

Teaching Students with Tourette's Syndrome

Definition:

An inherited, neurological disorder characterized by multiple involuntary movements and uncontrollable vocalizations called tics that come and go over years

Some statistics you should know include:

- The symptoms manifest before the age of 18
- Tourette's Syndrome can affect people in any ethnic group
- However, males are 75% more likely to have TS than females
- 100,000 have full-blown TS
- TS does not necessarily affect intellectual or academic potential

Symptoms of Tourette's Syndrome

- Facial tics and, most commonly, eye-blinking
- Nose twitching and grimaces
- Over time, motor tics can develop into head-jerking, neck stretching, foot stamping, body twisting and bending
- Clearing throats, coughing, sniffing, grunting, yelping, barking or shouting

Rare Symptoms include:

- Coprolalia: involuntary shouting of obscenities and uttering strange and unacceptable sounds, words or phrases
- Echolalia: constantly repeating words of others and touching other people excessively or repeating actions obsessively
- Self-harming behaviors: lip and cheek biting and head banging against hard objects

Because students with Tourette's syndrome may have different types of tics, it is important to know how they are classified.

Simple Tics

- ✓ Sudden, brief movements that involve a limited number of muscle groups
- ✓ Occur in a single or isolated fashion and are often repetitive
- ✓ Examples include: eye-blinking; shoulder shrugging; facial grimacing; head jerking; yelping and sniffing

Complex Tics

- ✓ Distinct, coordinated patterns of successive movements involving several muscle groups
- ✓ Examples include: Jumping; smelling objects; touching the nose; touching other people; Coprolalia; Echolalia; or self-harming behaviors

Many of you are probably wondering if people with Tourette's syndrome can suppress or control their tics.



People with TS can sometimes suppress their tics; however, the effort is much like holding back a sneeze.

Eventually tension mounts to the point where the tic escapes.

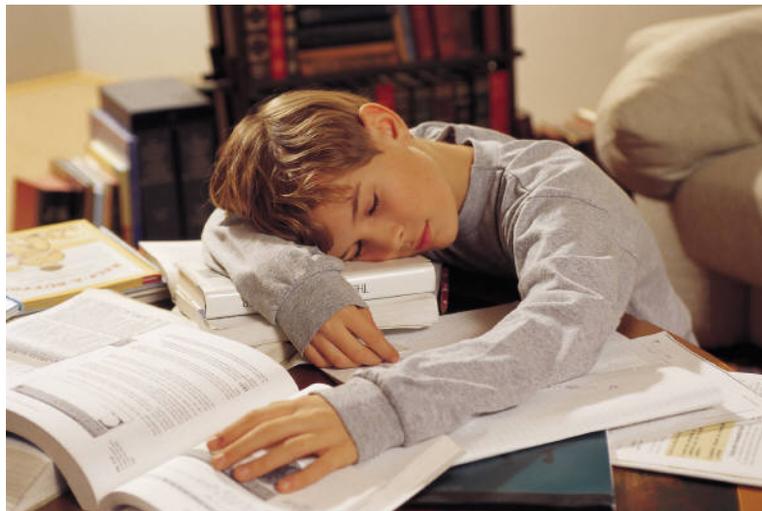
Important Points to Remember:

- Tics worsen in stressful situations
- They decrease when a person is relaxed or absorbed in an activity
- Tics decrease in most cases during sleep

The cause of Tourette's syndrome is unknown. However, there is evidence that it can be hereditary

Also, teachers need to remember that other disabilities can occur with TS:

- ✦ Obsessive compulsive disorder
- ✦ Attentive Deficit Disorder (ADD) or Attention Deficit Disorder with Hyperactivity (AD/HD)
- ✦ Learning Disabilities
- ✦ Sleep disorders



In fact, the accompanying disorders can be more disabling than the tics themselves; therefore, teachers need to remember that students with Tourette's syndrome might have other aspects of their lives affected. You might imagine how embarrassing it is to have such a disability, so please be willing not only to accommodate the tics but to also accommodate the other disorders that might occur.

→ You have just read lots of information about Tourette's syndrome in general. But, you are probably wondering what kinds of accommodations you can make for your students. Here is a list of categories and their respective accommodations.

→ However, please remember that not all accommodations are going to help every student in every situation.

→ These items are just suggestions.

First day of school:

- Introduce the student with TS (with permission of the student and family) to the rest of the students on the first day
- If the student with TS feels comfortable, he/she can describe the condition to the class
- Make sure the other students understand that tics will happen during the school day and the student with TS cannot help the tics
- Whether or not the student with Tourette's is in the room at this point is up to the child and the parents.
- As teachers, do not encourage the child to hold tics in; this can make it much worse
- Make sure the rest of the class understands that just because one child swears, that does not mean they can swear

Material Presentation:

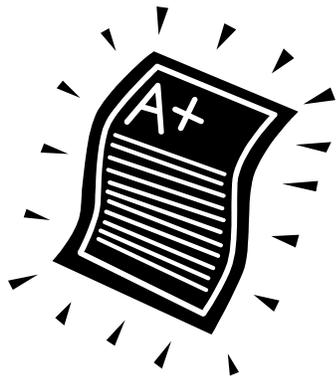
- Use as few words as necessary when explaining
- Check for understanding (have the child repeat directions for a task back to you)
- Present a syllabus for the whole quarter, so the student knows what is expected of him
- Use phrases like "This is important" and "Listen Carefully"
- Avoid lots of visual distractions in the room and don't sit them near the door or window
- Have a cue (both you and the student know) that can be given if he/she needs to leave the room. Provide a certain place they may go if needed

Classroom Environment:

- Use seating chart to allow for any movement tics
- Eliminate all unnecessary items from the student's desk to prevent distractions
- Have a duplicate set of text books for the child to keep at home. (Great to use if child misses school or is having a hard time concentrating)
- Use a study corral if needed

Transitions:

- Give students ample notice that a transition is coming
- Provide a written schedule on the desk of the student who has TS
- When walking through the hall, make sure the student with TS is at the front of the line so the student does not get distracted



Tests and Grading:

- Give extra time to finish test or turn in homework if necessary
- Reduce amount of work (e.g.: odd numbers or half the problems)
- Allow extra time, read the test to them, allow oral responses, etc
- Provide movement breaks during the test if necessary
- Part of the grade could be based on individual effort or improvement
- Allow student to retake the test (rework problems) for a passing grade
- Avoid ALL timed tests



Classroom Behaviors:

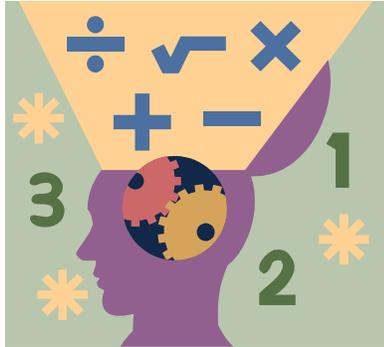
- Sit the student with TS next to a responsible student so distractions are limited (Be careful that this does not negatively affect the other student)
- Reward forgetful students for remembering rather than punish them for forgetting
- Ignore behaviors that are minimally disruptive
- Provide modifications for behaviors that are disturbing (e.g. foam on desk if they tap they tap their pencil, tennis balls on chair legs).
- Have a code or private signal to use for the student when his/her behavior is unacceptable

Organization:

- Establish a daily routine and remain consistent
- Teach the student organization and self-management skills
- Have clearly defined rules and be consistent enforcing them
- Write the due date at the top of worksheets/assignments
- Highlight important ideas so worksheets aren't cluttered
- Remain very organized, use color coding, and provide a schedule

Handwriting:

- Minimize writing for homework
- Have a computer for that student
- Allow the student to copy another student's notes at home
- Provide a printed outline if watching a movie
- Provide a print out what is written on the blackboard



MATH:

- Allow the use of a calculator without penalty
- Have a table of math facts available
- Break story problems into shorter segments
- Use graph paper or notebook paper turned sideways to keep work in columns

READING:

- Let the student sit comfortably
- Allow student to follow along with the finger or use a bookmark
- Tapes or reader for textbooks
- Read out loud in a tape recorder to listen for improvement
- Read questions first before reading story
- Use headphones to block out noise

By: Rachel Holtz
Reviewed: Dr. Greg Conderman, Ed. D.
Associate Professor
Department of Teaching and Learning
Northern Illinois University

References

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"Tourette Syndrome Fact Sheet." National Institute of Neurological Disorders and Stroke. 20 Sept 2004 <http://www.ninds.nih.gov/health_and_medical/pubs/tourette_syndrome.htm>.

Wilson, Jeni. "Tourette Syndrome: A Case for Establishing the Individual Needs of Children at Risk." Shrimpton: Bradley, 2001. Council for Exceptional Children. 20 Sept 2004 <<http://ericec.org/faq/tourette.html>>.

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For more information about Tourette's Syndrome, please visit these websites.

Tourette Syndrome Association: <http://www.tsa-usa.org/>

Tourette Syndrome "Plus": <http://www.tourettesyndrome.net/>

Website made by a man with TS: <http://members.tripod.com/~tourette13/>

Tourette Syndrome Association of Australia: <http://www.tourette.org.au/>