

CHILDREN PSYCHOTHERAPY WITH HIGH SKILLS/GIFTEDNESS

PSICOTERAPIA DE CRIANÇAS COM ALTAS HABILIDADES/SUPERDOTAÇÃO

PSICOTERAPIA DE NIÑOS CON ALTAS HABILIDADES/SUPERDOTACIÓN

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ABSTRACT: The child with high abilities / giftedness has a different behavior from the others, with high performance in areas of human knowledge, whether determined in a single field or combined. Through this differentiation, myths are propagated and this audience can face great challenges, being one of the possible coping strategies to hide, deny or even not recognize their abilities, starting to develop behavioral and/or psychological problems. Therefore, this study aims to investigate the role of the clinical psychologist with children with high abilities / giftedness. It is an empirical research, with a qualitative approach, of the exploratory type. Four clinical psychologists who attend or assist children with high abilities/giftedness participated in this research. The results indicated the prevalence of the cognitive-behavioral approach as a theoretical and technical basis for the interviewed professionals, and the frequent use of techniques such as psychoeducation, social skills training and relaxation techniques in caring for these children.

KEYWORDS: High skills. Giftedness. Child Psychotherapy.

RESUMO: *A criança com altas habilidades/superdotação apresenta um comportamento diferenciado das demais, com desempenho elevado em áreas do conhecimento humano, sejam isoladas em um único campo ou combinadas. Por meio dessa diferenciação, são propagados mitos e esse público pode enfrentar grandes desafios e uma das possíveis estratégias de enfrentamento é esconder, negar ou até mesmo não reconhecer suas habilidades, passando a desenvolver problemas comportamentais e/ou psicológicos. Diante disso, o presente estudo objetiva investigar a atuação do psicólogo clínico junto a crianças com altas habilidades/superdotação. Trata-se de uma pesquisa empírica de abordagem qualitativa, do tipo exploratória. Participaram desta pesquisa quatro psicólogas clínicas que atendem ou atenderam crianças com altas habilidades/superdotação. Os resultados indicaram a prevalência da abordagem cognitivo-comportamental como embasamento teórico e técnico das profissionais entrevistadas e o uso frequente de técnicas como psicoeducação, treino de habilidades sociais e técnicas de relaxamento no atendimento a essas crianças.*

PALAVRAS-CHAVE: *Altas habilidades. Superdotação. Psicoterapia infantil.*

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RESUMEN: *El niño con altas capacidades / superdotación tiene un comportamiento diferente a los demás, con alto desempeño en áreas del conocimiento humano, ya sea determinado en un solo campo o combinado. A través de esta diferenciación se propagan mitos y esta audiencia puede enfrentar grandes desafíos, siendo una de las posibles estrategias de afrontamiento para ocultar, negar o incluso no reconocer sus habilidades, comenzando a desarrollar problemas de comportamiento y / o psicológicos. Por lo tanto, este estudio tiene como objetivo investigar el papel del psicólogo clínico con niños con altas capacidades / superdotación. Es una investigación empírica, con enfoque cualitativo, de tipo exploratorio. En esta investigación participaron cuatro psicólogos clínicos que atienden o asisten a niños con altas capacidades / superdotación. Los resultados indicaron la prevalencia del enfoque cognitivo-conductual como base teórica y técnica para los profesionales entrevistados, y el uso frecuente de técnicas como la psicoeducación, el entrenamiento en habilidades sociales y técnicas de relajación en el cuidado de estos niños.*

PALABRAS CLAVE: *Altas habilidades. Superdotación. Psicoterapia infantil.*

Introduction

Psychotherapy is a process based on psychological functioning, mediated by a psychology professional, which aims to favor personal development, overcoming conflicts and self-knowledge. Psychotherapy, of clinical scope, is conceptualized as a method of treatment of psychic suffering by essentially psychological means (DORON; PAROT, 1998), a form of listening and welcoming in which the psychotherapist turns to the client (AYRES; BARRIER, 2014).

Psychotherapy can be indicated for several audiences. One of them is the child, identifying needs and promoting the mental health of children and adolescents. It is a space to welcome anguish, fears and insecurity. Children are often taken to psychotherapy by their guardians due to problems that they may or may not recognize that they are experiencing. Another factor that can lead them to psychotherapy is referral performed by other professionals (FRIEDBERG; MCCLURE, 2004).

In childhood, there is the beginning of the formation of affective bonds provided by family, social and cultural relationships. It is a phase of central importance for personal development, constituting the foundations of thoughts, emotions, behaviors and values constructed from past experiences (BOWLBY, 1997). Thus, child psychotherapy represents an investment in the promotion of mental health, helping the child in the search for means to deal with the adversities of daily life.

Problems related to mental health in childhood are worrying and these problems are often associated with limitations in the functioning of children, such as social involvement, school performance and low self-esteem, besides being able to negatively affect social and

emotional development in the long term, signaling a possible psychopathology in adulthood (KÖSTERS *et al.*, 2012).

Although it is not a homogeneous group, children with high skills/ giftedness have specificities that may leave them more vulnerable to psychological distress. But before understanding the specificities, it is necessary to understand the concepts related to high skills/giftedness (AH/SD). Pérez (2008) proposes the use of Gardner's Theory of Multiple Intelligences and Renzulli's Theory of the Three Rings for this understanding. The first establishes the framework of intelligence through eight intelligences (logical-mathematics, linguistics, spatial, musical, body-kinesthesia, naturalistic, intrapersonal and interpersonal). The second considers the gifted from the intersection of three traits (high skill, commitment to the task and creativity) in the various forms of intelligence (PÉREZ, 2008).

In Gardner's conception of intelligence, adopted in this study, it is understood that there are several intelligences that represent a multidimensional phenomenon, which involves diverse operations such as memory, cognition, convergent thinking, divergent thinking (ability associated with creativity). Thus, intelligence is understood as consisting of a set of skills.

The field of AH/SD is permeated by myths and stereotypes and these conceptions can imply difficulties for the person with these characteristics in the relationship with the other. Studies dedicated to people with AH/SD generally pay greater attention to their cognitive characteristics and educational needs, with their socio-emotional dimension often ignored and little discussed (ALENCAR, 2007; OLIVEIRA; BARBOSA; ALENCAR, 2017).

Socio-emotional development refers to the experiences that individuals present in their historical and cultural context, which involve feelings and emotions, characterizing it as a phenomenon with a purpose, meaning and social meaning (PISKE, 2013). The author emphasizes the social character and learning of emotions that trigger thoughts and actions, being fundamental for the construction of the child's abilities.

Relationships in the family and school context can positively or negatively influence the child's beliefs, so there is a need for greater attention to these contexts. Family attributes are a protective factor when the family provides positive qualities to interactions, stability and cohesion, assertiveness, mutual respect and support to the needs of the individual (MOREIRA; STOLTZ, 2012).

The intensity with which many children with these characteristics experience their emotions is often responsible for triggering internal conflicts that are often associated with psychological difficulties. In addition, they may experience low self-esteem caused by

overvaluing cognitive aspects, depression, anxiety, perfectionism, irritability, nonconformism, hostility and aggressive behavior, impulsivity and attention deficit (ALENCAR *et al.*, 2001).

To favor the socio-emotional development of children with AH/SD, psychotherapy and counseling based on the Theory of Positive Disintegration (TDP), developed by Dabrowski, have been adopted by an increasing number of psychotherapists. TDP can favor psychological counseling processes, as it helps in understanding experiences and feelings of difference experienced by gifted people, among other factors (DANIELS; PIECHOWSKS, 2009).

Thus, the Theory of Positive Disintegration (TDP) presents itself to the field as another theoretical possibility of understanding this dimension. Over-excitability, construct of TDP, are intensities in the way of experiencing life that are easily identified in gifted individuals. Such intensities are often responsible for triggering internal conflicts that are routinely associated with psychological disorders and difficulties, but which by the lens of TDP should be identified as driving elements of advanced human development (SOUSA, 2019, p. 108, our translation).

Although the singular character of the subjective world of each person is considered, it is worth mentioning that knowledge about the socio-emotional needs of people with AH/SD is useful in the development of psychotherapeutic processes. Thus, all the environments that make up the social support network (school, community, etc.) play an important role in the healthy formation of the person with AH/SD, so that they can understand their potential and accept themselves as a natural person. Amabile (2001) reinforces that "a social support environment is vital for the development of motivations, attitudes and skills" (p. 335, our translation).

There are still very few studies on the psychotherapy of children with AH/SD, characterizing the demands presented by children and the strategies used in their care. This research is justified by recognizing the relevance of psychotherapy in children with these characteristics and because it understands that it can contribute to the dissemination of knowledge about AH/SD and provide theoretical and technical support for the professional practices of psychologists and other professionals.

This article discusses the performance of the clinical psychologist with children with high skills/gifted. As specific objectives, we investigated the main demands presented by children with AH/SD, the strategies and techniques used in the clinical care of children with these characteristics and the interventions of the clinical psychologist performed with the schools and families of these children.

Method

This is research of exploratory, field-type qualitative approach. According to Minayo (1993), qualitative research answers very particular questions. It is concerned, in the social sciences, with a level of reality that cannot be quantified, that is, it works with the universe of meanings, motives, aspirations, beliefs, values and attitudes, which corresponds to a deeper space of the relationships of processes and phenomena that cannot be reduced to the operationalization of variables.

The participants of the research were four psychologists who work in a clinical context with children with high skills/giftedness in the city of Teresina-PI, *through the snowball sampling or "Snowball"* technique. The inclusion criteria of the participants were to have current or previous experience in clinical care with children with AH/SD and to be available to participate in the research, declared through the Informed Consent Form (TCLE).

Data collection took place through a questionnaire, through *Google Forms*, without the need to install programs or physical storage of data, with multiple choice and answer options in paragraph, applied in August 2021. The research was conducted through the approval of the study by the Research Ethics Committee of the State University of Piauí, no. 4,211,489, and the Informed Consent Form was sent to participants before responding to the electronic form, paying attention to the norms and recommendations of Resolution No. 510/2016 of the National Health Council.

The method of data analysis used was content analysis from Bardin's perspective (2010), paying attention to the following phases for its conduction: organization of analysis, coding, categorization, treatment of results, inference and interpretation of the results.

Results and discussion

The participants indicated for this research are four female professionals who currently work with psychotherapy of children with AH/SD or had previous experience. It was found that there is a higher incidence in the care of children with high skills/giftedness in the age group from five to ten years, and 75% of the professionals mentioned this age group as prevalent and 25% indicated the age group up to 5 years.

Table 1 – Participants and psychotherapeutic approaches

Participant	Gender	Theoretical-technical approach
<i>Psychologist A</i>	Female	Psychoanalysis
<i>Psychologist K</i>	Female	Cognitive behavioral therapy
<i>Psychologist L</i>	Female	Cognitive behavioral therapy
<i>Psychologist T</i>	Female	Cognitive behavioral therapy

Source: Research data - Elaborated by the authors

In the psychotherapy movement there are different conceptions with regard to scientific knowledge. Among the study participants, there is a prevalence of psychotherapeutic work in the aspect of cognitive-behavioral therapy (CBT), according to chart 1. CBT is a directive, structured approach focused on the current patient problem.

It is known that child psychotherapy has its peculiarities. This field of intervention is not fully effective if only theories and techniques developed for adults are used. It is important to emphasize the differences between audiences, which include affective, cognitive, motivational and behavioral schemes, which causes the child psychotherapist to develop his knowledge about the singularity of child psychology (CAMINHA; CAMINHA, 2007).

The following categories will be presented in this study.

Demands presented by children with AH/SD in the context of psychotherapy

When asked about the main demands that justify the search of family members of children with AH/SD for psychotherapy, the interviewed professionals emphasized complaints related to the socialization of these children.

The main demands are related to socialization, feeling of inadequacy, of being isolated because they do not find people of the same age with the same interests, feeling lost (Psychologist T).

Low tolerance to frustration, difficulty in social aspects and need to adjust school demand (Psychologist L).

It is known that as they develop early awareness of the functioning of society, children with AH/SD develop a vision of themselves, others and the world. According to Alencar (2003), if there are situations in which children/young people are frustrated, in the face of monotonous and repetitive academic activities that do not influence the development and expression of their superior potential, it is likely that there will be a favoritism of introspection of feelings and expressions, resulting in social withdrawal.

Del Prette (2013) highlights the relevance and efficacy of interventions in the social development of children with high skills/gifted, especially in *the therapeutic setting*. In the study by Ignachewsk *et al.* (2019) benefits of psychotherapy were observed in the social repertoire of students with high skills/gifted, mainly in order to facilitate the development of social, personal and academic skills.

Regarding the demands pointed out by parents when seeking psychotherapy for their children, difficulties related to learning and school performance also stand out in the participants' responses, especially in cases where children have AH/SD associated with disorders such as Attention Deficit Hyperactivity Disorder.

When they have associated ADHD, they start to have difficulty learning and are very charged, tais as "Impulsivity-Hyperactivity-Change of Focus (Psychologist A, our translation).

This condition has been called double exceptionality and can be defined as the presence of high performance, talent, skill or potential, occurring in conjunction with a psychiatric, educational, sensory and physical disorder (NAKANO; ALVES, 2015).

The subject who presents ADHD/AH/SD may have a constant academic performance, in addition to losses in fine motor skills and, consequently, in writing (NAKANO; ALVES, 2015). In addition to the specificities of double exceptionality, it is important to highlight that students with AH/SD are not exempt from presenting school difficulties and one of the related factors is not having their educational needs understood and met.

The participants also mentioned as demands for psychotherapeutic work characteristics that are commonly attributed to people with AH/SD, such as stiffness and perfectionism, according to the speech of professional T.

Several authors, such as Winner (1998), Fleith and Alencar (2007), Renzulli (2014), Goulart *et al.* (2016) mention some common characteristics among people with AH/SD and, among them, are rigidity and perfectionism. These characteristics significantly impact the emotional dimension, because they are related to an excess of self-criticism, and can cause impacts, such as stress for children and young people with high skills/giftedness.

Strategies, techniques and resources used to care for children with AH/SD

Child psychotherapy aims to help in the expression of each child's emotions, so the psychotherapist sees himself in questioning how to approach this child and what techniques can be used. In addition to considering the context and culture of the child, it becomes fundamental

an interaction, sometimes playful. Thus, the psychotherapist should be prepared for the unforeseen moments that may occur. For an adequate bond between therapist and child, a continuous and playful interaction is relevant in order to enter the child's world. Thus, the therapist must be creative and flexible, besides having a theoretical and technical support (BUNGE *et al.*, 2015).

According to Duchesne e Almeida (2002, p. 49, our translation), "CBT is a semi-structured, objective and goal-oriented intervention that addresses cognitive, emotional and behavioral factors in the treatment of psychiatric disorders", based on various techniques. Regarding the techniques used in the follow-up of children with AH/SD from the perspective of CBT, it was observed in the participants' reports a prevalence of psychoeducation, emotional regulation, training of social skills, relaxation techniques and parental training.

Psychoeducation, Socratic questioning, training of social skills and training of behavioral skills of tolerance to frustration, use of symbolic cards (with figures that are linked to the child's daily life). It is frequent the use of coping cards, relaxation techniques, techniques of reversal of habit with application of behavioral interventions to deal with tics, repetitive and nervous habits, use of certain objects to stimulate tranquility (self-control and self-regulation), among others (Psychologist T, our translation).

In addition to the techniques mentioned above by cognitive-behavioral approach professionals, the importance of using neuropsychological assessment techniques in addition to psychotherapeutic techniques was mentioned by Psychologist A.

I make a mixed approach, with psychoanalytic listening and research in terms of clinical neuropsychology evaluation (Psychologist A, our translation).

According to Chahine (2011), psychoanalytic psychotherapy with children is done through the same method of working with adults – interpretation, and uses the same *techniques*: *setting, floating attention*, free association, transference management and resistance, but adding play as a new and fundamental technique so that analytical work with the child is feasible. Regarding the process of neuropsychological evaluation, it is usually one of the first phases of the psychotherapeutic process. In this evaluation process, it will be possible to understand the mechanism of the child's cognitive functions and their respective uniqueness.

Facilitators in the psychotherapeutic care of children with AH/SD

When asked about the factors that facilitate the care of these children, psychologists mainly related the patients' ability to communicate and learn in relation to achieving therapeutic goals.

Most often, they show great interest in understanding their learning process, as well as the emotional aspects that are part of this context (Psychologist L, our translation).

Good general communication skills (Psychologist K, our translation).

The child's own cognitive structure. They are children who usually make good associations, have excellent insights, are creative and the sessions end up becoming very interesting and their own process ends up being made easier because of this cognitive ability (Psychologist T, our translation).

Some of the characteristics mentioned by the professionals are compatible with the description made by Fleith (1999), regarding cognitive characteristics. The author points out that these individuals often present curiosity, early language, good memory, advanced vocabulary for age and ability to generate original ideas.

The motivation to learn, one of the conditions present in THE/SD, according to Renzulli's conception, can also be one of the facilitators in the psychotherapeutic process. Another facilitator in the follow-up process of children with AH/SD in psychotherapy is when there is good support from the family and the social support network. It is emphasized that teachers must be prepared to identify these children, who are often not recognized and not identified their potentials, in order to be able to act appropriately.

There are researches, such as those of Stoltz (2016) and Costa-Lobo *et al.* (2016), which expose strategies to switch between learning skills and complex and innovative tasks, providing learning contexts, challenging attitudes and beliefs, as well as skills and knowledge. These strategies are important for the development of creativity and help to promote cognitive abilities in a psychotherapeutic, educational and guidance context with parents.

Another facilitator is the family engagement and the sensitivity of the school to issues related to the adaptations that the child needs (Psychologist T, our translation).

According to Del Prette and Del Prette (2013), family members and teachers of children with AH/SD can help expand the repertoire of social skills, helping in the process of identifying

these behaviors in different contexts and facilitating the development of creativity, positive self-concept and cognitive skills.

Difficulties in care for these children

In this category, the participants' answers regarding the difficulties encountered in the care of these children were gathered, mainly citing *the* deficits in relation to socio-emotional skills.

Some are resistant to more structured strategies or techniques and, in some cases, have low tolerance to frustration (Psychologist L, our translation).

Engagement difficulties and/or difficulty of social skills (Psychologist K, our translation).

According to Alencar (2007), emotional and social difficulties may be related to the response to high standards of demand. When searching for people with AH/SD and ADHD, Hosda *et al.* (2009) found similar behaviors in both. They stated that, due mainly to factors such as frustration, unchallenging activities, insufficient school curriculum and inadequate teaching and learning procedures, impulsivity and hyperactivity can be characteristic of both.

Interventions with families and schools of children with AH/SD

Regarding the investigation of the clinical psychologist's interventions with the family and the school of children with AH/SD, it was possible to identify the importance attributed to collaborative work between these institutions. It was also emphasized the need for guidance on the field of AH/SD in order to expand the knowledge for the proper management of the child in these spaces.

Work with the family is essential, from evaluation to interventions. The family is always called to participate in the evaluation work and also in the psychotherapeutic process, because it needs to be oriented in relation to high skills, management with the child, in relation to work with the school and especially in the child's day-to-day conduct. The family always arrives with many complaints, many concerns regarding the behavior and specificities of the child and needs this psychoeducational work in relation to high skills (Psychologist T, our translation).

According to Benito (2000), relatives of precocious students with giftedness often have an excessive concern about what their children learn. In some cases, those responsible for the child assume the child as a superior being, stimulating patterns of competitive interaction

between siblings and colleagues. In this sense, it was possible to identify the following report from one of the participants:

With the family it is common to do a work on guidelines for reducing super stimulation (Psychologist A, our translation).

It is also worth emphasizing the studies mentioned above by Paludo, Loos-Sant'Ana and Sant'Ana-Loos (2014) that state that low expectations, excessive pressure and contradictory attitudes on the part of the family can generate feelings of insecurity and misunderstanding in these children.

Childhood education plays a primary role in the integration of the individual into society. Education professionals should be qualified and qualified to know how to identify, assist children, guide family members and, if necessary, refer to multidisciplinary rehabilitation. Thus, the importance of initial training and continuing education to education professionals who contemplate this theme (LEONESSA; MARQUEZINE, 2013).

The approximation between psychology and pedagogy has often been fundamental in the development of the teaching and learning process, both in the educational and clinical context. In the pedagogical or psychotherapeutic follow-up of children with AH/SD, it is necessary to know the modalities of pedagogical intervention (curricular enrichment, acceleration, among others) so that it can guide and accompany students. The presence of the psychologist in school follow-up is a great need to create spaces for dialogue and reflection with the objective of assisting children with AH/SD. The presence of different professionals should be of complementarity and not of exclusion (PEDROZA, 2003).

Virgolim (2007) reports that the main objective in identifying students with AH/SD is to highlight the potentials that the school has not been able to observe and, therefore, does not offer proposals for its development. This is the dynamic that should be understood by education professionals, aiming at the perception of talents and the offer, to students with high skills, of supplementary challenges and/or participation in enrichment programs, according to current legislation in Brazil.

Skills/skills required of clinical psychologist in the care of children with AH/SD

What skills/skills would be required of the Psychology professional in the clinical care of children with AH/SD? How could I act more efficiently with these patients?

The interviewed professionals emphasized that it is necessary to have a theoretical and technical knowledge about the characteristics of the children in the spotlight.

Technical knowledge on the subject and sensitivity to perceive the emotional aspects that are part of the demand (Psychologist L, our translation).

Knowledge, understand about high skills and about the aspects that involve this condition (Psychologist K, our translation).

In a study on the personal and professional characteristics desirable in teachers who work with gifted students, Davis and Rimm (1994) cite the ability to develop flexible programs, respect for individual interests, creativity and innovation, information on giftedness, among others. Guarding the specificities of each professional practice, it is understood that these characteristics are also important to the professional profile of the psychologist.

As mentioned earlier, in addition to the classical theories that address AH/SD, it is understood that the Theory of Positive Disintegration can be an important tool for the psychologist's work, since it favors the knowledge of one, as well as a possibility to understand the development of personality and the potential of students and clients with these characteristics (HARPER; CLIFFORD, 2017).

Knowing these theories deeply is important to understand the cognitive, socio-emotional and pedagogical needs of the patient. The limited training of the professional offers space for the perpetuation of myths about the person with AH/SD, interfering in professional action.

Final considerations

The results obtained allowed us to verify that the prevalent approach of the professionals participating in the research was Cognitive-Behavioral Therapy (CBT), besides that similar techniques used in psychotherapeutic work were found, such as psychoeducation, social skills training, emotional regulation, parental training and relaxation techniques in the care of these children. The techniques used in general aim at stimulating the child's creative potential, favoring socialization, self-knowledge, cognitive flexibility and emotional regulation.

The results of this study allow to expand the knowledge about the field of skills/gifted, as well as the professional performance of the clinical psychologist in the care of children with these characteristics. This study contributes material to the clinical and educational field, from a perspective of facilitating communication between clinical psychologists, schools and families of children with AH/SD.

It is suggested to conduct future research in order to expand professional experiences and characterize psychotherapeutic interventions also from other theoretical approaches. For

the training of psychologists, it is suggested that it expands the theoretical and practical knowledge in relation to the field of high skills/gifted, school inclusion and educational care modalities offered to these children, so that it can facilitate the identification of these children and the development of psychotherapeutic work.

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