

Death with Honors: Suicide Among Gifted Adolescents

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The incidence of suicide and suicide attempts among adolescents has increased markedly during the past two decades. Gifted adolescents, often perceived by others as being immune from problems of depression and emotional upheaval because of their high intelligence, have also shown increases in suicidal behaviors. On the basis of current research, the author contends that gifted young people are especially susceptible to suicide attempts. The author suggests intervention strategies to assist caregivers who notice signs of depression in adolescents.

He was known to be shy and he was known to be brilliant. Dallas Egbert, a 16-year-old computer genius, captured America's attention when he disappeared, presumably among the maze of heating tunnels under Michigan State University's campus. Months later, under conditions far less bizarre than publicity intimated, Dallas was found in the city of Texas that shares his name. Shortly thereafter, at his Ohio home, he put a gun to his head. Dallas was dead.

But if statistics are accurate, Dallas was not alone that day in committing suicide. An estimated 13 adolescents per day—5,000 young people each year—end their own lives, and as many as five times that number make less "successful" attempts at suicide (Tishler, McKenry, & Morgan, 1981). This statistic, as shocking as it is tragic, is even more alarming when combined with another figure: a 250% increase in suicides among young people since 1964 (Petzel & Cline, 1978).

The number of gifted young people attempting or committing suicide remains unknown, partly because of the wide variance in definitions of the intellectually gifted population. Yet, in a review of two decades of research on adolescent suicide, Lajoie and Shore (1981) concluded that "suicide statistics and theories about the causes of suicide are . . . most accommodating to the idea of overrepresentation of the gifted, especially at college age" (p. 141). The interactions among the three phenomena—giftedness, adolescence, and suicide—are speculative, and data indicating that gifted adolescents are more prone to suicide than are their less able age mates are based more on logical conclusion than on quantitative evidence. Nevertheless, the problem is real: Suicide, or its attempt, involves more American teenagers today than ever before, and some of these teenagers are intellectually gifted.

SUICIDE AND GIFTEDNESS

The evidence of giftedness among people who commit or attempt suicide is difficult to document in the research literature. Except for a psychological analysis of the original Terman group of people with IQs of 140 and above (Shneidman, 1971), few suicide researchers have identified giftedness as a variable. Anecdotal data on the recent rash of "cluster" suicides in Plano, Texas, Westchester County, New York, and Cherry Creek, Colorado, revealed that many of the suicidal adolescents were above average or superior in their academic performance, were well liked by their peers, and were prone to no more than occasional, recreational drug use (Delisle, 1984b)—factors that have shown

nonsignificant or negative correlations with suicidal behavior in past studies (Berman & Cohen-Sandler, 1982; Garfinkel, Froese, & Hood, 1982; Korella, 1972). In a study conducted at the University of California—Berkeley, it was discovered that 67% of the campus students committing suicide had above average grades and 91% of the undergraduate students committing suicide had above average grades (Seiden, 1966). Thus, the commonly attributed precursors to suicidal behavior in adolescents do not seem significant when examining on-campus or college-bound populations. This finding was recently corroborated in research done on male adolescent suicides (Motto, 1984). Also, in citing a study conducted by Golombek and Garfinkel in 1983, Sargent (1984) reported that adolescents who commit suicide are more intelligent than their counterparts who attempt but do not complete the suicidal act. Furthermore, in analyzing 1,500 suicide completions, Sargent (1984) noted that "better students made the most severe attempts" (p. 50) at ending their lives (i.e., the method of attempt involved more lethal means, such as guns or jumping).

There do, however, seem to be some characteristics common to the gifted population that may serve as contributing factors to suicidal behaviors among people 15 to 24 years of age. Several investigators (Delisle, 1982; McKenry, Tishler, & Kelly, 1982; Seiden, 1966) have suggested that the perception of failure among above average students may be far different than among average students; thus, a B is equivalent to an F for an adolescent whose personal standard for success is perfection. This perfectionism often permeates the life of the gifted adolescent, causing one researcher to conclude that perfectionism is the most influential, yet overlooked trait among gifted persons (Whitmore, 1980). One teenager, responding to a question regarding personal success, stated: "Just how good am I? Just how smart is smart? How do I become better than the bestest best? The questions constantly plagued me" (American Association for Gifted Children, 1978, p. 13). Two younger but equally capable students were asked a similar question (Delisle, 1984a). One, an 11-year-old girl from Connecticut, responded, "I love A's, and the first time I got a B, I cried. But I only got one. No more of those B's" (p. 40). The other, a 12-year-old girl from Pennsylvania, stated: "I am waiting for the day I can face a blank page without fear, for the day I will stop running away from discovering myself and turn around to see what life's all about" (p. 42).

Too often, gifted young people believe that the only acceptable level of performance is perfection; effort is merely a means to an end. Thus, when perfection is not reached—which, by strict definition, is never—even 97% may constitute failure.

In addition to the quest for perfection in academic or life situations, there are several other factors that may contribute to extreme maladaptive behaviors in gifted adolescents. One of these factors relates to the societal expectations placed on gifted teenagers. Often, these adolescents are identified as "future

leaders" and as "the movers and shakers of the next generation." Such assertions may seem overly ambitious and perhaps unattainable to the gifted adolescents themselves. What parents, teachers, or other adults may consider justifiable urgings to "do your best" and "work your hardest," the gifted adolescent may interpret as not so subtle forms of external pressure. A gifted adolescent stated:

Being gifted, I have a strong sense of future, because people are always telling me how well I will do when I grow up. . . . My feelings fluctuate from a sense of responsibility for everything to a kind of "leave me alone—quit pushing." (American Association for Gifted Children, 1978, p. 7)

Research by Sanborn and his associates (Sanborn, 1979; Sanborn, Pulvino, & Wonderlin, 1971) has shown the difficulties faced by gifted adolescents who are being told that they are lucky to be blessed with varied talents. In some cases, these talents become an embarrassment of riches, wherein the gifted teenager downplays or disregards special talents so as to be seen as "regular" by classmates. At other times, the stress of living up to expectations that the teenager perceives as conflicting or unattainable overrides the desire to go on, and life becomes aimless and barren (Shneidman, 1972).

A third area of concern in reviewing possible interactions between giftedness and suicide is the reality that intellectual talents may not be matched with advanced development in social, emotional, or physical realms (Webb, Meckstroth, & Tolan, 1982). Whereas gifted students are more popular than are less able age mates in the elementary years (Coleman, 1961), this popularity diminishes significantly in high school, especially for gifted girls (Austin & Draper, 1981). Such a readjustment of social strata and the concomitant changes in behavior that may be required of bright adolescents may become a source of concern or anxiety. Also, if the gifted teenager is accelerated in school so that his or her classmates are 2 or more years older, there is no guarantee that intellectual prowess will be of help in locating social peers. A gifted young adult, reflecting on his decision to forego acceleration for social considerations, summarized this intellectual-social rift:

I could have skipped sixth grade, but my parents and I decided I wouldn't. For one thing, sixth grade was the big social year, with the week at camp and the end-of-school dinner. . . . I didn't particularly want to jump ahead to junior high. I wanted to avoid the image or reputation of not fitting in. (Delisle, 1984a, p. 117)

The need and desire to fit in with a peer group is a common concern of adolescents, gifted or otherwise. The hurt and isolation that can result from a lag in social skills development may cause gifted teenagers to regard themselves as "minorities of one" (Torrance, 1961)—distinct units with no true peers or expendable cogs in the social complex.

A final area of emotional concern for gifted adolescents is the frustration that can result from understanding adult situations and world events but being powerless to affect their outcomes (Hollingworth, 1942; Strang, 1951). Thus, when a gifted 12-year-old asks, "Why don't we use our taxes to buy food for poor people instead of using them to make bombs?" the adult response often is, "I don't know" or "Don't worry about such things; you're too young." Yet, the ability to perceive problems and possible solutions cannot be disregarded merely because the thinker is, presumably, too young to be concerned; to do so denies the existence of those very qualities that help define the youngster as gifted. When this intellectual frustration is coupled with teenagers' frequent perception of transitory problems as permanent or long-term and their tendency to focus more on the present than the future (Berman, 1984), "in effect,

the problems that the world creates . . . are perceived as catastrophic. The solution is to remove all the problems all at once" (Smith & Mauceri, 1982).

These four issues—perfectionism, societal expectations to achieve, differential development of intellectual and social skills, and impotence to affect real-world change—confront every gifted teenager to some degree. Their influence on suicidal behaviors among gifted adolescents is at best tenuous because, although case study research provides some evidence of correlation, more quantitative studies are needed to establish a firmer base of knowledge. Also, more qualitative analysis, as can be conducted through interviews and surveys of "unsuccessful" suicide attempters, may provide some understanding of the reasons why some gifted adolescents are more vulnerable to life's stresses than are others.

INTERVENTION STRATEGIES TO ASSIST SUICIDAL TEENAGERS

The decision to kill oneself is rarely passive. Almost without exception, the suicidal teenager transmits verbal or behavioral clues to those with whom she or he lives, works, or attends classes. It is imperative, then, that counselors and therapists make teachers, parents, and adolescents themselves aware of the cues often sent by suicidal persons. The following are intervention strategies for counselors working with adolescents who show signs of depression.

1. *Remember that intervention begins with assessment.* Teachers and classmates are often the first to detect life-threatening behaviors (Ross, 1980), but rarely do they report their beliefs or feelings to either the suicidal adolescent or to a clinician trained to work in a counseling role. Often students and teachers fear that people will think they are overreacting if they report significant changes in the behavior of another student.

Thus, counselors must make educators, parents, and adolescents aware of the warning signs common to presuicidal persons (American Association of Suicidology, 1977; Morgan, 1981). Also, they need to know the common myths regarding suicide (e.g., "People who say they are going to kill themselves never do" or "If I talk about suicide, I may give the impression that it's okay to do") and to recognize their own roles in suicide prevention.

2. *Confront the teenager directly with your reasons for suspecting an impending suicide attempt.* Open discussion of suicide seldom induces its onset; on the contrary, such overt acknowledgment often relieves a suicidal teenager from the burden of raising the topic (ABC Community Relations, 1985). Ask the client questions such as, "You seem to be kind of down; is something bothering you?" or "Have you been thinking about killing yourself?" If a student acknowledges that she or he is considering suicide, do not overreact by reminding the teenager that "you have your whole life ahead of you." Instead, be affirmative and supportive. Let the student know that you are there for any support needed, that you know what you are doing, and that you will do whatever it takes to prevent this suicide.

3. *Discuss common complaints of gifted adolescents as they relate to depression, anxiety, and fear of the future.* Review the remarks made by gifted adolescents regarding the assets and problems of growing up gifted (American Association for Gifted Children, 1978; Delisle, 1984a; Sanborn et al., 1971). Let them know that the concerns they hold for the future of both the world and their place in it are not unique but are shared by many other intelligent young people.

4. *Act specifically.* If you tell the distressed teenager that you will follow up on your initial discussion, then do so. Arrange the next meeting, locate the appropriate referral agency or person, or schedule another time to talk. Do not become yet one more person to disappoint this adolescent with promises that go unfulfilled. Also, if the teenager's plans for suicide are well

thought-out and complete, the danger of a suicide attempt is acute. Arrange for someone to stay with the adolescent during this time of great vulnerability and make certain that the environments—both physical and emotional—are as safe and as free of provocation as possible (Smith & Mauceri, 1982).

CONCLUSION

Just as there are those who at the least indisposition develop a fever, so do those whom we call suicides, and who are always very emotional and sensitive, develop at the least shock the notion of suicide. Had we a science with the courage and authority to concern itself with mankind . . . these matters of fact would be familiar to everyone. (Hesse, 1974, p. 55)

Today's gifted adolescents are enmeshed (as is everyone) in a world that often seems uncaring and uncompromising. But with the support of significant adults and peers, these troubled adolescents may come to see options less severe and less definitive than suicide. With the help of counselors, these adolescents may come to appreciate those facets of the world worth saving and may learn some nonsuicidal alternatives to coping with the harsher realities of life that do not seem to go away. If counselors can help, then they must help. The saving of only one young life is reason enough to attempt to make a difference.

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