

# No pressure to speak

Children with selective mutism speak freely with only a small number of people, usually at home, which means that practitioners need to understand how best to make the child feel comfortable.

JASMINE IS three-and-a-half-years-old, and has been in her pre-school for six months. At home she is boisterous and chatty with members of her immediate family, but the adults in her setting have yet to hear her speak. They report that she, 'won't answer when her name is called during registration, and refuses to talk to any of the adults. Yet when her mum comes to pick her up she will talk quite freely to her.'

The staff are naturally beginning to become concerned. They initially described Jasmine as 'just shy', but because she talks freely to her mother when she collects her at the end of the session, they are beginning to wonder whether Jasmine is 'an elective mute'. This possibility has been discussed with mum, with the suggestion that perhaps she might like to visit her GP and ask for a referral for Speech and Language Therapy.

Unfortunately, mum, who describes herself as being 'painfully shy' when she was at school, has researched 'elective mutism' on the internet, and has become very confused and alarmed. Her search engine immediately refused to accept 'elective mutism' and automatically changed the search to 'selective mutism'. This led to hundreds of entries, many of them suggesting her child has 'high anxiety' or 'social phobia', and is possibly using refusal to speak as a way of gaining control, or as a symptom of trauma or even abuse.

Up to this point, Jasmine's mother was confident that she was doing a good job as a parent, but now has become anxious that her little girl is 'starting to have the same problems that I went through'. Her first reaction was to encourage her daughter to 'speak up at register time', and offer her the reward of a trip to McDonald's if she does it.

Although selective mutism in children is relatively rare, the situation I have just described is quite common, and it is essential that all adults working with young children are clear about why some children are very quiet, and what to do about it.

## Children who are shy

Maggie Johnson, a Speech and Language Therapist specialising in supporting children with selective mutism, and co-author of *The Selective Mutism Resource Manual*, agrees that it is particularly important to understand the difference between 'shyness' and selective mutism: 'Many children can

be described as "reluctant talkers" outside their homes, and being shy is just one of the reasons for this. Some shy or timid children are often lacking in confidence with unfamiliar people, and especially in groups. They may have a quiet temperament, or possibly a sensitive disposition, or have low self-esteem.'

Children who are described as 'shy' have a natural tendency to be wary of new situations and people. They may feel anxious if they are suddenly asked to do something that they have not tried before. This may be especially noticeable in a group. The children feel very self-conscious, which may show itself by children blushing or becoming tearful.

Shy and quiet children may function well at home because they are in an environment that is predictable. Language at home is also very predictable, where children, in general, begin conversations and adults respond. Children are, therefore, much more familiar with topics of conversation, which are often very repetitive and based around daily routines. This can be the opposite in settings, where children need to compete with each other to attract and maintain an adult's attention through talk.

Children who are shy may initially talk very quietly to a few adults and children, but are more likely to talk freely once they get to know the staff and routines and, particularly, if they are encouraged to join in with group activities where adults avoid putting them under pressure to speak. They are usually keen to join in with group activities, as long as they are not 'put on the spot' by being asked to go first. When faced with a new activity, shy children usually need to see another child get the activity right, and most importantly, need to see someone make a mistake, so that they can see how adults react.

While they welcome and respond well to adult support, children who are shy may remain uncertain in new situations, or with unfamiliar people.



**Michael Jones**

provides training on language development in the early years. Visit [www.talk4meaning.co.uk](http://www.talk4meaning.co.uk) for more details

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### Children with high sensitivity

Some children may be quiet because they are 'highly sensitive'. Often, they are more aware than other children of information coming to them through their senses. They may find, in particular, that certain levels of sound make them feel uncomfortable.

Children tend to be naturally very noisy when they are in a large group, causing highly sensitive children to feel overwhelmed. In order to cope with this feeling, they may retreat into activities that are repetitive and that do not require much interaction with other children. Like shy children, they may respond best in quiet groups, and activities where the rules and boundaries are very clear.

### Children in the 'silent phase'

#### Learning English as an additional language

Many young children in the very early stages of learning a second language go through a silent phase. This is an 'active silence', when they spend a great deal of time listening, and working out important aspects of their new language, such as when one word ends and another one begins.

Children often emerge from this stage as chatty individuals who then learn their new language by talking a great deal. However, some children who may have a shy, anxious or highly sensitive nature may need more support during their silent phase, to make sure that they join in activities with other children – so that they are getting the practice they need to learn their new language with confidence.

### Children with selective mutism

Children with selective mutism speak freely with only a small number of people with whom they feel comfortable. Typically, the children are able to speak at home, with familiar family members, but experience extreme anxiety about speaking outside their home.

This anxiety is so strong that the children often describe experiencing an actual physical blockage in their throats, possibly caused by muscular tension. The condition was originally referred to as 'elective' mutism because it was thought that the children were electing or choosing to be silent. It is now generally recognised that these children have developed a fear of unfamiliar people hearing their voice.

Maggie Johnson says that practitioners can make a clear distinction between children who are shy and those with selective mutism by observing their reactions to adults. 'Shy children are generally unsure of themselves and usually welcome help with joining in, whereas children with selective mutism have a specific dread of speaking.

'They may suddenly shut down, back off, or become almost frozen or rooted to the spot and unable to respond. They become wary of what they perceive to be a threat to make them talk. They may also be too "frozen" to communicate non-verbally, including making eye contact, smiling, nodding or pointing. They often develop a response of "silent watchfulness", where they have become extremely sensitive to the possibility that adults may put pressure on them to talk.'

### Providing the right support

So, how can we help reluctant talkers? Let us go back to Jasmine who, it transpired, was very shy and highly sensitive. Maggie Johnson has some key recommendations: 'Paradoxically, when we let the child know that she doesn't need to talk until she is ready, and the less we focus on the child talking, the more she will feel inclined to join in, because the pressure to talk is off.'

This relaxation often shows itself by the children beginning to talk with their friends while out of adult earshot. This is a sign of progress, and often leads to children like Jasmine feeling more comfortable talking with children when adults are near, and gradually to talking with adults.

It is very important to talk accurately about children's problems. Instead of saying, 'she's an elective mute', the staff in Jasmine's setting can



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*Children with selective mutism need adults to free them from the pressure to talk*

become more positive by using descriptions like, 'we know that Jasmine is a confident talker at home, and we are helping her develop her confidence here, and especially in groups.'

Visiting children at home, where they feel comfortable about talking, is very important, as is talking positively to parents about how you can work together.

Reluctant talkers are often anxious about what they will be doing in the setting, so if you can spare a few minutes at the end of the session to let them know what you plan to do tomorrow, then they can look forward to it. Alternatively, allowing them to come in with their parent five minutes before the start of the session, to see what activities are on offer, can help them to relax and plan in their own minds what they might like to do.

It is vital to look at the possible pressures on talking that can be created in settings. Top of my list is registration. What made the biggest difference to Jasmine was when the adults changed from a formal registration at the beginning of the session to self-registration. Each child was allocated a photocard with their name and photo on it, and parents were encouraged to help their child to find their card and put it up on a 'who's in pre-school today?' display.

Staff and children got together in a group later in the session and sang a 'hello' song, where children sang 'hello' to each child in turn, so there was no pressure on individual children to respond verbally.

The aim is not to make reluctant talkers noisy, but to help them feel more comfortable about being in a group – joining in and having fun because they know that there is no pressure for them to talk. Speaking can then develop at the children's own pace.

## Case study

### Sophia

Sophia attended a pre-school and was diagnosed as having selective mutism when she was four-years-old by a Speech and Language Therapist. Sophia talked well at home, and had no history of delayed language. Her older brother had no problems with communication. She could talk to her mother on the way to pre-school, but would become silent as soon as she saw other children and adults. She was described as 'always having a worried expression on her face'.

As time progressed, Sophia was able to take part in most activities, but difficulties arose because she was unable to say what she needed and particularly to ask to go to the toilet. She played alongside other children, and developed three friends that she regularly played with.

The Speech and Language Therapist recommended that a member of staff visit Sophia at home, and her 'key person' was able to visit once a week for five weeks. During the visits she chatted to mum, played with Sophia's toys, read her stories and played with Sophia's cat.

## Practitioners can make a clear distinction between children who are shy and those with selective mutism by observing their reactions to adults

The therapist also suggested that mum make arrangements with Sophia's friends' parents to meet with them and the children in the local park, and for friends to visit Sophia at home. Staff were advised to encourage and praise Sophia for joining in activities, but to remove any pressure on her to speak. These strategies led to a turning point – not long after this, Sophia began whispering to her friends during outdoor play.

Adults were concerned about how Sophia would cope in school. The Speech and Language Therapist led a training session for school staff, and helped them set up a plan to make Sophia's transition from pre-school to school as comfortable as possible. This included staff visiting Sophia in pre-school, and Sophia meeting her new class teacher in school.

During the last term in pre-school, Sophia seemed more relaxed, smiled more and was able to whisper in her mother's ear to say 'goodbye' or 'hello'. During the first year of school, with continued support from Speech and Language Therapy, Sophia became more confident as a talker. She remains quiet, but her anxiety about talking has greatly diminished. **eye**

## Useful resources

- *The highly sensitive child* by Elaine N Aron. Published by Thorsons Element (ISBN: 9780007163939).
- *Can I tell you about selective mutism?* by Maggie Johnson and Alison Wintgens. Published by Jessica Kingsley Publishers (ISBN: 9781849052894).
- *The selective mutism resource manual* by Maggie Johnson and Alison Wintgens. Published by Speechmark Publishers (ISBN: 9780863882807).
- *Supporting quiet children* by Michael Jones and Maggie Johnson will be published by Lawrence Educational in autumn 2012.
- SMIRA (The Selective Mutism Information and Research Association) have produced an excellent DVD, *Silent Children*, which describes selective mutism in detail, and gives advice on how to help. Contact SMIRA via [www.smira.org.uk](http://www.smira.org.uk)

## Key points

- Children with selective mutism will often talk freely at home, but not at all in a setting, which means practitioners should arrange home visits if possible
- Children may be anxious about what they might be doing, or feel too much pressure to talk in a group