

# The curse of being a “gifted child”

KOUSHIN UNBER

*If you, as a kindergartener, thought classes were boring and lengthy, found yourself finishing sums way before the rest of your classmates, and passed tests with flying colours with minimum effort put into studying the night before, you tick all the boxes for being what the internet calls a “gifted child”.*

While being a gifted child may seem enviable, the world often seems to overlook the difficulties this specific group of children face as they grow older and advance in their academic stages. These children usually have the innate ability to comprehend lessons and apply themselves in studies, along with being able to get to get away with spending a minimum amount of their time studying. That is where the biggest curse of being gifted comes in – the inability to develop proper study habits.

Often, these children realise that they do not need to study as much as their peers do in order to achieve the same grade, especially during the initial years of schooling. Though it seems like an advantage early on, it is only when they start settling into more advanced classes that they realise they have actually



DESIGN: SYEDA AFRIN TARANNUM

begun to fall behind.

The student in question will continue to use their intuition to pass tests with minimal effort until the time comes when their intellect is no longer sufficient to handle the schoolwork and tests. And this usually happens when 8th grade rolls in, where the coursework becomes tougher, where regular, persistent studying is required in order to understand the lessons and do well in the tests.

And so this perceived gifted child now suffers from burnout and stress, as they struggle to understand why they are having a hard time coping with studies, and maintaining their usual grade levels.

Moreover, the superficial praises and glorification

of this group of children actually tend to do more harm than good in the long run. The words “You have a lot of potential,” are ones that are almost universal for every child perceived to be “gifted”. They are never taught how to truly unlock that “potential”. Parents and teachers inundate these individuals with compliments and place the burdens of expectations on them, but they never receive the proper professional assistance required to truly perform well.

You as a six-year-old are not mature enough to realise that you need to develop a proper work ethic in order to keep up with the rising difficulty of school all the way to college. The ultimate solution to this problem is the simple acceptance of the fact that only hard work can beget success. A head start will only get us that far if we do not continue to finish the rest of the road.

*Koushin is your average leftist e-girl with crippling imposter syndrome. Send her video essays on indie films at: fb.com/omgitsunber*

# Why “fake it till you make it” works

AFIA IBNAT

The endless spiral of self-doubt that forces us to question our competence and sabotages the opportunities we could’ve taken is something that holds many of us back. Lucky for us, there’s a way that could get us out of this anxiety-induced downward spiral.

You’ve probably heard of the oft-cited advice “Fake it till you make it.” Over the years, the phrase has lost its novelty and now sounds like clichéd advice you’d find in a pastel-themed carousel on your Instagram explore page.

Fake it till you make it, or counter-attitudinal advocacy in social psychology terms, is essentially a method of tricking yourself into thinking you can accomplish the things you set your heart out to do. Once you communicate something counter to what you believe in, it can slowly help change your original belief.

Now, this isn’t supposed to be used in an “Anna Delvey scamming the entirety of New York City” kind of way, but more in a “I don’t think I can do this but I’ll trick my brain into thinking I can” kind of way.

Here’s how this works: you catch yourself losing sleep over something you just can’t get yourself to do. It can be a presentation that you’re blanking on or a paper that isn’t writing itself. This is when you hear a record scratch in your head, stop in your tracks, and deploy your weapons.

Imagine that you’ve hired a lawyer and their sole job is to convince a jury of all the reasons you can finish the task you’re currently struggling with. Your lawyer has to use everything in their arsenal to



make your case – maybe you’ve previously crunched before your deadlines and made it work, maybe you’ve practised your speech so many times you can now recite it in your sleep, or perhaps you’re just an all-around remarkable person who’s dead set on achieving their goals.

Now that you’ve established a case and sufficiently empowered yourself, it’s time to actually put in the work. When you end up delivering your speech after you thought you were too shy to speak in

public, your brain registers public speaking as a skill you possess.

When you force yourself to argue for something you don’t believe in, such as yourself, your brain ends up believing you because it hates pegging you as a liar. Your mind can soften towards views you’re arguing for – doesn’t matter whether you initially believed so or not. Repeated reaffirmation convinces your brain to forgo the previous mindset where you underestimated yourself.

Constantly suffering from self-doubt and second guessing your abilities can get tiring. In a world where lawyers are expensive to hire, we need to be our own advocates. In the end, perhaps tricking ourselves into unlocking our potential is one of the most authentic things we can do.

*Afia Ibnat is trying to gaslight herself into being productive. You too can gaslight her at afiaibnat09@gmail.com*

# DAZED AND CONFUSED

*The adolescent reproductive health conundrum*

TASNIM ODRIKA

“I had never really put much thought into what reproductive health is and this interview is the first time I actually decided to Google what the term really means.”

This was the response I received from 18-year-old A Level candidate Eliza Tahmida Sultana, when asked about what she knew about the topic of reproductive health.

This is a tale as old as time. Lack of information regarding an important developmental aspect of one’s life leading to helplessness and confusion.

According to a report published by UNICEF, one-fifth of Bangladesh’s population is comprised of adolescents. Despite being such a large portion of the population, there is lack of services tending to their health problems. Adolescents in our country still have limited knowledge about reproductive health issues and limited access to accurate information. And while textbooks and curriculum include content about reproductive health, schools and teachers are by and large reluctant to teach these topics. As a result, the majority of adolescents have no idea about the changes associated with puberty (e.g. menstruation or wet dreams) until they experience them.

When it comes to any sort of education on reproductive health, 17-year-old O Level candidate Shanum Sarkar shared, “We had very strictly educational Biology classes from 10th grade. Before that, we were not even allowed to flip through the reproduction chapter in our books.” She further adds how bizarre it was since many girls would start going through puberty at the age of nine.

This seemed a common response from the various teenagers interviewed for the article where education of reproductive health by schools was restricted to the pages of the Biology books only, and the teenagers ended up merely learning bookish knowledge of the reproductive organs but nothing about their reproductive health.

Besides schools, the other place where adolescents seek information from is their parents, but the scenario there also seems to be bleak for the majority of the teenagers.

“I didn’t know about menstruation until fourth grade when a classmate told me about it, and all she knew about it was that it was a normal phenomenon and that it ‘happens to every girl’.” When I got my first period, I was just handed sanitary napkins and was taught how to dispose of them and that was the extent of the information I received. I was not told what colours or changes in the consistency of my period might indicate or what not having it at some point might mean. I also wasn’t sure how children were conceived until seventh grade and the way I learned that definitely isn’t commendable,” mentioned 18-year-old Fabiha Afifa, student at Maple Leaf International School.

The last resort for these teenagers when it comes to receiving information about their own bodily issues would be healthcare providers. Even there, dispersing relevant information seems to be hurdled with stigma and proper information regarding reproductive health seem to be confined to married individuals only. Doctors are often visibly reluctant



DESIGN: KAZI AKIB BIN ASAD

on sharing pertinent information with adolescents.

For Shanum, an undiagnosed eating disorder-related issue leading to disruption in her menstrual cycle had required her to visit a gynaecologist.

“The first thing the doctor asked me was my marital status. Considering I was 13 or 14 years old back then, I found the question to be quite absurd and it made me wonder why they couldn’t just ask if I was sexually active,” she recalled.

Apart from the lack of knowledge about tending to their own reproductive health, puberty itself becomes a confusing period to navigate through for many. With so many changes taking place in their bodies, many find it hard to understand which changes are normal and which ones aren’t. Although many of the adolescents spoken to for the article did seem to have a solid grasp of the biological basis of puberty, they still struggled to cope with the changes themselves not having an adult with the proper knowledge to walk them through this difficult time period.

“During my puberty, I suffered from insecurity because I had hair growing in places where girls don’t usually have hair,” commented Eliza, adding that it was a hormonal issue but she felt the need to cover these hairs out of embarrassment. On the other hand, Shanum disclosed how acne during her teenage years and a growth spurt that everyone would point out had made her feel ashamed and uncomfortable.

But, if not from schools, homes, or healthcare providers, where were these teenagers getting their information from? It seemed social media posts and Google searches were their main teachers. For youths barely starting to traverse the big bad world of the internet, this clearly is not a sustainable option.

For male adolescents, the situation seems slightly direr with an even lower

level of awareness regarding male reproductive health. Many female participants spoken to also had the idea that reproductive health was confined to the females.

This idea was reiterated by 15-year-old O Level candidate Inqiad Bin Ali’s response, where he said, “Personally, I thought reproductive health is related to the processes that lead to conception and hence initially, I used to think it was only relevant to women. But I later found out, due to my own puberty and Biology lessons, that men have a lot to learn as well.”

Although being just as confusing, the experiences of male puberty are slightly different than that of a female.

“I was aware that growing a beard was a common phenomenon during puberty but that’s something that has not happened to me yet. My first ejaculation was a terrifying experience for me. The growth of hair from around my genitals and armpits made me feel embarrassed as well,” Inqiad goes on to share his experience going through puberty. He also shared how he kept all these facts hidden due to shame.

Shame regarding these changes is not uncommon and the stigma surrounding reproductive health seems to keep coming down to this idea of shame. This shame disrupts conversation about topics of reproductive health which further leads many adolescents to have undiagnosed health complications.

In a recent study by Kamrul-Hasan, ABM et al., polycystic ovary syndrome (PCOS) is an emerging problem for Bangladeshi adolescents with 88 percent of the patients involved in the study having oligomenorrhea, 2.3 percent having primary amenorrhea, 6.9 percent having secondary amenorrhea, and 2.9 percent having polymenorrhea. The lack of understanding and knowledge also leads these adolescents to conceal the most basic bodily function.

Puberty for 17-year-old Aryana Zaman\*

studying at Bangladesh International Tutorial (BIT) started at the age of nine. “The first time I got my period, I thought it was some kind of a disease resulting from dehydration. I was pretty scared at first and thought I was going to die. I hid the situation from my family for the first two days but obviously, they soon found out. And, although my family was supportive, I don’t think I received enough information about the whole process and I was even told to hide my menstruation from my friends and teachers,” she said.

The stigma is further extended to adolescents not conforming to the binary identities of males and females as most healthcare services are designed in a very binary manner. This population ends up facing unique barriers to receiving care due to being so vastly under-researched, according to Moseson et al.

It is crucial to impart proper knowledge to adolescents regarding their bodily changes. According to Inqiad, “If society had taught me about the physical and emotional changes I would go through during my teens, puberty would have been a lot easier to handle. Moreover, I would have been able to steer clear of harmful misconceptions.”

\*Name has been changed for privacy.

## References

1. Population Council. (2004). Improving Reproductive Health of Adolescents in Bangladesh.
2. TouchREVIEWS in endocrinology. (2021). Clinical, Metabolic and Hormonal Profiles of Bangladeshi Adolescents with Polycystic Ovary Syndrome.
3. Obstetrics & Gynecology. (May 2020). The Imperative for Transgender and Gender Nonbinary Inclusion.

*Tasnim Odrika has only one personality trait and that is cats. Share ideas for new personality traits with her at odrika\_02@yahoo.com*