

What is Selective Mutism?

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Selective mutism is a disorder that affects a child's ability to speak in certain settings. For example, a child may be able to speak with family at home but not with peers at school. Selective mutism is linked to anxiety and may be related to social phobia.

It is important to remember that selective mutism does not occur because an individual is shy or chooses not to speak.

Instead, it is a type of communication disorder with social anxiety elements.





How Is Selective Mutism Diagnosed?

The Diagnostic and Statistical Manual of Mental Disorders (APA, 2000) states that the following criteria lead to a diagnosis of selective mutism:

- The child is unable to speak in at least one social situation.
- The problem disrupts school/occupational achievement.
- The symptoms last for at least one month, beyond the first month of school.
- The child's inability to speak isn't caused by an insufficient grasp of his/her primary language.
- Another communication disorder (such as stuttering), a pervasive developmental disorder (PPD), schizophrenia, or other psychotic disorder cannot account for the difficulty.

What Are Some Behaviors Associated with Selective Mutism?

A child may show the following behaviors when struggling to say thoughts, feelings, or opinions out loud:

- intense shyness
- minimal eye contact
- withdrawal

- clinging
- compulsions
- temper tantrums

Sometimes a child will become motionless and expressionless when trying to communicate. This behavior is particularly common at the beginning stages of selective mutism.

What Treatments Are Available?

The goal of treatment is to increase communication both verbally (speaking) and nonverbally (signs, gestures, motions, etc.). Because some experts treat selective mutism as an anxiety disorder, medicine may be an option. Treatment is most effective when a team of professionals works together. The team may include a psychologist/psychiatrist, a speech-language pathologist, and/or a pediatrician.

Below are two treatments typically offered at school:

Behavioral treatment program

- Introduces the child to new individuals and situations gradually.
- Shapes communication by encouraging the child to progress from whispering (or mouthing) to voicing.
- Shows the child videotapes of desired behaviors.

Specific speech/language work

- Role-plays with different communication partners/ situations.
- Works in small groups.
- Uses nonverbal methods (picture cards, gestures, etc.) to build up to speaking tasks.



Resources

http://www.selectivemutism.org/. Retrieved October 21, 2008.

http://www.asha.org/public/speech/disorders/SelectiveMutism.htm. Retrieved October 21, 2008.

American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author. DSM-IV-TR (2000).



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