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A highly sensitive child – a challenge for parents and teachers – a case study

Abstract

This article aims to present the characteristics of a child with high sensitivity features (HSC) and his/her behaviour and functioning in various areas of everyday life. Moreover, the article analyses an individual case of a seven-year-old highly sensitive child and a teacher-educator with thirty years of experience in observing children in kindergarten and during early education. The research was in-depth with the results of surveys conducted among parents and teachers, which will be used to answer the question: How does a highly sensitive child cope and function in the home and kindergarten environment, and what are the ways to support his or her development in these contexts?

The analysis of the collected material was used to propose methods of working with a highly sensitive child and the importance of cooperation between educators and caregivers to support such a child.

Keywords: The highly sensitive child, support, kindergarten.

Introduction

The Constitution of the Republic of Poland, the UN Convention on the Rights of the Child, the Convention on the Rights of Persons with Disabilities and the

Education Law guarantee all children equal access to education and development, taking into account individual needs, talents and opportunities.

In the literature and research on children's development, special attention is paid to the role of the conditions in which their development takes place, and to the importance of adequate stimulation, which comes from the immediate environment, especially the family home, and later – kindergarten then school. Research results indicate that the younger a child is, an appropriate environmental influence plays a more significant role in his or her development; therefore, the quality of the environment is the key.

After looking at the care and teaching practices, it can be noticed that – if a child has a certificate of a need for special education – care and educational institutions respect and implement the provisions contained in the Regulation of the Ministry of National Education (Journal of Laws; 2023, item 1798) on the principles of organising and providing psychological and pedagogical assistance in public kindergartens, schools and facilities.

The situation is much more complicated in the case of children who do not have any diagnosed disorders or developmental deficits but still require an individualised approach and the creation of a safe space for them following their developmental needs. This applies, for example, to children who are very talented, 'excessively' sensitive or have temperamental or personality traits that do not allow them to function well within the established kindergarten or school framework.

Some parents and educators mistakenly treat childhood as only a transitional stage that aims to prepare the child for adulthood. The human species has the longest childhood, which will determine its future life. Childhood is not only a transitional period to adulthood; it is the most important and beautiful time when a child should experience a good, meaningful life.

Weakened families and the lack of interpersonal bonds are especially noticeable in children and adolescents. Researchers claim that loneliness is contrary to human nature and that this contradiction lies at the genetic level. Therefore, loneliness may be as dangerous to health as smoking or alcohol abuse. The human mind has evolved to efficiently process social information to increase the chance of survival through cooperation with other members of the species (Cacioppo, Patrick, 2008).

It is not only about spending time together but, above all, about the quality of the time we spend with children as parents, grandparents and teachers. Today, even family celebrations do not serve this purpose. Celebrating being together, talking, sharing experiences, and learning from older family members is unfashionable. Most of them are meetings that do not fulfil their original role, i.e. they do not satisfy the need for social contacts and support provided by the presence of another person. Superficial behaviour, lacking a deeper conversa-

tion with attentive listening, empathy and reflection, causes us to experience another person through 'cellophane'. These are often events that look good on Facebook or Instagram, but in reality, an absent adult cannot raise a mentally healthy child.

This situation is complicated for the so-called highly sensitive children, who are often perceived as shy or introverted. High sensitivity is a feature, not a developmental disorder and does not require treatment or therapy, just space and support to experience emotions in one's way. As E. Aron (2017) writes: "Although it is known that high sensitivity is not a developmental disorder, it is not diagnosed, and therefore not treated, this group of people has common areas that require from adults: *more, more often, more, less or more gently*". Unfortunately, in everyday life, highly sensitive people are more often shamed than supported. They often hear: "this is not a reason to cry", "Don't bleat", "Nothing happened – why all this lamentation?", "Boys don't cry". Unfortunately, such lack of knowledge and stereotypes cause suffering for Highly Sensitive Persons (HSPs) living in various environments.

The article aims to describe a Highly Sensitive Child (HSC), considering his/her functioning in various aspects of everyday life, as well as to indicate methods of support in the home and kindergarten environment.

Based on the analysis of an individual case of a highly sensitive child, 30 years of observations of children made at work in kindergarten and early school education, and surveys among parents and teachers, an attempt was made to answer the question: How does a highly sensitive child function in the home and kindergarten environment?

General characteristics of a highly sensitive child

What is considered a high sensitivity? Each of us has met a person who is moved by every cloud, sheds tears over the fate of a trampled worm, and every argument with this person ends up with him/her crying. Of course, this is a very colloquial approach to high sensitivity because it is a very individual feature.

High sensitivity is the tendency to see more, notice details, feel the surroundings with a higher intensity, and the heightened ability to reflect more before acting as compared to people who do not have this feature.

High sensitivity is not the same as introversion; sensitive people are not naturally shy or neurotic, i.e., full of anxiety and depression (Aron, 2017, p. 40).

Elaine N. Aron (2021, p. 27) writes that sensitivity is innate. It is observed in children from birth and in animals where the genetic basis has been deciphered. This feature can be selectively enhanced in breeding.

Attention disorders are one of the many difficulties that highly sensitive children struggle with. Objects surrounding them are treated as distractors that disturb the concentration process and cause the child to become distracted, resulting in overstimulation.

It can be said that the HSP's body is designed to detect and understand everything that reaches it more accurately. Therefore, highly sensitive people

are characterised by faster reflexes (these are reactions usually coming from the spinal cord) and greater susceptibility to pain and the effects of drugs and stimulants, have a more reactive immune system and are more likely to suffer from allergies (Aron, 2017, p. 41).

We distinguish four aspects of high sensitivity as traits which must be present in a highly sensitive child. The first aspect refers to **deep processing** – visible to those around us as a symptom of the child being overstimulated.

Deep processing also manifests itself in the form of the child asking deep questions, using words that are complex for his age, wisely using a sense of humour, difficulty making decisions due to considering many options, and slowly getting used to new people and situations (Aron, 2017, p. 13). Brain research has shown that highly sensitive adults make greater use of parts of the brain that are involved in more profound or more complex processing (Jagiellowicz et al., 2011).

The second aspect is **the ease of overstimulation** – highly sensitive people, who are more aware of everything happening outside and inside, process things more thoroughly; therefore, they get mentally and physically tired more often than other people. HSCs notice everything new and think about it more intensely and, as a result, become overstimulated. These children perceive noise as physical harm. They complain about being cold, hot, having their clothes scratched, etc (Aron, 2017, p. 14). Generally, these children do not like parties or team games and have difficulty presenting their skills when being watched or judged.

The third aspect characterising HSPs is **emotional reactivity and empathy**. Simply put, it is the tendency to overreact to stimuli combined with the depth of processing. Emotions tell us what we should pay attention to and remember.

The HSC is more interested in everything, observes everything even more and learns more effectively (Aron, 2017, p. 17). Empathy allows such children to feel what other people feel, which is why they perfectly perceive, for example, a nervous atmosphere in the environment.

Highly sensitive people are more empathetic, creative, and cautious, and their intuition is highly developed and usually correct. People with highly developed sensitivity are often shy or perceived as unsociable. This may be because they are easily overstimulated. Bright light and many colours and sounds that reach a highly sensitive person from the environment often lead to irritability, headache, or withdrawal from activities.

One of the leading causes of this great sensitivity is hyperesthesia (Petitcollin, 2020, p. 35). People with hyperaesthesia have a significantly developed sensory system, which makes their senses more sensitive. For such children, the stay in kindergarten or school is frustrating. They are extremely sensitive to sounds from the surroundings; seeing all the details exhausts them. Others have more developed memory or perception, leading to remembering details and unimportant nuances, which overloads highly sensitive people.

It is hard to imagine living with hyperaesthesia when you do not experience it. Elaine Aron also writes that in addition to hyperaesthesia, highly sensitive people suffer from a deficiency of hidden inhibition, which means that “[...] if you do not consciously try to neutralise all the stimuli that surround you, you will have to endure them” (Petitcollin, 2021, 31).

The last aspect is sensitivity to subtle stimuli and attentiveness to nuances/subtleties. This trait manifests in attention to detail, subtle sounds, touch, smell, and other delicate stimuli. In Highly Sensitive Children (HSCs), this trait is visible in paying attention to changes in people or places’ appearance, reacting to subtle smells, picking up delicate sounds, such as birdsong and feeling pleasant textures of a material, e.g., soft, plush. Noticing the appearance of food, the details of its arrangement and the aesthetics of its presentation. HSCs pay attention to the tone of voice, glances, snubs, fleeting glances, and small encouraging gestures. The HSP’s nervous system must be designed to respond to subtle experiences, but as a result, it takes longer to return to a state of balance after reacting to intense stimuli. Children’s high sensitivity implies numerous difficulties in everyday life. The minimalist characteristics of HSC were presented to illustrate what children and parents of highly sensitive children face.

Individual case study of a highly sensitive child (HSC)

Diagnostic tools used:

- observing and talking to the child during their stay in kindergarten for 3 years,
- in-depth interviews with the mother,
- interviews with kindergarten teachers,
- analysis of the child’s work products.

The pregnancy was normal. The baby girl (her name abbreviation: K.) was born naturally at 40 weeks of pregnancy, APGAR score 10/10, and was breastfed for over two years. The Sensory Integration (SI) diagnosis showed no sensory integration disorders, only information about high sensitivity.

K. is 7 years old and has started studying in the first grade, preceded by an adaptation process. Adapting to the new school was easy, and the child felt safe

in the new environment. The fundamental problem in K.'s behaviour is the loss of security in new situations and the fear of separation from her parents. This child functions best when there are no strangers in her environment. She does not like sudden and significant changes, but recently, she has been coping with them better and better.

The interview with her mother shows that K.'s parents thought from the beginning that their daughter had symptoms of High Need Babies, which they had not observed in other children they knew. Caring for K. required the parents to reorganise their lives and adapt to the girl's needs. The parents are very aware of the girl's needs and have extensive knowledge about their daughter's highly sensitive personality (HSP). They also observe numerous symptoms of high sensitivity in their 4-year-old son. The girl's mother is also a highly sensitive person, and in the test, she obtained 24 answers out of 27 confirming the characteristics of HSP.

Special needs became apparent in the first days of K.'s life, as she slept briefly and alertly. At 6 months, K. fell asleep and slept only in her mother's arms in a specific position, and it was impossible to separate the girl from her mother. Later, her parents' hands turned into a swing, in which K. slept until she was four years old. She is 7 years old and sleeps alone but wakes up every night and checks by asking or touching if her parents are nearby. Her parents did not use the stroller on walks. She was carried in their arms and in a scarf and hybrid carrier because she responded to attempts at separation and putting her in the gondola by crying incessantly. To this day, after an eventful day, K. has difficulty falling asleep and waking up at night.

The socialisation process of this girl was complicated. She did not like short trips because she did not want to sit in a car seat. The hour-long journey to visit her grandparents was challenging as she tensed and cried during the car ride. K. was afraid of people and children. Her parents walked around the playground for many weeks before she wanted to go there. She was afraid of slipping on the slide, and if a child was behind her, she was afraid of close contact.

K. attended a club preparing children for kindergarten for several months but never left her mother's side and crossed the so-called 'carpet zone' where only children were allowed. Her mother had to stay on the edge of the carpet all the time so that she could be in physical contact with it. She usually stiffened under the influence of glances from people she did not know.

Even though K. attended classes in the children's club to prepare for kindergarten, the adaptation in the first kindergarten was unsuccessful. The girl entered kindergarten at the age of three in October. After several meetings at the kindergarten playground and attending the facility for 1-2 hours weekly, K. could not stay there alone. Additionally, the lack of understanding of the girl's difficulties (HSC syndrome) by the teachers, as well as their lack of support for the parents, resulted in her giving up attending kindergarten. After four months, K. be-

gan acclimatising to a new kindergarten with fewer children, which also had some problems. For 3 weeks, K.'s father sat in the kindergarten corridor working on the computer. After sitting in the corridor, there was another stage of sitting in the yard, a little farther. When the girl lost her sense of security, she went to her father for conversation and hugs. During the 3 years of attending kindergarten, K. was often ill, and each return to the facility required readjustment to the conditions.

The interview with her mother and the teachers' observations show that K. is quickly overstimulated, even if situations involve positive things. She does not like to be surprised by anything and needs to be prepared for surprises. She does not like noisy places. At home, she can use noise-cancelling headphones, e.g. when vacuuming. She is very sensitive to pain. She prefers quiet play. K. reacts poorly to the threat of punishment or persuasion and learns better with gentle instructions and explanations. She notices the suffering of others but is not particularly empathetic. She is very sensitive to her needs.

At home and in kindergarten, she asked many difficult questions that led to reflection. K. had a rich passive and active vocabulary and used complicated words. In kindergarten, she was very good at identifying and talking about her emotional states, e.g. "I know it's not a reason to cry, but I miss my mom", "I miss my mom and dad very much", "My mom misses me too?", "Can I hug?" "I need to hug".

If other children had difficult situations in kindergarten, e.g. the teacher did not allow the child to do something, gave strict attention, or spoke unpleasantly, the other child's experiences stayed with her for a long time. Experiences from kindergarten became a topic of conversation at home in the form of ideas and triggered fear of going to kindergarten. K. had a strong need for approval that the things she was doing were perfect and noticed by others; teachers' praise was vital to her, but it was formulated in an original way and with justification. There were also moments when she wanted to be only with adults in kindergarten: "Can I sit here with you?".

K.'s mother stated that raising a highly sensitive child is a great challenge and requires them to entirely focus on the children and their needs, adapting their lives "to suit them". The initial lack of understanding - in the immediate environment and in the kindergarten - of the needs of the HSC made it much more difficult for the parents to raise their daughter. They heard the comments, "You taught how to carry, so carry it", "let her cry; she will get tired and fall asleep on her own; the baby rules you", "leave her crying, and she will stop", "don't give in to her", etc.

When diagnosing K.'s high sensitivity, it can be concluded that it is characterised by each of the four aspects of a highly sensitive personality, i.e.:

— **Depth of processing;**

- A tendency to consider various actions in detail, develop various scenarios, and wonder: “What if we do this and we cannot do otherwise? Why?”
- longer time (compared to peers) to process new information, but also more extended time to get used to new clothes, toys, and changes in the environment: “Who was rearranging my things?”
- slow (compared to peers) getting used to new people and situations (due to the need to look at them and think about them);
- practical learning from her own experiences; wants to experience situations on her own, does not trust the assurances of others;
- concluding experience to increase operational efficiency and her sense of security;
- apparent slowing down of activity and inhibition, usually taking the form of observing a situation, e.g. playing before engaging in it (watches others for a long time before joining in the fun, does not like imposed roles in play);
- asking thought-provoking and reflective questions (e.g. regarding death, what happens to a person after death, why he dies, she is not satisfied with superficial answers and explanations);
- using words that are complicated for her age;
- difficulty making decisions due to considering too many options;
- remembering a large number of details of observed events, situations and phenomena, especially regarding other people’s emotions, facial expressions, and tone of voice;
- paying attention to non-obvious elements of the situation that most people do not pay attention to (teacher’s smell, nail colour);
- analysing and searching for relationships and similarities between the current situation and previous ones, building associations, comparisons, and metaphors.

— **emotional reactivity combined with empathy;**

K. carefully observes and analyses is interested in the surrounding reality, and overreacts with emotions. Her arousal threshold is lower than that of less sensitive peers, her emotions are more intense, and their expression is stronger, which is why, as an infant and at preschool age she often burst into tears, got excited quickly and slept for a short time. She still experiences intensely both problematic and pleasant emotions while perfectly sensing and responding to an adult’s mood/changes in mood. When the teacher was angry or dissatisfied, she felt the atmosphere in the kindergarten group was tense. She showed tension while performing tasks when someone was watching her work. She strives for perfectionism and reacts strongly to even the slightest mistake.

- **awareness of subtleties** – i.e. paying attention to details
 - K. reacts strongly to smells, sounds and touch. She notices changes in the appearance of rooms and subtle changes in clothes, make-up, smell and hair colour, e.g. of teachers. She liked kindergarten productions and could learn even extended roles quickly. However, the tense atmosphere of rehearsals and preparations while setting up on stage made her reluctant to watch the performance. She reacts to changes in the tone of voice, fleeting glances, and small gestures, detects gestures between, e.g. teachers and reads their intentions.
- **Overimultation** is another characteristic feature of HSCs, a natural consequence of the previous three.
 - K. is aware of what is happening to her and around her. She processes other people's situations and behaviours more deeply and thoroughly, leading to faster mental and physical fatigue than her peers. K. notices everything new and thinks about it more often and more intensely than other children. Therefore, it becomes overloaded and tired faster, which, according to Aron (2002), is a consequence of more profound and thorough processing.

The parents of the described girl have profound awareness and knowledge of high sensitivity and all the consequences associated with it. These are people who, on their initiative, educate themselves in this area and are willing to sacrifice a lot to create an appropriate space for their children to develop. They use an educational system based on attachment parenting, i.e. responding to the child's needs and self-reg (Self Reg is a self-regulation method that helps the parent understand the child well enough to appropriately respond to its needs), from which they derive real help.

It is extremely important nowadays when parents often look for "subcontractors" to raise their children, handing them over to nannies and teachers. A conscious parent who provides an atmosphere of love and acceptance and builds a relationship with his child – this is the best thing he can do for his offspring.

High sensitivity of the child from the perspective of teachers

High sensitivity is an entirely new issue for many teachers and parents. The symptoms of HSCs are downplayed and attributed to their shyness, inappropriate upbringing, or other factors. Meanwhile, kindergarten and school are a real training ground for these children, a survival camp where they must fight daily. Traumatic experiences related to their stay in kindergarten or school do not allow them to unleash their potential and develop and learn properly.

Majewska (2022) writes that the so-called “demanding since birth” is more complex with high-sensitivity children. They need more involvement from their parents. From the beginning, these children demand, for example, rocking, carrying, and being constantly close to their parents. Even though society’s awareness of high sensitivity is increasing, and people often talk about the so-called “high needs baby”, i.e. children who from birth demand more attention from their parents, their closeness or interaction (Majewska, 2022, p. 23), the level of knowledge of teachers and parents is insufficient. According to a survey conducted by 45 teachers (Wodejko, Leszcz-Krysiak, 2023), most of them associate the term “high sensitivity” with being overstimulated (66.7%), shyness (44.5%), prone to crying (35.5%), being an introvert (33.3%).

There were also such associations of a highly sensitive child as “anxious”, “extrovert”, “being the centre of attention”, “quiet”, and “special”. E. Aron has often written that most people mistakenly identify sensitive people as introverts, which is a very illusory and misleading statement.

In line with the HSP’s theory, respondents answered that high sensitivity is a genetic feature (47%) and a temperamental feature (68%) of the respondents. Satisfactory is the fact that most respondents know that high sensitivity is not a disorder. The 80 % of surveyed teachers stated that they lack knowledge on how to work with HSC and support parents when they ask about their child’s behaviour that concerns them. The respondents pointed out that knowledge about HSP is not widespread, it is difficult to access, and there is no training in educational centres. In the surveys, teachers wrote, for example: “I believe that there is no extensive literature on this topic. I get many tips for my work by collaborating with other specialists, e.g. SI therapists, physiotherapists”, “There is still little talk about it”. “I think that even the term ‘high sensitivity’ is denied that it is an invention”. Such answers prevailed in the surveys.

Most teachers in the research responded that a highly sensitive child needs support in everyday life, understanding and empathy, as well as attentiveness and kindness. The knowledge and awareness of people working with children must be high to say that teachers are competent and qualified. In the literature on the subject, authors have repeatedly emphasised that when these children are provided with an appropriate space to give them wings, they will open up and flourish.

Supporting highly sensitive children

When a sensitive child is placed in a large group of children with a teacher who is entirely unable to help him or create a suitable space, it is safe to say that this will have negative consequences for his development in the future. Lack of

space for experiencing emotions, lack of willingness to help in everyday activities, e.g. establishing relationships with peers, lack of empathy, and punishment are just some of the mistakes often made by teachers. Agata Majewska and Elaine Aron, among others, write that the lack of an appropriate environment and space may even result in anxiety and depression in sensitive people in the future. It also translates into lower self-esteem and self-esteem of highly sensitive people.

Separation from parents, trips or trying to spend the night without them is a great challenge for sensitive children. It is a significant change that they are not ready for a long time. They like routine, and changes should be agreed upon together.

Children who are excessively shy and self-conscious, who experience a lack of response to basic needs from adults, later grow into people full of complexes and lacking self-confidence. HSCs, but also other children, spend at least half of the day in institutions, and the teacher takes an active part in the process of their upbringing, so it is vital for educators to create an atmosphere of acceptance and space for optimal development.

Elaine N. Aron (2017, p. 153) lists four keys to raising a joyful HSC:

1. **Caring for self-esteem** – the children must feel loved, but at the same time, they must be corrected and disciplined in the right way. Children with high sensitivity treat comments addressed to them as information about their own value. As a result of the excessive criticism they often encounter, they may conclude that they are usually wrong. They also need a social sense of value, i.e. the awareness that they can build positive relationships with peers and loved ones. What is essential is the physical sense of value relating to one's appearance and skills. They need to believe in their motor skills, that they will master new skills and be able to participate in fun and games. The last aspect creates an intellectual sense of self-worth – they must be sure that, in some areas, they are as good as other people of the same age.
2. **Reduction of shame** – Highly sensitive children experience shame much more strongly and are prone to experiencing it. Therefore, one should avoid shaming one's children and comparing them to others. Parents must remember not to convey hostile messages through jokes. It is crucial to ensure that the HSC does not feel that it is the cause of any family problem. Because they are focused on themselves, HSCs may believe that they cause conflicts in the family or other difficult situations.
3. **Wise discipline** – working on disciplining and observing the norms and rules of HSCs is particularly difficult and requires a lot of adult tolerance and wisdom. Standards and methods of discipline, especially for the HSC, should be consistent between family members, the kindergarten, and the school, which requires close cooperation and understanding.

4. **Skilful conversation about sensitivity.** HSCs quickly notice that they differ from their peers, and age-appropriate conversations and explanations are essential. A clear indication of what aspects the child can change and a realisation of what cannot be changed must be accepted. The parent must discuss the child's sensitivity with caregivers and teachers (Aron, 2017, pp. 153–191).

Discussion

Researchers on high human sensitivity emphasise that HSP should not be confused with neuroticism. In their scientific investigations on HSP, Acevedo *et al.* (2014) adopted the following eligibility criteria for the research group: age 22–40 years, no use of antidepressants, no anxiety, social or personality disorders, no generally good health, no contraindications to magnetic resonance imaging, stable relationship and private life status. Such strict criteria resulted in approximately 34% of the original number of people being excluded for not meeting the criteria. The research method assessed the degree of people's reaction to seeing photos of close people and strangers expressing three primary emotional states: positive, negative and neutral. After a year, the study was repeated. Across all conditions, HSP scores were associated with increased brain activation of regions involved in attention and action planning (in the cingulate and premotor areas). For happy and sad photo conditions, sensory processing sensitivity was associated with activation of brain regions involved in awareness, integration of sensory information, empathy, and action planning.

Many researchers, including a team led by Bas in their study (Bas *et al.*, 2021), point to the interpenetration of research concepts regarding Sensory Processing Sensitivity (SPS), Highly Sensitive Person (HSP) and Highly Sensitive Child (HSC) conducted by various scientists. They also emphasise the existence of limitations both to the HSP scale, promoted by Aron (2017, 2021), and to all theoretical considerations. The scale's content validity always limits the interpretation of the results of a research questionnaire. The results of the HSP questionnaire differ from current theories in that the HSP scale overemphasises overstimulation, while the depth of processing is only indirectly captured in the aesthetic sensitivity component (Greven *et al.*, 2019). Finally, although SPS theory has been updated based on empirical evidence, certain hypothesised main features have not yet been theoretically fully developed. For example, empathy consists of several characteristics, such as affective and cognitive empathy (Keyesers, 2011), which involve distinct neural pathways (Yu, Chou, 2018); however, the role of empathy in SPS remains unclear, as well as which aspects are essential in SPS. Therefore, further research is needed to inform the scientific debate on which key features are essential for HSP, HSC and SPS.

To summarise, it should be stated that when considering the role and challenges faced by parents and teachers of children initially classified as HSC, the most crucial problem will be distinguishing between a personality endowed with high sensitivity and a personality showing neurotic features requiring specialised medical assistance.

Conclusions

The results of exploring the issue of children's high sensitivity based on literature analysis, individual case studies, observations and surveys of teachers' and parents' opinions lead to a broader interest in the functioning of HSCs in the family and kindergarten environment. The primary condition for increasing the level and effectiveness of support provided to HSCs is to improve teachers' competencies in identifying features of high sensitivity and ways of working with HSCs. Preparation is essential to teachers' qualifications, including practical skills consistent with current psychological knowledge.

It is necessary to select people for the teaching profession, which has not existed for a long time, to include people with predispositions to work with children, empathetic, sensitive people who desire self-development and self-improvement. Unfortunately, currently observing the decline in the prestige of the teaching profession, this is becoming a "cool dream".

The teacher should be able to create an atmosphere conducive to the well-being, participation and activity of children and students. He should be a guide to the world of emotions and an advisor. The task of educators is to help the child discover the needs of his body and psyche and then provide support on how to achieve them. It is facilitated by cooperation with parents who know the needs of their HSCs best.

Kindergartens and schools must have appropriate, safe physical space, e.g. warm and gentle colours, appropriate lighting, without unnecessary decorations, and a place to calm down. Moreover, it is necessary to organise a socio-emotional environment with numerous components to ensure the satisfaction of the child's needs and optimal development. It includes as many activities as possible in small groups, avoiding work determined by time pressure, showing understanding and support for the child's emotions, not interpreting the child's crying as a sign of weaknesses, avoiding labels (difficult child, tearful child), rewarding the child for making efforts, teaching how to recognise and name emotions and how to communicate in a group.

It is necessary to move away from education that treats the child as an object to be processed and adapted to generally accepted patterns, where there is no room for individuality and only the curriculum counts.

In our society, too much emphasis is placed on intellectual development. The result is a lack of security, fear and running away from one's emotions. Lack of acceptance of one's different emotions translates later into not knowing how to deal with different situations in life. Therefore, emotional education is essential for children and young people and parents and teachers since most of them grew up when showing emotions and spontaneity was undesirable.

A vital element is the quality of education for pre- and postgraduate pedagogy students, enabling them to acquire the latest extensive knowledge of psychology and pedagogy. An essential component of educators' qualifications is methodological preparation in using work methods and organisational forms in working with children with special needs and current educational challenges.

For this purpose, it is worth using non-authoritarian trends in education aimed at integrating the cognitive and emotional spheres of learning, combining the teaching content with the student's personality, and noticing the interaction of the human body and psyche with the social and natural environment.

If 20% of people are HSPs (Aron, 2017, p. 39), therefore the care and upbringing system cannot ignore the problem of this group of children. It is necessary to identify an HSC in the home, kindergarten, and school environment and to create an appropriate space for their development and life. As Śliwerski (2016, p. 29) writes: "First, they have to acquire a CHILD, psychosocially 'attach' him to themselves, to undertake the common effort of existence and development with him. They must learn from each other, get to know each other to respond to each other's expectations and needs".

According to Elaine N. Aron (2017, p. 25): "The world needs well-mannered, sensitive people. I desperately need them". However, for HSPs to use careful thinking, deep feeling, and noticing subtleties, thanks to which they perceive the world from a broader perspective, they need courage. This courage is needed to speak up and resist when non-sensitive people do not see, do not think, or feel deeply enough (Aron, 2017, p. 25). Implementing these postulates may create a safe environment for children where high sensitivity will be a gift, not a curse (Sand, 2020).

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Dziecko wysoko wrażliwe wyzwaniem dla rodziców i nauczycieli – studium przypadku

Streszczenie

Celem niniejszego artykułu jest przedstawienie charakterystyki dziecka o cechach wysokiej wrażliwości (DWW) oraz jego zachowania i funkcjonowania w różnych obszarach życia codziennego. Ponadto w artykule została zaprezentowana analiza indywidualnego przypadku siedmioletniego dziecka wysoko wrażliwego oraz nauczyciela-wychowawcy z trzydziestoletnim doświadczeniem w obserwacjach dzieci w przedszkolu i w trakcie wczesnej edukacji. Badania zostały pogłębione o wynik badań ankietowych przeprowadzonych wśród rodziców i nauczycieli, które posłużyły do odpowiedzi na pytanie: Jak dziecko o wysokiej wrażliwości radzi sobie i funkcjonuje w środowisku domowym oraz przedszkolnym i jakie istnieją sposoby wspierania jego rozwoju w tych kontekstach?

Analizę zebranego materiału wykorzystano do zaproponowania metod pracy z dzieckiem wysoce wrażliwym z uwzględnieniem rangi współpracy pedagogów i opiekunów służących wsparciu takiego dziecka.

Słowa kluczowe: dziecko wysoko wrażliwe; wsparcie; przedszkole.