

## What is Selective Mutism?

Carolyn Nelson, LCSW-C, RPT

Andy is a red-haired fourteen-year old youth with freckles across his nose and cheeks. He sits in my office quieter than a mouse. All you hear is the clock ticking in the background. I ask him to write about a video game he likes. He did not budge an inch. I just sat there wondering if he was just too anxious to respond. I pulled out my ten point scale and asked him to point to where his anxiety was from one to ten. He did not budge an inch. I sat with him in silence for the rest of the session.

Andy has selective mutism and has had it since he was two. While he talks freely with his parents alone, he does not speak to strangers or people outside of the immediate family. Andy was not diagnosed until he was seven. He had no services. While he was able to speak at home to his parents, it took him years to speak outside of the home setting. Now he speaks to a few friends in school but mostly texts using his cell phone. He does not answer teachers' questions in the classroom, but will go up to them after class to ask what he does not understand. He will not talk in public or in front of strangers, even with his parents around. My job is to get him comfortable to talk to me and get him to talk in the community.

Research in the literature shows that selective mutism is found in about three percent of the population. It is a social anxiety disorder that occurs around the age of three and is seen as early as two. It is usually diagnosed between the ages of three to eight. There is usually social withdrawal or not playing at all, hesitation in responding, difficulty following a series of directions, problems staying on a task, or difficulty completing tasks. Children with this disorder have difficulty socializing nonverbally or may not communicate at all. The non-verbal stage of communication is commonly called speech phobia as compared to others that have social anxiety and cannot speak or even do gestures at all. These children often change their level of social communication based on the setting and expectations of others. Further information can be found at: [www.selectivemutismcenter.org](http://www.selectivemutismcenter.org) and [www.selectivemutism.com](http://www.selectivemutism.com).

There is no one theory as to the cause of selective mutism. Researchers have looked at genetics and heredity and found no causal link. If a parent is predisposed to anxiety, this may be a mitigating factor. In these children, it is found that they have an overly excitable amygdala that sets off a flight/fight response. Some say it is related to abuse or trauma, but in traumatized children, they become totally silent and do not speak to anyone. Further information can be found at: [www.socialanxiety.com](http://www.socialanxiety.com); [www.theselectivemutism.info](http://www.theselectivemutism.info); [www.selectivemutism.org](http://www.selectivemutism.org).

In my experience, the lack of speech impacts on their social development and, for some, on their academic work as well. It can cause a child to misinterpret environmental and social cues. The earlier you get your child into treatment, the better. These children will not outgrow this. If children are mute for years, his/her behavior can turn into a conditioned response. The child gets used to non-verbalizing and it can be a difficult habit to break. If left untreated, children with selective mutism are at risk for developing a host of other problems.

Parents may be at a loss of how to help their child who suffers from selective mutism. Below are some tips:

- Do not speak for them. If they want something and still refuse to talk, walk up with them and encourage them to ask for what they want until they can do it on their own.
- Find a motivator or positive reinforcement that will encourage them to talk to others. This may be as simple as wanting a lollipop at the doctor's office.
- Get treatment as soon as you notice the problem. It is much easier to treat children when they are younger. Find a therapist who has expertise in treating children with anxiety disorders (it is best to find a social worker or a psychologist who has been trained in play therapy and childhood anxiety). Speech therapy beginning at age three is also recommended, although this is not a speech disorder per se.
- Do not try to force your child to talk. You have to allow your child to talk at his or her own pace. You do not want it to become a power struggle.

The following are some resources that may be helpful:

Can I Tell You About Selective Mutism? By Maggie Johnson and Robyn Gallo

Helping Your Child with Selective Mutism: Practical Steps to Overcome a Fear of Speaking By Angela McHolm, Charles Cunningham, and Melanie K. Vanier

Sophie's Story; A Guide to Selective Mutism By Vera Joffe, Ph.D.

The Selective Mutism Resource Guide by Maggie Johnson and Alison Winigens

A Home Bird by Philip Stead

Unspoken Words—A Child's View of Selective Mutism by Sophie Shipon Blum

Why Dylan Doesn't Talk by Carrie Bryson

<http://pintrest.com/shirla/selective-mutism/>

Selective mutism is not a death sentence. It is a social anxiety disorder. Just because your child has selective mutism does not mean you are a bad parent. It takes time. I worked with a girl for five years, beginning at age five. She slowly made improvements. I will never forget after having her for a year, she spoke to her grandmother for the first time and said, "I missed you grandma." When she was eight she was put on a small dose of antidepressant with anti-anxiety properties. This helped even more. She still was not talking in school. This year she went into fourth grade and slowly began talking to friends in the class. Then she talked to her teacher. Finally, she

began answering the teachers questions out-loud. She now talks freely to others at school with no symptoms of anxiety. Academically, she is still behind, but she is slowly catching up. This is an example to show you there is hope. It is a long road, but worth the effort.

*Carolyn Nelson is a licensed clinical social worker and a registered play therapist. She has worked in the mental health field for over 25 years. She currently works for a non-profit outpatient mental health clinic in the state of Maryland in USA working with children and adolescents. She can be reached on her website:*

*<http://www.therapistscornerblog.com>. You can also follow her blog: <http://blog.therapistscornerblog.com>.*