

Tics/Twitches/Grunts

About tics

Having tics is common and often misunderstood, or even ridiculed. This is because of the somewhat strange symptoms of the condition. They can be referred to as Tourette Syndrome when the tics are severe.

Tics are repeated, and sometimes seemingly 'socially inappropriate' movements and sounds. These movements can range from twitching, eye blinking, facial grimacing, head and shoulder jerking to jumping, touching other people and things, smelling, as well as sometimes hitting or biting oneself. The sounds range from grunting, throat clearing, yelping, sniffing and tongue clicking to uttering full words and sentences out of context, which can sometimes be swear words, as well as repeating phrases or sentences which have just been heard.

A child or adolescent with this condition has little or no control over their behaviour. The tics are not deliberate or voluntary at all. Some can learn to suppress their tics for a while in certain situations, but the tics will come out at some later point. Also the severity and type of the tics often change over time, getting better and worse, and again this is nothing that the child or young person has any control over. There is however some indication that tics may be related to stress and anxiety, which can result in them occurring more frequently.

It is not fully known what causes tics, but they appear to involve some abnormal processing of certain brain chemicals. Tics are also often inherited; a parent with severe tics has about a 50% chance of passing them on to each child.

The tics usually start around the age of 6-8 years, and often do get better by themselves towards the end of adolescence. In mild forms the condition is thought to affect 1 in every 100 school children, though severe cases are somewhat less common, and it affects about 4 times as many males than females. Tics that involve using bad language only affects about 10% of the children and young people with severe tics so this is relatively uncommon.

It is common for children/young people with severe tics to have other difficulties, such as poor attention/overactivity and obsessive thoughts and behaviours, but many only experience tics.

Things to think about

Tics are fairly common, and many children might only display them for a few months, and if this is the case, it is no indication of any underlying problems. Also, if you are a parent or carer, you may be the only one seeing these tics in the child, and they might not display them in other places. This is not an indication that this is your fault at all, but rather a sign that the child or young person feels safe around you.

It is only when the tics are very severe and occur frequently in environments outside of the home that they can become problematic to the child or young person.

The tics themselves are most often not a problem at all, but what can be a problem are the responses the child or young person gets from the people around them. Others may feel uncomfortable or simply do not understand the tics, and this can lead to larger problems. Children or young people with tics can be ridiculed or rejected by others, or even bullied. This of course can lead to numerous other problems, such as low confidence, or anger or depression.

The main thing to realise is that the tics are not voluntary. Even if the child or young person has some control over them, for instance, can suppress them in a certain environment, it does not mean that they can control them at all times.

Think about yourself

Although you can have an understanding that tics are not deliberate, it is almost impossible to be completely unaffected, this may be at a subconscious level. This is because tics often mimic disobedient and disrespectful behaviours. The knowledge that tics can often be suppressed for a period is also a potential source of frustration. Understanding our reactions and prejudices can help us make sense of our feelings and respond more sensitively.

For more advice, see section on being aware of yourself and your own response.

What you can do

- Reassure the child or young person that it is OK to have tics.
- Do not tell the young person off for having tics in any way, but instead remember that they are not voluntary or deliberate.
- Do not give the young person the impression that they should control their tics. Stay calm and natural around them, and don't show annoyance or embarrassment if they have tics.
- Educate the other children and adults around the child/young person, and make sure they know about their condition, and encourage them to respond naturally.
- In structured activities like school, build in time/give permission for the young person to leave the room when tics become overpowering.

When to contact a mental health specialist

- If tics occur regularly and appear to be becoming more frequent or severe.
- If the tics are causing the young person emotional distress or physical discomfort.
- If the tics occur together with other worrying behaviours, such as anger, sadness or self-harm.

How to contact a mental health specialist

You should get in touch with your local health centre or hospital to obtain a contact number for the appropriate children and young people's mental health specialists.

Remember - you can contact your local mental health specialists for a number of reasons, for example:

- For advice on how to make a referral about a named child.
- For advice about whether or not to make a referral (it is normal practice to seek this advice without naming the child in the first instance).

- For advice about what to do (once again there should be no necessity to name the child).

By not naming the child you are protecting their right to confidentiality. This method of seeking advice also has the advantage that you do not need to get anyone's consent in advance of your contact phone call.