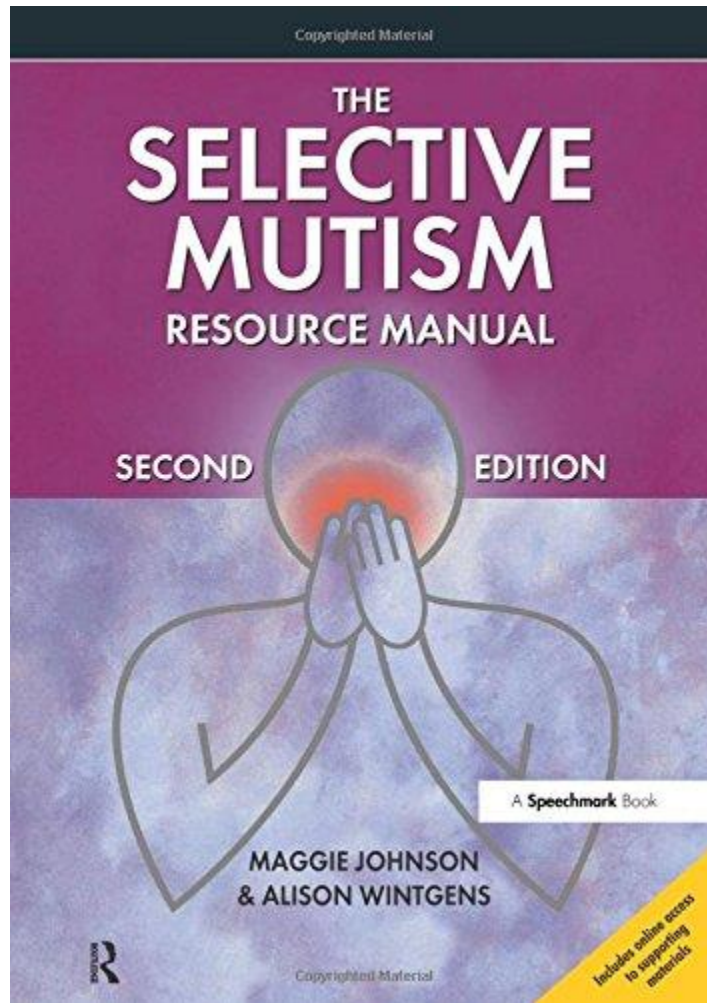


Children Who Can Speak but don't... Working with Selective Mutism

by Libby Hill, SLT

Session Aims

- ▶ To recognise SM
- ▶ To understand the causes and maintaining factors
- ▶ To relate the above to an appropriate prevention or management plan:
 - educating all key people involved with the child
 - creating the right environment at home and at school
 - considering the need for a formal/informal programme and what that should look like



Selectively Mute Children

- ▶ WANT to speak but are unable to
- ▶ Become afraid of the act of speaking and people hearing their voices (or own voice)
- ▶ Become increasingly wary of any form of communication which could lead to an expectation to speak
- ▶ In time learn to avoid distress by avoiding communication

Stats

- ▶ 1 in 140
- ▶ More girls than boys
- ▶ More in geographically separate populations or EAL (isolation and cultural reasons)

- ▶ More research needed

Common Symptoms of Anxiety?

- ▶ Body tension
- ▶ Blank facial expression
- ▶ Lack of coping strategies
- ▶ Avoidance
- ▶ Can't analyse/explain source of anxiety
- ▶ General helplessness
- ▶ But may not exhibit any outwards signs

What is Selective Mutism

Consistent failure to speak in specific social situations despite being able to speak in other, more familiar situations providing.....

- ▶ Duration at least one month beyond the first month of school or nursery
- ▶ Not due to lack of knowledge of, or comfort with, the language
- ▶ Cannot be better explained by a communication disorder or any other abnormality

What is Selective Mutism

It's more than just not talking.....

Any form of expectation to communicate including non-verbal

Using the toilet

Standing out/being different

Selective Mutism - Summary

- ▶ Now seen as ‘a manifestation of social anxiety or **phobia**, occurring in temperamentally predisposed children who are unable to take normal life events in their stride, particularly when the reactions of others reinforce silence rather than speech’

Why

- ▶ A child with SM, is not born mute, they cry at birth and develop speech, language and communication as everyone else. They are at risk of developing SM because of genetic factors linked to their family and it is specifically the level of anxiety which will be at issue.
- ▶ They might develop SM because of an event or a series of events which raise the level of anxiety in their life. The environment in which they live can cause a negative reaction, elevating the level of anxiety which in turn takes the form of mutism.

Causes

Lorraine Carmody (1999) described three types of factors, which are considered to be relevant to the cause of the development of SM in a child:

- ▶ Predisposing
- ▶ Precipitating
- ▶ Perpetuating/exacerbating.

Predisposing

- ▶ These factors include those which the child is born with. These are the genetic factors. They also include the existence of any speech and language difficulty, anxiety, wariness and hyper-sensitivity within the child; family history of shyness or selective mutism; family history of other psychological issues, especially anxiety.

Precipitating

- ▶ Factors which might occur in the environment around a child
- ▶ Separation, loss or trauma
- ▶ Frequent moves or migration
- ▶ School or nursery admission
- ▶ Self-awareness of speech impairment
- ▶ Teasing and other negative reactions

Perpetuating or exacerbating

- ▶ Lack of appropriate intervention or management
- ▶ Reinforcement of the mutism by increased attention and affection.
- ▶ Over-acceptance of the mutism
- ▶ Ability to convey messages non-verbally
- ▶ Geographical or social isolation
- ▶ Family belonging to an ethnic or linguistic minority
- ▶ Negative models of communication within the family

Maintaining

- ▶ **Direct Association:**

- Child links communication outside the immediate family to unpleasant feelings such as discomfort, fear or nausea. They learn to avoid such feelings by remaining silent.

- ▶ **Negative reinforcement:**

- Child experiences anxiety build-up followed by relief when pressure to speak is removed

Unwittingly, adults often repeat and strengthen these associations

A unique child

- ▶ Therefore, any one person's cause, maintenance and perpetuating factors are going to be slightly different to anyone else's. We can use some generalisation about children and young people with SM but far more useful, is actually finding out the unique combination of these factors that make up the individual

Wrong term?

- ▶ Situational mutism would be better
- ▶ Talk fully and freely else where

SM:

Not to be confused with traumatic mutism

Poly-vagal lens neural response response: fight, flight, freeze, fawn

SM: High or Low profile?

High:

- ▶ Child does not speak at all to certain people

Low:

- ▶ Child manages to speak a little when absolutely necessary (fear or disapproval outweighs fear of speaking) but does not initiate conversation, requests etc.
- ▶ Likely to be overlooked and at risk of high profile SM, social anxiety disorder, school avoidance etc.

Always a consistent pattern with body tension, wariness and tendency to freeze

Initial Simple Assessment

- ▶ Background information from home/school
- ▶ Speaking habits
- ▶ Possible maintaining factors
- ▶ Anxiety and comfort triggers

Overview of development, cognitive and language skills, family situation, relationships, temperament

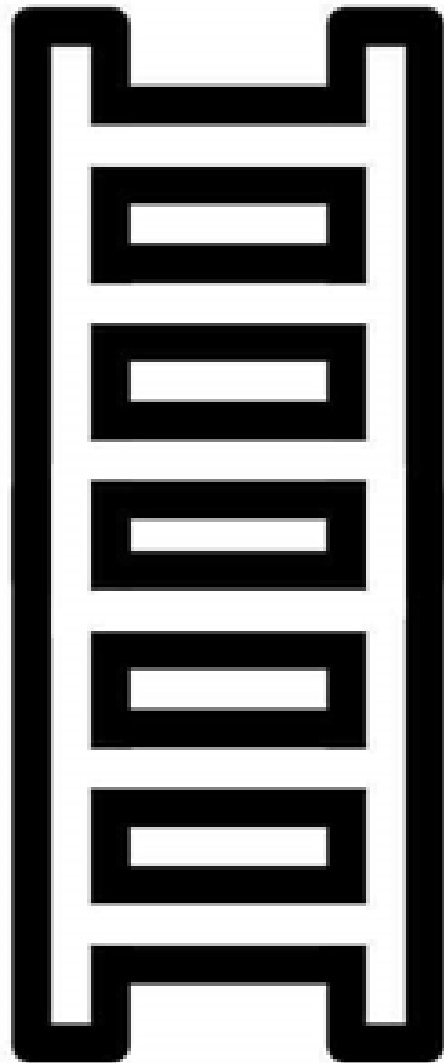
Record on who/where/when

Audit of school vs home

Work out child's pattern and not additional anxieties

PRIMARY & MIXED STATES of the Autonomic Nervous System

The Polyvagal Theory by Dr Stephen Porges / "The Polyvagal Ladder" by Deb Dana, LCSW / image by Justin Samsori, LMFT



SAFE & SOCIAL

ventral

FLIGHT

sympathetic

FIGHT

dorsal

SHUT DOWN

PLAY

STILLNESS

FREEZE

JustinLMFT.com



Communication Load

Low

- ▶ Rote language
- ▶ Economical e.g. yes/no
- ▶ No risk of getting it wrong
- ▶ Elicited/structured speech

High

- Alternatives/reasons
- Opinions/ideas
- Unsure if answer is acceptable
- Initiated/unplanned speech

Detailed Assessment for diagnostic purposes

- ▶ Parental interview and home environment checklist
- ▶ School report form and school environment checklist
- ▶ Cognitive assessment
- ▶ Language assessment
- ▶ Social communication assessment

Treatment Progression

- A. Educate home and school about SM
- B. Plan and implement appropriate modifications to environment at home and school
- C. Acknowledge the difficulty with the child - whatever the age
- D. Introduce informal small step targets at home and at school
- E. If necessary, elicit speech with a key individual, using parent whenever possible
- F. Generalise speech to other people and places, including wider community
- G. Ongoing social skills, confidence-building and assertiveness-training as appropriate

Principles of Intervention (1)

- ▶ Early intervention and prevention
- ▶ Tackle the difficulty where it exists
- ▶ Ensure a united, consistent approach
- ▶ Make the child an active partner in the treatment process
 - they **want** to talk and need open discussion
 - giving some control will reduce anxiety

Principles of Intervention (2)

- ▶ Use a behavioural approach to reduce anxiety
 - reward communication rather than avoidance
 - avoid negative reinforcement (anxiety build-up followed by *relief* when pressure to speak is removed)
- ▶ Follow a systematic progression changing one variable at a time
 - small achievable steps ensure success
 - work through the stages of confident speaking gradually increasing the “communication load” at each stage

A. Educate home and school

- ▶ Silent Children DVD (see resource section)
- ▶ SMIRA membership and leaflets
- ▶ Hand out from SMRM. *“What is SM?”* and *Ch. 2 “Frequently asked questions”*
- ▶ *“Can I Tell you about SM?”* (Jessica Kingsley Publishers, June 2012)
- ▶ *“My friend Daniel doesn’t talk”* (Speechmark Publ.) linked to whole case awareness
- ▶ www.selectivemutism.co.uk (especially the download “A5 SM leaflet)
- ▶ *“Speaking Out”* leaflet for prevention

B1. Modifications to environment at home and school

- ▶ Use assessment findings from discussions with home/school, especially Maintaining Factors and Environmental checklists, to agree changes
- ▶ Selective key points from Parent Advice sheet, Do's and Don'ts,
- ▶ Agree review date

B2. Modifications to environment

- ▶ **Raise a shared awareness**
 - teamwork and consistency are essential
- ▶ **Understand the child's anxiety**
 - identify the pattern of behaviour related to anxiety triggers and modify interaction/expectations
- ▶ **Reinforce risk-taking rather than avoidance**
 - do things *with* rather than *for* the child

B3. Modifications to environment

- ▶ **Remove all pressure to speak and ensure that all associations with communication are positive**
 - provide opportunity not expectation
 - cajoling, gentle persuasion, bribes and reprimands all amount to pressure
 - suggest alternative (*natural*) forms of communication until child is ready to speak
 - never remove all need to communicate

B4. Modifications to environment

- ▶ **Acknowledge child's difficulties but cut them down to size**
 - play down difficulties without ignoring them
 - hide own anxiety and be positive about future
- ▶ **Foster a special relationship with at least one adult at school**
 - rapport building for confidence and trust
- ▶ **Use friends and family to mediate and facilitate communication**
 - SLT children with their friends, invite parents into class
 - communicate through friends or parents

C. Acknowledge the difficulty with the child

- ▶ You are not alone
- ▶ I want to help get rid of that feeling
- ▶ There's a reason why you feel this way, and ways we can help
- ▶ This is how we do it - tiny steps
- ▶ We only move on when you are ready
- ▶ If you ever feel uncomfortable, we stop
- ▶ It won't always be like this

D. Informal small step targets (1)

1. Ideas for desensitisation

- Communication cards or a dry-wipe board (but consider child's ability to initiate)
- Aids to Communication (e.g. talking cards or photo album)
- Voicemail - child records the home message or leaves a message with friends and family

D. Informal small steps targets (2)

2. Activities to build confidence and independence

- Using louder instruments in music
- help to move further away from wall or teacher in physical education or hall sessions
- increasing artistic expression through clay, painting, movement or dance
- Bigger stronger actions or roles in mime, movement or dance

D. Informal small step targets (3)

Activities to build confidence and independence (continued)

- extra encouragement or practice on climbing apparatus in hall or playground
- jobs or responsibilities in the classroom
- running errands, at first with another child
- using puppets in play or drama
- joining in noisier group activities - singing, chanting, vocalising as animals

E. Eliciting Speech

- ▶ Stimulus fading (sliding-in technique) if conversational partner available to help
 - enter room *while child is talking* and join in once child can tolerate your presence
- ▶ Shaping approach/Lone talking if no conversational partner available, combined with desensitisation (use of voice recordings/telephone/walkie-talkies etc.)

Small Steps following systematic progression

Small steps programme

Need to agree:

- ▶ Initial keyworker/overall progression
- ▶ Sliding-in technique or shaping sessions
- ▶ Rewards/recording system
- ▶ What to do if target failed

Realistic targets following systematic progression - child in control

Teenagers

- ▶ Greater understanding about selective mutism: 100% felt that best way to help a student with SM is to recognise that they are manifestations of anxiety. The student is not choosing to be silent and the lack of speech is not because they are not motivated nor trying to be deliberately difficult.
- ▶ 75% felt that teachers had a huge role in helping/building the student's self-esteem and self-confidence. 95% felt that increasing confidence helped to reduce anxiety at school
- ▶ 100% discussed taking the pressure away by not expecting them to speak was a huge help.
- ▶ 75% discussed that the expectation to communicate nonverbally was just as stressful e.g. given cards or other device to use. 100% mentioned a need not to stick out in any way.

Teenagers

- ▶ 25% mentioned that pressure to speak comes in many forms. Cajoling, teasing, punishing and the promise of a reward are all forms of pressure.
- ▶ The position where the student sits was mentioned in 75% of the responses. Interestingly 25% of these said to sit in a less conspicuous locations such as back half of the room, towards the sides, and away from the teacher's desk while 75% of them preferred the front of the class so the teacher could see if they needed help but few others would be aware.
- ▶ 100% wanted staff to avoid singling out the individual or calling attention to any achievements or differences. 30% talked about post-it notes as subtle feedback.

Teenagers

- ▶ 75% mentioned a trusted adult such as a TA, teacher or counsellor, responsible for maintaining a continuous relationship with the student from year to year
- ▶ 2 participants mentioned that it is useful at the beginning of a new school year for new teachers to allow for plenty of time for the child to get used to the new situation. 3 of the respondees had experienced phased settling in time at secondary school while 4 felt that this was not a good idea as they would have missed lessons and then feel worse about going in.
- ▶ 100% felt they could not ask for help but 50% found it useful if the teacher checked-in on them to see if they needed anything. 2 talked about the fact that it's easier to say, 'No,' if someone asked if they wanted help to avoid being conspicuous while 4 others discussed that to say yes to questions is easier than arguing why, 'No,' is actually more appropriate.
- ▶ If the student is unable to respond, move on rather than waiting for the student to answer, was talked about 5 times.

Teenagers

- ▶ 75% had found it best where they had a means of communicating with teachers especially either sharing good news and letting them know if anything has upset them, e.g. via email, a liaison book or a go-between
- ▶ 50% had experienced staff who had taken it personally when they had not been able to talk to them. They had appeared hurt or offended when the YP remained silent. To realise it's not personal, is best.
- ▶ 45% wanted staff to know that anxious teenagers are often too tense to process information quickly or accurately, so please repeat instructions quietly and calmly as necessary.

Exams testing

- ▶ 60% discussed separating the child's performance from the SM so that success is measured by performance only.
- ▶ Alternative forms of assessment and participation to substitute for speaking, such as: written work, non-verbal communication, audio- or video-taping had been used in 45% of the cases.
- ▶ Extended time for testing and assignments, or non-timed testing had been welcomed by 75%.

Friendships

- ▶ To have trusted friends in the same class(es) was felt to be the best way in 100% of the replies. In secondary school, this probably requires scheduling by hand.
- ▶ To be able to sit with a trusted friend or have them as a work partner was useful in 75% of the replies.
- ▶ Opportunities for small group activities wherever possible in preference to whole class activities, preferably with at least one trusted peer was mentioned in 6 replies.

Techniques for involving child

- ▶ Wish list
- ▶ Talking Map (see SMRM2)
- ▶ Questionnaires
- ▶ Shared target-setting respecting child's preferences
- ▶ Ranking (see SMRM2)
- ▶ Monitor anxiety level - rating scales
- ▶ Shared environment record

Success depends on...

- ▶ Thoroughly assessing and reducing reinforcement of Mutism
- ▶ Full involvement of the child/yp
- ▶ Relationship with keyworker
- ▶ Understanding the progression and keeping anxiety to a minimum
- ▶ Being prepared for and ready to cope with setbacks
- ▶ Knowing when to let go

Case 1

- ▶ 3 years old
- ▶ Attends nursery 5 mornings a week
- ▶ Has never said anything to staff but will talk to peers outside

Case 2

- ▶ 4 years of age
- ▶ Starting school in September (imagine its easter now)
- ▶ Doesn't speak at all to adults or peers yet when her mother collects her they hear her talking fully and freely on the way out

Case 3

- ▶ 14 year old girl attends a grammar school
- ▶ Needs to talk to participate in lessons
- ▶ Only speaks to 2 friends in playground or where can't be overheard

Case 4

- ▶ Teenager who wants a job but needs to talk on the phone
- ▶ 'recovering from SM' but cant talk on the phone
- ▶ Wants help

Case 5

- ▶ 5 years old in primary school
- ▶ Will talk to the TA but no other adults
- ▶ Speaks OK to other children when not overheard

Case 6

- ▶ 16 year old wants to do all the things his pees do inc ordering in maccys, go to town, travel on the bus
- ▶ starting college and wants peers to know he's not being rude, he wants to be friends but just cant talk

<p>3 years old Attends nursery 5 mornings a week Has never said anything to staff but will talk to peers outside</p> <p>A-H</p>	<p>4 years of age Starting school in September (imagine its easter now) Doesn't speak at all to adults or peers yet when her mother collects her they hear her talking fully and freely on the way out</p> <p>J-R</p>	<p>14 year old girl attends a grammar school Needs to talk to participate in lessons Only speaks to 2 friends in playground or where can't be overheard</p> <p>S-Z</p>
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Further Support

- ▶ **SMIRA** (Selective Mutism Information and Research Association)
- ▶ Facebook page
- ▶ **Parent/professional support group** based in Leicester (free membership) - info@selectivemutism.co.uk
- ▶ **Help Line** 0116 212 7411 - (4-7pm most days, not Thurs)
- ▶ **“Silent Children”** DVD available from SMIRA website
- ▶ **Email Chat Forum**, free downloads and SMIRA information packs:
www.smira.org.uk

Resources

- ▶ **The Selective Mutism Resource Manual 2**

Speechmark Publications 01908 326 944

ISBN 9780 86388 280 7 Order Code: 002-4759

- ▶ **Can I Tell You about Selective Mutism?** By Maggie Johnson & Alison Wintgens, Jessica Kingsley Publishers, June 2012. ISBN 9781849052894 www.jkp.com £7.99

- ▶ **My Friend Daniel Doesn't Talk** by Sharon Longo Speechmark Publications info@Speechmark.net £9.99 ISBN 9780 86388 562 4 Order Code: 002-5288AF

- ▶ **Social Skills Poster: Facing Fears**

Taskmaster Ltd www.taskmasteronline.com 0116 270 4286 catalogue

Resources

- ▶ **Penguin** by Polly Dunbar (2007) London: Walker Books
- ▶ **Medina Hill** by Trilby Kent
Tundra Books/Random House, a novel featuring an 11 year old boy with selective Mutism
- ▶ **The Loudest Roar** by Claire Maskill

Addressing Anxiety

- ▶ **Dawn Heubner (2006)** *What to do When you Worry too much: a Kid's Guide to Overcoming Anxiety*, Magination Press (order through Amazon)
- ▶ **Stallard P (2002)** *Think Good - Feel Good: A cognitive behaviour therapy workbook for children and young people*. John Wiley & Sons, Chichester
- ▶ **Stallard P (2005)** *(A Clinicians' Guide to) Think Good - Feel Good: Using CBT with children and young people*, John Wiley & Sons
- ▶ **Anxiety UK** *Children and Young People with Anxiety: A Guide for Parents and Carers/ Young Person's Guide (£3)*