

that while TSA should focus on scientific research, TSA should also address the needs of the newly-diagnosed—adding, “I advocated for myself. I wouldn’t mind advocating for other people.”

Right now Kim’s priority is school but he has also volunteered for the TSA Multi-Cultural Task Force which he views as a great way to help himself and other people.

TS is not prejudiced. It hits everybody. This is the perfect opportunity to show that.

Gordon’s first exposure to a TSA support group was off-putting. An older man discussed how the disorder had “ruined his life.” Gordon found the experience very distressing. He found comfort in Sue Conners’s jokes and decided to make a career change from traffic reporter to counselor.

Whenever I did a lifetime inventory, I always wanted to work with kids—even prior to TS. During my internship I met a cute little boy with TS. I hope that I can be comforting to kids with TS.

He believes that TSA should make going into schools its priority. He hopes to work with Ms. Conners in schools.

Lloyd believes that TSA should continue to focus on educating the public “. . . without over dramatizing or scaring people.”

Education is even more important than research for the cure. There’ll be a cure one day—we’ve already come so far—but people will be living with TS for years to come.

These five members of the TSA Generation are role models for the next generation. As a group, they are open about TS and willing to discuss how they cope with symptoms. They have weathered difficult periods with a combination of humor, intelligence and the support of their families. All of them acknowledge that increased awareness has made life with TS easier than it had been for previous generations but there is still a great deal of work to be done. Each of them has voiced their plans to ‘give back’ by participating in easing the way for children and adolescents with TS today. ■

Ask the Social Worker

Answers provided by Evan Michaels, CSW, and Emily Kelman-Bravo, CSW, Director Social Worker of TSA’s NYC Counseling Program.

Q How can I be fair to my other children when I know that my child with TS gets away with so much more than they do?

A Most parents with more than one child attempt to be as fair as possible with all their children. We’re all familiar with the common parental refrain—“I treat all my children the same.” Most parents do try to provide all their children with love and nurturance and to establish a set of principles for their children’s behavior. But in practice, equal treatment for all children can become an obscure proposition for parents with the best of intentions. This is because all children are different. They have differences in their need for love and nurturance, and their abilities to return it. They also differ in their cognitive, emotional and physiological developments and abilities.

Since all children are, in fact, different, it is reasonable to assume that they will need individualized parenting. For some siblings the differential treatment may be very subtle and occur in just a few areas of parenting. When one sibling has TS these differences in parenting strategies may be more fundamental. Parents will probably need to give disproportionately more time and effort to the child with TS, and perhaps even have different expectations of the TS sibling’s behavior. The child with TS may need more time to get ready for school in the morning or require more help with his homework. It may also be harder to set limits for the child with TS. He may challenge the household rules and the parents’ well-intentioned ideas about equal treatment of all children.

Some parents tell us they feel guilty about these unequal expectations and ‘unfair’ treatment, but if they are responding appropriately to the child’s current capacity to learn and internalize, they should not feel guilty. Parents may indeed

wind up showing more understanding, patience and compassion toward the child with TS while the sibling without TS might be reprimanded or punished for a similar behavior or mistake.

The family needs to have an ongoing dialog about discipline and TS. Parents need to let their children know that they would like to treat them equally and want to work toward that goal, but they are different and need to be treated accordingly. The child who is not effected by TS may even be asked: If you had a choice would you like to have your current rules and expectations or have TS and a new set of rules? His choice will undoubtedly be not to have TS. Most children do see their siblings with TS as having needs and abilities different from theirs, and will be able to assimilate being treated in a different way if it is done in a manner that is sensitive to their developmental needs.

Q If my child with TS goes to counseling should my whole family go?

A We strongly recommend that the entire family participate, especially during the assessment process at the beginning of your child’s treatment. This assessment process is the first contact between the family and the therapist and it often takes several sessions. The purpose of the assessment is for the therapist to gather information not only about the “identified patient” (your child) but to get a clearer idea of the underpinnings of the child’s problems which may involve his environment, family communications patterns, family relationships and the values of the family.

Once the therapist has an understanding of the background surrounding the child, the therapist should recommend the appropriate kind of therapy, individual or family, that will be most effective for the individual child.

