

How to get help with Selective Mutism

If the child or young person has not spoken in certain situations for over 1 month, consider a referral to the Community Speech & Language Therapy service.

People who can refer to the service are:

- Health Visitor
- Nursery staff
- School SENCo
- SEN Link worker
- Paediatrician
- Other health workers



To discuss a possible referral, there is a duty therapist available from 9.00am – 5.00pm Monday – Friday on: 0151 295 3990

You don't need to wait for a Speech & Language Therapy appointment to start making changes for the person with SM. Parents and schools can get started straight away by following the advice in this leaflet and from the sources listed in 'further information'.

What will Speech & Language Therapy do?

The first appointment might take place at a community clinic, at home or at school or nursery. A Speech and Language Therapist (SLT) will talk with you about what worries you and how we can work together to make a plan.

The SLT will work with parents/carers and the nursery or school setting to provide specialist advice and strategies to skill everyone up to support the child or young person's Selective Mutism.

Further Information

Online:

- Selective Mutism Information and Research Association (SMiRA): www.selectivemutism.org.uk
- SMiRA Facebook group: search "SMiRA"

Recommended reading:

- The Selective Mutism Resource Manual (2nd edition) by Maggie Johnson and Alison Wintgens, Speechmark Publishing Ltd. 2016
- Can I Tell You About Selective Mutism? By Maggie Johnson and Alison Wintgens, Jessica Kingsley Publications 2012
- Can't Talk? Want to Talk! By Jo Levett and Stephen Street, Routledge 2014



This leaflet only gives general information. You must always discuss the individual treatment of your child with the appropriate member of staff. Do not rely on this leaflet alone for information about your child's treatment.

This information can be made available in other languages and formats if requested.

Information in this leaflet is adapted from 'The Selective Mutism Resource Manual' (2nd edition) by Maggie Johnson and Alison Wintgens (2016) Speechmark Publishing Ltd.

What is Selective Mutism?

Information for parents, carers and professionals



Community Speech & Language Therapy (Liverpool)
Liverpool Innovation Park
Kilby House
Digital Way
Liverpool, L7 9NJ
Tel: 0151 295 3990

Community Speech & Language Therapy (Sefton)
Netherton Health Centre
Magdalen Square
Bootle, L30 5SP
Tel: 0151 247 6109

What is Selective Mutism?

Selective Mutism (SM) is an anxiety disorder where a child or young person has a **phobia of talking** to certain people or in certain situations.

Children with Selective Mutism can talk freely when they feel comfortable, such as at home with close family or friends. But in other situations, such as at nursery or school, they feel frightened that someone might ask them to speak.



What should I look for?

Children with Selective Mutism might:

- Look anxious when under pressure to speak
- Find it difficult to answer the register or to say hello, goodbye or thank you
- Look 'frozen' when spoken to and may not respond to you in any way
- Find it difficult to look at you when they are feeling anxious
- Do all they can to avoid the need to talk
- Be able to speak freely with close friends or family when no one else is around

Key Information

Selective Mutism is not normal shyness or stubbornness. Children with Selective Mutism don't 'refuse to speak', they try to speak but have a panic reaction and are unable to.

A few facts:

- SM affects 1 in 150 young children. That is at least 1 child in most primary schools.
- Both boys and girls can have SM.
- SM usually starts when children first leave the family circle, for example to stay with a relative, go into hospital or start nursery.
- In some cases, it can also develop in older children.
- Children with SM are more likely to have other speech and language difficulties.
- Children from bilingual backgrounds are more likely to have SM.
- It is possible to have both SM and another condition such as an Autism Spectrum Disorder (ASD).
- Children who have SM are no more likely to have been abused than any other child.
- If left untreated, SM can continue into adulthood and lead to other mental health difficulties.



How can I help?

There are lots of changes you can make at home, nursery or school to help. The golden rule is...

Don't try to get them to speak!

- This can have the opposite effect.
- Instead, remove all pressure on the child to talk.
- Use comments and statements rather than questions e.g. "wow, look how tall your tower is" or "hmm I wonder where this one goes..."

At nursery/school:

- Choose an adult to build a relationship with the child. Make time for 1:1 sessions focusing on building a rapport with no pressure to speak.
- Allow them to join in with activities without needing to talk e.g. by pointing, nodding or choosing a picture.
- Reassure them that you won't choose them to answer a question unless they *want* to be chosen.

At home:

- Reassure your child that talking will get easier and they don't have to talk until they feel ready.
- Focus on what they *can* do, encourage and praise their skills, talents and interests.
- Make sure everyone around them understands their anxiety and doesn't put pressure on them to talk.

