



## Children with Multiple Exceptionalities

**What do we mean by multiple exceptionalities? When reviewing provision for students with multiple exceptionalities in your school, first ensure that colleagues are agreed on a definition.**

### Introduction

The phrase 'multiply exceptional' is used to describe people who are highly able and who also have a disability, sensory impairment or learning problem. Students with such features are sometimes known as 'doubly or dually exceptional', and in the US as 'gifted handicapped', or as having 'asynchronous development'.

In the field, commonly described issues include the following:

- high ability with mobility and sensory impairments
- high ability and learning difficulties
- high ability and autism/Asperger's Syndrome
- high ability and Attention Deficit/Hyperactivity Disorder
- high ability and social/behavioural difficulties
- high ability and unseen illness (such as asthma, epilepsy, etc)
- high ability and cognitive impairment
- high ability and cultural disadvantage
- high ability and socio-economic disadvantage.

Children with multiple exceptionalities can be tricky to spot, as their abilities can be masked by their problems. The obscure and complex nature of multiple exceptionality has also made it hard for interested professionals to have their concerns taken seriously. Montgomery (2003) notes:

'Those who have tried to bridge the gifted/special gap over the years have had difficulty obtaining resources or research funding because the topic falls between two stools and could be regarded as too small a population to merit concern. Equally, from the intervention point of view, the most obvious sign of difficulty is the special need; the other,

the giftedness, is regarded as a bonus but they can cancel each other out' (2003: 5).

Just as it is far from easy to be absolutely clear about definitions of the able, it can also be problematic to be specific about the difficulties children with multiple exceptionalities face. For example, many children suffer from glue ear, or some other temporary hearing loss: are they hearing impaired? Conditions such as Attention Deficit Disorder are controversial, and some practitioners are unwilling to accept that they even exist. Many agree that they are often misdiagnosed and this can cause problems, with parents and teachers disagreeing about the best way to support the child.

In the list above, 'cognitive impairment' is mentioned, and this is a curious addition. Some people consider high ability to mean possessing exceptional cognitive abilities, and by definition this would mean that the cognitively impaired are discounted from definitions of the highly able. However, there are several ways of considering this issue. One such is that the cognitive impairment would not prevent or preclude high ability in other areas, such as music or drama.

Sometimes, the term 'multiply exceptional' may refer to other types of circumstances that make it difficult for children to function effectively in school, such as cultural diversity or socio-economic disadvantage. The full range of issues can include gifted children who also have learning or developmental disorders or disabilities, or social-emotional difficulties. This broader definition can thus encompass:

- autistic savant syndrome
- developmental delays in speech, language and motor coordination
- disruptive behaviour (including conduct and oppositional-defiant disorders)
- a range of anxieties, including eating disorders (Moon and Hall, 1998).

More usually, however, the terms 'dual exceptionality' or 'multiple exceptionality' are used to refer to children and young people with sensory impairment, disability and/or learning problems. For example, a child with high ability and a learning difficulty such as dyslexia, is described as having a dual exceptionality. Her advanced ability is likely to be in a subject area that does not require her to excel in tasks which she finds difficult as a result of her dyslexia. It could be that her teachers notice that her abilities in, say, mathematics, are far higher than in the work she produces when the focus is on reading. Noticing the discrepancy, the teacher may have the child assessed by a psychologist, who observes a high measurable intelligence but at the same time a specific deficit: the inability to decode some sounds in speech that would affect the child's ability to read and spell.

The educator's task is then to find ways of helping the child to tackle the auditory problem. Once support is provided, the confusion over sounds is reduced and the reading difficulties are minimised. The child's level of attainment increases to a level more closely matching the high abilities she presents in mathematics. This would be a clear case of dual exceptionality.

Multiple exceptionalities are obviously more complex, and more common in children who have, for example, mobility difficulties, since these are frequently accompanied by a hearing problem. Similarly, in cases of Asperger Syndrome, there may be difficulties with motor coordination (dyspraxia), and this can be evident through spatial problems in drawing, physical education and drama.

It would be possible to write an entire article on the subtleties of naming and describing these issues, but for the purposes of this Launchpad, it is sufficient to be aware that the area is controversial. The key point is that whatever decision is taken, it should be agreed and understood by all those involved. A simple definition would be that a child with multiple exceptionalities is highly able in some area included in the current notions of 'gifted and talented', and also has one or more difficulty that is likely to hinder him or her from expressing this high ability.

A school may not necessarily have many children who fall into the category of multiple exceptionalities. In most schools, however, there will be some classes with one or two children who have a high ability combined with one of the difficulties described above. As already noted, the relatively small numbers make it easy to overlook these children. Add to this the particular problem of catering for their complex requirements, and it becomes obvious that they are unlikely to have their needs met easily.

In many schools, the most common cases are likely to be gifted or talented children with:

- learning problems
- attention problems
- cultural and social issues
- unseen illness.

Of course, these difficulties frequently exist outside as well as within the population of gifted and talented children. In schools with significant numbers of children with disabilities, autism and sensory impairments, the school policy on integration is already likely to recognise some of these issues and their implications. In such schools, however, there may be a higher proportion of children with disabilities who are also gifted or talented than is recognised.

### Why 'multiple exceptionalities' is an important focus in the context of gifted and talented pupils

High ability is not always synonymous with high achievement, and reasons for failing to achieve are sometimes related to learning problems, disabilities, and/or sensory impairments. People often mistakenly talk of a spectrum of ability with high ability at one end and disability at the other. This would suggest that people with disabilities cannot be highly able, which is clearly wrong, as exemplified by the many highly achieving individuals who also have a disability or sensory impairment. Thinking about one's own understanding of 'ability' is a vital component in carefully considering provision for the gifted and talented.

In terms of equity for all children, it is important to be sure that children with multiple exceptionalities are not neglected when teachers and others are striving to identify children for gifted and talented programmes. It is likely that such children will be receiving help and support for their difficulty, but not the development they need for their high abilities.

The DfES has recently (2006) highlighted the need to 'reduce underachievement gaps for the disadvantaged' and 'support multiple exceptionality', so this will be included in future reviews of provision and will be considered by Ofsted whenever specific provision for the gifted and talented is reviewed.

Training and research into children's different needs is obviously valuable, but it is impossible for any classroom practitioner to be an expert in all aspects of multiple exceptionality. Fortunately, it is also unnecessary, as there are already experienced experts and practitioners in all these areas and it is easier than ever to access their knowledge and expertise. Local authorities have pools of educational psychologists, health professionals and welfare officers who can help support teachers in schools (and, in particular, form strong links with SENCOs). There are also local, national and international help groups that can be invaluable sources of advice and information, some of whose websites are listed at the end of this Launchpad.

Teachers should not try to solve all the problems themselves. Practical support and help is available, and a multi-disciplinary approach will benefit everyone involved, most especially the child in question.

## Key issues to consider

To ensure the best possible impact from everything the school provides, staff should have a clear and shared understanding of what is involved in defining high ability and identifying the able. Children and young people with difficulties should not be excluded from the definitions of 'gifted and talented' adopted by the school. Schools should review their understanding of high ability periodically; one aspect of this is to look at the issue afresh through the lens of multiple exceptionality. This entails an understanding of the range of difficulties that children might face, as well as information about what currently happens in the school. Framework questions that might guide a school's audit of its approach to multiple exceptionalities are suggested in the sections that follow.

### *Mobility issues*

How accessible is your school? Are children with mobility problems able to interact with peers effectively? Are they excluded from any activities and, if so, what can be done about this? What impact might this have on their chances of demonstrating their abilities and taking part in activities that extend them?

### *Sensory impairments*

Do staff understand the issues and implications of teaching children with sensory impairments? Are other children confident in interacting with these children? How can they best be helped to build positive relationships? Are any children with sensory impairments at risk of developing learning difficulties through missing key parts of their learning, or misunderstanding some aspects of lessons? What strategies are in place to avoid this happening?

### *Learning difficulties*

Are staff prepared to accept that children with reading, writing and spelling difficulties can be gifted in English, for example? Where children are receiving extra support, for instance in reading or handwriting, is this suited to their intellectual ability as well as the right level for their problem? For example, where children are being helped with reading, are the texts able to hold their attention, or are they far too simplistic? If the books are dull and too repetitive, children may fail to make progress through lack of motivation and be turned off reading.

### *Autism / Asperger's Syndrome*

Is help provided to stretch the abilities of the child as well as supporting him or her in developing good social relationships, etc? Are staff aware of the way in which autism and Asperger's Syndrome affect behaviour? Can they, for example, receive training on how to cope with the apparent rudeness and social outbursts that can accompany these conditions? Are there opportunities for such children to exercise, display, and receive recognition for their areas of strength in a manner that does not make them feel 'uncomfortably different'? Is it possible to introduce a buddy system or mentoring scheme that would give children with autism one or two peers with whom they can interact regularly?

### *Attention Deficit / Hyperactivity Disorder*

Are staff prepared to accept that this condition exists? What support is available to help staff understand and devise effective strategies for helping these children? Are they willing to adapt their teaching to help the children function appropriately? How are those with AD/HD managed in the classroom in terms of their relationships with other children, for example in group work?

### *Social / behavioural difficulties*

What support is there for children who have problems in controlling their behaviour? Do they have Individual Education Plans which include behaviour contracts they have been involved in creating? Do all teachers know the standards of behaviour that are acceptable from these children? What support and training are available to help teachers include such children in their classrooms?

### *Unseen Illness*

What allowance is made for children who miss many days at school through illness? How are their difficulties explained to other children? Is their absence taken into account when tests are administered, allowing for some likely gaps in knowledge? How best can such gaps be filled?

Are there hospital school services with which teachers can liaise, or does this need to be done through parents/carers? Does the school understand enough about the condition to be able to anticipate future concerns? It is possible to avoid future problems by working in a multi-professional fashion, drawing on a range of expertise?

### *Cognitive impairment*

What is the school's definition of high ability, and does this exclude children with cognitive impairment? If so, how are these children able to demonstrate their abilities? If not, how are their strengths and problems understood and tackled? If children with cognitive impairments do not feature on the 'talent' register, should there be a rethink? Are such children being compared with the whole school population or with their own immediate peers?

### *Socio-economic disadvantage*

Where children are living in an impoverished environment, do staff have a true sense of the difficulties they are facing? What support is available for children who have little or no support from home? For example, do they receive help from learning mentors and other professionals? Can the school ensure that the response to the Every Child Matters initiative will help children who are living with socio-economic disadvantage? Would aspects of the 'extended school' model be helpful in compensating for a difficult background?

### *Cultural issues*

Cultural issues are dealt with in full in a separate launchpad, but certain of them are worth highlighting here. If children have no access to the English language at home, what is being done, using their first language, to recognise their abilities? Are there specialist professionals whose help could be enlisted, for example local authority advisers in English as an Additional Language, or additional adults, such as learning mentors? Where the child's cultural background conflicts with the values of the school, what is being done to strengthen understanding of the home environment and to build relationships with it? For example, families sometimes refuse to allow girls to play certain sports or to let boys engage in dance classes. Discussing the benefits of these activities with the family can often succeed in allaying fears.

### *Relationship issues and sources of support*

As already noted, teachers should not be trying to tackle all the difficulties surrounding cases of multiple exceptionality by themselves. A multi-agency approach is often required. Health and welfare specialists, psychologists and sometimes legal professionals are all able to support schools in ensuring that children have the best possible opportunities to learn. The following questions can help to clarify relationships and partnerships with the variety of people who might be involved in cases of multiple exceptionality.

- What is being done to ensure good relationships with parents and relevant health and welfare professionals?
- Is the school doing all it can, for example in using the services of an educational psychologist, to make teachers' jobs easier and more effective in teaching these children?

- Who has ultimate responsibility for helping teachers cope with children with difficulties?
- Are all those associated with the support work comfortable with the language they are using when discussing the children? For example, some individuals object to being called 'dyslexic' and prefer to be described as 'having dyslexia'. Others are proud to be called 'dyslexic' and see it as an essential part of their identity.
- Is the child's voice being heard? Are children asked what would help them and how they would like their difficulty explained to their peers when this is necessary?
- What support and training are available to help teachers understand and provide for children with such conditions?

## What might we do in school?

1. If a school wants to improve its practice in the area of multiple exceptionalities, its first priority should be to raise awareness of the issue and be sure that the teaching and auxiliary staff understand that high ability need not mean high achievement and is not exclusively linked to 'normal' learning profiles. All staff should be involved in such discussions, with SENCOs, pastoral staff, teachers and teaching assistants working together to create shared understandings. Parents of children with multiple exceptionalities are likely to have links to national help organisations and may be willing to provide information that can help all staff.

2. Once people are clear that the definition of high ability is inclusive, the processes for identification must be scrutinised to ensure that they will catch all children, even if their abilities are less obvious than those of the mainstream able.

3. In individual cases of multiple exceptionalities, every effort should be made to glean as much information as possible about the difficulties being faced by the child. This requires a genuinely multi-agency approach, with educational psychologists, social workers, welfare officers, health professionals and others all working together. They must not merely be silent partners but must be included in on-going discussions about the child and made aware of the school's strategies and tactics. Their support can be a great help in the quest to provide such children with consistency. Having an extended hours policy in the school and following the government guidelines on Every Child Matters will play its part in fulfilling this quest.

4. The child should be consulted where possible and included in discussions about his or her needs and support. It may not be appropriate to include the child in all meetings, but depending on the child's maturity and circumstances it is preferable to involve him or her as far as possible. Even where children are unable to make informed choices that would best serve their own welfare, they should be made aware of decisions that concern their education, as sensitively and fully as possible.

5 The school should make every effort to ensure that teachers and support staff receive the training and support they need to work effectively with children with multiple exceptionalities. It is a matter of equity that the high abilities of such children should not be overshadowed by their difficulties. This requires that those working most directly with them receive appropriate help, guidance and support in addressing **both** 'exceptionalities', the high ability no less than the difficulty.

## References and recommended reading

Brown, S.W., Renzulli, J.S., Gubbins, E.J. Siegle, D., Zhang, W. and Chen, C (2005) Assumptions underlying the identification of gifted and talented students. *Gifted Child Quarterly*, 49(1), 68-78.

Eriksson-Sluti, G. (2001) The gifted game: overcoming stereotyping in gifted education. *Gifted Education International*, 15, 178-187.

Heller, Monks, F.J., Sternberg, R.J. and Subotnik, R.F. (Eds.) *International Handbook of Research and Development of Giftedness and Talent* Oxford: Elsevier Science [Three key chapters: Colangelo, N and Assouline, S.G. *Counseling Gifted Students* (pp. 595-608); Feldhusen, J.F. & Jarwan, F.A. *Identification of Gifted and Talented Youth for Educational Programs*, (pp.271-282); and Morelock and Feldman (2000) *Prodigies, Savants and Williams Syndrome: Windows into Talent and Cognition* (pp.227-241)].

Kokot, S. (2003) Diagnosing and treating learning disabilities in gifted children: a neurodevelopmental perspective. *Gifted Education International*, 17, 42-54.

Montgomery, D. (ed) (2003) *Gifted and Talented Children with Special Educational Needs* London: NACE / Fulton.

Neihart, M. (2000) Gifted Children with Asperger's Syndrome. *Gifted Child Quarterly*, 44(4), 222-30.

Silverman, L.K. (1989) Invisible Gifts, Invisible Handicaps. *Roeper Review*, 22(1), 37-42.

Winstanley, C. (2004) *Too Clever by Half: A fair deal for gifted children* Staffs: Trentham Books.

Winstanley, C. (2005) *Investigating the Notion of Children with Multiple Exceptionalities*, Warwick: NAGTY.  
[http://www.nagty.ac.uk/research/occasional\\_papers/documents/occasional\\_paper6.pdf](http://www.nagty.ac.uk/research/occasional_papers/documents/occasional_paper6.pdf)

## Useful websites

- The National Attention Deficit Disorder Information and Support Service  
<http://www.addiss.co.uk>
- National Autistic Society  
<http://www.nas.org.uk>
- Information about Autism  
<http://www.insidethebubble.co.uk>
- Asperger Syndrome  
<http://www.aspergerfoundation.org.uk>
- British Dyslexia Association  
<http://www.bdadyslexia.org.uk>
- Site designed and edited by a young person with dyslexia  
<http://www.iamdyslexic.com>
- Royal National Institute of the Blind  
<http://www.rnib.org.uk>
- Visual Impairment Centre for Teaching and Research (Birmingham University)  
<http://www.education.bham.ac.uk/research/victar/>
- National Deaf Children's Society  
<http://www.ndcs.org.uk>
- National Literacy Trust  
<http://www.literacytrust.org.uk/database/deaf.html>
- Cerebral palsy charity  
<http://www.scope.org.uk>
- Down's Syndrome Association  
<http://www.downs-syndrome.org.uk>
- Epilepsy Action  
<http://www.epilepsy.org.uk>
- Sickle Cell Society  
<http://www.sicklecellsociety.org>
- Dyspraxia foundation  
<http://www.dyspraxiafoundation.org.uk>