

Children who can talk...but don't

Session two: Effective round-the-clock support handout pack

Handout order	Handouts
1.	Session two PowerPoint handouts
2.	Talking to the child about speech anxiety – ‘The pep talk’*
3.	What to say when*
4.	Maintaining factors
5.	Helping young children to speak at school*
6.	Ensuring an anxiety-free environment for children who have selective mutism (primary)*
7.	Environmental checklist for educational settings*
8.	Environmental checklist for home setting*
9.	Informal ways to work through the stages of one-to-one interaction (informal techniques)
10.	Supporting children with selective mutism – advice for parents
11.	Talking in public places*
12.	Advice for healthcare professionals
13.	Quick guide to meeting children and young people who have selective mutism
14.	Helping children to cope with anxiety*


* Handouts have been sourced from:
Johnson, M. and Wintgens, A. The Selective Mutism Resource Manual. 2nd edn 2016.
London: Speechmark. www.routledge.com


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Children who can talk...but don't
Session two: Effective, round-the-clock support
Children's Therapies Service









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Principles of Intervention

1. Immediate intervention in relevant setting(s).
2. Make sure a united, consistent approach.
3. Talk openly and positively about the child or young person's fear of speaking.
4. Remove pressure to speak and support participation rather than avoidance.
5. Help the child or young person (CYP) to face the fear at their own pace, one tiny step at a time.
6. Don't cut corners!
7. Build resilience from day one, through general achievement and independence.






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Before watching this training session


Please make sure that you previously watched:

- Session one: Understanding selective mutism

This training will refer to handouts from the session two pack that can be downloaded from the website. It will be beneficial to save or print the pack off in advance so that you can read them after the training session.

- www.kentcht.nhs.uk/childrens-therapies-the-pod/speech-and-language-therapy/selective-mutism/






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Managing SM and speech, language and communication needs

Speech or language difficulties

- Early SM work (principles 1 to 4) takes priority. Speech and language therapists can then do *input* work at clinic/school with non-speaking CYP and their parent or a teaching assistant (TA) they speak to comfortably. CYP does *output* work with the parent or TA.
- Group work should only be contemplated after early SM strategies are in place and CYP understands that speaking is optional.








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Aims

- To understand the principles of intervention when working with children and young people who have selective mutism (SM).
- To be able to create an anxiety-free environment for children and young people with SM.
- To be familiar with a range of informal techniques that can be used to help children and young people with SM to communicate.
- To be aware of how to support language development alongside SM.






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Managing SM and speech, language and communication needs

Autism Spectrum Disorder (ASD)

- SM and ASD benefit from the same anxiety reduction strategies (predictability, structured activities, visual explanations etc.).
- Usual SM strategies but even greater need for visual support and consistency.
- Tackle SM before social skills.







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Managing selective mutism and bilingualism


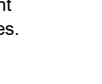
- Treat anxious or frozen child or young person (CYP) as though they have SM; it may not be the 'silent period'.
- Investigate and address bullying, teasing and speech awareness.
- Make sure parents do not model avoidance or fear of making mistakes and are encouraged to learn additional language too (ask CYP to teach them).
- Apply 'one situation - one language' rule (for example, Mum speaks Polish to child on way to school and in playground but changes to English when friend or teacher joins them or when friend comes home for tea).


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3. Talk openly and positively about the CYP's fear of speaking


- Often, people don't talk about SM for fear of making the CYP feel worse.
- Whenever SM is mentioned, it is usually in a negative light, for example, 'where's your voice gone?', 'why don't you speak?', 'he'll be fine but he won't say anything'.
- Without an explanation, the CYP won't understand why they are unable to speak or what is happening to them.
 - intensifies feelings of being ostracised or different
 - reinforces negative perceptions about themselves.


 


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1. Immediate intervention in relevant settings


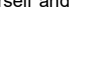
- Delay means that people will continue to inadvertently make things harder for the CYP.
- SM can't be treated in a clinic – success with one person would not transfer to other settings.
- Parents, relatives and school staff are in the best position to provide 24/7 support in the settings where the CYP experiences SM.


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Responding to CYP's comments

- Anxious children:
 - acknowledge fear but put it in perspective.
- Non-anxious children:
 - understand where their stubbornness comes from
 - they make it a rule *not* to speak in order to eliminate their anxiety
 - agree with them, then reframe it, for example, "of course you don't want to talk. That's because when you were little it felt very scary when you tried to talk. Don't worry, talking will get easier for you. One day you won't have to stop yourself and you'll be able to say anything you want."


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2. Make sure a united, consistent approach

- Just one person can undo everyone else's good work.
- Until everyone works together to provide an anxiety-free environment, the CYP will be unable to respond to intervention.
- It will be very hard to relax sufficiently to make progress with one person while dreading another situation.
- Families or staff may not agree initially, so at least agree to try this approach for a few weeks and see what difference it makes.


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What to say when meeting the child and building rapport (1)

- Don't ask children why they don't talk, tell them, "talking to new people can feel scary to begin with – so scary your words get stuck and don't come out. It's OK, you don't need to talk to play these games."
- "You're not the only one who finds it hard to talk sometimes."
- Reassure them, "you'll be able to talk to me when you're ready, but until then you can just talk to Mummy if you like."

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What to say when meeting the child / building rapport (2)

- "Don't worry, it's OK to talk to your friends, I'm not going to ask you any questions."
- If appropriate: "it's hard...learning a new language / not knowing anyone / talking clearly / being worried about making a mistake, but I'm here to help."
- "Talking is difficult at the moment but there are lots of other ways to join in and have fun. It's OK to laugh, it's OK to sing if you feel like joining in!"
- "It won't always be like this – talking will get easier."

See handout 'talking to the child about speech anxiety – the pep talk' from the session two pack.






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Be ready to deal with unhelpful comments from peers

Respond to comments and questions casually to show there's nothing to be concerned about, for example:

- "Jessie *can* talk. She talks beautifully at home, don't you Jessie? When she's ready, Jessie will talk here too."
- "Not everyone can talk straightaway in new places, that's OK. They join in by listening and thinking hard and they start talking when it feels right."
- "Jessie's not being unfriendly, she just hasn't got used to talking here yet. If you play with her and do all the talking, she'll soon join in."

See handout 'What to say when...' in the session two pack.

Advice sheet for staff and parents of children who have selective mutism

TALKING TO THE CHILD ABOUT SPEECH ANXIETY – 'THE PEP TALK'

A♣

Acknowledge the child's fear of speaking.

Let them know that you understand their difficulty and the feelings they experience when they try to speak. You know they want to and have tried to speak, but they feel so worried about talking that they tighten up and feel frozen – the words seem to get stuck in their throat. The language you use and the detail you give will depend on their age, but even very young children benefit from having their problem acknowledged rather than ignored, 'hushed-up' or misinterpreted.

A♦

Let the child know they are not alone.

Younger children need to know that there are plenty of other lovely children who find talking hard at first. For older children (just as for adults) it can be especially reassuring to be told that their condition has a name (selective mutism) and that other children their age have got

WHAT TO SAY WHEN ...

... other people need a quick explanation (do this in private)

"Selective mutism is an anxiety disorder – if we do nothing or treat it like a behaviour problem, the anxiety will get worse."

"No, it's not shyness, more like stage fright. She literally freezes up and can't get a word out at times."

"Selective mutism is a phobia of talking to anyone outside your comfort zone. It's the same as a phobia of cats or eating certain foods – even though there's nothing to be scared of, you just get this awful feeling of panic."

... people make unhelpful comments in front of the child

Step in quickly and play down unhelpful comments and questions as in the following examples. Show that you are not concerned and quickly move on to another topic. If appropriate, arrange to speak to the individuals concerned later, to explain how they can help the child or young person in future.

... adults put pressure on the child to speak

If adults make comments such as:

"Are you going to speak to me today?"

"Has the cat got your tongue?"

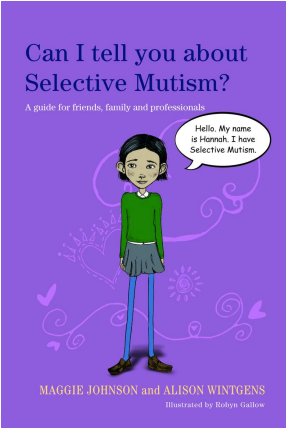
"What's the matter – is something wrong?"

Say something like:

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Can I tell you about Selective Mutism?

A guide for friends, family and professionals



Hello. My name is Hannah. I have Selective Mutism.

Books to support with talking about selective mutism

Jessica Kingsley Publishers

Hannah tells her family, friends, relatives and teachers how they can help.

MAGGIE JOHNSON and ALISON WINTGENS
Illustrated by Robyn Dutton

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My friend Daniel doesn't talk



Sharon Longo

Books for children who have selective mutism

Speechmark Publications (3 to 8 years)

www.routledge.com

"every child with selective mutism should have a friend like Ryan"





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4. Remove pressure to speak and support participation rather than avoidance

See handout 'maintaining factors' in the session two pack.




An advice sheet for early years practitioners and carers working with quiet children

HELPING YOUNG CHILDREN TO SPEAK AT SCHOOL

! Early years staff members have seen an increase in the number of children who talk happily and noisily to close family but say much less outside the home. Children need to be eased into new settings gently, so that initial reluctance to speak does not become an intense fear of speaking.


? **Why is this happening?** While family life gets busier, children are going into school younger and may not be ready to separate from parents and talk confidently to strangers. Some children are particularly sensitive to change and anything new. Well-meaning attempts to encourage speech can actually make them *more* anxious about talking.

😊 **Turn this worrying trend around now!** By expecting *less* while supporting *more*, children are allowed to succeed and develop the confidence to take small steps forward.

Be positive and reassuring

✦ As soon as it becomes clear that children are remaining silent in response to questions, have a private chat to reassure them. Say you know they want to talk but are finding it

CHILDREN TO SPEAK AT SCHOOL


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Maintaining factors

Children with selectively mutism (SM) can only speak freely to a small number of people. They experience feelings of panic and extreme anxiety when they're expected to talk to anyone else – this has nothing to do with the person they're trying to talk to, it's an automatic reaction that developed in the past at a time when they found talking difficult. Without realising it, friends, family and staff may *strengthen* this fear of talking by

- i) putting pressure on the child to speak (often in quite subtle ways)
- ii) allowing the child to opt out of social situations altogether.

We need to take all pressure *off*, and then support the child to gradually face their fears in small manageable steps at their own pace.

Possible home factors that maintain silence / delay improvement

- child frequently hears 'he/she won't talk'; 'don't expect him/her to talk', etc.
- the child's anxiety about talking is not openly acknowledged
- child is pressed to talk when clearly uncomfortable
- mutism causes family members great anxiety/embarrassment which is conveyed to the child and puts on pressure (e.g. frequent questioning about progress; voicing concerns; giving encouragement (rather than helpful strategies); asking child why they behave as they do and when they are going to change)
- child is set unrealistic targets or offered a reward to talk
- little expectation or need to speak/communicate
- parent/sibling acts for child to spare embarrassment/anxiety/disappointment (e.g. answers for child; takes item that is being offered to child)
- silence is modelled as a reaction to strangers or to express anger


An advice sheet for parents, carers and teachers

ENSURING AN ANXIETY-FREE ENVIRONMENT FOR CHILDREN WHO HAVE SELECTIVE MUTISM

PLEASE DO:

- ★ Recognise that selective mutism is an anxiety disorder, a phobia of talking which can only be overcome by allowing children to take small steps forward, in a controlled way, at their own pace. By removing speech anxiety in everyday situations, you will enable them to benefit fully from an intervention programme.
- ★ Remember that this is a genuine difficulty and any pressure to speak will make things worse. Have patience and let the child speak when they are ready.
- ★ Engage the child through physical activity, craftwork, creative projects and fun.
- ★ Talk to the child about what you are doing without expecting an answer. Make comments rather than asking direct questions, eg 'This looks like your dog, I can't remember his name though', rather than 'What's the name of your dog?'
- ★ Provide the *opportunity* to speak rather than making demands, eg 'Hmm, I wonder where this one goes?' (pause), 'Oh dear, I can't find any round ones' (pause).
- ★ Warmly respond to the child's attempts to communicate through gesture or whispering.



10a ENSURING AN ANXIETY-FREE


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Address the maintaining factors

It is important to address maintaining factors at **home and in school**:

- identify which factors are operating (these need to be eliminated)
- agree what to do instead, ideally at a joint meeting involving home and school (we'll work through some examples)
- see handouts in the session two pack for more ideas: 'Helping young children to speak in school', 'Making sure an anxiety-free environment' and 'Environmental checklists'.

FORM 12

ENVIRONMENTAL CHECKLIST FOR EDUCATIONAL SETTINGS

Ensuring an anxiety-free environment for children and young people who have selective mutism

Student's name [N]: _____ Date of birth: _____

Setting: _____ Year group: _____

Completed by: _____

Purpose: to help identify and eliminate possible causes of anxiety which could be adversely affecting [N]'s self-esteem and progress in communication.

Aim: for staff and family to make appropriate adjustments, where necessary, in order to agree with each statement (✓).

Communication	Date	Review date
Using non-verbal, written or verbal means (eg talking through a friend); [N] has a way of:		
Gaining attention/acknowledgment		
Protesting/indicating dislikes		
Expressing need to go to the toilet		

12 EDUCATIONAL ENVIRONMENT

FORM 13

ENVIRONMENTAL CHECKLIST FOR HOME SETTING

Ensuring an anxiety-free environment for children and young people who have selective mutism

Child or young person's name [N]: _____

Completed by: _____


Purpose: to help identify and eliminate possible causes of anxiety which could be adversely affecting [N]'s self-esteem and progress in communication.

Aim: for the family to make appropriate adjustments, where necessary, so that family members and relevant professionals agree with each statement (✓).

Home and community	Date	Review
Talking outside the home is culturally/socially acceptable; if not, permission has been actively given for appropriate settings		
Socialising is modelled and encouraged within the family and [N] is enabled to participate comfortably in social activities with and without parents present		
SM is explained to and/or discussed with [N], rather than in front of [N]		
[N]'s difficulty talking is openly acknowledged by parent(s) and reassurance has been given that it will not last		

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HOME ENVIRONMENT


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Example two: At school


Pressure: Teacher gives the CYP a chance to answer the register every day, then moves on.

Avoidance: Teacher skips over CYP.

Instead: Let pupils choose between answering or arm-raising, make a non-verbal game out of registration to encourage interaction, or simply repeat, 'Is _____ here?' so that the whole class can answer together each time.

If talking to individual members of staff but not yet talking in class:
- roll-call for whole class, saying your number in sequence
- read out register (practice both individually first).



 



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Example one

Pressure: Teaching assistant or grandparent asks CYP questions in an attempt to make conversation and engage them.

Instead: Use the running commentary technique – talk to the CYP with chatty comments; talk about what you are doing and what CYP needs to do; ask *yourself* questions rather than the CYP ('I wonder what this is? Hmm, where does this go?')



 



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Example three

Pressure: Canteen staff or a friend's mother encourages CYP to speak when he or she points to their food selection.

Instead: Alternative forms of communication are an essential stepping-stone to talking (pointing, nodding, shaking head, writing). Respond with a smile as if the child has spoken.


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Practice changing questions to statements to reduce pressure


For example:

'Did you have a nice birthday?' ✗
'I hope you had a nice birthday. I had a big chocolate cake with candles on when it was my birthday.' ✓

'What have you drawn for me today?' ✗
'What a lovely drawing, thank you. Let me guess who this is.' ✓

'How's it going here?' ✗
'I've just popped over to see how it's going. Let's look at your plan and you can show me any steps you're not sure about.' ✓




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Example four: At school

Pressure: Teacher separates CYP from friends to give the CYP a chance to answer for themselves.

Instead: Seat pupils together to allow CYP with selective mutism to become comfortable using their voice in school. They can then gradually talk to their teacher via their friend.

Note: Make sure friend doesn't routinely speak on behalf of CYP.

Example five: At school

Avoidance: It is voluntary to contribute in circle time.

Pressure: Child is given a chance to contribute and teacher moves onto next child when no response.

Instead: Child contributes by means they are comfortable with, for example, using whiteboard, showing a picture or objects so others can guess, child chooses someone to read out what they/their parent wrote down, child records message in advance.



Example six

Avoidance: Parent or teaching assistant answers for CYP when they are asked a question, for example "who do you want to sit with?".

Pressure: Parent or teaching assistant turns to CYP after a short pause and says "can you tell Jim who you'd like to sit with?"

Instead: Support CYP to answer questions rather than stepping in to answer for them (see page two of the handout 'informal techniques'). For example, parent turns to CYP and asks "who would you like to sit with?" or "would you like to sit with Mia or Laura?". Teaching assistant could say, "would you like to sit with Laura?".

Adult can *repeat* what CYP has said, but *does not answer for them*. Have a private chat to find out what child wants if necessary.



Desensitisation: A stepping stone to talking

There are a range of resources with voice recording clips that allow the CYP to easily record and play messages. These can be found through a quick internet search. Some of these resources also allow the option of including pictures or photographs:

- talking tins
- talk time postcards
- talking photo cards
- talking key rings
- talking albums
- talking labels
- talking greeting cards.



An advice sheet for parents of children with selective mutism (SM)

Do I answer if someone asks my child a question?

The short answer is No!
It's natural to step in when you see your child freeze. But if a child gets used to someone answering for them, they will adopt the role of silent partner whenever that person is around. One day they *will* answer and it's so important to have everything in place for that moment when they are ready to speak out.

A few Golden Rules:
Do not answer for your child. If you adopt the routine that follows, your child will learn that it's not so bad to be asked a question; everyone seems relaxed about it, whether they answer or not. They'll be far less wary of social situations in general.
Do not put your child under pressure to answer. Calmly convey that it's fine if they answer and fine if they don't. You know they're trying hard and doing their best.
Do not apologise for your child. They'll feel they've done something wrong. If appropriate, you can always explain later that your child wasn't being rude, or share how it makes you feel that others don't see your child as they really are.

But now the long answer...
Follow this routine whenever someone asks your child a question and you'll be surprised how much easier it gets and how quickly your child succeeds in answering. *It's not usually necessary to tell younger children what you're doing or why, but if they ask or you want to prepare an older child, see 'Why does this work?' below.*

1. WAIT for a full 5 seconds (always count to 5)



See Red's first words to her grandad in 'my child won't speak', a BBC documentary about selective mutism on YouTube.




Example seven: At home

Pressure: Family friend can't get the hang of the running commentary technique (see example one) and still asks the CYP direct questions to try and help them to talk.

Instead: Tell friends and relatives they *will* be able to ask questions but just say a friendly hello and then give the CYP plenty of time to talk to their parents or siblings *first*, in front of the friend or relative. Once they've heard the CYP speak, it's fine to ask them direct questions as the parent will be able to repeat or rephrase the question, using the strategy discussed in example six.






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Example eight: At home

Pressure: Grandparent talks about the CYP's silence in front of them (for example, saying to the parent 'why don't they talk to me?') or asks the CYP when they're going to speak.

Instead: Make sure that the CYP hears their selective mutism talked about in a factual way, so that they don't feel bad about not being able to talk. For example, "he's not being rude" (or stubborn, difficult or silly). His silence is caused by anxiety like a phobia, so no-one must take it personally. He'd love to talk to you and he will when it feels easier."

See 'what to say when' handout in session two pack.

An advice sheet for the adults who children with selective mutism talk to freely and comfortably

Note: this is not for adults who need to prompt or question the child to sustain conversation.

TALKING IN PUBLIC PLACES

An informal approach to generalising speech across different settings

Are you one of the people who a child with selective mutism (SM) talks to easily and spontaneously when no one else is listening? If so, you can gently help them discover that it's 'safe' for other people to hear their voice. Children who have SM need to talk in as many places as possible, so that nowhere becomes 'off limits'. And enabling them to speak to you in public, when other people are nearby, is the first vital step towards expanding their talking circle. This handout will help you gradually achieve this. But please take time to read it a few times for reassurance that the techniques let you work at your child's pace, so they don't become unduly anxious.

You have probably adopted several 'rescue' strategies for when you are together in public places and talking becomes difficult. Perhaps a combination of gesture, whispering and guessing sounds familiar? It's natural to fall back on these modes of communication when children become silent but, unfortunately, these strategies actually strengthen their fear of


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Example nine: At home

Avoidance: CYP regularly whispers in their parent's ear in front of friends, family or teachers etc and parent is now in the habit of lowering their head towards CYP so they can whisper in their ear.

Instead: Accept whispering when it's done in full view, but don't allow whispering in your ear. *Face* the CYP and if they look worried, reassure them that it's OK, the other person *knows* that they talk to you and isn't going to join in. If they're still unable to speak to you, move away just far enough to where the CYP *can* talk to you (for example, step out of the room). Do the same in public places - move to where CYP is comfortable enough to talk rather than allow whispering in your ear.

See handouts 'advice for parents' and 'talking in public places' in session two pack.




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Example 10: At home

Pressure: Parent doesn't want their CYP to be seen as rude so asks them to say 'hello' when spoken to or 'thank you' for presents.

Instead: Don't focus on getting the CYP to speak if they aren't yet ready. Educate friends and family. Consider how the CYP can say 'hello' or 'thank you' in ways that are more comfortable for them, for example, by smiling, waving, making a thank you card or using a voice recorded message.

Try video-calls or telephone before talking face-to-face; see 'informal techniques' handout from the session two pack.


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Supporting Children with Selective Mutism – Advice for Parents

1. Ensure that your child feels valued and secure

Children with selective mutism are so anxious about talking that the muscles they need for speaking freeze (especially their vocal cords) and they cannot make a sound. Any anxiety, disapproval or uncertainty they pick up from adults will increase their own sense of guilt, failure and fear about the future – they'll then tense up and find it even harder to speak.

It's not just teasing that makes children feel bad about themselves. Asking 'Why don't you talk?' or 'When will you have a go?' implies that you don't like them the way they are, wish they were different and worst of all, have no idea what to do about it. They will worry that they are upsetting you and try to avoid situations that are likely to highlight their difficulty. Repeatedly asking 'Did you talk today?' or 'How did you get on?' makes children dread going to school in case they let you down.

We need to *tell* children why they find it hard to speak at certain times rather than ask questions they cannot answer. Reassure them that everyone grows up with childhood fears and although they find talking difficult right now, they'll find it gets easier as they get older. Their fear will go away because they will get used to talking, one tiny step at a time, and meanwhile there are lots of other ways to join in and have fun. Your child needs approval whether they speak or not, so be positive about their efforts and tell them how brave they are when they try new things. The calmer you are, the more relaxed your child will be and the quicker they'll improve. Older children who are familiar with phobias will be relieved to hear that they are not shy – they have a phobia of talking which can be overcome in tiny steps, working at their




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Example 11: At home

Pressure: Doctor asks CYP direct questions during medical appointment to find out what's wrong.

Instead: Warn doctor, optician etc in advance that CYP may need to answer questions by pointing or by telling their parent the answer. (Optician could give CYP the written alphabet to point to. GP could ask questions through the parent, 'Mia, can you show Mum where it hurts' or 'Mum, can you ask Mia when she started feeling sick?')

See handouts from session two handout pack: 'Advice for healthcare professionals' and 'strategies when meeting CYP who have selective mutism'


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Advice for healthcare professionals offering medical appointments to children and young people who have selective mutism


The following information has been taken from an article in the Faculty Dental Journal called, 'Dental Care for children with selective mutism: How do we communicate effectively?' by Mona Agel and Gino Hipolito. While this advice has been written from a dentist's perspective, it is useful to share with all health care professionals who have medical appointments with children and young people with selective mutism (SM). Additional information about the 'graded questions' referred to in the article has also been included.


Healthcare professionals may mistake silence in children with SM as 'rudeness' or defiant behaviour. It is important to recognise that SM is an anxiety disorder SM is an anxiety disorder that can cause profound disruption to the life of a child and the child's family.

Every child with SM is unique in how their difficulties manifest. Medical history forms should be adapted to include appropriate questions for the additional support needs of children, including any communication difficulties. Some parents may disclose a SM diagnosis, some children may not yet be diagnosed with SM. It is also important to establish whether the child has any other phobias or anxieties that could cause distress during the session.

Dentists should be aware of the modes of therapy that the child is receiving and work with these therapeutic principles during dental appointments. A simple phone call with the parent ahead of an appointment may be useful in facilitating this:

- Find out what makes the child feel at ease and discover more about their interests.
- Ask the parent what form of communication the child would feel most comfortable with (eg gestures, signing, use of visuals or if the child is old enough, writing, texting or typing).
- Has the child made sufficient progress to be able to answer in single words or sentences?






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5. Help the CYP to face the fear at their own pace, one tiny step at a time

We help the CYP talk to just *one person* at a time, in a comfortable progression from non-verbal communication to talking.

Then gradually introduce more people (generalisation).




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Quick guide to meeting children and young people (CYP) who have selective mutism

Understand the nature of selective mutism (SM)
 Despite the name, SM is not a choice. SM is an anxiety disorder that robs the individual of the power of speech. The expectation to speak triggers a feeling of dread or panic with an automatic freeze response, leading to 'consistent failure to speak in specific social situations' (DSM-5, 2013). The CYP wants to speak and does not understand why they cannot. They can speak freely in other situations, usually with a few close family members and friends. Only these people see the CYP's true personality – lively, chatty, sociable. To other people, the CYP often appears sullen, disinterested, slow, aloof, wooden, stubbornly silent or shy.

Facilitate participation rather than avoidance
 SM behaves in the same way as a phobia. All the time there is an expectation to speak, the CYP with SM will feel compelled to avoid or escape from the situation. Therefore, the first step to helping the CYP to participate is to remove all pressure to speak. Once the CYP is visibly more relaxed, gradually introduce opportunities to speak, rather than demands.

- Inform CYP what is required from them in forthcoming activities, social events, meetings and appointments. They will need reassurance that talking is optional or unnecessary, or they will not want to attend.
- Social comfort and non-verbal communication always precede speech. Be prepared to do all the talking initially in the form of friendly running commentary – use greetings, comments, explanations and rhetorical questions (e.g. 'It's cold, isn't it?'. 'Oh no! What have I done with my keys?') but no direct questions.
- Reassure the CYP that they can talk to friends/parents in your presence and you won't interrupt or try to start a conversation.
- As CYP joins in activity, introduce 'Yes/No' and choice questions that can be answered by nodding, shaking the head, pointing or circling a response.

The stages of one to one interaction


Stage 1: The child does not communicate nor participate
 e.g. *passively accepts help [e.g. stands while coat is buttoned] but makes no attempt to seek assistance; retreats to bedroom when visitors arrive*

Stage 2: The child participates but limited communication
 e.g. *complies with requests which are perceived as non-threatening or non-invasive (may deal out cards, pass an object or draw a picture, but be unable to copy gestures or point to objects on request); joins in group activities 'singing' (mouthing) or moving in unison*

Stage 3: The child communicates without talking
 e.g. *responds by nodding/shaking head; points to indicate answer or make a choice; writes a message; provides an action or gesture to complete a sentence or convey a message*

TALKING BRIDGE: The child talks to an existing conversational partner (CP) within earshot of a 'new' person
 e.g. *talks to mother in same room as teacher, either quietly or at normal volume; talks to parents or siblings at home in front of visitors*


Stage 4: The child talks to a 'new' person through their CP
 e.g. *answers teacher's question by telling parent or friend the answer; participates in turn-taking games with parent and teaching assistant or therapist (even when*



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Address the maintaining factors

Closely monitor implementation of agreed changes:


- parents to work with extended family
- parent-school liaison to make sure everyone follows the agreed strategies
- set a review date at each meeting (every one to two terms initially, less frequently as progress accelerates).




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The stages of one-to-one interaction

Stage 1 – **frozen** or absent
 Stage 2 – **participation**
 Stage 3 – **communication without talking** (CYP points, nods, writes etc.)
 Stage 4 – **talking through parent/other** (CYP answers indirectly via parent, friend or voice recording)
 Stage 5 – **voice** (child uses voice to read, count or to make a sound, for example, hums, laughs, 'uh-uh', brmmm!)
 Stage 6 – **single word** response
 Stage 7 – **phrase/sentence** response
 Stage 8 – **connected** sentences
 Stage 8+ – group work, talking in public, free conversation and initiation.



Working through the stages of one-to-one interaction

- This can be done:
 - informally (24/7, general interaction, everyday routines, play sessions, rapport-building)
 - formally (small-steps programme).
- The informal approach may be all that's needed. With early intervention, pre-schoolers often generalise their talking spontaneously.
- School-aged children may need an additional small-steps programme to help them speak and/or generalise to other people, larger groups and public places.

(we care)



Graded questions

- See the *graded question sequence* on page one of the handout 'informal techniques' from the session two pack to facilitate speech, working at the CYP's pace.
- Once rapport has been established, staff and extended family use the sequence with individuals on a one-to-one basis, whether or not parents are present.
- Parents use this sequence when helping the CYP talk to them in front of other people.

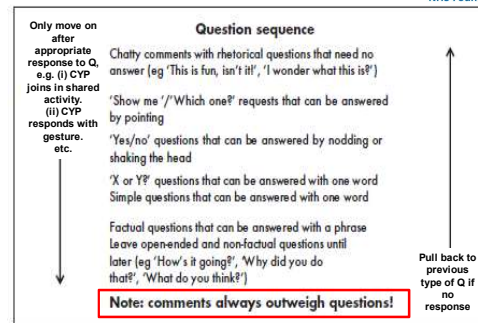
(we care)



Working through the stages of one-to-one interaction at school

- Foster a special relationship with at least one adult at school:
 - build rapport and facilitate speech
 - consider home visit(s) initially
 - two-way book for home and school communication. This is a safeguarding issue, only necessary until child can talk freely to at least one adult at school.
- Use family and friends as a talking bridge towards communication with others whenever possible:
 - tell CYP it's fine to talk to parents and friends and reassure them you won't butt in
 - invite parents to join activities or help on school trips.

(we care)



(we care)

Introducing questions to a person who has SM.
(‘informal techniques’ handout, page one)

Stages one to three: Build rapport (trust)

- Stage one: Take pressure off the child or young person (CYP); tell the CYP privately that no-one minds if they don't talk, you just want them to have a good time and feel comfortable etc. They can talk if they want to, but they don't have to. They might prefer just to talk to their friend or parent for now and that's fine with you.
- Stage two: Support participation and shared play. You do all the talking. Tell CYP privately they won't be singled out in a group unless they volunteer, for example, PE, answering questions or reading aloud in class.
- Stage three: Find activities that require a non-verbal response rather than talking (pointing, nodding, showing a picture or writing) and respond to these forms of communication as if the CYP has spoken.

(we care)



Talking through parent or friend

- Provide opportunities for the CYP to answer you by telling their parent or friend the answer, initially when they are at home or in a different room. Gradually work towards being in the same room.
- Don't look at CYP while waiting for response and never ask them to speak louder. It's okay to say 'did you catch that?' to parent or friend, or 'I don't think (parent/friend) heard you, try again while I sort these out'. Move or look away if necessary.
- Play simple turn-taking games after saying 'It's okay, you don't need to talk to me, when it's your turn you just tell (parent/friend) what to look for'.

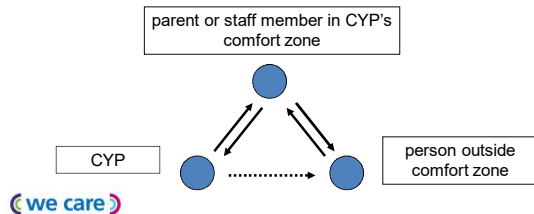
See the 'informal techniques' handout, page one, for more examples.

(we care)



The triangle tactic

Parents (and staff the CYP talks to easily) can use the 'triangle tactic' to help the CYP talk to friends or relatives as part of their normal routine (page three of the handout 'informal techniques').



VIDEO

- Tiny Tearaways - informal sliding in with Tania



The informal sliding-in technique

- Enter room while child is talking comfortably to parent or friend, but feign disinterest at first. Once this is tolerated and child is talking in your presence, slide in a bit closer and ask to watch, learn, listen etc. Do not ask CYP direct questions initially, but make comments or ask questions through their parent or friend.
- 'House of tiny tearaways' clip shows this technique with a three year old - it is most effective with children aged five and under.
- Can be adapted for teenagers who understand how phobias are treated by graded exposure.



Talking through parent or friend – video clip

'House of tiny tearaways'

- Other people now try talking to Charlie via his parents. They do this across the room, rather than sliding in.
- Once again, it doesn't take long before he answers directly, rather than via his parents.
- Next step will be for his parents' friends to repeat this technique when sitting even closer to Charlie.



'House of tiny tearaways'


- Charlie – three years old
- maintaining factors – pressure from both parents in different ways
- desensitisation – voice recording
- note the type of input that is most likely to get a response from Charlie (running commentary rather than direct questions)
- stage two: He happily looks at book or plays with train
- stage three: He responds by nodding or shaking head
- stage four: He answers through his mum
- stage five: He responds with sound
- stage six: Next time, repeat informal-sliding-in and mum leave Charlie for a couple of mins to see if he can use single words with Tania without Mum at his side.



VIDEO

- Other families talk to Charlie through his parents






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Stage Five: Releasing voice

- Always encourage laughter.
- Physical exercise and noise-making, 'Wheee!' etc.
- Encourage young children to play musical instruments and eventually a kazoo.
- Make sound effects for stories or sing as a group activity.

Optional - only for *good* readers
Explain to CYP that they'll find reading much easier than talking as it's not like a conversation and reassure them you won't ask them any questions.

- Try reading aloud one-to-one or with a friend or in a group. See 'reading route' on page four of 'informal techniques'.


 


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7. Build resilience from day one, through general achievement and independence



See handout 'helping children to cope with anxiety' in the session two pack.


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Stages six to seven: Moving on to single words and sentences (informal approach)

- After sliding in, gradually join in talking activities with parent or friend (especially turn-taking games, first in one direction then the other) and continue after parent/friend slides out.
- Move through graded questions on a one-to-one basis, at the CYP's pace (move on if CYP responds, pull back if they don't). See page one of the handout 'informal techniques' from session two pack.

An advice sheet for parents, teachers and carers


HELPING CHILDREN TO COPE WITH ANXIETY


How to make anxious children *more* anxious ...

- 1 Tell them there's nothing to worry about.
- 2 Sort out their problems.
- 3 Don't allow them to become distressed.
- 4 Rush to comfort them.
- 5 Let them decide what they can cope with.
- 6 Ask if they are going to be OK.
- 7 Answer all of their questions.
- 8 Spring the dreaded event on them at the last minute so there's less time to worry.

Did that list surprise you? No one wants to see their child in distress. So, of course, you want to take away your child's anxiety.



However, anxiety is *normal* and it is *good* for us – it keeps us safe!
Anxiety makes sure that we look out for danger and are prepared to meet life's challenges. When children are shown that the only way to cope with anxiety is to eliminate it, they become increasingly intolerant of anxiety. They only know to feel the tiniest bit nervous and





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6. Don't cut corners!



- Don't expect or try to facilitate any speech without laying the foundations:
 - always educate everyone involved with the CYP, talk openly to the CYP, address any maintaining factors and build rapport before moving on to the informal techniques.
- Don't **stop** when the CYP can answer one or two people; no guarantee this will transfer to other settings or to spontaneous speech:
 - actively manage generalisation and transitions, just answering questions doesn't count as "cured"
 - see session four 'generalisations and transitions'.


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General expression and physical release



- Focus on child or young person's (CYP) strengths and interests.
- Help CYP to move further away from wall or teacher in physical education or hall sessions by letting them stand with a friend (privately reassure them that they won't be singled out).
- Extra practice on climbing apparatus in hall or playground before group session.
- Physical release: Jump or flop onto mattress, beanbag etc.
- Introduce louder instruments in music and have musical 'conversations'.
- Encourage artistic expression through clay, painting, movement or dance.
- Bigger stronger actions in mime, movement, dance.

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General confidence and independence

- Avoid doing things for the CYP - make tasks easier or do things initially with the CYP and gradually fade support.
- Do not spring surprises, it puts CYP on constant alert. Give plenty of warning with reassurance that they will be ready for it when the time comes. Focus on what *will* happen, not what *might* happen with preparation, information and dummy runs.
- Give jobs or responsibilities in the classroom and run errands, at first with another pupil – making sure other staff are on board and do not expect speech.
- Ask CYP to support a younger or less able pupil.
- Ask CYP to teach you a game or skill.
- Outdoor challenges, zip wires etc.



 

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Voice-activated toys

The following voice-activated toys can be found through a quick internet search:

- repeating parrot
- build-a-bear talking teddy
- 'Nintendogs' game
- Lucky the incredible wonder pup
Lucky understands phrases and obeys commands such as "sit", "come here" and "go to sleep".

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Communication confidence through small-steps and desensitisation

- Provide communication cards, a communication chart (see next slide) or a dry-wipe board (but consider CYP's ability to initiate or make first move).
- Use puppets or masks in play or drama.
- Group noise-making activities – singing, chanting, clapping, vocalising as animals.
- Ask class or group to answer or read in unison.
- Read to teacher or teaching assistant via telephone.
- Make voice-recordings (talking cards, talking tin or photo album).
- Whole class record/share messages (use phone or tablet).
- Voicemail – CYP records the home message or leaves a message with friends and family.



 

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You have completed training session two: Effective, round the clock support

Depending on the age of the CYP you are working with, you will need to access the following training sessions:

	Early years	Primary school	Secondary and beyond
Session one: Understanding selective mutism	✓	✓	✓
Session two: Effective, round-the-clock support	✓	✓	✓
Session three: Implementing a small-steps programme		✓	✓
Session four: Generalisation and transitions	✓	✓	✓
Session five: Additional considerations for secondary+			✓

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Toilet
Please



I can't
remember
what to
do



I've made
a mistake



Sorry
I didn't
hear you



I need a
word
Please



 

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Further support

- **KCHFT** virtual family groups available to all relatives of CYP with SM who have accessed training. See website for further details: <https://www.kentcht.nhs.uk/childrens-therapies-the-pod/speech-and-language-therapy/selective-mutism/>
- **SMIRA** (Selective Mutism Information and Research Association) – a parent/professional support group based in Leicester with free membership: info@selectivemutism.org.uk

SMIRA website www.selectivemutism.org.uk and **SMIRA Facebook Group** with free downloads, info packs and chat rooms (older CYP have their own 'SM Space Café' Facebook group).

Resources

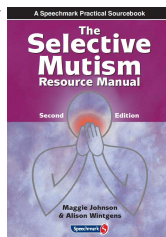
- **The Selective Mutism Resource Manual** (2016) Speechmark Publications www.routledge.com
- **Can I Tell You About Selective Mutism?** (2012) by Maggie Johnson & Alison Wintgens, Jessica Kingsley
- **My Friend Daniel Doesn't Talk** by Sharon Longo, Speechmark Publications www.routledge.com
- **Facing Fears Poster** in 'Worry Wheels' www.sensetoys.com
- **Selective Mutism in Our Own Words** (2015) by Carl Sutton and Cheryl Forrester, Jessica Kingsley Publishers. www.jkp.com



The selective mutism resource manual Maggie Johnson and Alison Wintgens

This manual provides in depth information for parents and professionals on identifying and supporting CYP with selective mutism. The manual is accompanied by a downloadable 244 page online resource which contains assessment forms, progress charts and advice handouts, some of which have been included in your handout pack today.

The Selective Mutism Resource Manual (2016)
Speechmark Publications www.routledge.com



Advice sheet for staff and parents of children who have selective mutism

TALKING TO THE CHILD ABOUT SPEECH ANXIETY – ‘THE PEP TALK’



Acknowledge the child's fear of speaking.

Let them know that you understand their difficulty and the feelings they experience when they try to speak. You know they want to and have tried to speak, but they feel so worried about talking that they tighten up and feel frozen – the words seem to get stuck in their throat. The language you use and the detail you give will depend on their age, but even very young children benefit from having their problem acknowledged rather than ignored, ‘hushed-up’ or misinterpreted.



Let the child know they are not alone.

Younger children need to know that there are plenty of other lovely children who find talking hard at first. For older children (just as for adults) it can be especially reassuring to be told that their condition has a name (selective mutism) and that other children their age have got through it. A calm, informed approach will inspire confidence!



Take the pressure off talking so that the child can relax, participate, enjoy and learn in all settings. Emphasise that there are lots of other ways to join in and have fun. Impress on the child that the most important thing is for them to be happy and relaxed. Tell the child that there is no rush and they can speak when they feel ready. Let them know that they have a friend in you to turn to, if they are feeling upset.



Explain that talking will get easier.

It is essential that the child sees themselves as a person who will talk at some time in the future and knows that you have confidence in them. Tell them you know they are not ready to talk yet but it will not always be like this; it will get easier and they will get braver. Emphasise that they only have to do things they can manage; and that by starting with things they find easy, they will gradually be able to do more and more until, one day, talking is really easy too. Even children as young as three years old can see the logic of this approach.



An advice sheet for parents, teachers and carers of children who have selective mutism

WHAT TO SAY WHEN ...

... other people need a quick explanation (do this in private)

"Selective mutism is an anxiety disorder – if we do nothing or treat it like a behaviour problem, the anxiety will get worse."

"No, it's not shyness, more like stage fright. She literally freezes up and can't get a word out at times."

"Selective mutism is a phobia of talking to anyone outside your comfort zone. It's the same as a phobia of cats or eating certain foods – even though there's nothing to be scared of, you just get this awful feeling of panic."

... people make unhelpful comments in front of the child

Step in quickly and play down unhelpful comments and questions as in the following examples. Show that you are not concerned and quickly move on to another topic. If appropriate, arrange to speak to the individuals concerned later, to explain how they can help the child or young person in future.

... adults put pressure on the child to speak

If adults make comments such as:

"Are you going to speak to me today?"

"Has the cat got your tongue?"

"What's the matter – is something wrong?"

Say something like:

"You'll have to wait and see, won't you?!"

(To [N], referring to the comment) "That's a funny thing to say, isn't it?!"

"[N]'s doing really well. We're all very happy with how she's doing."

"Nothing's wrong. [N]'s enjoying listening, aren't you?"

... other children ask why the child who has selective mutism doesn't talk

"[N] will talk as soon as she feels ready, won't you [N]?"

"[N] hasn't found his voice in school yet but, when he does, we won't make a fuss. We'll talk to him as if he's always spoken."

"Some of us find it hard to speak when there are lots of people around. It'll be easier when just the two of you work or play together."

"[N]'s working on it. You can be a good friend and just wait for it to happen."

[N] is the name of the child or young person who has selective mutism

... other children tell you the child can't talk

"[N] is really good at talking at home and if we all help by being patient, she'll be able to talk here too, isn't that right [N]?"

"[N] talks lots at home, and he's working hard on talking here too"

"If you're lucky you might be the first person [N] talks to at school. But it won't be you if you keep saying that!"

"Of course she can, but right now you prefer to listen and think, don't you [N]?"

... other children speak for the child

If children pass on a message from the child openly accept this to gradually enable [N] to speak to friend(s) in front of you.

"Thank you, I'll check with [N] that I've got the message right."

"Is that right, [N]?" ([N] confirms by nodding or shaking their head.)

(Use friend as a go-between) "Can you ask [N] who he'd like to sit with?"

If children answer for the child, make it clear that you were not talking to them!

"It's OK, [N] knows how to answer. He can point/show me/nod/shake his head."

... the child puts up their hand in class to answer or is asked a question

Smile and wait five seconds. If no answer comes, calmly move the conversation on:

"Well done, I can see you know the answer! Who else wants to have a go?"

"That's OK, jot it down/show me later/tell Danny what you were going to say."

"Let [N] have a think about that." (Explain privately that [N]'s not ready for direct questions.)

... the child speaks for the first time and/or other children comment on this

Respond to what [N] says as if they have always spoken (ie no direct praise):

"Great idea"; "That sounds fun"; "Yes let's do that"; "Good answer!"

"We always knew [N] would feel like talking one day."

"That's great – and what have you managed to do today?"

... you cannot hear what the child says

If you are alone with [N], say you're sorry you didn't hear, rather than ask [N] to repeat or speak up. But don't draw attention to this in public. Thank [N] for the contribution and, if necessary, seek clarification later on a one-to-one basis.

... people expect the child to say 'Hello', 'Goodbye', 'Please' or 'Thank you'

Smile and calmly move the conversation on. Social conventions are the hardest thing for children who have SM to accomplish and are not a priority. If appropriate, explain later in private that the child was not being rude.

Note: these are just examples which can be adapted for individual children, depending on their age and different situations – you will be able to think of more!
The last example in each group is generally more suitable for older children.

Maintaining factors

Children with selectively mutism (SM) can only speak freely to a small number of people. They experience feelings of panic and extreme anxiety when they're expected to talk to anyone else – this has nothing to do with the person they're trying to talk to, it's an automatic reaction that developed in the past at a time when they found talking difficult. Without realising it, friends, family and staff may *strengthen* this fear of talking by:

- a) putting pressure on the child to speak (often in quite subtle ways)
- b) allowing the child to opt out of social situations altogether.

We need to take all pressure *off*, and then support the child to gradually face their fears in small manageable steps at their own pace.

Possible home factors that maintain silence / delay improvement

- child frequently hears 'he/she won't talk'; 'don't expect him/her to talk', etc.
- the child's anxiety about talking is not openly acknowledged
- child is pressed to talk when clearly uncomfortable
- mutism causes family members great anxiety/embarrassment which is conveyed to the child and puts on pressure (such as frequent questioning about progress; voicing concerns; giving encouragement (rather than helpful strategies); asking child why they behave as they do and when they are going to change)
- child is set unrealistic targets or offered a reward to talk
- little expectation or need to speak/communicate
- parent/sibling acts for child to spare embarrassment/anxiety/disappointment (such as answering for child; taking item that is being offered to child)
- silence is modelled as a reaction to strangers or to express anger
- there are few opportunities to mix or observe social interaction outside the family
- intense warnings about speaking to strangers/taking risks
- child is allowed to miss any activity that causes anxiety, rather than modifying the activity as necessary and helping child to understand and manage their anxiety
- child gets cuddles when opting out (to comfort) rather than for participating (high five!)

Possible school factors that maintain silence / delay improvement

- the pupil's anxiety about talking is not openly acknowledged
- pupil senses disapproval from peers/adults for not talking
- pupil feels under pressure to speak (such as being invited to contribute and put on the spot; dreading that they might be chosen to answer a question/read aloud)
- adult looks at pupil while waiting for an answer or insists on eye-contact
- rewards are in place for what pupil *might* do, rather than what pupil actually does
- pupil feels unrealistic expectation to speak, such as 'Are you ready to talk to me today?' 'I can't help you if you don't tell me'; unrealistic targets are set with no strategies
- always a large audience/possibility of someone overhearing/ little opportunity for one to one with an adult or working with friends that the pupil talks to at home
- pupil is expected to initiate requests for help/toilet or report illness/bullying etc. when unable to do so
- teasing/demands to talk from peers or over-protection, such as 'he/she can't talk'
- lack of social relationships/ isolation/ ignored by peers and/or teachers
- breakdown of trust (such as teacher given video/tape without pupil's consent; mixed messages/expectations from different staff members)
- no need to change – alternative forms of communication are used as a replacement for talking, rather than a stepping-stone *towards* talking
- attention is drawn to the fact that the pupil has spoken, rather than continuing a normal conversation

Reference

The Selective Mutism Resource Manual, 2nd edition (2016) by Maggie Johnson and Alison Wintgens

An advice sheet for early years practitioners and carers working with quiet children

HELPING YOUNG CHILDREN TO SPEAK AT SCHOOL

! Early years staff members have seen an increase in the number of children who talk happily and noisily to close family but say much less outside the home. Children need to be eased into new settings gently, so that initial reluctance to speak does not become an intense fear of speaking.

? **Why is this happening?** While family life gets busier, children are going into school younger and may not be ready to separate from parents and talk confidently to strangers. Some children are particularly sensitive to change and anything new. Well-meaning attempts to encourage speech can actually make them *more* anxious about talking.



Turn this worrying trend around now! By expecting *less* while supporting *more*, children are allowed to succeed and develop the confidence to take small steps forward.

Be positive and reassuring

- ❖ As soon as it becomes clear that children are remaining silent in response to questions, have a private chat to reassure them. Say you know they want to talk but are finding it difficult at the moment. Tell them not to worry because talking will get easier and they don't have to talk straightaway. Ask them to concentrate on having fun and then it will be easier to be brave and have a go.
- ❖ Make sure that *no* adult applies pressure to talk using bribery, persuasion or negative comments. *Never* force children to say 'Hello', 'Please', 'Thank you', etc. Social conventions are extremely difficult for anxious children.

Build confidence

- ❖ Look out for children who are stiff or frozen in their facial expression or body movements. This is usually caused by extreme anxiety. Focus on physical activity, laughter and general noise making to help them relax.
- ❖ Include plenty of activities which involve children moving, singing or talking *in unison*.
- ❖ Adopt a self-registration system, or repeat 'Is _____ here?', so that the whole class gets to know each other as they answer in unison each time.

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PHOTOCOPIABLE

The Selective Mutism
Resource Manual
second edition
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- ❖ Parents can reduce the anxiety of separation by giving children something of theirs to look after before they leave. Arrange an early return so that parents can join in and make the last part of the session a positive experience.
- ❖ Welcome parents as volunteer helpers for the whole group, not just their child.
- ❖ Encourage non-English-speaking parents to learn and use English at school, to show their child that it's OK to have a go and make mistakes.
- ❖ Organise playground activities and make sure each quiet child has a friend at playtime. Encourage parents to invite the same children home to play.
- ❖ Give extra smiles and attention when children try anything new. Do things *with* children or make things *easier*, rather than doing things *for* them.
- ❖ Ensure that children can access the toilet, drinking water and first aid without asking.

Gradually facilitate speech, being guided by the child's response

- ❖ Encourage *all* children to record messages for each other at home to add to their photographs on a computer or to share with recording devices such as Talking Tins®.
- ❖ Assign an adult to befriend and play with quiet children for short periods of time.
- ❖ Don't ask direct questions while building rapport. Instead, chat in the style of a running commentary, with pauses so that children can join in when they feel ready: "Wow, look how tall you made your tower!"; "I wonder if that's a horse ... or maybe it's a dog ..."; "This is fun, isn't it?". Be prepared to do all the talking for a while!
- ❖ When the child gestures (eg nods or points), talk back as if they spoke to you.
- ❖ When children are relaxed enough to laugh, smile, nod and shake their heads, help them answer questions by providing a *choice*: "What's this on your tree – are they apples or cherries?" Smile and allow a full five seconds for them to answer. If they don't reply, move on the conversation in a positive way: "They look very tasty!" If children struggle to answer near other people, only use the choice technique one-to-one. If they tense up, even on a one-to-one basis, return to commentary-style chat until they relax again.
- ❖ When children speak, praise their ideas or the way they joined in, rather than the fact that they spoke: "Hey, you chose your book really quickly today!"
- ❖ Once children have begun to talk, turn gestures into speech by seeking clarification: "I can see you nodding. Does that mean you want milk or juice?"; "You're pointing over there, are you showing me Tommy or Max?"; "You're shaking your head, does that mean you want to play outside or stay here?"

Do some investigation

- ❖ Ask parents which language is spoken at home, how much the child speaks with family and friends, and whether they have any concerns about their child's pronunciation or ability to understand or speak in sentences.
- ❖ Share the above advice on facilitating speech if the child is quiet with family or friends.

- ❖ Let parents know that you are very pleased with how their child is settling in and that you are working on building their confidence, so that they can do as well with you as they do at home.
- ❖ Make sure that parents are not putting pressure on the child by telling them they must speak at school or with relatives because this will increase separation anxiety and stop the child looking forward to school and social events.
- ❖ Seek advice about bilingualism if appropriate.
- ❖ Ask for advice from the local speech and language therapy service if language development appears to be delayed.
- ❖ If the above advice has been followed for six weeks, and the child is speaking much more at home than at school, the child could have a condition called selective mutism (SM). Continue this advice while seeking information about SM for home and school.

Suitable children's books

Penguin by Polly Dunbar (2007), Walker Books.

Little by Little by Amber Stewart (2008), Oxford University Press.

Lamb Says Boo! by Katherine Sully (2010), Alligator Books Ltd.

Additional resources

Talking Tins[®], Talking Products Ltd, www.talkingproducts.co.uk.

Supporting Quiet Children: Exciting Ideas and Activities to Help 'Reluctant Talkers' Become 'Confident Talkers' by Maggie Johnson and Michael Jones (2012), Lawrence Educational.

The Selective Mutism Resource Manual, 2nd edition, by Maggie Johnson and Alison Wintgens (2016), Speechmark Publishing Ltd.

An advice sheet for parents, carers and teachers

ENSURING AN ANXIETY-FREE ENVIRONMENT FOR CHILDREN WHO HAVE SELECTIVE MUTISM

PLEASE DO:

- ★ Recognise that selective mutism is an anxiety disorder; a phobia of talking which can only be overcome by allowing children to take small steps forward, in a controlled way, at their own pace. By removing speech anxiety in everyday situations, you will enable them to benefit fully from an intervention programme.
- ★ Remember that this is a genuine difficulty and any pressure to speak will make things worse. Have patience and let the child speak when they are ready.
- ★ Engage the child through physical activity, craftwork, creative projects and fun.
- ★ Talk to the child about what you are doing without expecting an answer. Make comments rather than asking direct questions, eg 'This looks like your dog, I can't remember his name though', rather than 'What's the name of your dog?'
- ★ Provide the *opportunity* to speak rather than making demands, eg 'Hmm, I wonder where this one goes?' (pause); 'Oh dear, I can't find any round ones' (pause).
- ★ Warmly respond to the child's attempts to communicate through gesture or whispering, by talking back in a natural way as if they had spoken.
- ★ Ask the child questions through other adults or children they talk to, keeping a comfortable distance until the child can talk easily in front of you.
- ★ Reassure the child in private that you won't single them out in class to answer a question, read aloud or demonstrate an activity unless they let you know that *they want to be chosen*. Say that they can start talking as soon as they feel ready but, until then, just have a good time! It's OK to laugh and it's OK to sing – whatever they feel they can manage.
- ★ Invite the child to let you know if anything is upsetting them, or if they have news they want to share, through a two-way liaison book with home.
- ★ Assist transitions between home and other settings: eg parents participate with the child in other settings; staff or friends visit the child's home.
- ★ Try to find time at school for periods of unpressured one-to-one interaction.
- ★ Encourage the child to sit, work or play with friends they talk to in other settings.
- ★ Organise activities in which children move, sing or talk *in unison*, and activities and games which do not require speech, making this clear before you start.

10a
Continued

ENSURING AN ANXIETY-FREE ENVIRONMENT

PLEASE DO:

- ★ Include the child in other activities by offering alternative forms of communication as a temporary stepping-stone while the child is having difficulty speaking; for example, pointing, holding up a picture, writing, or recording their news at home.
- ★ Provide opportunities to talk in situations that are less threatening to the child. For example: 'Can you take [new child] to the pegs and show her where to put her bag?'; 'Take Mummy to the hall and show her what we've been making for assembly'; 'Please help [less able child] tidy up. He's not sure what he's got to do.'
- ★ Actively support friendships with other children, making sure that peers don't pressurise the child to speak and understand that they will speak in their own time.
- ★ Use puppets, masks, voice-activated toys, recorded messages, talking tubes and walkie-talkies, which may be easier for the child than direct talking.
- ★ Ensure that the child can access the toilet, meals, drinks, help and first aid without speaking. Agree a procedure to follow when they feel ill or upset.
- ★ Let children sit at the back or side of the classroom so that they have a good vantage point.
- ★ At registration, allow hands-up, involve the whole class in a social activity, or ask 'Is [each child's name] here?', so that the class members look around and answer in unison.
- ★ Let the child know how well they are doing by noticing them being helpful, kind, thoughtful, hard-working, good-humoured, brave and creative.
- ★ Encourage independence and ensure success. Rather than doing things *for* the child, do things *with* them initially and then withdraw, or make things *easier*.
- ★ Have the same expectations for good behaviour as for any other child.

PLEASE DO NOT:

- ★ Be hurt or offended when the child remains silent.
- ★ Confuse a fixed facial expression with glaring, defiance, being uninterested or smirking.
- ★ Beg, bribe, persuade or challenge the child to speak, or make it your mission to get them to talk.
- ★ Make the child say 'Hello', 'Please', 'Thank you, etc. They are *not* being rude.
- ★ Ask direct questions which put the child on the spot, especially when other people are watching and waiting for an answer.
- ★ Look directly at the child when you are hoping that they might say something.
- ★ Penalise the child for not talking or tell them that they are talking too quietly.
- ★ React when the child finally talks. Simply carry on as if they have always spoken, responding positively to what they *say*, rather than the fact that they spoke. Later you can remark on how much fun you had, how good they are at reading, etc.

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PHOTOCOPIABLE

The Selective Mutism
Resource Manual
second edition
Speechmark Publishing Ltd
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Aison Wintgens, 2016

PLEASE DO NOT:

- ★ Make the child repeat themselves in public if you don't hear (it's great that they are talking at all!). Do say in private, 'Sorry, I don't understand', or 'That was a great try but I'm sorry, I didn't hear', or 'Did you say X or Y?'
- ★ Tell the child off in public – have a quiet word in private about your expectations.
- ★ Treat the child too delicately – they enjoy banter the same as anyone else!
- ★ Follow opting out with special treatment or privileges because this can delay gradual participation.
- ★ Anticipate the child's every need. Instead, hold back, give permission ('It's OK to ...') and create opportunities for them to start taking the lead.
- ★ Object if the child talks to you through their friends – they could be valuable allies in the child's intervention programme. But do make sure that the child is comfortable enough to communicate with you non-verbally when needed. For example, they could confirm you heard their friend correctly by nodding or shaking their head.
- ★ Be afraid to say 'Hey, please can you keep the noise down!' as necessary.
- ★ Be surprised if the child looks confused, does the wrong thing or does nothing. Anxious children are often too tense to process information quickly or accurately, so repeat your instructions quietly and calmly.
- ★ Spring surprises on the child; instead, prepare them for changes and transitions with photographs, visits and pictorial timetables.
- ★ Allow the child to become isolated. Actively foster friendships with peers, both in and outside school through games, shared projects, interests and activities.
- ★ Dwell on what the child *can't* do. Discover their interests and talents and let them shine. 😊

Other useful handouts

Handout 4 'What to say when ...'

Handout 5 'Selective mutism is a phobia'

ENVIRONMENTAL CHECKLIST FOR EDUCATIONAL SETTINGS

Ensuring an anxiety-free environment for children and young people who have selective mutism

Student's name [N]: _____ Date of birth: _____

Setting: _____ Year group: _____

Completed by: _____

Purpose: to help identify and eliminate possible causes of anxiety which could be adversely affecting [N]'s self-esteem and progress in communication.

Aim: for staff and family to make appropriate adjustments, where necessary, in order to agree with each statement (✓).

Communication	Date	Review date
Using non-verbal, written or verbal means (eg talking through a friend), [N] has a way of:		
Gaining attention/acknowledgment		
Protesting/indicating dislikes		
Expressing need to go to the toilet		
Obtaining help/clarification for homework/course work		
Obtaining general help/clarification during the school day		
Making a lunch selection		
Reporting teasing/bullying/illness		
<i>Natural</i> alternative forms of communication are encouraged (eg gesture, pointing to words/pictures/symbols, writing) rather than an unfamiliar alternative communication system		
Participation		
Using either verbal or alternative forms of communication, [N] is routinely able to participate in (add/delete as appropriate):		
Registration/roll-call		
Circle time or 'bring and share' activities		
Reading activities		
Writing/spelling activities		
Class assembly		
PE sessions		
Drama sessions		
School trips/work experience		
Staff do not do things <i>for</i> [N] but <i>with</i> [N], giving whatever support [N] needs in order to manage part of the activity or make some contribution		

(Continued)

Name of student [N]:

Social relationships and self-esteem	Date	Review date
Staff involve [N] in usual greetings/conversation/banter by using commentary-style talk, rather than asking questions		
[N] is befriended by others in class and is included in class/team activities		
[N] spends break/lunch-times with other students		
[N] routinely gains success/acknowledgement through realistic targets and desirable behaviour (eg kindness/taking the lead/physical activity/ responsibility/ participation)		
[N]'s strengths/special interests are recognised/valued by classmates		
Teasing/bullying occurs rarely, if at all, and is addressed to everyone's satisfaction		
Support		
Staff have reassured [N] that he/she will be able to talk in time but there is no rush; meanwhile, there are other ways to participate and have fun		
Peers know they can best help by including [N] in all they do, waiting patiently, not trying to make [N] talk and not saying that [N] <i>can't</i> talk		
[N] has good rapport with at least one adult in the educational setting who is able to offer regular encouragement/support		
[N] is given 1:1 time for curriculum differentiation, rapport building and communication goals, as appropriate (ie little and often, rather than once a week)		
[N] knows that staff members will not single out [N] to talk in class but wait for [N] to volunteer information (until [N] is more comfortable with talking)		
If [N] speaks, staff members are primed to respond warmly but without direct praise or comment (<i>this does not include planned programme targets</i>)		
School/home is in regular contact through a liaison book or email to communicate [N]'s successes/news/concerns/queries/strategies, etc.		
General points		
[N] separates from the parent willingly and is confident about collection arrangements; or can travel to/from school independently		
Apart from rare occasions, [N] smiles frequently (and genuinely – not a fixed smile) and looks relaxed throughout the day		
The seating position allows [N] to observe other people and not feel scrutinised		
[N] eats lunch with his or her peers		
[N] uses the school toilet		
[N] is not given extra attention/privileges for silence/opting out (<i>apart from the 1:1 support necessary to address needs and move forward</i>)		
[N] is allowed to experience some disappointment/frustration as a result of not speaking (eg occasionally misses out) and maintains incentive to change		
Staff members have access to a support network for further information about selective mutism and as a sounding board for their ideas		
A plan is in place to address [N]'s speech anxiety, which has been agreed with student and parent(s)		

ENVIRONMENTAL CHECKLIST FOR HOME SETTING

Ensuring an anxiety-free environment for children and young people who have selective mutism

Child or young person's name [N]: _____

Completed by: _____

Purpose: to help identify and eliminate possible causes of anxiety which could be adversely affecting [N]'s self-esteem and progress in communication.

Aim: for the family to make appropriate adjustments, where necessary, so that family members and relevant professionals agree with each statement (✓).

Home and community	Date	Review
Talking outside the home is culturally/socially acceptable; if not, permission has been actively given for appropriate settings		
Socialising is modelled and encouraged within the family and [N] is enabled to participate comfortably in social activities with and without parents present		
SM is explained to and/or discussed <i>with</i> [N], rather than in front of [N]		
[N]'s difficulty talking is openly acknowledged by parent(s) and reassurance has been given that it will not last		
Friends, family and members of the community in regular contact with [N] have been educated about SM and have modified their behaviour accordingly		
[N] does not experience distress as a result of teasing or bullying		
[N] is not pressed to talk when clearly uncomfortable but, rather than opting out completely, is helped to participate in other ways		
[N] does not use inappropriate non-verbal communication or whispering when alone with parent(s) because they have learned from parent that it is ineffective		
Parents do not answer for [N]		
[N] gets ready for their educational setting willingly, and travels there either independently or with a parent/peer/sibling, as appropriate to their age		
[N] has the opportunity to play/share activities or communicate with peers out of school hours (includes email, texting, online messaging)		
[N] gets more attention/physical contact when they are succeeding/participating/playing/helping than when they are anxious/shy/opting out		
[N] has a regular physical outlet and gets enough sleep		
[N] has skills, interests or talents to focus on, enjoy and be proud of		
If clear speech is an issue, it is encouraged through modelling, rather than correction		
[N] is self-motivated to improve through the experience and enjoyment of success; in contrast to opting out to avoid failure/correction/criticism		
[N] experiences normal disappointment/frustration as a result of not speaking (eg occasionally misses out) and expresses their desire to talk		
Parent(s) have access to a support network of other parents with experience of selective mutism		
A plan is in place to address [N]'s speech anxiety, and this has been agreed with [N] and their educational setting		

Informal ways to work through the stages of one-to-one interaction*

1. Graded questioning, at child's pace

Introducing questions to someone with selective mutism

*move on only as
child joins in
activity
then responds
with gesture,
single words, etc.*

Chatty comments with rhetorical questions that need no answer (such as 'This is fun, isn't it!' 'I wonder what this is?')

Show me/Which one? requests that can be answered by pointing **and/or**

Yes/No questions that can be answered by nodding or shaking head

X or Y? questions that can be answered with one word

Simple questions that can be answered with one word

Factual questions that can be answered with a phrase

Leave open-ended and personal questions until later (such as 'How's school going?' 'What do you think?')



*pull back if
child freezes*

N.B. Comments always outweigh questions!

2. Talking through parent or a friend

- Use parents or friends as 'go-betweens'
- Provide space to talk together, such as 'Why don't you two go into the book corner to discuss your plan' (*keep your distance and/or pretend to be occupied*)
- Ask questions via the friend/parent, such as 'Could you ask Pria where she put her lunchbox?' 'I expect you've got a favourite teacher – Mum, do you know who Joe's favourite is?' (*prime parents to redirect the Q rather than answer!*)
- Ask child to communicate via friend/parent, such as 'Tell Ben whose table you want to be on and we'll get it sorted',
- Move away or turn away initially, so that the conversation is private
- Gradually get closer until child talks to parent/friend in your presence
- It won't be long before they answer you without waiting for parent/friend to repeat the question

3. Talking to parents in front of other people

- No more whispering in parent's ear – parent moves to where child can talk to them *face to face* and soon the distance from other people will decrease
- Help parents to stop answering for their child and show them how to *support* their child to answer for themselves (see next page).

An advice sheet for parents of children with selective mutism (SM)

Do I answer if someone asks my child a question?

The short answer is No!

It's natural to step in when you see your child freeze. But if a child gets used to someone answering for them, they will adopt the role of silent partner whenever that person is around. One day they *will* answer and it's so important to have everything in place for that moment when they are ready to speak out.

A few Golden Rules:

Do not answer for your child. If you adopt the routine that follows, your child will learn that it's not so bad to be asked a question; everyone seems relaxed about it, whether they answer or not. They'll be far less wary of social situations in general.

Do not put your child under pressure to answer. Calmly convey that it's fine if they answer and fine if they don't. You know they're trying hard and doing their best.

Do not apologise for your child. They'll feel they've done something wrong. If appropriate, you can always explain later that your child wasn't being rude, or share how it makes you feel that others don't see your child as they really are.

But now the long answer...

Follow this routine whenever someone asks your child a question and you'll be surprised how much easier it gets and how quickly your child succeeds in answering. *It's not usually necessary to tell younger children what you're doing or why*, but if they ask or you want to prepare an older child, see 'Why does this work?' below.

1. **Wait** for a full 5 seconds (slowly count to 5).
If your child nods or shakes their head for Yes/No, that's fine. Add a comment to move the conversation on, e.g. 'Yes, we came last week, didn't we?' But with other sorts of questions your child will probably find it easier to answer if you don't look at them - fiddle with something if it helps!
2. If no response, make it a private conversation between you and your child:
 - gently **repeat** the question *or*
 - turn it into a **choice** 'X or Y?' *or*
 - **rephrase** it so that your child only needs to say Yes or No or nod or shake their head.
3. **Wait** for a full 5 seconds.
If your child answers or gestures, smile and add a comment to move things on. Keep any acknowledgement of this great achievement for a private moment - your child doesn't want attention drawn to their talking in public.
4. If no response, **move the conversation on** without answering, such as
 - say to your child 'We'll have a think about that, won't we?' or 'Tell me later'
 - ask the other person a question to divert attention from your child
 - change the subject
 - say your goodbyes

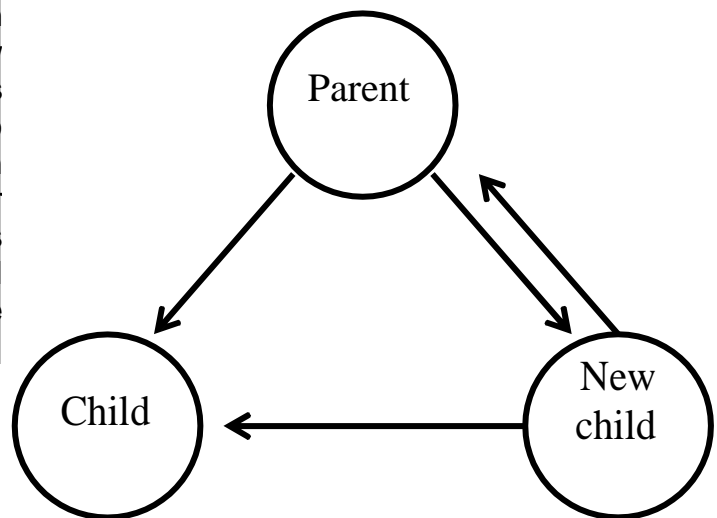
Why does this work? Your child will learn, *without any pressure*, that:

- questions are for the person who's been asked – no-one else will answer
- you know they will get good at answering if they keep trying
- *it's not a big deal* if they don't manage it, no-one minds, it's still a good day!

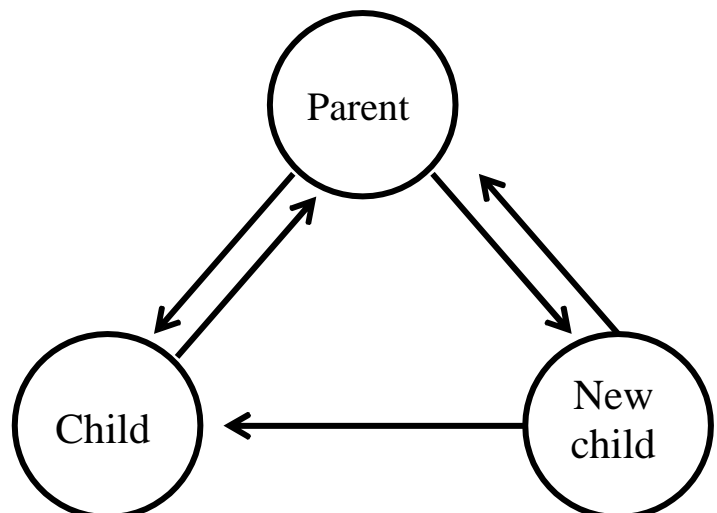
WAIT \implies **REPEAT/REPHRASE** \implies **WAIT** \implies **MOVE ON**

4. The Triangle Tactic

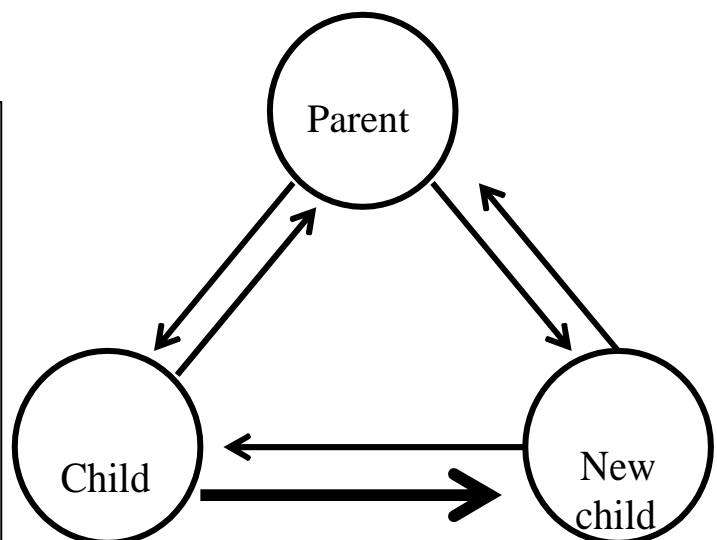
- a) Parent talks to children individually, redirecting new child's comments or questions as needed by asking Yes/No questions that their child can answer with gesture. As their child warms up, parent asks them 'X or Y?' questions and waits 5 seconds to encourage one word answers.



- b) Child starts to talk to parent. Parent passes bits of each interaction on to the other child to keep both involved in the same conversation. As child answers with single words more easily, parent asks them more general questions.



- c) Child talks more to parent and starts to make more general comments. Parent continues to redirect new child's questions but waits a full 5 seconds before doing so. Parent also introduces a 5 second pause before responding to new child's comments, creating more opportunities for their child to cut out the middle man and talk to new child directly.



5. Reading Route

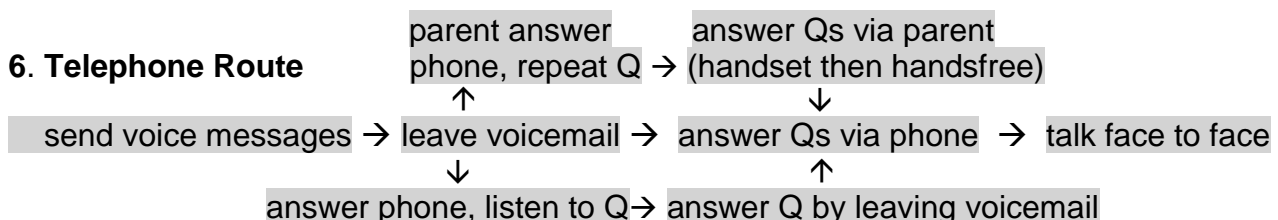
This is an excellent starting point for children and young people who are competent readers and are able to read aloud when on their own with a keyworker. As such it represents the quickest route to establishing speech, but should never be adopted if it causes distress or 'shut-down'. An advantage of this method is that it does not require a parent or other talking partner's presence.

Reading aloud is usually less daunting than other verbal activities as the child does not have to worry about saying the wrong thing or being expected to enter the unpredictable and personal world of conversation. Success is dependent on the child knowing that their difficulties are understood, and trusting that by reading aloud they will not suddenly be expected to speak any more than they feel comfortable. It also helps to sit beside rather than opposite the child, following the text so the child does not feel scrutinised as they read. Young children may approach this route via reading groups, where children read the same text in unison and join in as best they can, following the text with their finger and saying whichever words they can manage. Older children and teenagers may be able to read aloud following a period of rapport-building and explanation of their difficulties: introduce it by saying that you understand that certain things like being asked unexpected questions can be very difficult, but that reading aloud is usually easier because they won't need to find their own words to express themselves.

Activities can be moved towards true communication in a few sessions as follows, starting with a familiar paragraph or piece of work that the child has looked at in advance:

- a) child reads a short passage.
If voice is steady and audible rather than whispered or strained, it is possible to go straight to d). Otherwise use b) and c) for smaller steps to improve voice through repetition and gradual relaxation.
- b) keyworker and child take it in turns to read alternate sentences from a short passage or familiar poem.
- c) (emphasis moving from reading to more interactive turn-taking):
Keyworker and child read different characters' lines from a set number of pages or for a set number of minutes (local amateur dramatic companies will have comedy and pantomime scripts you can borrow and TV scripts are available to download. See also 'I Say!' in STASS catalogue.
or Child reads out numbers, the days of the week and months of the year and then says them alternately with the keyworker, aiming for steady pace, rhythm and voice (may be quiet but should not be strained).
- d) reading games and activities involving turn-taking, questions and answers.
Such as the keyworker asks questions that can be answered by reading out from the text; the child reads out crossword clues for the keyworker to solve.
- e) activities involving turn-taking, questions and answers without reading

6. Telephone Route



7. Zoom / Facetime / Skype Route (video chats)

Do not worry how long this takes – it might take one session or several sessions, but your perseverance will always pay off! Don't leave too long between sessions for best results – no more than 2 or 3 days. Ideally, carry on the next day.

1. Parent arranges a guessing game to play with friend or relative (N) via video chat, such as Hangman, Battleships, adapted Pictogram, Guess Who? or Headbanz. Start with games that need single words and build up to sentences. See next page for Battleships grid.
2. It's OK if child doesn't want to be in camera range at first, they can just watch, no need to join in straightaway. They'll gradually get closer to parent as they realise there's no pressure to talk and the game looks good fun. Often children come closer if parent pretends to get stuck, such as 'Oh dear, what's that, it looks really weird!'; 'Hmm, I wonder if I should go for H6 or H7?'
3. N and parent chat to each other as usual. N doesn't ask the child any direct questions but talks to them commentary-style, such as 'You won't believe what Nana did the other day...'; 'You're good at this, aren't you?'
4. Parent involves the child by asking questions where they can respond by pointing, nodding or shaking their head, such as 'Do you think it's a dinosaur?', 'Shall I choose this square or that one?', but puts no pressure on them to talk to N. Parent responds to the child's gestures as if they are talking, such as 'Great idea, you just sank one of Sam's submarines!' When that's easy...
5. Parent asks the child choice questions ('X or Y?') where the child answers with one word, such as 'What do you think Grandad's drawn this time, do you think it's a **dragon** or a **camel**?' Parent waits 5 seconds (keep smiling, don't look anxious!) and moves on if the child doesn't respond, 'I'll try... **camel**'. Children often find it easier to correct you than reply, so get it wrong!
6. Once the child is chatting *easily* to parent, it's OK for N to ask them direct questions, but still the focus is on N playing and chatting with *parent*, rather than trying to get the child talking. At this point we are just aiming for the child to be comfortable talking to parent in view of N.
7. If N asks the child a direct question, parent must always wait 5 seconds to give them a chance to answer. If no response, parent repeats the question to the child or makes it easier (turns it into a yes/no question or an 'X or Y' question). There is no pressure to answer N, the child can answer the parent (the parent acts as a 'talking bridge' between N and the child).
Such as Grandad: Give me a clue, Liam. What family does it belong to?
Mum (after 5 seconds): What family does it belong to, Liam. Is it a plant or an animal?
8. As soon as the child wants to play the game, let them take a turn. This is the best way for them to talk directly to N but parent should stay for another couple of games to make sure the child doesn't need them as a talking bridge.
9. Once the child is playing the game well with N, their parent leaves so they can play it unsupported. If the child seems anxious, leave just for a short while, for example to get a drink, and promise to be back very soon. This is where games are so valuable as they give the child a familiar structure for talking which is much less scary than an open-ended conversation.
10. Build up to games like 'Don't Say It!' which feel just like conversation and promote free talking.

Battleships

The object of the game is to sink your opponent's fleet before they sink yours. Each player has a 10 × 10 grid on which they fill in the squares to depict various vessels (see next page). A second 10 × 10 grid is used to record the hits and misses when attacking the other player. Players take it in turns to target one of their opponent's squares, hoping that they will score a direct hit. When successful, they are told what type of vessel has been struck, and this helps guide their next 'missile'. Players send a missile by naming a square ('D4', 'E9', etc.). Their opponent replies 'miss', 'submarine', 'tanker', etc. The original player then writes 'S', 'T', etc. in the square or marks it with a dot if it's a miss. Their opponent can cross out the square on their own grid to make sure no cheating is going on!

Handout A1 Battleships

	1	2	3	4	5	6	7	8	9	10
A										
B										
C										
D										
E										
F										
G										
H										
I										
J										

Add to grid:



1 battleship



5 submarines

2 tankers

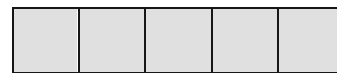


3 cruisers

BATTLESHIPS!

	1	2	3	4	5	6	7	8	9	10
A										
B										
C										
D										
E										
F										
G										
H										
I										
J										

Find and sink:

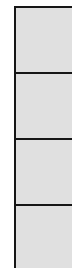


1 battleship



5 submarines

2 tankers



3 cruisers

Supporting children with selective mutism - Advice for parents

1. Ensure that your child feels valued and secure

Children with selective mutism are so anxious about talking that the muscles they need for speaking freeze (especially their vocal cords) and they cannot make a sound. Any anxiety, disapproval or uncertainty they pick up from adults will increase their own sense of guilt, failure and fear about the future – they'll then tense up and find it even harder to speak.

It's not just teasing that makes children feel bad about themselves. Asking 'Why don't you talk?' or 'When will you have a go?' implies that you don't like them the way they are, wish they were different and worst of all, have no idea what to do about it. They will worry that they are upsetting you and try to avoid situations that are likely to highlight their difficulty. Repeatedly asking 'Did you talk today?' or 'How did you get on?' makes children dread going to school in case they let you down.

We need to *tell* children why they find it hard to speak at certain times rather than ask questions they cannot answer. Reassure them that everyone grows up with childhood fears and although they find talking difficult right now, they'll find it gets easier as they get older. Their fear will go away because they will get used to talking, one tiny step at a time, and meanwhile there are lots of other ways to join in and have fun. Your child needs approval whether they speak or not, so be positive about their efforts and tell them how brave they are when they try new things. The calmer you are, the more relaxed your child will be and the quicker they'll improve. Older children who are familiar with phobias will be relieved to hear that they are not shy – they have a phobia of talking which can be overcome in tiny steps, working at their own pace.

2. Try to reduce embarrassment or anger about your child's behaviour

We have to accept our children as they are and not put them on the spot by pushing them to talk to other people or drawing attention to their speech. Allow them to warm up in their own time, help them to loosen up through physical play, join in activities yourself or give them a job to do which you know they will do well, and they are much more likely to relax sufficiently for their speech muscles to start moving again.

3. Educate family and friends about the nature of your child's difficulties

This should be no different to telling other people that your child has a real fear of water or dogs and expecting them to make allowances. Never let your child hear you tell people that they can't or won't speak, as this reinforces their belief that talking is impossible and can make it very difficult for them to break the pattern – especially when you are present! So explain the situation when your child is out of earshot. Explain that when they are worried about talking they can't get their words out, and that asking questions and putting pressure on just makes it worse. They *will* be able to speak once they conquer their fears and when they do, it's important that no fuss is made – everyone needs to carry on as if they've always spoken! Meanwhile, help others respect alternative forms of communication – nodding, pointing, smiling, waving, writing, talking through a friend or parent etc.

4. Tell your child your family and friends understand

Having had the above conversation (or email exchange) it's very important to let your child know that they don't need to worry and can speak in their own time when meeting other people. Never say they don't need to speak – that gives children permission to keep quiet and conveys the message that you don't think they are capable of speaking! But do reassure them that no-one will mind if they don't talk straightaway, no-one will be cross if they don't manage to say 'hello' 'thank you' etc., it's OK to answer with just one word if they can manage it, everyone just wants them to have a good time and will love to see them whether they speak or not. This takes all the pressure

off but gives your child the positive message that they *will* speak when they feel ready.

5. Build confidence by focusing on your child's achievements

In conversations with your child, your friends and yourself, focus on what your child CAN do, not on what they CAN'T. Support them in their interests and creative talents and find ways in which they can comfortably demonstrate their skills to others.

6. Keep busy and have a routine

Activity and physical exercise are good for mind, body and soul and help to keep anxiety at bay. Sitting around doing nothing increases stress, as does uncertainty about the day's events. Start each day with a plan that includes exercise – whether this is letting off steam after school for younger children, sweeping up leaves or walking the dog for older children.

7. Remember that avoidance strengthens fear

When we do things for our children or let them avoid activities, we are confirming the child's belief that these things are too difficult or threatening for them. Of course, we do not want our children to fail or become distressed, but by removing the need to engage at some level, we are taking away their opportunities to learn, experience success and become independent. The secret is to make activities easier, shorter or more manageable so that children are less overwhelmed and have a go. In this way, we show that anxiety is a normal part of life and can be *managed*. If their only way to deal with anxiety is to eliminate it completely through avoidance, they will grow up with no coping strategies. For example:

- Instead of ordering for your child, ask them to show the waiter what they want.
- Instead of avoiding a party completely, arrange to arrive first when it's quiet and only stay fifteen minutes – chances are your child will ask to stay a bit longer!
- Instead of taking something that is offered to your child, first reassure your child that it's OK to take it and if necessary, ask for it to be put somewhere handy so your child can take it when they are ready.
- Instead of turning down an invitation, ask if you can go too as a helper.
- Before children opt out of an activity completely, try to work out with them which part they find difficult/distressing and look for a solution.
- If children miss school, do not let avoidance become a fun option. Make sure they stay in bed or do schoolwork during school hours rather than play.
- Discuss any concerns and enlist the school's support to ensure a positive return.
- Rather than answer for your child (which quickly becomes a habit and delays progress), try the following after waiting a full five seconds:
 - repeat the question so that your child can look at and answer *you*, **OR**
 - rephrase it as a 'Yes/No' question so a nod or shake of the head will do, **OR**
 - rephrase it as an X or Y choice so a one-word answer will do, **OR**
 - if no response after another five seconds, deflect it or simply change the subject, for example 'We'll have a chat about it and let you know later'; 'We just wondered if you had any of these trainers in size 2?'

8. Accompany child but as a general helper rather than their personal assistant

If the only way your child will attend a school trip, Brownies, football etc. is if you go with them, volunteer yourself as a general helper, make a point of talking to other children and get actively involved to assist socialisation rather than dependency.

9. Let children know what is happening

Warn children of changes to their routine and prepare them for new events by talking through what will happen. Rehearse or make a game of real-life scenarios such as going to the doctors, opticians, McDonalds or ordering a Chinese takeaway. Take it in turns to be the patient, doctor, server, etc. and practice/write down phone calls.

Visit new schools as soon as possible to meet and educate key staff, take photos to show relatives, throw wet sponges at the summer fair etc.

10. Provide an escape route

Feared situations are a lot easier to tolerate when we have the control of knowing we can opt out if it all gets too much – the signal to the dentist, the rescue text, independent means of transport. Children have far less control over their escape routes than adults so it's important to give them the same security. If children are anxious about a school trip or going to a friend's house for example, arrange to pick them up at lunchtime so they only go for half the day or say you will phone at intervals to see if they need collecting. Gradually extend the time.

11. Don't spring surprises on your child

Many parents don't like to warn their children about a forthcoming event because they see their child worrying for days or weeks and doing all they can to avoid it. They prefer to tell their child on the day and find they cope reasonably well because they haven't had time to think about it.

This is a risky strategy that increases rather than reduces anxiety. On the surface it works well but it's a very short-term gain. Even when children cope reasonably well with the event that was sprung on them, they will usually have tolerated it in a high state of tension rather than feeling relaxed and in control. In the long term, they are constantly on the alert, waiting for the next surprise, and doubt sets in that they can trust anything to be what it seems. Furthermore, they are being deprived of the opportunity to learn that anxiety doesn't have to be eliminated, it can be managed through preparation and coping strategies such as educating key people and having an escape route.

12. Remember that it can be just as scary talking to children as adults

Help your child play with other children rather than leaving them to get on with it. Join in with them, starting with activities or games where talking is optional, so you can all concentrate on having fun.

13. Establish safe boundaries with your child so they can take small steps forward

Laughing, singing, talking in unison and talking to parents will be a lot easier than talking to other people. But children are often afraid to do these things in case it draws attention to them and leads to an expectation to speak. Reassure your child. For example:

- Grandma knows you can't talk to her just yet, but it's OK to talk to me and Daddy in front of her.
- It's hard to talk to your teacher at the moment but it's OK to laugh. It's OK to join in the singing, no-one will make you talk afterwards.
- It's fine to talk to us here in a very quiet voice, no-one will make a fuss. You don't need to speak on your own, you can just try joining in when everyone speaks together.

14. Use telephone and recording devices as a stepping-stone to the real thing

Go to www.talkingproducts.co.uk for lovely ideas for presents and talking practice – children can personalise greetings cards with a recorded message or make a talking photo album for example. If children cannot speak to their relatives or teacher face to face yet, they could leave a message on a mobile phone or have a conversation via a 'Talking Pod' or MP3 player. How about encouraging siblings to take it in turns to record the message on your home answerphone? Teachers can listen to children reading to their parents over the phone rather than in the classroom. Finally, children can get used to talking to strangers by practising with voice recognition software (such as Train Tracker). This builds up confidence, volume and the ability to repeat without panicking, safe in the knowledge that it's a robot, not a real person. Before you know it they're ordering a Chinese or pizza over the phone!

15. Push the boundaries, starting with safe strangers

Do not be afraid to let children go without every now and then so they develop that bit of extra determination to confront and overcome their fears. They'll often surprise you! For example, explain you are too busy to stop what you are doing but there is the money if they want to get an ice-cream. Do not get it for them. If the ice-cream van drives away, calmly say, 'Never mind, you can try again tomorrow'. Reassure children that only a couple of words are needed and there will be no need to have a conversation.

16. Encourage a very quiet voice rather than whispering

Accept whispering on the odd occasion if you can genuinely hear and are in a hurry but *do not lower your head so that your child can whisper in your ear*. This easily becomes a habit and encourages avoidance. A very quiet voice is much better than a whisper as it will gradually get louder as your child gains confidence.

So, if your child wants to talk to you but is worried about being overheard, either:

- a) turn so that you are blocking your child's view of whoever they are concerned about and, maintaining eye-contact, quietly say 'Pardon?' (*do not whisper!*) or 'it's OK, X isn't listening'.
Or
- b) move far enough away from onlookers so that your child can speak to you face to face rather than in your ear. If you are in the middle of a conversation, ask your child to wait for you to finish and then pull away to speak to your child.

There is no need to explain what you are doing but if your child asks why they can't whisper, explain that too much whispering will give them a sore throat so it's better to stand where they can talk normally. Stick to this and very soon your child won't need to move so far away. N.B. This technique only works for parents and people with whom the child has no difficulty talking when there's no-one else around.

17. Ask friends, relatives, shop-assistants etc to speak to your child through you if you know they will not be able to respond directly. For example

'What colour would your son like to try on first?'

'Max, what colour would you like to try on first?'

(*Max points to brown shoes*) 'He'd like to try on the brown ones please.'

'I love Max's blazer. Could you ask him what school he goes to?'

'Max – you like your school don't you, what's it called?'

'St. Joseph's'

'Max says it's called St. Joseph's.'

If children are relaxed with you in public and know you are not pushing them to talk directly to other people, you will find that they begin to cut out the middle man!

18. Help your child offload their stress safely

Being watchful, anxious and unable to speak for much of the day is a great strain. It's common and can be challenging for the whole family to get the brunt of SM children's pent up emotions when they come home from school, but they need you to understand that it is natural to feel this way and to provide a calm, safe place rather than more emotional upheaval. Your child may need a chance to relax completely after school before attempting homework, or a physical outlet for their frustration – trampolining, swing-ball or swimming for example. Violent computer games are NOT a good idea!

When upset, your teenage child may use a flat tone of voice which sounds rude and confrontational. Do not rise to this or you will escalate your child's stress and make things even worse. Recognise their anxiety, take a deep breath and continue in a calm gentle tone. If they lash out verbally or physically, calmly reflect, 'I'm sorry you've had such a bad day' and leave them on their own to listen to music, bash a pillow or put it on paper until they feel better. When things are calmer, acknowledge their frustration but explain that the family do not have to suffer their outbursts so will keep out of their way if they try to take it out on other people. Discuss alternative outlets and say that if you know what has upset them there may be something you can do to help.

Finally, look at your own lifestyle. Does your child have good reason to be concerned about **your** behaviour? They cannot improve while worrying about you.

19. Show your child it is OK to relax and have fun

If parents have unrealistic standards and try to keep their children and house spotless with everything in its place, their children will constantly worry about spilling or breaking something, getting food on their hands or faces, touching something unhygienic or making the room untidy. They will get extremely anxious at school or other people's houses where they perceive a different set of standards. They will not be able to tolerate lively, unstructured behaviour or engage in normal messy play like finger-painting, papier mâché or digging for worms.

This fear of getting dirty and putting something in the wrong place can spread to a fear of using toilets outside the home and inability to take risks. It will certainly impact on children's ability to relax around other people and make friends. It is important for all the family to enjoy mealtimes, gardening, cooking and play without fear of making a mess – put away the wet-wipes til the end of the activity!

20. If different languages are spoken at school and home, set a good example Your child needs to hear you having a go at speaking the school language at school and with their new classmates. Show them learning is fun and mistakes are OK! Ask the teacher if your child can spend some time with other children who speak the same language for part of the day, teaching their vocabulary to English speaking children so everyone sees what it is like to learn something new.

21. Make explanations, instructions and reminders visual

Anxious children quickly feel overloaded, forget things easily and tend to take things literally or at face-value. Anxiety causes 'brain-freeze' so we are unable to take in all we hear and cannot think laterally or rationally. Put things on paper so that children have a checklist to follow rather than trying to remember instructions. If they repeatedly ask the same question for reassurance give them a visual reminder and respond to further questions by asking them to refer to it and tell *you* the answer.

22. Acknowledge anxiety but do not fuel it with an emotional reaction; calmly provide a diversion or clear plan of action

Children need brief sympathy followed by matter of fact guidance and strength – not anger, worried looks or protective cuddles which just confirm that there is something to be afraid of. For example, if they complain of a tummy-ache before visiting a friend's house say 'Poor you, I know you're a bit worried but Josh's Mummy knows all about waiting until you're ready to talk. I know what will help until our taxi gets here, where's that catalogue you wanted to look at?'

Or, if they don't want to go to the doctor's say 'We can take something with us to play in the waiting room. Let's choose something and have a game now'.

If they have difficulty separating from you, stay but do not cling to them or put them on your lap – explore the room together and find things to do. If appropriate, explain how you or others are going to make situations manageable for your child.

Older children will need to discuss their fears about starting a new school, changing class, going on a school trip etc. Externalise their anxieties by breaking the events down and writing each component on a post-it note – the coach-journey, taking the right clothes, getting to the toilet in time etc. Then sort the post-it notes into three columns – things I don't have to worry about, things that worry me a bit and things that worry me a lot. Now you can agree on which part to tackle first and strategies to help. Some post-it notes you will leave to deal with another time but already the anxiety will be out of the child's head and seem more manageable. Unless problems are broken down in this way, children will want to avoid situations completely without understanding the specific source of their anxiety.

23. Answer anxiety questions with another question so that your child becomes the problem solver

Children tend to bombard parents with questions as they try to control their anxiety, for example

Who's going to be there?

How long will it last? Have they gone?

Are you going to talk to my teacher? etc.

Instead of answering (which rarely alleviates the anxiety) respond with another question so that children start to understand their anxiety, and can think about coping strategies. For example

Who do you hope will be there?

How long do you think you can manage?

Why do you want them to go?

If I talk to your teacher, what would you like me to say?

24. Celebrate your child's unique qualities

We cannot change the personality of SM children – and wouldn't want to! They are naturally sensitive individuals who take life seriously and set themselves impossibly high standards. The downside is a tendency to be overwhelmed by novelty, change and criticism; the upside is an empathetic, loyal and conscientious nature. When treated fairly and allowed to show their true colours, SM students often display more creativity and insight than their peers.

An advice sheet for the adults who children with selective mutism talk to freely and comfortably

Note: this is not for adults who need to prompt or question the child to sustain conversation.

TALKING IN PUBLIC PLACES

An informal approach to generalising speech across different settings

Are you one of the people who a child with selective mutism (SM) talks to easily and spontaneously when no one else is listening? If so, you can gently help them discover that it's 'safe' for other people to hear their voice. Children who have SM need to talk in as many places as possible, so that nowhere becomes 'off limits'. And enabling them to speak to you in public, when other people are nearby, is the first vital step towards expanding their talking circle. This handout will help you gradually achieve this. But please take time to read it a few times for reassurance that the techniques let you work at your child's pace, so they don't become unduly anxious.

You have probably adopted several 'rescue' strategies for when you are together in public places and talking becomes difficult. Perhaps a combination of gesture, whispering and guessing sounds familiar? It's natural to fall back on these modes of communication when children become silent but, unfortunately, these strategies *actually strengthen fear of speaking*. Of course, never pressurise children to talk when they are not comfortable but, equally, don't convey that you think talking is impossible for them. By changing your support strategies, and talking openly about what you are doing and why, you can gently provide the opportunities children need to master their anxiety and gain confidence.

To start, check that you are not falling into any of the rescue 'traps' below when you are *alone* with your child. This is a good time to practise the techniques initially! You will find it increasingly natural to use the same techniques when strangers are in the distance; then as strangers get closer; until eventually your child can even talk to you in front of people they know.

Key: C = child or young person

1 Talk to the child about their fear

When C is relaxed and comfortable at home, talk openly and casually about SM like any other fear. For example: 'Talking feels scary at the moment, but you'll get braver and it will get easier and easier'; 'I know talking feels hard at the moment, but you'll get there'; 'No one will mind if you don't talk straightaway. They know children often need a while to settle in first'; 'It's OK to feel scared about going somewhere new, that's normal. It won't last'.

C needs to believe:

- ★ You are not worried and are confident they'll get over their fear.
- ★ Their fears will pass and are *not* part of their personality.
- ★ If ever they can't answer, it's not a big deal and no one will mind.

2 Smile

Check your face! If you are worrying that C won't talk, your face will be tense and immobile. An anxious face looks like disapproval or sadness to a child. You may be worried on the inside but, on the outside, try to look happy, sound relaxed and act as if it's only a matter of time before C talks.

3 Give your child time to respond

To turn things around, you will need to do the hardest thing of all – **wait** a full 5 seconds after asking a question, even if you sense that C is aware of other people nearby. It's important to talk about this, *not at the time* but when you are both relaxed, using whichever combination of the following explanations feels right.

- a) I'll always give you a chance to answer because I know it's going to get easier and easier for you.
 - b) If I guess I might get it wrong.
 - c) I'm helping you to be braver about talking. It's OK, you only need to talk when you feel ready, just see how you feel.
- ★ So ... **wait** a slow count of five. Then, if no response ...

TRAP 1**4 Don't guess!**

Do not guess the answer or offer items until C finally nods or chooses one. Every time you guess correctly, C is less likely to talk the next time. C may not be able to answer straightaway but there are several ways to make it easier for them to speak as this handout explains ...

5 Prompt with alternatives (X or Y?)

This is an acceptable alternative to guessing. Give C a choice of two:

- ★ Prompt by providing an alternative, 'X or Y?', eg
 - 'Shall we go on the slide or swings first?'
 - 'Which pizza do you fancy tonight – mushroom or pepperoni?'

Wait ... If there are more than two choices add 'Or something else?'

Wait ...
- ★ If there is no response, smile and **move on** (change subject) or **move away**, eg
 - 'That's OK, tell me later' (*don't go to the pizza aisle just yet*)
 - 'That's fine, I can decide' (*don't always choose their favourite*)
 - 'Come round the corner and tell me' (*move to a 'safe' place*).
- ★ If C tries to communicate by gesture, follow procedure 6.

6 Don't let gesture be a substitute for speech**TRAP 2**

- ★ It's natural for C to point to an object to show what they want; or to answer a 'yes/no' question such as 'Would you like an ice-cream?' by nodding or shaking their head. Follow these up whenever possible with a question where gesture *won't* do, eg 'What sort?'; 'Chocolate flake or no flake?'. Try to ask fewer 'yes/no' questions and keep items out of sight to reduce pointing.
- ★ If C tries to tell you something more complex by using gesture, don't get into a game of charades! Quickly seek clarification, eg 'Sorry, I don't know what you mean'.
- ★ If C doesn't answer, provide an alternative, 'X or Y?', eg:
 - 'Do you want me to *look* at something or *listen* to something?' (C is pulling at your sleeve)
 - 'Are you showing me the *slide* or the *dog*?' (C is pointing across the park)
 - 'Does that mean you want to *go* or you want to *stay* a bit longer?' (C is shaking his or her head)
 - 'Are you thinking it's a *good* idea or a *bad* idea?' (C is looking surprised)
 - 'Does that mean you *can't decide* or you *don't want anything*?' (C is shrugging his or her shoulders).

Wait for an answer (a full 5 seconds).

- ★ If no response, **move on** or **move away**, as described in procedure 5.

7 Don't encourage whispering in your ear**TRAP 3**

The closer people get, the quieter C's voice is likely to become. That's OK, it will get louder as C becomes desensitised to talking in public. Get down to C's eye level, if necessary, and accept a quiet voice, but don't let C hide the fact that they are speaking, by whispering in your ear. This strengthens their belief that talking in public is not safe, making it harder to talk another time.

- ★ Avoid turning or lowering your head, so that C can whisper in your ear.
- ★ Maintain eye contact with C and quietly say 'It's OK to talk here'. Smile and **wait** (a full 5 seconds).
- ★ If no response, give appropriate reassurance, eg 'It doesn't matter if anyone from school sees you – they already know you talk to me'; 'I know you feel worried but nothing bad's going to happen'. **Wait** ...
- ★ If no response, but you have a good idea of what C wants to say, prompt with an alternative, X or Y?', eg 'Cola or lemonade?' **Wait** ...
- ★ If no response, smile and **move on**: 'That's OK, tell me later' (*don't start guessing*) or **move** just far enough **away** so that C *can* talk (see procedure 5).
- ★ If C tries to communicate by pointing, follow procedure 6.

8 Be aware of position

If C is not responding and darts looks at bystanders, it is often the fear of being *watched*, rather than being overheard, that is increasing their anxiety.

- ★ Reduce anxiety by turning away or moving so that you can talk side-by-side, out of people's vision, eg at a wall display or notice board or behind a screen. As C relaxes, gradually return to your original position.
- ★ C may initially feel more comfortable at the side of a room or near a doorway. Respect this and wait for their anxiety to subside before moving to a more central position.

9 Be positive and realistic

Keep your own voice low-pitched and calm and never convey anxiety, frustration, disbelief or disappointment because this will increase C's already negative associations with the expectation to talk.

- ★ If it has taken a lot of persuasion just to get C to attend an event, acknowledge their effort and achievement: 'You're doing really well!'
- ★ Whenever C talks, give a big smile and respond quietly and positively without making a huge fuss about the fact that they spoke, eg 'Oh good – that's my favourite flavour too!'
- ★ Later, out of public gaze, you can be more specific: 'Wow, it was fantastic the way you helped me out there and ignored everyone else in the shop!'
- ★ Occasionally, time is of the essence and you need to be realistic to ensure success. For example, rather than cave in and resort to guessing when you finally reach the fast-food counter, it is better to ask C what they want *before* joining a long queue. There will be plenty of other opportunities to practise at the counter when the place is less busy.
- ★ Don't worry if C speaks extremely quietly – they will get louder the more they talk in public and learn that it is 'safe'.
- ★ Don't ask C to speak louder. C may find this critical or unnecessary. Be natural and honest, eg: 'Pardon?'; 'Sorry, there's too much noise, what was that?'. Let C work out what they need to do!
- ★ If a stranger unexpectedly asks C a question, follow the same routine: smile, **wait**, prompt, **wait** and move on, if necessary, rather than answer.

10 Keep it up!

You may be convinced that these techniques won't work because your child never speaks to you in public when you are close to other people. But perhaps C never speaks in those situations because you have never *consistently* put these techniques into practice!

- ★ Set yourself the task of applying these techniques *consistently* for two weeks before dismissing them.

- ★ Don't expect it to be easy. The techniques may feel counterintuitive at first but children need you to provide the opportunity for them to challenge their fears safely and discover that they can rise above them.
- ★ This is **not** about making children go without things, to force them to speak. It's about calmly conveying that you know C will be able to speak as their anxiety subsides. C will gain strength from your faith in them. You talk to each other at home; it can be the same outside, especially if you move slightly out of other people's vision and earshot.

For example, when it's quiet and there's no queue, don't be afraid to order only for yourself at the fast-food counter, giving C 'a bit longer to think' about what they want. There is now a very good chance that C will tell you while the server gets your order. If they don't, you can return after C has told you at your table (pick a less public one at the side rather than in the centre of the room). There is no question of C going without a meal; C just needs to find the right moment to summon up courage and speak. Persevere and *you will find that moment coming sooner and sooner*.

- ★ If you feel that you are getting nowhere, take a break! Stick to light-hearted comments without asking C any direct questions. Fall back on a question that C can answer by nodding or shaking their head. Then move further away from bystanders and try again.
- ★ Keep a record of where C has managed to speak to you in public; how many other people were present; how close they were; and whether any were connected to C's school or other organised activities. This will enable you to see what progress is being made, what reassurances you may need to give, and how you can gradually increase the challenge next time.

Good luck!

<p>Practise and memorise this sequence!</p>	<p>If C wants to whisper, say 'It's OK to talk here'.</p> <p>Wait for C to speak ... <i>If no response ...</i></p> <p>Offer an alternative, 'X or Y?' <i>or</i></p> <p>Replace gesture with an alternative, 'Do you mean X or Y?'</p> <p>Wait ... <i>If no response ...</i></p> <p>Move on or move away. Don't guess!</p>
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WAIT \Rightarrow **REPHRASE 'X or Y?'** \Rightarrow **WAIT** \Rightarrow **MOVE ON**

Why does this work?

Your child will stay calm and learn that:

- ★ being seen or heard to speak to you in public does *not* lead to increased pressure to speak
- ★ with an expectation to do only what they can manage, there is no need for avoidance strategies.

Advice for healthcare professionals offering medical appointments to children and young people who have selective mutism

The following information has been taken from an article in the Faculty Dental Journal called, Dental Care for children with selective mutism: How do we communicate effectively? by Mona Agel and Gino Hipolito. While this advice has been written from a dentist's perspective, it is useful to share with all health care professionals who have medical appointments with children and young people with selective mutism (SM). Additional information about the 'graded questions' referred to in the article has also been included.

Healthcare professionals may mistake silence in children with SM as 'rudeness' or defiant behaviour. It is important to recognise that SM is an anxiety disorder that can cause profound disruption to the life of a child and the child's family.

Every child with SM is unique in how their difficulties manifest. Medical history forms should be adapted to include appropriate questions for the additional support needs of children, including any communication difficulties. Some parents may disclose a SM diagnosis; some children may not yet be diagnosed with SM. It is also important to establish whether the child has any other phobias or anxieties that could cause distress during the session.

Dentists should be aware of the modes of therapy that the child is receiving and work with these therapeutic principles during dental appointments. A simple phone call with the parent ahead of an appointment may be useful in facilitating this:

- Find out what makes the child feel at ease and discover more about their interests.
- Ask the parent what form of communication the child would feel most comfortable with (eg gestures, signing, use of visuals or if the child is old enough, writing, texting or typing).
- Has the child made sufficient progress to be able to answer in single words or sentences?
- Are the parents trying particular strategies as part of an intervention programme (the dentist visit could be an exposure activity to help the child's generalisation of talking).

When meeting the child, the dentist should assure them that there is no pressure to speak and they can communicate in whichever way feels comfortable for them. Children with SM like to know what is happening. Before asking any questions, dental teams should talk through what will happen in the session with the parent and child, and use a visual timetable (pictures of each activity such as talk to parent/child, look in mouth, special photo x-ray, clean teeth, sticker) to aid understanding for a young child or a child with language difficulties.

SM often impacts a child's ability to ask for help or tell others if they are hurt or in pain and so this should be considered when taking a history of presenting complaints. The use of a pictorial rating scale of pain can be used by the dentist to identify what the child feels and can facilitate communication even if the child is verbal in a session. Other forms of non-verbal communication are important during treatment such as pre-agreed hand gestures (thumbs up for 'fine', thumbs down for 'not fine', hand up for 'stop'). Accepting the child's non-verbal forms of communication such as nodding and shaking of the head is extremely important when developing rapport.

Initially, it is important for the clinician to ask questions involving both the parent and the child, e.g. 'Mum, could you ask Ricky when he cleans his teeth?'. Children will be more likely to speak to their parent if they are confident that there is no expectation to have a direct conversation with the clinician. Parents should then allow five seconds for their child to respond to them and can prompt to make it easier, e.g. 'Do you clean them before breakfast or after?'. This strategy could be discussed in the pre-appointment phone call if parents seem unaware of it. If the child responds by speaking to the parent in front of the clinician, this is a good indicator that they are feeling more relaxed.

Communication tips:

- Keep the interaction fun and light hearted.
- Limit eye contact while speaking to the child to help the child feel more at ease.
- Try to relate topics to the child's interests.
- Limit the use of questions initially and focus more on comments to avoid putting pressure on the child to respond.
- Wait until the child is speaking comfortably to the parent in front of the dental team before asking questions directly to the child.
- Start with simple questions where the child can nod or shake their head or point, e.g. 'Who do you think should sit in the chair first, you or Mummy?', and if they seem happy, move on to simple factual questions requiring a one-word answer, e.g. 'Have a look in Dad's mouth. Has he got one filling or lots?'
- If the child is answering those questions, it is appropriate to move on to factual questions that can be answered by a phrase or short sentence (e.g. 'What are your favourite foods?'; 'Where do you keep your toothbrush?').
- If the child continues to answer these questions, stepping up to subjective questions would be the next stage (e.g. 'Where are you feeling pain?', 'How much pain are you feeling?' with the pictorial rating scale for pain).
- Give the child enough time to respond (5 seconds), whether communication is verbal or non-verbal.
- It is crucial that the clinician does not show surprise or make a big deal out of the child speaking, otherwise the child may stop, owing to attention being drawn to their speech.
- If the child disengages and becomes silent, questions should be scaled down to allow for non-verbal responses.

Ensuring that the child sees the same clinician and nurse is also important as this helps to maintain an environment that is familiar for the patient. Finally, although there is no evidence to suggest that children with SM are more likely to have experienced abuse, trauma or neglect, it is important to be mindful that these children are less likely to make disclosures of abuse to professionals and in these cases, relying on other indicators of abuse will be crucial if there are safeguarding concerns.

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- Oerbeck B, Stein MB, Wentzel-Larsen T et al. A randomized controlled trial of a home and school-based intervention for selective mutism – defocused communication and behavioural techniques. *Child Adolesc Ment Health* 2014; 19: 192–198.
- Johnson M, Wintgens A. *The Selective Mutism Resource Manual*. 2nd edn 2016. London: Speechmark.

Quick guide to meeting children and young people (CYP) who have selective mutism

Understand the nature of selective mutism (SM)

Despite the name, SM is not a choice. SM is an anxiety disorder that robs the individual of the power of speech. The expectation to speak triggers a feeling of dread or panic with an automatic freeze response, leading to 'consistent failure to speak in specific social situations' (DSM-5, 2013). The CYP *wants* to speak and does not understand why they cannot. They can speak freely in other situations, usually with a few close family members and friends. Only these people see the CYP's true personality – lively, chatty, sociable. To other people, the CYP often appears sullen, disinterested, slow, aloof, wooden, stubbornly silent or shy.

Facilitate participation rather than avoidance

SM behaves in the same way as a phobia. All the time there is an expectation to speak, the CYP with SM will feel compelled to avoid or escape from the situation. Therefore, the first step to helping the CYP to participate is to remove all pressure to speak. Once the CYP is visibly more relaxed, gradually introduce *opportunities* to speak, rather than demands.

- Inform CYP what is required from them in forthcoming activities, social events, meetings and appointments. They will need reassurance that talking is optional or unnecessary, or they will not want to attend.
- Social comfort and non-verbal communication always precede speech. Be prepared to do all the talking initially in the form of friendly running commentary – use greetings, comments, explanations and rhetorical questions (such as 'It's cold, isn't it?', 'Oh no! What have I done with my keys?') but no direct questions.
- Reassure the CYP that they can talk to friends/parents in your presence and you won't interrupt or try to start a conversation.
- As CYP joins in activity, introduce 'Yes/No' and choice questions that can be answered by nodding, shaking the head, pointing or circling a response.
- Once non-verbal communication is well-established, try a simple 'X or Y?' question requiring a single word answer, e.g. 'Do you prefer cats or dogs?' Wait 5 seconds and if no response, move on, such as 'I used to be terrified of dogs when I was little.'
- The CYP is more likely to speak to you initially if no-one else can overhear.
- Respond to all forms of communication as if the CYP has spoken and show no surprise when they speak. Respond to what they say – this is the best form of praise.

Video-conferencing

A video call is an excellent precursor to face to face conversation but may be overwhelming at first. Begin by providing clear guidelines regarding how the call will be set up.

- Allow CYP to choose if they join the call with video enabled/disabled. If a group call, CYP can stay Muted with reassurance they won't be picked out to answer a question.
- If 1:1 and accompanied by parent, CYP may choose to sit off-camera. Parent repeats any questions to them and they answer parent rather than talk to screen.
- Allow CYP to answer in writing or with pictures where appropriate, such as thumbs up.

Inclusion and well-being

- Interact with a smile – a concerned expression looks very similar to disapproval.
- Talk freely to CYP as described above and encourage peers to do the same.
- Ensure CYP is able to access essentials like toilets, water, meals, student support, friendship groups, medical attention and entrances/exits without needing to speak.
- Most CYP are unable to initiate, even via a text or email, so don't leave them to find a partner or seat and anticipate any questions they might have, for example show them where to find essential items and check they've understood instructions, homework, etc.
- Safeguarding: Until CYP can approach at least one person in your setting to report illness, teasing, misunderstandings, etc., a two-way home-school communication system is essential to ensure CYP has a voice (for example, book, email).

References:

The Selective Mutism Resource Manual, 2nd edition (2016), Johnson and Wintgens, Routledge.
Diagnostic and Statistical Manual of Mental Disorders, 5th edn (2013) DSM-5 American Psychiatric Publishing, Washington, DC.

An advice sheet for parents, teachers and carers**HELPING CHILDREN TO COPE WITH ANXIETY****How to make anxious children *more* anxious ...**

- 1 Tell them there's nothing to worry about.
- 2 Sort out their problems.
- 3 Don't allow them to become distressed.
- 4 Rush to comfort them.
- 5 Let them decide what they can cope with.
- 6 Ask if they are going to be OK.
- 7 Answer all of their questions.
- 8 Spring the dreaded event on them at the last minute so there's less time to worry.

Did that list surprise you? No one wants to see their child in distress. So, of course, you want to take away your child's anxiety.

However, anxiety is *normal* and it is *good* for us – it keeps us safe!

Anxiety makes sure that we look out for danger and are prepared to meet life's challenges. When children are shown that the only way to cope with anxiety is to eliminate it, they become increasingly intolerant of anxiety. They only have to feel the tiniest bit anxious and it's unbearable – they feel compelled to run (FLIGHT) or resist (FIGHT) and may seize up or go into denial (FREEZE).

There is another way. Parents can help children FACE their anxiety, understand it, work with it and overcome it!

Things to do differently to make anxious children *less* anxious

- 1 Anxious children can't help worrying. Telling them there's nothing to worry about makes the worry more confusing, elusive and overwhelming. Children need help to understand that it is *worry* (a product of their excellent imagination!) that is making their body produce the sensations of panic, rather than the situation they fear: "You feel worried because you've never done this on your own before", "You're not sure what will happen when I go downstairs", "It feels scary right now but, after a while, you'll see that nothing bad happens, and your worry will go away and stop bothering you". By labelling and recognising 'Worry', children learn that it's a normal response that they can talk to and control; it's not a stop sign that has to be obeyed. So, rather than dismissing



- worries, let children know how amazing they are every time Worry appears and they are brave enough to ride it out. They'll be surprised how quickly it gives up and goes away!
- 2 When children are tiny, of course they need their carers to fix any problems so that they are safe, well and happy. But even two year olds are actively problem solving throughout the day as they discover how to stop food falling off their spoon and retrieve objects that are out of reach. Independence develops through experimenting, finding your own solutions and enjoying the knowledge that you can be self-reliant. It thrives on a flexible approach to life where there are many ways to do the same thing; there is no need to be perfect; and you can take pride in *effort* as well as achievement. When parents do all of the fixing for anxious children by providing comfort, removing sources of stress or doing things for them to prevent failure, the children become more dependent, less willing to take risks and increasingly passive in their parent's presence. Just recognising that you have fallen into any of these patterns of behaviour, and knowing that it was in response to your child's anxiety, not the cause of it, is the most important step towards turning things around.
 - 3 If we allow children to avoid everything they're afraid of, they will never learn the difference between a *real* threat and an imagined threat. Acknowledge how brave children are being and help them face that fear, one tiny step at a time. Maybe they only need to attend the party for the first ten minutes or watch you having your dental examination, but *not* going to the party or to the dentist's should never be an option.
 - 4 We comfort young children when they are in pain and convey the message 'Stinging nettles, broken glass and fights are *bad* things that you need to avoid if you want to save yourself further pain; meanwhile, I will make you feel better'. If we cuddle and soothe children when they are afraid of insects, dogs or fireworks, for example, the message is the same: 'These are **BAD** things to be avoided and you should run to me for comfort'. So, **ACKNOWLEDGE** their anxiety; **REASSURE**; **FACE** the fear and **PRAISE** them. "Of course you're worried, you weren't expecting that but it can't hurt you. Let's stand further back until you get used to it". Save the cuddles for when you congratulate them for being so brave!
 - 5 Anxious children will be convinced they cannot face certain events. By agreeing to their terms – no parties, no visits, no falling asleep alone in their own bed – we deprive them of the opportunity to discover that anxiety can be managed and things are not as difficult as they expect. Consequently, all new challenges will be scary and they will make increasing demands to avoid any anxiety-provoking situation. It is frightening for children to have this much control; they need *adults* to make the big decisions about what is a real threat and what is safe. Adults should, in turn, be guided by the child regarding how *much* they can face at a time, steering them towards gradual mastery of feared situations. By making activities simpler or shorter, providing a distraction or phasing out support, realistic expectations can be set and children can be assured that all they need is the courage to have a go. It may also take courage for their parent to step back and let it happen.
 - 6 "Will you be OK now?" Asking children this question before leaving them tells the child they are right to worry – after all, even you, the adult, are not sure that they'll be OK! *Tell* children they will be OK, let them know when you will be back, and do your very best



not to be late. When you return, stay a while to share an activity and, on your way home, talk about the fun you had, rather than the terrible time they had without you.

- 7 Anxious children try to eliminate uncertainty by asking their parents endless questions about upcoming events. Answering each one conveys the message that the only way to deal with anxiety is to have a completely accurate forecast for the future – an impossible task. Having *no* idea of what's coming up is horribly unsettling at best and utterly terrifying at worst. So children certainly need a broad outline of their daily schedule and important events in their calendar. They need explanations or role play of routine procedures to know what to expect. But beyond that, as long as children have a clear understanding of what is required from them to complete specific assignments, they need to discover that the finer detail can wait and, more importantly, that they can cope with *not knowing*. Differentiate between need-to-know questions that require an answer and 'worry' questions. Try to answer 'worry' questions with another question, so children can explore the reasons for their anxiety and test how they would cope in each situation.



For example:

"I'm not sure how many people will be there. Why would you like to know? How many do you think you could cope with? So what could you do if there are more than that? What would make it easier?"

"She might have a dog. What worries you most about dogs? How can we tell if it's safe to go near a dog? What do you think dogs want when they jump up? What would make you feel better if a dog was around? So what should we ask Auntie Sue to do?"

Above all, show children by your own example that it's natural to worry about new situations but you can be brave and give it a go anyway. You can show *Worry who's in charge!*

- 8 After seeing anxiety, repetitive questioning and resistance grow on the approach to dreaded events, it is completely understandable to forgo advance warning to save children getting themselves into a state. On the surface, this seems to be a good strategy because children often appear to cope reasonably well when there is no way out of a situation. However, this 'success' is usually a feat of endurance, spurred on by sheer adrenaline, rather than an enjoyable experience. The child is left, not with a sense of achievement, but with feelings of resentment, dread and insecurity. They become increasingly wary and suspicious, knowing that the next surprise could be just around the corner. Working through anticipatory anxiety to prepare for a specific event takes a lot more energy and resolve, but provides the foundation for general anxiety-coping strategies. Children learn that anxiety is normal; it can be spoken to with calming and rational thoughts, and overcome with familiarisation, a back-up plan and courage!



Further reading

- ★ *The Huge Bag of Worries* by Virginia Ironside (2011), Hodder Children's Books (age 3–9).
- ★ *What to Do When You Worry Too Much: A Kid's Guide to Overcoming Anxiety* by Dawn Heubner (2005), Magination Press (age 6–12).
- ★ *Anxious Kids, Anxious Parents* by Reid Wilson and Lynn Lyons (2013), Health Communications, Inc. (age 8–18).
- ★ *First Steps Out Of Anxiety* by Dr Kate Middleton (2010), Lion Books, Oxford (young people and adults).

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Continued

HELPING CHILDREN TO COPE WITH ANXIETY

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Resource Manual
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