



Succeeding with TS:

*A Resource Guide
for Teachers*

Succeeding with Tourette Syndrome is a copyrighted curriculum of the
Jim Eisenreich Foundation for Children with Tourette Syndrome 2002

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ABOUT THE FOUNDATION

Jim Eisenreich and his wife Leann founded The Jim Eisenreich Foundation for Children with Tourette Syndrome in 1996 to help children with TS achieve personal success. In its first year, the foundation met with area philanthropists and leaders to raise awareness of the goals of the foundation. On September 21, 1996, the



foundation teamed with the Kansas City Explorers professional tennis team to host its first fund raising event. The proceeds of the event helped launch the foundation's

activities. An office was established with a toll-free number, which gave parents the opportunity to call with their questions and concerns. In some cases this was the first opportunity many parents had to talk to someone who has dealt with the feelings and emotions their children are now going through. Currently the Jim Eisenreich Foundation is involved in the implementation of a strategic plan, which was developed in 1999 to establish a vision and mission of the foundation. This plan provides specific directions for the foundation and establishes a number of key objectives including:

- Building strong programming
- Creating public awareness
- Providing financial support
- Insuring administrative excellence

CONTACTING THE FOUNDATION

Reach the Jim Eisenreich Foundation for Children with Tourette Syndrome at:

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Blue Springs, MO 64013
1-800-442-8624

Visit www.tourettes.org

Email: foundation@tourettes.org



INTRODUCTION

One summer I attended a session that Jim Eisenreich was presenting to children and families with Tourette Syndrome (TS). The room was filled with children of all ages, their family members and friends. Everyone was focused on Jim, as he spoke about his experience of learning to live with TS. The room was quiet except for one little boy. He was about 8 years old, a little blond guy in a baseball hat. He was fidgeting in his seat, making vocal tics, even calling out sounds. Sitting next to him was a kind looking woman. Later I learned she was his mother.

My attention was drawn first to the little boy and then to his mother. As he went through what seemed to be a vast menu of tics, his mother would comfort him. Sometimes she stroked his back, or touched his neck. Once in a while she would lean over and kiss him on the cheek. At the end of presentation, while the children gathered with Jim to get an autograph, I had a chance to speak to the mother. As gently as I could, I asked why she was comforting her son when he seemed to be unaffected. She told me that as her son grew older and spent more time away from her, at school, scouts and sporting activities, she knew that there were many times when he was teased and ridiculed because of his TS. She said; "Whenever I have an opportunity to be with him in public, I want him to know that he is still loved, at least by me."

Her answer touched me deeply.

As an educator, I thought of the many children in my classrooms that had differences, physical, mental or behavioral. I had many resources at my disposal, curriculum guides, district and state objectives, to name a few. But there was little for children who have conditions that effect their social development and learning.

This curriculum is designed for teachers, principals, school counselors, support staff and volunteers who work with children with Tourette Syndrome (TS) and its related disorders. They include Obsessive Compulsive Disorder (OCD)

and Attention Deficit Disorder(ADD). Our hope is that it fills the void of other curriculum resources and provides educators and others who work with children concrete ideas and suggestions to assist schools in making the learning environment for all children one that is meaningful and rewarding places to be.

We may not be able to give children with TS and its related disorders the comfort of a mothers' touch, but with this curriculum as a resource we hope to build positive relationships to benefit students.

Constructivist Theory VS Behavior Modification

This resource has been written with a Constructivist Theory of Education as the guiding principle. In a Constructivist classroom, the emphasis is placed on the child rather than on the teacher. It is the learner who constructs or builds his or her knowledge by the interactions they have with materials or events. Students learn by fitting new information together with what they already know. It is an active rather than passive process.

In this resource, we have avoided using behavior modification techniques often employed for children with special learning issues. Traditionally those techniques depend on rewards and praise to manage the child's behavior. The suggestions in this resource require creating a supportive environment for all children while avoiding extrinsic motivators to manage the behavior of a few students.

We believe that when a TS child is in a supportive environment with high academic and social expectations he or she will focus on learning with less attention on "being good" to gain approval from adults.

QUESTIONS AND ANSWERS

What is Tourette Syndrome?

Tourette Syndrome is a neurochemical disorder of the brain, which causes involuntary movements and vocalizations known as tics. TS is a difficult condition to diagnose. Many physicians may not know about it or how to recognize it when a parent discusses the symptoms they have seen in their child.

What are tics?

There are two main categories of tics: Motor tics and Vocal tics. Motor tics are sudden repetitive movements of the muscles of the body that occur repeatedly. Vocal tics are in the muscles that control speech and cause involuntary sounds. Most children develop an eye tic first. Other tics develop

shortly afterwards with the intensity increasing during early adolescence. Tics can be embarrassing and even painful. Tics tend to take place less during sleep and more in times when the child is under stress. They can also increase when a child is sick or suffering from allergy symptoms.

How is TS diagnosed?

The criterion for diagnoses is the presence of at least two motor tics and one vocal tic. No two cases look the same. Tics can increase and decrease over time and new tics can emerge with no warning. Most symptoms begin at about age 7. TS presents itself more frequently in boys than girls.

How are Obsessive Compulsive Disorder and Attention Deficit Disorder connected to TS?

As many as 2/3 of people with TS also have Obsessive Compulsive Disorder. Research has shown the two are closely related, caused by the same gene. OCD is an anxiety disorder. Obsessions are unwanted, repetitive thoughts, which are difficult to control. Compulsions are repetitive actions in an attempt to relieve the anxiety caused by obsessions.

How is Attention Deficit Disorder connected to TS?

About half of all children with TS are also diagnosed with Attention Deficit Disorder. ADD is also a neurological condition that makes it more difficult for a child to focus attention and control impulses. Symptoms of ADD often appear before the onset of motor or vocal tics associated with TS.

How would I recognize a child with Tourette Syndrome, Obsessive-Compulsive Behaviors and Attention Deficit Disorders:?

TS symptoms vary for each person. The severity of tics also varies and changes. A person may develop new tics and drop others. Tics tend to occur everyday and many times throughout the day.

The following is a list of some of the most

common tics:

- Flexing and jerking of the arms and legs
- Body jerks
- Chewing on clothes, hands, hair, papers
- Eye blinking and twitching
- Sounds and movements of the hands
- Twisting hair
- Head jerking
- Hitting oneself
- Mouth movements
- Knuckle cracking
- Movements and sounds with the lips
- Pulling on clothes
- Scratching
- Shivering
- Spitting
- Banging on a table or other objects, producing repetitive noises
- Teeth clenching
- Twirling in circles repetitively
- Vocal noises including clearing throat, barking, coughing, and humming

People with Obsessive-Compulsive Disorders have reoccurring actions, which interferes with their ability to focus on their work. They may have persistent unrealistic and disturbing thoughts that they cannot avoid.

Some of the most common obsessions may include the following:

- Concerns for cleanliness
- Strong need for order around them
- Counting insignificant things around them
- Focus on a TV program, video game etc.
- Concern about background noises like fluorescent lights
- Overly concerned about bad things happening
- Concern about food and eating
- Concerns about illness and germs

Some of the most common compulsions may include the following:

- Cleanliness issues, washing hands and cleaning things around them
- Repeating words, actions, sounds, music which also may include humming and mimicking sounds
- Touching and counting things an exact number of times

People with Attention Deficit Disorders have difficulty controlling their impulses. They may have problems staying focused and may appear unorganized. Some of the most common behaviors include the following:

- Directions: beginning work without the directions or ignoring directions
- Acting without thinking
- Difficulty waiting their turn
- Hurrying through assignments
- Difficulty playing alone or quietly
- Interrupting
- Taking things from others
- Unable to sit quietly for even short amounts of time

Tourette Syndrome, Obsessive-Compulsive Disorder and Attention Deficit Behavior are diagnosed by observing the behaviors in children by a qualified medical professional. By discussing the behaviors with parents, caregivers and teachers, they will assess how many times each day the behaviors occur. Many children diagnosed with one of the disorders will show symptoms of the other related disorders. The symptoms may change frequently.

FOR TEACHERS

The role of the teacher of a child with Tourette Syndrome is enormous. Recently, The Jim Eisenreich Foundation received a message from a young teacher who had just learned that a child, a six year old, who had just been diagnosed with TS, would be joining his first grade classroom. This teacher had a long list of questions. What should he know about TS? How would the other children react to this child? Could we recommend books to read to the class to help them understand how best to relate to their new classmate?

This section is designed to help that teacher and all of the others who are interested in learning as much as possible about TS and its related disorders.

It is the teacher's tone that will tell the TS child if he or she has a friend who is caring and understanding or a foe. The teacher holds the power in the classroom. We believe that the power must be used to create inspiration. They have the critical job of finding methods that design a classroom community where every child is valued.



It is important that the teacher understand the symptoms of TS and its related disorders.

Teachers should avoid thinking that the child is demonstrating behaviors to annoy. Children with TS and its related disorders would prefer to not have to deal with the tics, compulsions and disruptive behaviors.

RESPONDING TO BEHAVIORS

Observation

Observing students in the classroom will provide valuable information about how they react to each learning and social setting. Early in the school year, find time to observe the student. Use the log provided on page 13. Print off the lists of

characteristics in the introduction on pages 3-5 and tape or tack them where they are accessible to you. Use the log to record the behaviors you observe along with the time of day and situation. This log will be a valuable resource in discussions with parents, administrators, school counselors and other school personnel. Use this information to identify times and activities when the child is more and less comfortable, when tics increase in frequency, or when the child has lost focus.

Motivation

The tone of the classroom affects the learning of all students. Students with TS and its related disorders are very affected by the classroom tone. All students learn best in an environment that feels safe and secure. If the classroom is disruptive or stressful, learning is affected. Set a tone in the classroom of respect for everyone. The teachers' reaction or lack of reaction to a student's tics or other behaviors will be the model for all of the students.

Reacting to a Students' Tics

Never embarrass a student in any way or ask a student to suppress his or her tics. You may find yourself thinking that the student is doing this to gain attention or annoy you in some way. They are not! Your actions will set the tone for how other students react. Students with TS or its related disorders may

- Have difficulty making eye contact with you.
- Not respond immediately to your questions.
- Need directions repeated.

Discussing TS and its Related Disorders with Classmates

Consider asking an informed adult to speak to the class about TS and its related disorders. This may be the student's parent, a school counselor, nurse, the student's advocate or a teacher from a previous year. The adult should be well informed about TS and able to communicate clearly to a young audience and provide meaningful answers to questions. Discuss the presentation ahead of time with the class. Brainstorm a list of questions they

would like to ask. Speak privately with the TS student to see if he or she feels comfortable being in the classroom during the session.

Stress

Stress for the student with TS and its related disorders are an ongoing and cyclical issue. Stress creates tics and more tics create stress. Thus creating a disruptive cycle for learning. Stress affects the chemical balance in the brain and puts learning on hold. Difficulty with academics and the embarrassment of social problems ultimately lead to the lowering of the student's self-esteem. Research is clear that without a healthy self-esteem all students have difficulty learning.

CHALLENGING BEHAVIORS

Some behavior issues are a result of age and lack of logical thinking, as with all children. The challenge for teachers is to sort out when the student with TS or its related disorders is having behavior issues as a result of his condition or whether he is just misbehaving.

Respond to challenging behavior in the following ways

- Stay calm.
- Be consistent.
- Be caring.
- Don't take the behavior personally.
- Stay in control.
- Don't get mad at the child.
- Keep discussions private.
- Seize the opportunity to teach social skills.
- Use positive language.

As with any behavior plan, the consequences must be real, appropriate and fit the situation. The consequences should not be harsher than those for other students. Whenever possible the student should have input into what is best to rectify the situation.

Examples

If the student is hitting another child, he should make a sincere apology.



If he destroys another student's materials, he should make arrangements to replace them.

If he is rude to a classroom visitor, he should write a letter of apology.

The behavior of a student with Obsessive Compulsive Disorder is particularly challenging. You should help the student realize when he or she is stuck on a thought. Do not discuss an issue when the student is not able to listen, and always keep discussions about behavior issues private.

CREATING A HEALTHY ENVIRONMENT

Students with TS or its related disorders thrive in a child-centered classroom. As do all students. Consider the messages that a student gets when they enter the classroom. From the appearance of the displays to the arrangement of the classroom furniture, the more comfortable and engaging the more appropriate for the student with TS or its related disorders.



Student Desk

Students with TS and its related disorders are more comfortable in a classroom

environment where they are not seated with other students looking directly at them. Arrange student desks into table grouping rather than rows of desks in a lecture format. Small groups of 3 to 6 students allow him or her to learn more about their peers as individuals in an informal setting.

Learning Centers

Students with TS and its related disorders learn best in "hands on" environments. Establish learning centers, work labs or stations with an interesting collection of materials and tasks that encourage students to use a variety of learning strategies.

Lectures

Students with TS and its related disorders feel uncomfortable in lectures. Students with vocal tics are aware that they are interrupting the

speaker. Reduce the amount of time spent in “teacher talk” and create lessons where students discuss thought questions, work cooperatively on problems, read silently and use hands-on materials.

Directions

Students with TS and its related disorders have difficulty following multi-step directions. Provide small bits of information at a time, using wait time to allow the students to complete each request. Print the directions onto a transparency where students can refer to it as they work through the assignment.

Comfort Areas

Create a quiet comfortable area in the classroom to be used by only a few students at a time or to work alone. Include an overstuffed chair, sofa, beanbag chairs or large floor pillows.



Class Meetings

Hold class meetings on a regular basis. Establish a tone of respect for every student. Early in the school year, introduce a topic and ask open-ended questions. As the year progresses, encourage the students to discuss topics of their choice. Use class meetings to establish classroom norms. Post the classroom norms in an accessible place in the classroom and revisit them in future class meetings.

TECHNIQUES FOR CLASSROOM MANAGEMENT

The following are specific techniques for assisting students with TS or its related disorders to work productively in the classroom. These techniques will only be effective, however, if they are established in a classroom environment where students are valued for their unique learning abilities.

State the objective for each activity in clear terms. Provide the class with a written version of the objective. Post the objective where everyone can see it and refer to it as questions

about the assignment are answered.

Create a consistent schedule for each day. Post the schedule in an accessible place in the classroom and refer to it frequently. For younger students, create a large arrow to demonstrate the current activity.

Listen to the students’ problem intently. Restate what you hear them saying in a calm, clear statement. Then ask the student what their choices are for solving the problem.

Provide (or allow students to bring) headphones to wear while they are working alone on assignments or reading silently.

Contact the child’s previous teacher(s) to see what has worked in the past. If the child has a private tutor, work with him or her to share ideas and strategies.

Communicating Hope to Parents

Parents of children with TS or related disorders need to hear frequently from their child’s teachers. Messages should keep parents informed about every area of their child’s development including physical, emotional, cognitive and social growth.



Establish a journal for students and parents. Purchase a commercially produced journal for this purpose or staple a sturdy cover to several sheets of paper. Ask the student to print the date at the top of each page. As the student is encountering issues, ask him or her to write about their feelings and impressions. Younger children may draw a picture and dictate a sentence to accompany the drawing. Encourage the student to express his or her feelings honestly. At the end of the day write your own personal comments about your perceptions of the day. Keep these messages positive and honest. Ask parents to read the journal and write a message in response.

Establish a time monthly to meet with parents. Schedule meetings more frequently as warranted. Use these meetings to discuss changes in the child's behavior and symptoms.

Interactions with parents are more productive when it is cooperative. If necessary, meet with the parents and principal. Brainstorm solutions to problems. Set goals together and discuss them at each meeting. Agree to phone when an issue needs to be discussed.

Parents of children with TS and related disorders are anxious for news of improvement in symptoms. Report them to the parents in the daily journal, monthly meetings or a phone conversation.

Discuss homework with parents frequently. Work with the child's parents to establish the ideal time for the student to complete homework. Help parents understand that the main goal is for the student to complete the homework assignment in a positive manner and that may require them to rethink where the child can do his or her best work. For example, some students work well sitting on their bed, laying on the floor or listening to background music. Ask parents to write on the bottom of the assignment how long it took to complete. This information should be used to help you make future assignments and adjust the amount of homework.

Age Appropriate Activities

The following suggestions for academic accommodations are arranged according to the following age groupings:

- Early Childhood
- Pre Kindergarten to 2nd Grade Intermediate
- Grades 3rd to 5th Grade
- Middle School 6th to 8th Grade High School
- 9th to 12th Grade
- Early Childhood

If reading work is difficult use books on tape. Many commercial trade books are available on cassette tapes. Make your own tapes of favorite books by recording your voice onto a blank

cassette tape.

Facilitate class meetings frequently. Use this time to discuss teasing and other inappropriate behaviors that may occur both in and away from the classroom and to reinforce appropriate behaviors that are observed. For example conduct a short class meeting before a recess period. Ask the children to brainstorm activities that will be fun and interesting for everyone, and avoid leaving any classmates out.

Break up intense periods of concentration with large motor activities. Gauge the amount of time the child is able to sit and work on pencil and paper work. Use music or stretching activities at regular intervals to provide a mental and physical rest between lessons that require concentration.

Ask parents to send a daily healthy snack. This is worthwhile for all young children but may be necessary for the student with TS or related disorders who burn extra calories with tics and stress. If the parents are not able to send a snack, ask the school cafeteria to provide crackers, popcorn or fruit.

Choose a good book that encourages values like tolerance to read aloud to the class. Use the characters in the book to discuss these important issues. See the Resource Section for a list of books that will work well to read aloud to this age group.

Schedule time for students to work in centers for a sustained period of each day. Include tasks that encourage hands-on experiments, tactile tasks like a sand and water table and art projects.

Allow the student to read in a position that is comfortable. For TS students this time allows them to not feel that other children are viewing them if they are experiencing vocal or motor tics. Create a cozy space for quiet reading that includes pillows or beanbag chairs.

Intermediate Grades

If the TS student experiences vocal tics discuss with them privately if they wish to read aloud. Assign passages to be read silently and then discuss it to assess the student's comprehension skills.

If reading work is difficult for the student use books on tape. Many commercial trade books are available on cassette tapes. Make your own tapes of favorite books by recording your voice onto a blank cassette tape. Make recordings of passages from textbooks as necessary. Allow the student to read aloud with a responsible partner in a quiet section of the room.

Encourage the child to write in a daily journal. Use this format to discuss their feelings. Encourage the child to include drawings to help them express their impressions about their day and to communicate frustrations. (See page 5 for more information about daily journals.)

Facilitate class meetings frequently. Use this time to discuss teasing and other inappropriate behaviors that may occur both in and away from the classroom and to reinforce appropriate behaviors that are observed.

Ask parents to send a daily healthy snack. This is worthwhile for all students but may be necessary for the student with TS or related disorders who burn extra calories with tics and stress. If the parents are not able to send a snack, ask the school cafeteria to provide crackers, popcorn or fruit.

Break up long periods of quiet concentration with a movement activity. Choose an activity where students are able to leave their chairs and move. For example, after a concentrated math lesson, plan a math game where students can work in teams on the floor.

Plan several times throughout the day to organize materials. Remind all of the students to place work in subject folders, turn in homework to a labeled basket, and paper clip notes to a book. Use this time to sharpen pencils and throw away unnecessary papers.

Teach the TS students who have frequent motor

tics how to use a Post-it-notes™ to hold a place in a book when they are having tics. Provide small packs of post-it-notes for this purpose.

Design lessons with limited lecture or quiet listening activity and more hands-on work. For example, use math manipulative to teach a lesson on fractions, make a history timeline with paper dolls, and create experiments for science objectives.

Shorten math tests, quizzes, and homework to a few necessary items. Avoid a page with an endless number of problems. Avoid using timed math tests which create undue stress for students with TS and its related disorders and provide limited information on math concepts. Rather create ways to assess math skills with less stress.

Choose a good book that encourages values like tolerance to read aloud to the class. Use the characters in the book to discuss these important issues. See the Resource Section for a list of books that will work well to read aloud to this age group. Assign the child with TS or related disorders to work on a project in small groups with children who have a disposition to be helpful to classmates. Discuss and post a list of norms for group work before beginning the assignment.

Middle School

Avoid arranging desks in rows. Rather use tables or arrange desks in small groups. Place children with TS or related disorders in teams with students who have a disposition to be helpful to classmates. Discuss and post a list of norms for group work before beginning the assignment.

If reading work is difficult for the student use books on tape. Many commercial trade books are available on cassette tapes. Make your own tapes of favorite books by recording your voice onto a blank cassette tape. Make recordings of passages from textbooks as necessary.

Shorten math tests, quizzes, and homework to a few necessary items. Avoid a page with an endless number of problems. Avoid using

timed math tests which create stress for students with TS and its related disorders and provide limited information on math concepts. Rather create ways to assess math skills with less stress.

Design lessons with limited lecture or quiet listening activity and more hands-on work. For example, ask students to discuss reading passages with a characters point of view, create hands-on math games and set up science experiments.

Allow the child with TS to use a highlighter to hold their place in a reading passage when they have a tic.

Provide ample time at the end of the class period for organizing materials. Use this time for all students to put away materials, return books to shelves and organize materials for homework assignments.

Break up long periods of quiet concentration with a movement activity. Choose an activity where children are able to leave their chairs and move. For example, allow students to discuss a reading in small groups, conduct surveys or create a model from art materials.

If a lecture is necessary, provide the students with written notes.

Allow ample wait time for students to respond to questions. Research suggests waiting at least 10 seconds.

Keep an extra supply of paper, pencils and pens in the classroom, rather than asking the student to return to the locker to retrieve materials that were forgotten, thus losing valuable class time.



High School

Avoid arranging desks in rows. Rather use tables or arrange desks in small groups. Place children with TS or related disorders in teams with students

who have a disposition to be helpful to classmates. Discuss and post a list of norms for group work before beginning the assignment.

If reading work is difficult for the student use books on tape. Many commercial trade books are available on cassette tapes. Make recordings of passages from textbooks as necessary.

Shorten math tests, quizzes, and homework to a few necessary items. Avoid a page with an endless number of problems. Avoid using timed math tests which create stress for students with TS and its related disorders and provide limited information on math concepts. Rather create ways to assess math skills with less stress, such as oral discussions, thought problems or projects.

Design lessons with limited lecture or quiet listening activity and more hands-on work. For example ask students to discuss reading passages with a characters point of view, debate two sides of an issue, or develop an original story. If a lecture is necessary, provide the students with written notes.

Give directions in small “chunks”. Wait between each step for completions. While other students are working check with the student to see if he or she is clear about the directions. Speak softly to him or her and ask if they need clarification.

Allow the child with TS to use a highlighter to hold their place in a reading passage when they have a tic.

Provide ample time at the end of the class period for organizing materials. Use this time for all students to put away materials, return books to shelves and organize materials for homework assignments.

Allow ample wait time for students to respond to questions. Research suggests waiting at least 10 seconds.

Keep an extra supply of paper, pencils and pens in the classroom, rather than asking the student to return to the locker to retrieve materials that were forgotten, thus losing valuable class time.

There is a form on the following page that can be used to track students observations.

Observation Log

Teacher's Name _____

Class _____

Student's Name _____

Date of Birth _____

Date Setting/Situation Assignment Observation

Include observations of interactions with other students, tics, loss of focus, distractions, etc.

LIBRARY OF ISSUES

Behavior

When it is necessary to intervene with the student with TS or its related disorders because of a behavior issue first allow him or her time to gain control. No issue can be resolved until the student is calm. Encourage the student to describe the situation to you and listen attentively. Calmly ask questions to clarify the situation. Consider what might have caused the difficulty, for example: time of day, teasing, side effects of the child's medications, or other factors. Make note of the situation in a log and compare it to other interventions. Use this log in conversations with administrators, teachers, counselor, nurse and parents.

Do not punish a child for behaviors that are the result of his disorder. For example, never punish a child with TS for making noise in the classroom when he has vocal tics.

Never embarrass a child in any way or ask a student to suppress his or her tics. Be sure that this position is clear to all staff. Some staff members may feel that some of the child's behavior is to gain attention or annoy them in some way. They are not! The actions of the adults in charge will set the tone for how other students and staff react. Children with TS or its related disorders may have:

- Difficulty making eye contact with the authority figure.
- Not respond immediately to questions.
- Need directions repeated.
- Lack response to criticism. They should not be punished for any of these responses.

Reactions of anger or sarcasm should never be used and they should never be disciplined in front of other students.

End of the Day

The end of the day can be a hectic time in any classroom. The additional stress of cleaning up

and going home can be particularly stressful for students with TS and its related disorders. The following suggestions may help make the end of the day more relaxed for everyone:

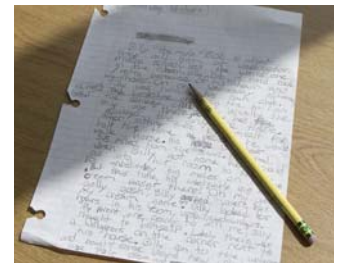
- Check the student's backpack for materials that need to go home. Be sure to include the daily journal to communicate with parents.
- Dismiss older students a few minutes early, allowing time to organize materials while the hallways are less crowded and noisy.
- Assign a counselor, assistant principal or another appropriate staff member to be available to assist any student who needs help in the hallways at the end of the day.

For some students with TS or its related disorders, the bus ride will be the only time when they experience problems. The bus may be too unstructured, noisy or chaotic and the extra stress may increase the number of tics they experience. The following are recommendations to work with the bus drivers and other appropriate staff members:

- Arrange an in-service for the bus drivers to educate them on TS and its related disorders. Include information about symptoms, behaviors and suggested accommodations.
- Make the bus ride as short as possible for the student.
- If necessary, find alternative methods for transporting students to and from school. For example: taxi cab or smaller school bus.
- Ask bus drivers to ignore tics. Explain that they are part of the condition.

Handwriting

Because of vocal and motor tics, some students with TS and its related disorders have poor handwriting, which is difficult to read. Accommodate the handwriting by one or more of the following suggestions:



- Allow the student to dictate stories to an adult.
- Teach the student to use a simple word processing program on the computer and print out his or her stories.
- Do not evaluate a student's work by their

handwriting but rather the content of the work. Do not ask the student to copy materials from the board. Provide a copy of the materials in printed form using a large easy to read font.

- If the student has an awkward pencil grip, it may be helpful to create some simple exercises, which develop the muscles of the arms, fingers and wrist. For example:

- Use large paper and markers and make large circles.
- Use chalk on a sidewalk to make large circles and other shapes.

- Allow the student to choose to use either a pencil or pen to do written work. They may find one more comfortable than another.
- Choose paper with a wider line space.

Homework

Students with TS or its related disorders may need accommodations for making homework successful rather than additional stress for the student and his or her parents.



For young children, create homework assignments that are hands-on rather than paper and pencil work. For example ask the child to draw diagrams, make charts or posters and complete surveys.

For older students provide a daily assignment book to record the homework assignment. Check to be sure that the student has recorded the appropriate information such as page numbers correctly.

When the student has been absent they may feel overwhelmed by the amount of make up work. Set an appointment to meet with the student privately to discuss the assignments. Discuss how much time it will take to complete each necessary assignment and eliminate those that are not necessary. Agree on a date for the materials to be completed. Print the due date clearly on each assignment.

Holding in Tics

Some students suppress or “hold-in” their tics. But this can create a great deal of stress and stress increases the symptoms of TS and its related disorders. The following are some strategies for helping a student release the tics without causing undue attention:

- Choose an appropriate place for the student to go when he or she feels a need to release tics. Discuss the place with the student and the parents/caregivers before it is implemented. For example a bathroom, counselor or nurse’s office. Agree on a signal with the student that will be your indication that they will need to leave the classroom.
- Provide a box of tissues for a student who has spitting or vocal tics.

- Encourage the student to get up frequently to release tics. Simple activities like walking to the pencil sharpener or returning a book to a shelf can help release motor tics without drawing undue attention.
- Arrange with another teacher that you may be sending the student to bring a message. Make an envelope with the teacher’s name on it to keep ready when the student needs a break. Ask him or her to take the envelope to the teacher. The teacher may “pretend” to write a message in return.

Lunch Room

The lunchroom may be a very uncomfortable space for the student with TS and its related disorders. Have a discussion with staff to consider the arrangement of the tables and other procedures. For example:

- Consider replacing long rectangular tables with round ones where conversations can be more focused.
- Serve meals “family style” with foods placed in large serving dishes to be passed around the tables.
- Play soft, calming music throughout the lunch



period.

- Dismiss tables from the lunchroom in small groups.
- Play a video of an appropriate movie during the lunch period.

Medication

Some behaviors may be the result of medications. Check with the student's parent or caregiver for a list of the medications the student is taking. Ask the school nurse or school counselor to provide a list of the side effects for each of the medications. Because the symptoms of TS and its related disorders change frequently messages from school are critical to inform parents if medications need to be changed. Some medications may cause the following:

- Sleepiness
- Unusual thirst
- Irritability
- School phobia
- Dullness
- Weight Gain
- Dizziness
- Skin Rash
- Memory Problems

Recess

Recess is often the most difficult time of the day for a student with TS and its related disorders. The noise and lack of structure may lead to over stimulation and result in an increase in tics and compulsions. The reduced amount of supervision may encourage more teasing and taunting. Discuss with team members, the principal and school counselor. Work out a plan to insure that adequate supervision is available. Discuss teasing and taunting with the students and be clear that it will not be tolerated.

Spend some time at a recess period to see if the student is establishing social relationships. Observe the student during these informal times and make notes about your observations. If you see teasing from other students plan a time to discuss teasing with the whole class. Lead a discussion about how hurtful teasing can be and brainstorm a list of action steps that they can do to make sure they do

not engage in those behaviors.

Schedule

A consistent schedule is necessary for the student with TS and its related disorders. Post a daily schedule in clear view. Refer to the schedule during transition times to a new activity. Discuss ahead of time when changes to the schedule become necessary.

Sleep

Many children with TS or its related disorders have sleep problems. Fatigue during the day may interfere with the student's ability to learn. Sleep problems can also cause the student to appear hyperactive, irritable or impulsive. Tics worsen when a student is sleepy. Discuss sleep problems with the student's parents. If necessary, parents should discuss sleep issues with the student's physician to see if medications are interfering with sleep.

School Phobia

Some students with TS or its related disorders develop school phobias. Make a note of the child's absences and discuss them with the teacher and parents. If the student comes to school feeling sick and requests to go home frequently, consider that they may have developed a phobia to school. This is a form of panic or anxiety that many TS or OCD children develop. You will need to uncover the source of this fear quickly. Work with the child, the parents, and the school counselor. Some medications can cause school phobia. It is imperative that the child continues to attend school.

Social Issues

Many children with TS and its related disorders have difficulty making and maintaining friends. Meet regularly with the child to discuss friends. Encourage the child to participate in social activities like scouting groups, sports or clubs. Convene a peer discussion group. Use a video or book about friendship and tolerance to begin a discussion. Check the Resource section for ideas.

Check to see if your area has a local Tourette Syndrome Chapter and encourage the parents and child to participate.

Substitute Teachers

Prepare an information packet for substitute teachers. Some students with TS and its related disorders find it very stressful to have a major change in his or her schedule. If possible, give the student with TS or its related disorders notice when a substitute will be in the classroom. Include the following in a packet for the substitute teacher:

- List of symptoms
- Suggestions of adaptations
- A question and answer pamphlet from a local TS chapter (check the Resource Section for suggestions)

Teasing

The position of the entire school community must be one that teasing and taunting must never be tolerated. Students with TS and its related disorders are often the victims of teasing and that alone can make school a very unhappy place for them to be.

Be mindful of the times in the school day when teasing and taunting are more likely to occur and provide a staff member to be available during those times. For example:

- Lunch
- Recess
- Transition times between class periods
- Gym class

Choose a book that encourages values such as tolerance to read aloud to the students. Discuss the book and its characters. Choose a book that is age appropriate from the Resource Section.

Testing

Because of motor or vocal tics it may be necessary to conduct tests for students with TS and its related disorders in a private setting. Discuss how to deliver a standardized test with the child's teacher(s), counselor or school psychologist. The

stress caused by testing may increase tics. It may be necessary to allow additional time to complete the test or for some students to prepare an oral version of the test. Consider the most appropriate testing situation for the student.

Transition Times

Transition times can be stressful and difficult for students with TS and its related disorders. At a school staff meeting consider the dismissal time and how to make them less stressful and to develop solutions that may benefit all students.

For example:

Stager the dismissal times to reduce the numbers of students passing in the hallways.



Organize buses with numbers or cartoon characters for younger children. Place signs with the numbers or characters in the window of each bus. Place a matching sign for each bus in the area of the school where children wait for buses to arrive. Gather students near their posted sign.

Break up intense periods of concentration with a large motor activity. Use music or simple exercises to help stretch muscles before beginning another quiet time.

Vocal Tics

Children with TS who demonstrate vocal tics may be uncomfortable in whole school assemblies or large group gatherings where they feel that everyone can hear them. It may be best to dismiss them from this type of activity or find a place where he or she can see and hear the presentation but not feel other students notice them. There may be other times during the school day when children with vocal tics are uncomfortable and will need to make similar adjustments, for example:

- Library
- Study Halls
- Computer Labs

RESOURCES

Books for Young Children Ages 4 to 8 years

- [Bubba and Trixie](#), Lisa Campbell Ernst, Simon & Schuster, 1997. Bubba the caterpillar is very nervous about life, but he learns to take risk with the help of Trixie, a ladybug who befriends him.
- [Extraordinary Friends](#), Fred Rogers, Puffin, 2000. Part of the Let's Talk About It series, this book takes an honest, clear look at an issue that children often find intimidating and scary, disabilities.
- [Feeling Left Out](#), (Playground Series), Kate Petty, Barrons The Feeling Box, Randy M. Gold and Dave Wright, Aegina Press, 1998. This book is for children and adults of all ages about how we manage our feelings, and provides children an opportunity to learn more about how they handle their emotions.
- [Help is on the Way: A Child's Book About ADD](#), Marc A. Nemiroff, Ph.D. and Jane Annunziata, PsyD., Magination. A reassuring book for youngsters with ADD.
- [How to Be a Friend: A Guide to Making Friends and Keeping Them](#), Laurene Krasny Brown, Little Brown & Co, 2001. A practical resource about the ins and outs of friendships.
- [I Like You](#), Sandol Stoddard Warburg, Houghton Mifflin Co, 1990. A tiny book that expresses the true meaning of friendship.
- [I'm Furious \(Crary, Elizabeth, Dealing with Feelings\)](#), Elizabeth Crary, Parenting Press, 1996. Mom lets Matt know it's OK to be mad and helps him discover ways to express his anger without hurting his brother or being destructive.
- [I'm Frustrated \(Dealing with Feelings\)](#), Elizabeth Crary, Parenting Press, 1992. This book is valuable because of the many positive techniques it suggests for venting frustration.
- [I'm Mad \(Dealing With Feelings\)](#), Elizabeth Crary, Parenting Press, 1992. A sensitive story that provides productive and positive interactive ways for parents to support their children in dealing with a sometimes-debilitating emotion.
- [It's Okay to Be Different](#), Todd Parr, Little Brown & Co, 2001. Readers are encouraged to accept differences in physical characteristics, abilities and family situations.
- [Just the Way You Are](#), Marcus Pfister, North South Books, 2002. The author of Rainbow Fish explores the issue of perception and acceptance in this story about animals dissatisfied with their appearances.
- [The Kissing Hand](#), Audrey Penn, Child Welfare League of America, 1993. When Chester the raccoon is reluctant to go to kindergarten for the first time, his mother teaches him a secret way to carry her love with him.
- [Lilly's Secret](#), Miko Imai, Candlewick Press, 1994. A useful book for introducing the concept of individuality.
- [Little Beaver and the Echo](#), Amy MacDonald, Paper Star, 1998. Little Beaver's search for a friend he thinks he hears across a pond is perfect for every child who's ever felt lonely.
- [Mean Soup](#), Betsy Everitt, Voyager Picture Books, 1995. When Horace comes home feeling mean, Mom knows what to do.
- [Odd Velvet](#), Mary E. Whitcomb, Chronicle Books, 1998. Velvet takes things in stride, but the other children find her strange. Even so, she endures, always with a winning smile, until things gradually begin to change for the better.
- [Otto Learns About His Medicine: A Story About Medication for Children With ADHD](#), Matthew Galvin, M.D., Magination. Otto is a high-octane young car whose motor runs too fast. He has trouble paying attention in school. After a visit to a pit crew of special mechanics, Otto finds ways to be more focused.
- [The Quarreling Book](#), Charlotte Zolotow,

HarperTrophy, 1982. Gruffness and anger is passed along from person to person until a little dog starts a chain of happiness that reverses the trend.

- [Step Ball: A Child's Book About Feelings and Differences](#), Norm Early, Danelle Young and Brent Naughton, Greenleaf Book Group, 2000. This book has beautiful drawings and a simple yet elegant story about friendship and feelings.
- [Someone Special, Just Like You](#), Tricia Brown, Owllet, 1995. Brown and Ortiz (Photographer) show that the differences that seem to separate children with handicaps from others are not important.
- [Stand Tall](#), Molly Lou Melon, Patty Lovell, Putnam Publishing Group, 2001. Any child who is less than perfect will cheer with joy to meet Molly Lou Melon, a girl who doesn't let anything, or anyone shake her belief in herself.
- [Taking A.D.D. To School](#), Jay Jo Books, 2001. This book is designed to educate classroom peers about children living with A.D.D. which includes 10 tips for teachers and a "Kids' Quiz".
- [Taking Tourette Syndrome to School](#), Tira Kruger and Kim Gosselin, JayJo Books, 2001. A guide to educate classroom peers about children living with TS.
- [We Can Work It Out: Conflict Resolution for Children](#), Barbara Kay Polland, Tricycle Press, 2000. Polland, a professor of child development, has devised a way to make difficult social situations easier for children to discuss with adults or work through by themselves.
- [Wemberly Worried](#), Kevin Henkes, Greenwillow, 2000. Wemberly, a little mouse girl, worries about big things, little things, and everything in between. This book may be helpful for the young child with school phobias.
- [Weslandia](#), Paul Fleischman, Scholastic Trade, 2000. The illustrations are beautiful and

the story shows kids that it's great to be who they are.

- [When I Feel Angry](#), Cornelia Maude Spelman, Albert Whitman, 2000. This gentle book puts an adorable bunny in a variety of situations that preschool or grade school children can relate to.
- [When Sophie Gets Angry- Really Angry](#), Molly Garrett Bang, Scholastic Trade, 1999. This Caldecott Honor Book is an elegant and thought provoking way for young children to learn how to deal with emotions.

Books for Students Ages 9 to 12 years

- [Adam and the Magic Marble](#), Adam Buehrens, Hope Press, 1991. A fictional story for children about how three boys with disabilities, TS and ADD, taunted by their peers, find the magical power to cure their disorders.
- [All Kinds of Minds: A Young Student's Book About Learning Abilities and Learning Disorders](#), Melvin D. Levine, Educators Publishing, 1992. A book written about 5 elementary school students who gain insights as they come to terms with either ADD, dyslexia, language disorder, social and motor skill deficits.
- [The Best of "Brakes": An Activity book for kids with ADD](#), Patricia O. Quinn, Magination. A collection of games, puzzles, activities, tips and resources from Brakes, a newsletter for kids with ADD.
- [Cliques, Phonies, & Other Baloney](#), Trevor Romain, Free Spirit Publishing, 1998. Written for every child who has ever felt shut out or trapped by a clique, this book blends humor with practical advice as it explains how to form positive, healthy relationships.
- [Distance Drums](#), Different Drummers: A Guide for Young People with Adhd, Barbara D. Ingersoll, Cape Publisher, 1995. Written for parents and young people to help them understand their ADHD.

- [Don't Pop Your Cork on Mondays: The Children's Anti-Stress Book](#), Adolph J. Moser, Landmark Editions, 1988. "A much needed book! I enthusiastically recommend it to parents, teachers, clinicians and, of course, to children." Theodore J. Tollefson, Ph.D. Clinical Psychologist.
- [Double-Dip Feelings, Stories to Help Children Understand Emotions](#), Barbara S. Cain, Magination. Offers children guidelines for responding to their conflicting feelings and provides parents with concrete suggestions for helping their growing children.
- [Hi, I'm Adam: A Child's Book About Tourette Syndrome](#), Adam Buehrens, Hope Press, 1990. A child's story of how it feels to have TS and hyperactivity.
- [How to Handle Bullies, Teasers and Other Meanies: A Book That Takes the Nuisance Out of Name Calling and Other Nonsense](#), Kate Cohen-Posey, Rainbow Books, 1995. A practical guide to the topic.
- [I Never Said I Wasn't Difficult: Poems](#), Sara Holbrook, Boyds Mills Press, 1997. Poems about feelings such as Angry, Alone, and Popular.
- [Jumpin' Johnny Get Back to Work!: A Child's Guide to ADHD/Hyperactivity](#), Michael Gordon, Ph.D, Gsi Publishers, 1991. Helps children with a simply written and straightforward approach.
- [Keeping a Head in School: A Student's Book About Learning Abilities and Learning Disorders](#), Mel Levine, Educators Publishing, 1991. This handbook explains the complexity of learning disorders in terms all readers can understand.
- [Learning to Slow Down and Pay Attention: A Book for Kids About ADD](#), Kathleen G. Nadeau and Ellen B. Dixon, Magination, 1997. A self help book for kids with ADD.
- [Many Ways to Learn: Young People's Guide to Learning Disabilities](#), Judith M. Stern and Uzi Ben-Ami, Magination, 1996. Presents a clear explanation of different learning disabilities, the nature of intelligence and intelligence testing with methods of interventions.
- [Multiple Choice](#), Janet Tashjian, Henry Holt & Co., 1999. A story centering on one girl's struggle with OCD.
- [Pay Attention](#), Slosch, Mark Smith, Whitman and Co., 1997. Tells how Josh causes disturbances at home and at school until a doctor diagnoses him with ADHD.
- [Polly's Magic Games: A Child's View of Obsessive-Compulsive Disorder](#), Constance H. Foster, Dilligaf Publishing, 1994. A book for children with OCD to share with their families and friends, to read together and understand.
- [The 'Putting on the Brakes' Activity Book for Young People With ADHD](#), Patricia O. Quinn, Magination, 1993. Written in a clear, visually appealing format, this book presents quick exercises that guide the late grade school, middle school or high school student in understanding how this disorder affects their ability to learn.
- [Stick Up for Yourself: Every Kid's Guide to Personal Power & Positive Self-Esteem](#), Gershon Kaufman, Lev Raphael and Pamela Espeland, Free Spirit Publishing, 1999. Discusses problems facing young people such as making choices, learning about and liking yourself, and solving problems.
- [Sparky's Excellent Misadventures: My ADD Journal](#), by Me (Sparky), Phyllis Carpenter and Marti Ford, Magination. Told in a first person diary format, Sparky's tale is optimistic and fun, and includes many valuable insights and ideas that can help kids with ADD resolve their struggles with ambivalence on the journey toward emotional maturity.

Books for Students ages 12 and up:

- [Coping with Tourette Syndrome and Tic Disorders](#), Barbara Moe, Rosen Publishing Group, 2000. This informative book discusses

TS, tic disorders and related problems affecting activities, moods, learning, behavior and sleep.

- [Don't Think About Monkeys. Extraordinary Stories Written by People with Tourette Syndrome](#), Adam Ward Seligman, Hope Press, 1992. A collection of stories written by fourteen people who live with TS. Ranging from teenagers learning to come to grips with teasing to adults encountering discrimination, the collection represents the incredible diversity of a disorder as diverse as life itself.
- [Don't Sweat the Small Stuff for Teens](#), Richard Carlson, Ph.D., Hyperion, 2000. With 100 different chapters, each just a few pages in length, this little book works especially well as a bedside companion or tucked in a backpack for the morning commute to school.
- [Hot Stuff to Help Kids Chill Out: The Anger Management Book](#), Jerry Wilde, Lgr Publications, 1997. Child psychologist, Dr. Jerry Wilde, speaks directly to children and adolescents in a language they can easily understand.
- [Jim Eisenreich](#), Bill Gutman, Raintree Steck-Vaughn, 1996. Relates the story of Jim Eisenreich, a baseball player who has had to contend with Tourette syndrome but continued to play the game he loves.
- [Kissing Doorknobs](#), Terry Spencer Hesser, Laureleaf, 1999. A compassionate novel that credibly explains exactly what OCD feels like, as well as the effects it has on surrounding friends and family.
- [My Feelings Are Like Wild Animals: How Do I Tame Them?: A Practical Guide to Help Teens \(and Former Teens\) Feel and Deal with Painful Emotions](#), Gary Egeberg, Paulist Press, 1998. A resource for teenagers, parents and teachers dealing with feelings.
- [Stress Can Really Get on Your Nerves!](#), Trevor Romain, Free Spirit Publishing, 2000. A resource for kids and adults who are feeling stressed.
- [Tourette Syndrome](#), Marlene Targ Brill,

Twenty-First Century Books, 2002. Examines the tic disorder known as Tourette Syndrome, its symptoms and manifestations, how it can be controlled and treated, and, through case studies, what it is like to live with Tourette's.

- [Tourette Syndrome \(Venture, Health and the Human Body\)](#), Elaine Landau, Franklin Watts, 1998. Describes the causes, symptoms, and treatment of TS and explains the challenges faced by people with the disorder.
- [The Unwelcome Companion: An Insider's View of Tourette Syndrome](#), Silver Run Publications, 1996. The Unwelcome Companion is an insider's view of TS, an often-misunderstood neurological disorder. It not only discusses the symptoms, causes and treatments for TS, it takes the reader inside the Tourettic mind.
- [What Makes Ryan Tick?: A Family's Triumph over Tourette Syndrome and Attention Deficit Disorder](#), Susan Hughes, Hope Press, 1996.

Books for Adults:

- [ADD/ADHD Behavior-Change Resource Kit: Ready-to-Use Strategies and Activities for Helping Children with Attention Deficit Disorder](#), Grad L. Flick, Center for Applied Research in Education, 1998. For teachers, counselors and parents, this comprehensive resource is filled with up-to-date information and practical strategies to help students with attention deficits learn to control and change their own behaviors and build the academic, social and personal skills necessary for success in school and life.
- [ADHD: Achieving Success in School and Life](#), Barbara P. Guyer, The Brain Store. Specific techniques for helping individuals cope with ADHD are recommended in clear, easy-to-understand language that translates theory into action.
- [An ADHD Primer](#), Lisa L. Weyandt, The Brain Store. Packed with current, practical information, it is geared towards classroom teachers and other educators.

- [Children with Tourette Syndrome: A Parent's Guide](#), Tracy Haerle and introduction by Jim Eisenreich, Woodbine House, 1992. The medical, educational, social and legal issues associated with TS are addressed through clear and comprehensive essays written by specialists and parents.
- [A Cursing Brain?: The Histories of Tourette Syndrome](#), Howard I. Kushner, Harvard University Press, 1999. After undertaking this long study, Kushner gives a broader understanding of TS.
- [Dysinhibition Syndrome](#), Rose Wood, Hope Press. This book shows that many children and adults with episodic anger and rage have a biological disorder.
- [Echolalia](#), Adam Seligman, Hope Press. Echolalia is the story of best selling writer Jackson Evans, who is diagnosed at age 35 as having TS.
- [The Explosive Child: A New Approach for Understanding and Parenting Easily Frustrated, Chronically Inflexible Children](#), Ross W. Green, Ph.D., HarperCollins, 2001. A resource and must-read for adults involved with easily frustrated children who are hard to manage. Most examples focus on TS and ADD.
- [Freeing Your Child from Obsessive-Compulsive Disorder: A Powerful, Practical Program for Parents of Children and Adolescents](#), Tamar E. Chansky, Ph.D., Three Rivers Press, 2001. A clear roadmap to understanding and overcoming OCD, this book is based on Dr. Chansky's successful practice treating hundreds of children and teens with this disorder.
- [Getting Control: Overcoming Your Obsessions and Compulsions](#), Lee Baer, Ph.D., Plume, 2000. An internationally known expert and Harvard Medical School professor offers an up-to-date guide for treating OCD.
- [How the Special Needs Brain Learns](#), David Sousa, The Brain Store. Easy to use book shows the brain processes information and examines both simple and complex learning strategies that can be adopted in any school.
- [How to Reach and Teach ADD/ADHD Children: Practical Techniques, Strategies, and Interventions for Helping Children with Attention Problems](#), Sandra Rief, Center for Applied Research in Education, 1993. A comprehensive resource that addresses the "whole child", as well as the team approach to meeting the needs of students with ADD.
- [Icy Sparks: A Novel](#), Gwyn Hyman Rubio, Viking Penquin, 2001. A beautifully rendered novel about an amazing girl with tremendous gift who is forced to face the ignorance surrounding her condition of TS.
- [Kevin and Me: Tourette Syndrome and the Magic Power of Music Therapy](#), Patricia Heenan, Hope Press. Heenan's book shows how much music therapy benefits her son with TS, ADHD, obsessive compulsive disorder and learning disabilities.
- [Keys to Parenting Your Anxious Child](#), Katharina Manassis, Barrons Educational Series, 1996. Provides a wealth of information for parents who want to help their children learn to overcome anxiety.
- [Living with Tourette Syndrome](#), Elaine Fantle Shimberg, Simon & Schuster, 1995. Providing a comprehensive information on diagnosing, treating and coping with TS, this supportive guide answers questions about obtaining a proper diagnosis, managing treatment and living a full life.
- [A Mind at a Time](#), Mel Levine, Simon & Schuster, 2002. "Different minds learn differently," writes Dr. Mel Levine and that's a problem for many children, because most schools still cling to a one-size-fits-all education philosophy.
- [A Mind of Its Own: Tourette's Syndrome: A Story and a Guide](#), Ruth Dowling Bruun and Bertel Bruun, Oxford University Press, 1994. Presenting information never before available in one source, this book explains TS in an

informative, comprehensive and accessible manner.

- [Obsessive Compulsive Disorder: A Practical Guide](#), Naomi Fineberg, Martin Dunitz Ltd, 2001. Presents a practical guide to the diagnosis, assessment and management of OCD.
- [Passing for Normal: A Memoir of Compulsion](#), Amy S. Wilensky, Broadway Books, 2000. This book concerns a frequently misunderstood psychological illness, TS. She describes, in intimate detail, how her life has been circumscribed by her debilitating condition.
- [Raising Joshua](#), Sheryl Johnson Hamer, R.N., Hope Press. The harrowing and heartwarming story of Josh, a boy caught in TS and ADHD, as told by his mother.
- [Search for the Tourette Syndrome and Human Behavior Genes](#), David E. Comings, MD, Hope Press, 1996. Dr. Comings tells the story of his 18 years of involvement with TS, from both the level of treating thousands of patients with this common and complex disorder, to his clinical, genetic and molecular genetic research.
- [Teaching Kids with Learning Difficulties in the Regular Classroom](#), Susan Winebrenner, The Brain Store. A guide that presents a rich and varied menu of options, strategies and teacher-tested techniques to help reach students with learning difficulties in every classroom.
- [Teaching the Tiger: A Handbook for Individuals Involved in the Education of Students with Attention Deficit Disorders, Tourette Syndrome or Obsessive Compulsive Disorder](#), Marilyn Pierce Dornbush and Sheryl K. Pruitt, Hope Press, 1995. An informative handbook for educators and parents.
- [Tourette's and Attention Deficit Hyperactivity Disorder: Toughing it out at Home and at School](#), Joan E. Murphy, Baton Rouge Tourette Support Group, 1995.

- [Tourette Syndrome](#), Donald J. Cohen, Md, Lippincott Williams & Wilkins Publishers, 2001. Presents a state of scientific and clinical knowledge on TS and its relationship to other child-onset neuropsychiatric disorders.
- [Tourette Syndrome – Tics, Obsessions, Compulsions: Developmental Psychopathology and Clinical Care](#), James F. Leckman and Donald J. Cohen, Wiley, John & Sons, 2001. Reflecting more than 25 years of research, this comprehensive resource describes the major categories of TS and its related disorders as well as the strengths and adaptation of individuals with Tourette's.
- [Tourette Syndrome: The Facts](#), Mary M. Robertson, Oxford University Press, 1998. Essential reading for TS sufferers, their relatives and friends, it will also be useful to clinicians, general practitioners, schoolteachers, and anyone seeking an accessible introduction to the disorder.
- [Tourette Syndrome: Finding Answers and Getting Help](#), Mitzi Waltz, O'Reilly & Associates, 2001. A consumer guide to TS, offering resources for families living and dealing with TS.
- [Twitch and Shout: A Touretter's Tale](#), Lowell Handler, Plume, 1999. From the author of the 1995 documentary of the same name, this book is an attempt to chronicle the disease from the inside.
- [Transforming the Difficult Child: The Nurtured Heart Approach](#), Howard Glasser and Jennifer Easley, Center for the Difficult Child, 1999. This approach puts a refreshing spin on both parenting and teaching and reveals new techniques and strategies that create thoroughly positive behaviors.
- [What Makes Ryan Tick? A Family's Triumph over Tourette Syndrome and Attention Deficit Disorder](#), Susan Hughes, Hope Press, 1996.

Web Sites For Students

- Kidshealth.com: <http://kidshealth.org>
Includes information and background on TS.

- Neuroscience for Kids:
<http://faculty.washington.edu> Includes information on TS including history, facts, diagnosis, causes and famous people with TS.
- Tourette-Syndrome.com:www://tourette-syndrome.com Site for children and adults, families, friends, teachers and medical professionals. Includes chat rooms, help, links and information about related disorders.

Web Sites For Adults

- Tourette Syndrome Association, Inc. 42-40 Bell Boulevard, Bayside, NY, 11361-2820.
www.tsa-usa.org Information about TS, treatment and research, resources and links to other state and local organizations.
- Tourette Syndrome “Plus”:
www.tourettesyndrome.net/behavior.html. Includes information on conditions, behavior, education and advocacy.
- The Facts About Tourette Syndrome:
<http://members.tripod.com> Facts, causes, related problems, and links.