

Study Investigating the Social Adjustment of Adolescents With Tourette Syndrome and the Relevant Factors

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Abstract

Purpose:

Tourette syndrome (TS) is a neurodevelopmental movement disorder, characterized by multiple vocal and motor tics lasting longer than one year. The tics tend to lead to misperceptions by others, which are deemed awkward and unpopular. As a result, adolescents with TS may experience negative impacts in the physical, psychological, social, and academic domains, which even cause difficulty in social interactions in their future adulthood. Good social adjustment is important to adolescents with TS, because it can help them deal with multiple physical and psychological stress factors of the disease, as well as maintain good social interactions. Nowadays, the knowledge on the social adjustment of adolescents with TS during their social interactions with others is still limited. Based on the social adjustment framework, the aim of this study is to examine the social adjustment, psychosocial stress, and self-esteem relationship of adolescents with TS.

Methods:

This research conducted a descriptive and cross-sectional study design, recruiting a total of 192 adolescents with TS from a medical center in Taiwan. Data was collected by using a structured questionnaire with demographic components, the Social Adjustment Scale for Adolescents with Tourette Syndrome (SASATS), the Self-Esteem scale, and the Stress Index for Children or Adolescents with Tourette Syndrome (SICATS). Data was analyzed by using SPSS Version 20. Independent t tests, Pearson's correlation coefficient tests, and analyses of variance were used on participants' demographic characteristics and on the correlation among psychosocial stress, self-esteem, and social adjustment. Lastly, multiple linear regression was utilized for determining the predictors of psychosocial stress.

Results:

The mean age of participants is 14.97 years, and most participants are male (85.58%). The mean age diagnosis of TS is 8.95 years. The most common type of comorbidity is Attention Deficit Hyperactivity Disorder (30.8%). The majority of participants (79.1%) used oral prescription medications. The mean SASATS score for all participants is 64.46 ± 8.16 , the mean SICATS score is 40.21 ± 12.23 , and the mean Self-esteem score is 28.98 ± 5.49 . Pearson correlations show that there is a positive correlation between social adjustment and self-esteem ($r = 0.37, p < 0.01$). In addition, there is a negative correlation between social adjustment and psychosocial stress ($r = -0.36, p < 0.01$). Multiple linear regression demonstrates that social adjustment and self-esteem are the predictors for psychosocial stress of adolescents and could explain 21.2% of the total variance.

Conclusion:

The research results can serve as evidential reference for clinical, community, and school nursing personnel who are taking care of adolescents with Tourette syndrome. Nurses and healthcare providers may also provide individualized care and adequate social resources to help adolescents reduce their psychosocial stress, improve self-esteem, social adjustment, and develop interventions that help them achieve good social adjustment.