Understanding and Educating Students who have Tourette Syndrome and are Gifted

Lori Comallie-Caplan
Joseph
Workshop Objectives

• Participants will be able to answer the following questions:
  – What is Tourette’s Syndrome?
  – What are the most common symptoms?
  – Do personal outbursts of personal, ethnic and other slurs by people with Tourette’s reflect their true feelings.
  – Do children with Tourette’s have special education needs?
  – Can children with Tourette’s also be gifted?
  – What are gifted OEs?
  – What are appropriate accommodations for students with Tourette’s?
Meet Joseph

- Joseph is profoundly gifted – His verbal IQ is 145
- His performance IQ at 132 is slightly lower due to motor difficulties depressing his scores.
- Joseph’s achievement is in the 98th to 99th %ile in all academic areas except for writing.
- Joseph’s critical thinking skills are in the 95%ile.
- He has vivid imagination.
- He is an excellent musician.
- He is an outstanding swimmer.
- He is currently working on a graphic novel where the main character is a superhero with Tourette’s.
- His goal to complete a PH.D., participate in the Peace Corps and become a teacher.
Tourette Syndrome (TS)

- Neuro-biological disorder
- Genetic
- Involuntary
- More common than once thought
- Symptoms involve both motor and vocal tics
- Due to the nature of TS, symptoms will vary from person to person
Motor Tics

• Simple Motor Tics
  – Eye blinking, grimacing, nose twitching, leg movements, shoulder shrugs, arm and head jerks, etc.

• Complex Motor Tics
  – Hopping, clapping, throwing, touching (self, others, objects)
  – Holding funny expressions, sticking out the tongue, kissing, pinching, tearing paper or books, etc.
Vocal Tics

• Simple Vocal Tics
  – Whistling, coughing, sniffling, screeching, animal noises, grunting, throat clearing, etc.

• Complex Vocal Tics
  – Linguistically meaningful utterances
    • Coprolalia (racial slurs, inappropriate language), repeating words/phrases

• Speech Atypicalities
  – Unusual rhythms, tone accents, intensity of speech, stutter-like, immature voice
The Nature of Tics

• Naturally wax and wane
• Change in appearance and frequency
• Change in severity and intensity
  – May worsen during adolescence
• Can sometimes be suppressed for short periods of time
Tourette’s: What makes you tic?
Environmental Factors May Impact Tourette’s Symptoms

- Stress
- Anxiety
- Excitement
- Fatigue
- Holidays
- Illness
- Vacations
- Hunger
- Life & School Transitions
Possible Related Issues

- Social Skills Deficits
- Obsessions & Compulsions
- Executive Dysfunction
- Immaturity
- Sensory Processing
- Handwriting Problems
- Tourette Syndrome
- ADHD
- Dysinhibition
- Learning Disability
- Sleep Issues
- Inappropriate Responses
- Anxiety/Mood
- Overexciteabilities

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Dysgraphia

• Characteristics include
  – Slow and laborious writing
  – Hand and finger cramping
  – Sloppy handwriting, e.g., uneven spacing, irregular margins, and inconsistent lettering
  – Inability to copy correctly from book to paper or board to paper
  – Inability to transfer thoughts onto paper

• Can be addressed with the use of computer technologies

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People With Tourette’s Often Have OCD

• Obsessive Compulsive Disorder is often associated with TS

• OCD is an anxiety disorder characterized by:
  – Recurrent, unwanted thoughts and images (obsessions), and/or
  – Repetitive behaviors (compulsions) which the person hopes will prevent the obsessive thoughts or make them go away
    ▪ Performing the “rituals” provides only temporary relief
    ▪ Not performing them significantly increases anxiety
Some common problems seen in school as a result of OCD

- Difficulty transitioning from one activity or location to the next
- Touching things that are off limits, such as fire alarms
- Inability to tolerate mistakes
- Constant erasing
- Not being able to start a task due to fear of imperfection
- Refusal to eat or participate due to obsession with germs
- Not completing work or appearing inattentive due to performing compulsions
ADHD and Executive Function

- Attention Deficit Hyperactivity Disorder
  - Many people with Tourette’s have ADHD
  - There are 3 ADHD subtypes according to the DSM IV:
    - Predominantly Inattentive
    - Predominantly Hyperactive-Impulsive
    - Combined

- “Executive Functions” are brain processes that guide thought & behavior in real world situations
  - Planning, decision making, error correction, troubleshooting, response in novel/difficult situations, overcoming strong habitual responses, resisting temptation
  - No single behavior indicates Executive Dysfunction, but it is common in ADHD and Tourette’s

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Common Struggles For Students With ADHD/Executive Dysfunction

- Keeping track of their belongings
- Organizing materials
- Getting started on a task and staying on task
- Failing to finish tasks
- Managing time/workload
- Initiating activities
- Writing down homework assignments
- Developing concrete strategies
- Performing to their potential

Remember when the only thing you had to take home was a note for your parents.

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What About Medication?

Before Medication

After Medication

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Sensory Processing Issues

- Can affect any of the senses and cause great anxiety for many children with Tourette’s
- Common indicators are:
  - Sensitivity to sudden touch, the feel of certain fabrics and tags
  - Inability to tolerate the texture of certain foods
  - Sensitivity to certain smells and over-reactive to certain sounds
  - Sensitivity to bright or fluorescent lights
  - Experiencing “sensory tics” e.g. picking at scabs; biting nails, scratching or hitting self
  - Difficulty in highly over stimulating environments such as the school bus, cafeteria, gym, hallways, etc.
  - Need for increased sensory input - Running into things purposefully, frequent hugs, painful actions
How Does Having Tourette’s Really Impact Classroom Performance And Learning?

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Compared with other students, gifted learners often...

- Show persistent intellectual curiosity
- Have a wider range of interests
- Have a written and spoken vocabulary that is markedly superior in quality and quantity
- Read avidly
- Show insight into complex mathematical problems...
- Show creative ability or imaginative expression in the arts
- Sustain concentration for lengthy periods and independence in classroom work when they are working in a passion area
- Set unrealistically high standards, be self-critical and correcting
- Show initiative and originality...
What does Gifted and Tourette's look like?

- Asynchrony
- Inattentive
- High Sensitivity
- Frustrated
- Intense
- Disorganized
- Distractible

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“Overexcitabilities are inborn intensities indicating a heightened ability to respond to stimuli. Found to a greater degree in creative and gifted individuals, overexcitabilities are expressed in increased sensitivity, awareness, and intensity, and represent a real difference in the fabric of life and quality of experience. Dabrowski identified five areas of intensity - Psychomotor, Sensual, Intellectual, Imaginational, and Emotional. A person may possess one or more of these.” (Lind, 2002)
Overexcitabilities

**Psychomotor** – an intense need for movement either large muscle or small muscle.

**Sensual** - a heightened experience of sensual pleasure or displeasure emanating from sight, smell, touch, taste, and hearing.

**Intellectual** - a marked need to seek understanding and truth, to gain knowledge, and to analyze and synthesize.

**Imaginational** - a heightened play of the imagination with rich association of images and impressions, frequent use of image and metaphor, facility for invention and fantasy, detailed visualization, and elaborate dreams.

**Emotional** - heightened, intense feelings, extremes of complex emotions, identification with others' feelings, and strong affective expression.
Social Emotional Issues

• Anger
• Fear of Failure
• Strong need to control
• Low Self-Esteem
• Fear of Success
“He feels that he is different from everyone else and worries that others do not accept him for the way he is.”

“Sometimes she seems ‘off the wall.’ She just sees things differently.”

*Being Smart About Gifted Children by Dona A. Matthews, Ph.D., Joanne F. Foster, Ed.D.*
Classroom Strategies

- Designate a safe place for the student to go to when tics are severe
- Positive and proactive supports involving TS symptoms
- Extended time for tests and assignments
- Reduce stressful situations
- Frequent breaks to provide opportunities for movement
- Preferential seating
- Find ways to make tics irrelevant

“Every child is different, therefore every child will require different strategies, BUT there is a strategy for every child.”
Judit Ungar, President, Tourette Syndrome Association
• Set up a signal for student to use when there is a need to leave the classroom
• Un-timed tests and exams for all subjects
• Allow student to leave class early to avoid crowded hallways
• Build schedule around student’s most productive times of the day
• Consider accommodations for written accomplishing work
  – Oral reports, use of a computer, shortened assignments, and/or a scribe
• Consider additional adult support during unstructured time
• Refer to TSA’s “Catalog of Accommodations”
OCD Management at School

• Use Assistive Technologies where applicable
  – Computers can help address compulsive erasing and having to re-write to achieve perfect letter formation
  – Audio books for students who count lines and letters in textbooks, etc.

• Provide extended time for test taking and assignments

• Stay in touch with the parents
  – Therapists may be available to provide school strategies

• Educate the students, teachers and support staff
  – Understanding and compassion are essential in the classroom

• Involve the student!
Strategies to Help Students With ADHD/Executive Dysfunction

• Teachers and parents must work together as a team
  – Communication is the key
• Creative methods for keeping track of assignments:
  – Teacher signing assignment book
  – Emailing assignments home or leaving message on home voicemail each day
  – Providing an assignment and activity plan for the coming week
• Extra set of books at home
• Breaking down large assignments into more manageable subtasks
• Reducing workload: Quality vs. Quantity
  – The primary goal is to master the material
Accelerated and enriched instruction in and through the student’s areas of strength.

• Meet the students where they are and take them to the next level of skill and knowledge.
• **Curriculum compacting**, enrichment activities, or acceleration to the next grade level.
• Provide access to enrichment, challenge, and rigor.
• Consider including the following in accelerated and enriched instruction:
  • Exposure to above-grade-level content in mathematics, reading/language arts, science, or social studies
  • Appropriate use of curriculum (i.e. William and Mary and/or Junior Great Books)
An appropriately differentiated program, including adaptations and accommodations

- Adaptations and modifications involve differentiated content, process, or product and describe multiple pathways to the same goals.
- Adaptations and modifications are not watered-down or “easier” tasks or busy work.
A case manager who is knowledgeable and sensitive to the needs of a GT/TS learner is critical. He/she is responsible for —

• coordinating all aspects of the student’s IEP
• ensuring appropriate accommodations are made
• advocating for the student’s needs,
• communicating with teachers and parents,
• promoting and fostering self-awareness and self-advocacy, and
• providing a safe haven for the student.
“We believe that Tourette Syndrome is commonly misunderstood to be a behavioral or emotional condition, rather than a neurological condition. Therefore including Tourette Syndrome in the definition of other health impairment may help correct the misperception of Tourette Syndrome as a behavioral or conduct disorder and prevent the misdiagnosis of their needs.”

Due to the intense advocacy efforts of the national Tourette Syndrome Association, TS is now included in the IDEA under the definition of Other Health Impaired.
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