited extremely large discrepancies in their cognitive, academic, and adaptive functioning profiles.

2. These discrepancies are confusing to the child/adolescent as well as to those who work and live with him/her (e.g., why are some things so easy and others so hard?)
Results from our research

3. Verbal and nonverbal reasoning skills are typically much stronger than are working memory and processing speed skills.

4. These cognitive discrepancies can, and often do, affect academic functioning.
Results from our research

5. Similar psychosocial concerns were reported by parents and teachers, but parents’ reports were more significant.

6. Teachers may not necessarily observe educational problems in GT/ASD.

7. Self-perceptions were generally positive and often were not consistent with parent/teacher perceptions.

Despite having similar IQs, gifted students with ADHD had lower scores on measures of self-esteem, behavioral self-concept, and overall happiness than gifted students without a comorbid diagnosis.

Among all participants, children had higher reported overall happiness than adolescents.

Relative to control participants, children with ADHD and high IQ had a higher prevalence rate of familial ADHD in first-degree relatives, repeated grades more often, had a poorer performance on the WISC-III Block Design, had more comorbid psychopathology, and had more functional impairments across a number of domains.
Antshel and colleagues (2009). Is adult attention deficit hyperactivity disorder a valid diagnosis in the presence of high IQ? *Psychological Medicine, 39*(8), 1325-1335

High-IQ adults with ADHD reported a lower quality of life, had poorer familial and occupational functioning, and had more functional impairments, including more speeding tickets, accidents and arrests. Major depressive disorder, obsessive-compulsive disorder and generalized anxiety disorder diagnoses were higher in high-IQ adults with ADHD.
Antshel and colleagues (2010). Exécutive functioning in high-IQ adults with ADHD. *Psychological Medicine, 40*(11), 1909-1918.

High-IQ adults with ADHD performed less well than those without ADHD on several psychological tests of executive functioning. Test performance in the high-IQ adult ADHD group, however, was average.
Accommodations to consider
STRENGTHS!!! Building blocks....

1. Unique view of the world
2. Honesty
3. (sometimes “quirky” 😊) sense of humor
4. Responds well to structure
5. Rule followers
6. Genuine
7. Intense interests = extremely knowledgeable!
8. Desire to learn
Reading

1. Allow kids to pick books from various genres in their area of interest
2. Talent sometimes varies with development
3. Focus on comprehension and enjoyment over speed
4. Pair with a student – social skill development with reading enjoyment
Math

1. Accelerate, accelerate, accelerate
2. Present new material more than repeating old; allow time for processing
3. Offer broad perspectives
4. Pair with a student – social skill development with math enjoyment
5. Emphasize quality over quantity
Written Language

1. Oral language gifts, written language barriers
2. Praise risk-taking
3. Allow writing in comfortable form / laptop training as soon as developmentally appropriate
4. Voice recognition software
5. Write about special interests
6. Content first, mechanics second
Things to recommend/highlight

1. Resources

2. Behavioral problems likely indicate stress: deal with stress (coping time, engage in familiar activity, removing environmental triggers)

3. Encourage teachers to create a list of problematic behaviors and devise specific guidelines with the student to deal with behaviors; should be consistent across settings.
4. Avoid using abstract ideas
5. Consider tangible reinforcers, not social ones (e.g., “great job!”)
6. Keep the setting structured / warn for transitions
7. Capitalize on interests
8. NEVER take away gifted programming due to behavioral issues. **Appropriate education is not a reward!**
Recommend/highlight

9. Post rules
10. Use positive reinforcement instead of punishment models
11. Create a social story to address difficult situations
12. Connect with peers based on interest, not diagnosis
Additional overall tips for parents and educators:

1. Understand processing and speed issues
2. Provide children/adolescents with the structure of the program/class (give “rules” of the meeting ahead of time)
3. Give students control *when possible*
4. Understand the need to provide concrete examples to help with generalization
5. Encourage teachers to develop rapport before pointing out potential problematic behaviors
Don’t forget the strengths!!!

1. What strategies does your child have to cope with stress?
2. Do they have any positive relationships? Can he or she tell you what makes them successful?
3. Identify and highlight talents/gifts, interests
4. What supports do they have?
Identify a safe person at school (Myles)

Who is someone the student can come to if he or she does not understand the meaning of words, phrases, or situations, or is frustrated, sad, or afraid?

This person should:
1. Understand the child’s characteristics
2. Respect the child
3. Listen, and know when to “offer advice”
4. Understand the child’s triggers and subsequent behaviors
5. Set boundaries
6. Be able to problem solve
Situation-Options-Consequences-Choices-Strategies-Simulation (Roosa, Myles)

1. Who, what, when, where & why
2. Brainstorm options
3. Identify consequences for each option identified (may be more than one; typically hard because of cause-effect difficulties)
4. Prioritize options/consequences and chose best
5. Develop a strategy for carrying out the option identified if the situation occurs. The student should lead this part.
6. Practice!
Coping skills & stress management (DBT)

Positive data log

Today, what positive things have happened to you? How did you feel? What positive things have you thought about yourself?
Coping skills & stress management (DBT)

Coping resources bank:

Identify pleasing things to do that utilize all five senses (e.g., what are pleasurable and calming things I do that stimulate taste, smell, sight, sound, touch)
Why should 2e children have accommodations in the classroom?

1. Levels the playing field for the twice-exceptional student
2. It can be the law
3. It allows students to better display their areas of talent
Would I recommend every gifted student with ASD obtain a 504?
Yes......if

The three criteria for a 504 are met: (1) A mental or physical impairment (or has a record of an impairment or is regarded as having an impairment) is present, (2) which substantially limits (3) one or more major life activities.
• Section 504 does not specifically define “substantially limits”.
• For a student to qualify, the disability must impose an important and material limitation to 1+ current major life activities.
  – The eligibility team considers the nature and severity of the disability & how long it is expected to last.
• Simply having a condition or disability does not automatically qualify a student for Section 504 protection.
• The condition must present a barrier to the student’s ability to access the same educational opportunities as that afforded a non-disabled student or a substantial limitation does not exist.
How is a 504 different from an IEP?
504 (civil-rights law) – goal: remove barriers = students with disabilities can have the same opportunities as others

IEP (Individuals with Disabilities Education Act) – centers on providing educational services; only a small subset of all students with disabilities, but who require significant remediation/assistance. Only certain classifications of disability can have an IEP
### Special Education

Number of students (ages 6 – 21) served by the Individuals with Disabilities Education Act (IDEA) in 2001 by disability category, Adapted from the U.S. Department of Education (2005); Number of students (ages 6 – 21) served under IDEA in 2001 (Sattler, 2008).

<table>
<thead>
<tr>
<th>Disability</th>
<th># of children</th>
<th>%IDEA total</th>
<th>% of US student Population (Ages 6-21)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specific learning disabilities**</td>
<td>2,886,679</td>
<td>49.2</td>
<td>6.0</td>
</tr>
<tr>
<td>Speech or language impairments</td>
<td>1,091,306</td>
<td>18.6</td>
<td>2.3</td>
</tr>
<tr>
<td>Mental retardation</td>
<td>604,325</td>
<td>10.3</td>
<td>1.2</td>
</tr>
<tr>
<td>Emotional disturbance</td>
<td>475,246</td>
<td>8.1</td>
<td>1.0</td>
</tr>
<tr>
<td>Multiple disabilities</td>
<td>129,079</td>
<td>2.2</td>
<td>0.3</td>
</tr>
<tr>
<td>Hearing impairments</td>
<td>70,407</td>
<td>1.2</td>
<td>0.1</td>
</tr>
<tr>
<td>Orthopedic impairments</td>
<td>76,274</td>
<td>1.3</td>
<td>0.2</td>
</tr>
<tr>
<td>Other health impairments</td>
<td>340,299</td>
<td>5.8</td>
<td>0.7</td>
</tr>
<tr>
<td>Visual impairments</td>
<td>23,469</td>
<td>0.4</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Autism</strong></td>
<td><strong>99,743</strong></td>
<td><strong>1.7</strong></td>
<td><strong>0.2</strong></td>
</tr>
<tr>
<td>Deaf-blindness</td>
<td>---</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Traumatic brain injury</td>
<td>23,469</td>
<td>0.4</td>
<td>0.0</td>
</tr>
<tr>
<td>Developmental Delay</td>
<td>46,938</td>
<td>0.8</td>
<td>0.1</td>
</tr>
<tr>
<td><strong>All disabilities</strong></td>
<td><strong>5,867,234</strong></td>
<td><strong>100.0</strong></td>
<td><strong>12.1</strong></td>
</tr>
</tbody>
</table>
What should you do if a 504 plan is not being followed?
• Talk to the classroom teacher. If not successful…..
• Talk to the principal. Has the teacher received appropriate assistance from the administration to put the accommodations into effect? Make a timeline…put it into writing. If not successful…..
• Talk to the 504 Coordinator / district representative. Is it realistic? Does it need to be rewritten? Make a timeline…put it into writing. If not successful…..
• Talk to your state parent advocacy center. The Technical Assistance Alliance for Parent Centers: http://www.taalliance.org/.

• Contact the U.S. Department of Education Office of Civil Rights. http://ed.gov/about/offices/list/ocr/504faq.html
• **Goal** = get your child the assistance and adjustments needed; be open to school personnel ideas

• **Tips for parents:**
  – stay calm, organized and collaborative with school personnel
  – Have a copy of the 504 Plan & know what provisions are needed
  – Provide specific examples of how those needs are not being met
  – Offer specific recommendations for how the school can make positive changes
How do you “prove” a GT child has a disability?
1. You can’t really “prove” what the child would look like without a disability; you can provide data that shows discrepancies in performance.

2. Provide the results of a comprehensive evaluation

3. Some institutions / schools will interpret the law differently and NOT provide accommodations with average performance.

4. May run into those who say average work is not causing significant impairment in life activities

5. Increase advocacy for twice-exceptionality.
   - Just because you were told “no” before does not mean that every case will be told “no.”
What does a well-written 504 look like?
Overall guidelines for parents

1. Make sure you understand the 504 Plan before signing it.
2. Make sure all the goals are objective and measurable (ask yourself – how will I know when this goal is reached?)
3. Make sure you know who is going to implement the accommodation.
4. Have a timeline in place for when it will be reviewed.
It’s not working....
1. Accommodations do not and should not lower work quality. Share your concerns with teachers

2. Revisit 504 plan – what needs adjusting? Are goals being met under the current plan?
When do 504s end?
Terminating / adjusting 504s

1. 504 eligibility team reviews current student need and determines that the plan is no longer needed to provide the student equal access.
   • How is this objectively measured?
2. Then typically a form is completed (e.g., Section 504 Plan termination form).
4. Adjustments = at annual meetings, after reviewing progress toward reaching goals.
5. Some accommodations may not end (specifically those neurologically-based difficulties)
Examples of accommodations that may go away...

1. Preferential seating
2. Peer helpers
3. Letting the child stand while working
4. Nonverbal cues
5. Supervised transitions
6. Child must restate directions
7. Behavioral contracts
8. Group therapy
Examples of accommodations that may stay…

1. Posting rules
2. Reinforcing positive behavior
3. Warnings for change
4. Help with organizational difficulties
5. Tests untimed or given over time (brief sessions)
6. Report suicidal statements to personnel
7. Break down assignments into manageable parts
Working together
How do I communicate with teachers?

1. Collaboration (we have the same goal – for Johnny to be successful in school, happy, etc.)
2. Ask for teacher input
3. Focus on strengths and relay that information first
4. Remain hopeful
5. Realize that you may not get all you want for your child, so focus on what is necessary for success
How does your child communicate his/her diagnosis?
Psychoeducation

1. Books
   Handling negative and positive reactions to diagnosis

1. Become involved in organizations

2. Who to tell about the diagnosis
   Why do you want the person to know?
   How do you think it will improve your relationship with the person?
   Can you be specific about how you want to person to support you?
   What are the risks of telling him/her?
   If you are not close with the person (classmate, teammate) are there other ways you can ask for support without talking about your diagnosis?
Self-reflection....

Process: How much of the problem can I change, and how much do I accept?
What abilities can I learn, and what can I live without?
How do I prepare for a summer program?
1. Disclose information to staff
   1. Provide IEP/504 Plan
   2. Share strengths!
   3. Describe issues on health the form
2. Let the child pick his/her class
3. Discuss the class/program prior to arrival
4. Visit the facility prior to the first day
5. Meet teachers and staff ahead of time, if possible.
1. Identify a “safe place” and/or “safe person” and agreed-upon ways to cope if stressful situations occur.
2. Be consistent with medications
3. Plan for unstructured time
4. Ask to have the schedule posted
5. Tour dorm rooms, lounge areas, and meet staff
Social Stories (Carol Gray)

Write stories to integrate new social information with the person’s current perspectives.
Include: description of the problem situation; student’s experience of the situation; information about how others feel or react, and what prompts the feelings or reactions. Needs to include the process of telling students in a non-judgmental way what to do in circumstances, including WHY their current behavior is not working.

EXAMPLES from PIF...