



## Understanding Selective Mutism A Guide to helping our teachers understand

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Selective Mutism is a childhood anxiety disorder characterized by a child's 'inability' to speak in various social settings. These children are able to speak at home, and in settings where they are comfortable, secure and relaxed. The etiology of Selective Mutism is due to severe anxiety.

Selectively Mute children have **severely inhibited temperaments**.

When compared to the typically shy and timid child, SM children are at the extreme end of the spectrum for timidness and shyness. So much so, that the severity of SM children's behavioral inhibition enables for a pathological reaction in response to various social stressors.

Most, if not all, of the distinctive behavioral characteristics that SM children portray can be explained by the studied hypothesis that children with inhibited temperaments have a decreased threshold of excitability in the almond-shaped area of the brain called the **amygdala**.

According to studies, when confronted with a *fearful scenario*, the amygdala receives signals of potential danger (from the sympathetic nervous system) and begins to set off a series of reactions that will help individuals protect themselves.

In the case of Selectively Mute children, the *fearful scenarios* are **social settings**, such as school, social gatherings, etc. According to studies, approx. 90% of SM children meet the DSM-IV diagnostic criteria for social phobia.

**Social phobia** is a persistent fear of social or performance situations. It can be a debilitating and a heart wrenching disorder for an adult; imagine what it can be like for a child who has not yet learned proper coping skills? Many of these children literally feel like they are 'on stage' every minute of the day! This is evident by their 'uncomfortable' body language when any attention is brought to them. Many children will turn their heads away, play with their hair, look to the ground, tilt their head, hide in the corner, suck their finger(s), and pick or scratch sores, moles or birthmarks on their body. Many will stare at you with a 'blank-looking' or 'expression-less' face, acting as if they are ignoring you. Teachers must realize these characteristics are all examples of a severely anxious child.

Unlike adults who can choose when and where to go, children do not have that choice; especially when it comes to going to school. Due to their severe anxiety disorder, Selectively Mute children do not speak. Just as an individual with agoraphobia avoids going out of the home in order to avoid the feeling of anxiety, and the person with obsessive compulsive disorder (OCD) performs rituals and has compulsions in response to their anxiety...the selectively mute child does not speak...simply because speaking enhances anxiety. These children are truly unable to talk in select settings where there is an expectation to speak.

It is so important for teachers and school personal to remember that the Selectively Mute child is not doing any of this 'on purpose,' or trying to 'control' a situation. These children literally **cannot** speak. As a selectively mute child once told me... "The words just won't come out."

These children are **not** mute because of a Learning Disability, Autism, Pervasive Developmental Disorder, oppositional defiant disorder, etc...

This is not to say that another disorder cannot occur concurrently with Selective Mutism, but it is not the cause.

Knowing that the majority of cases are due to severe anxiety, special education classes, remedial classes ...etc are often completely inappropriate for these children. By understanding the nature of Selective Mutism, a child should be mainstreamed in a regular class. An IEP can be beneficial in certain cases of SM, especially as the child progresses through school and verbalization is not occurring. The IEP should be designed to help lessen anxiety for the child but at the same time encourage mainstreaming and 'normalcy' as much as possible.

School is usually the most difficult place for selectively mute children to be. Teachers and peers expect all children to interact and participate in classroom activities. When children do not, attention is brought to them. This is exactly what happens to the selectively mute child. This is quite ironic, considering the last thing an anxious child wants to do is bring attention to themselves!

Knowing that these children are anxious, it should be quite obvious that 'pressuring,' 'punishing,' 'coercing' or 'bribing' an SM child to speak is completely counterproductive and inappropriate. By doing this, the SM child often feels more anxious and uncomfortable, causing them to regress even further.

It is of utmost importance that the school approach the SM child from an understanding and accepting perspective. The main objective should be to do whatever is possible to make the child feel comfortable and relaxed.

A teacher should work with the parents to help alleviate as much anxiety as possible. By doing so, many children will often make progress more readily than if they are completely misunderstood and mismanaged.

There are varieties of methods that teachers can use to help the Selectively Mute child feel more comfortable in the classroom. Primarily, a teacher should try to get to know the child in a completely unobtrusive and accepting manner.

I often recommend, if possible, visiting the child at home before the start of the school year. There is certainly no better place for children to feel more comfortable than in their own home! Visiting the children on their own turf will certainly allow for a more comfortable way of getting to know each other. I recommend sitting in the child's room, asking them to show you their favorite books, artwork, CD's, games...Etc. Allow them to lead, and direct the visit. It may take a few visits to the home before the child starts to open up. The goal is NOT to get the child to talk just yet, but to allow the child to feel relaxed and comfortable in your presence. Smiling, waving, sitting close to, and speaking gently to the child often help them feel more at ease. Conveying that their muteness is 'okay' and acceptable will often help the child as well. When a selectively mute child feels as though an individual is unaccepting and disappointed, they will often pull away.

Another tactic would be to meet the child at school, possibly before school starts in the morning. Have the parent bring the child as early as possible so the child does not feel so overwhelmed when a group of children is in the class at the same time. By being alone with the parent and the child, the teacher can try to engage the mother in conversation and allow the child to just observe. The teacher can direct the conversation to the child when the child seems more at

ease. Do not expect the child to necessarily respond. Just let the child know they are part of the conversation and any kind of nonverbal communication is okay with you.

Important advice is to **NEVER** make the child feel as though you are 'waiting' for him/her to speak. This expectation is anxiety provoking. Children do not want to feel as though they are letting the teacher down. In addition, it is important for teachers to not make a 'big deal' over any verbalization that does occur. Very often, the SM child will speak to a peer before a teacher. In this case, do not make mention that you 'hear' their voice. SM children will often pull away when that approach is taken!

Once a comfort level is reached, the teacher and parent(s) should agree on a '**plan**' to help the child. A qualified professional, such as a physician and/or therapist, who is competent in treating Selective Mutism are essential tools in helping develop a '**plan**' for the child.

The process of 'helping a child overcome selective Mutism' is a **step-wise** process that must be approached with patience and confidence. There is no over-night miracle cure for selective Mutism. With the guidance of professional, parents and teachers, children will build various behavior and coping skills that will allow them to slowly emerge out of their anxious state.

If approached in this manner, the child should successfully overcome Selective Mutism.

Please contact the Selective Mutism Group Childhood Anxiety Network (SMG-CAN) for further information. [www.SelectiveMutism.org/](http://www.SelectiveMutism.org/) 215-887-5748

**Please visit the 501( c )3, nonprofit organization the Childhood Anxiety Network, Inc.**  
[www.childhoodanxietynetwork.org](http://www.childhoodanxietynetwork.org)

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