

## Selective Mutism – Good Practice Guidelines

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### Introduction

These guidelines aim to help school staff to support children and young people with Selective Mutism (SM). These guidelines have been produced by Specialist Teachers, specialist preschool practitioners, Educational Psychologists, school staff and Speech and Language Therapists, who currently form the [Essex Selective Mutism Interest Group](#) (ESMIG).

These guidelines have been developed in the recognition that approximately 1 in every 150 children and young people across schools in the UK may be currently experiencing SM and is based on the advice and recommendations outlined in the following resources:

- **‘The Selective Mutism Resource Manual’** (referred to as the SMRM in these guidelines)  
Maggie Johnson and Alison Wintgens
- **‘Can I tell you about Selective Mutism?’**  
Maggie Johnson and Alison Wintgens, illustrated by Robyn Gallow
- **‘Parent Advice for East Kent’**  
Maggie Johnson, Selective Mutism Advisory Service, Kent Community Health NHS Trust
- **‘The Ideal Classroom Setting For the Selectively Mute Child’**  
Dr Elisa Shipon-Blum
- **‘Core and Extended training of key members of the group’**  
Maggie Johnson and Alison Wintgens

### What is Selective Mutism?

Selective Mutism (SM) is a term used to describe the behaviour of children who are able to speak but who remain silent in some situations or with some people. In order to obtain a diagnosis of SM the behaviour:

- needs to have been observed for at least one month and not be limited to the first month of nursery or school;
- cannot be due to lack of or comfort with the language or be better explained by a communication disorder or other abnormality;

- must interfere with education or occupational achievement or with social communication (DSM V, May 2013).

Children and young people with SM are able to speak but cannot speak in some situations because they **feel too anxious**. They do not choose to be silent. Most children and young people would love to be able to speak in every situation but they cannot. Causes could be described as fitting into any combination of three groups: **pre-disposing**, **precipitating** and **perpetuating**.

<b>Pre-disposing factors</b> such as:	<b>Precipitating factors</b> can include:	<b>Perpetuating factors</b> can include:
<ul style="list-style-type: none"> <li>• a speech and language impairment;</li> <li>• anxiety and hyper-sensitivity within the child;</li> <li>• family history of shyness or SM.</li> </ul>	<ul style="list-style-type: none"> <li>• separation, loss or trauma;</li> <li>• frequent moves or migration;</li> <li>• entry into school/nursery/pre-school;</li> <li>• self-awareness of speech impairment;</li> <li>• teasing and negative reactions.</li> </ul>	<ul style="list-style-type: none"> <li>• reinforcement of the mutism by increased attention and affection;</li> <li>• lack of appropriate intervention or management;</li> <li>• over-acceptance of the mutism;</li> <li>• ability to convey messages successfully non-verbally;</li> <li>• geographical or social isolation;</li> <li>• family belonging to an ethnic or linguistic minority;</li> <li>• negative models of communication within the family.</li> </ul>

(adapted from Carmody, 1999 cited in SMRM, 2001)

Children and young people with SM may sometimes use non-verbal communication and be willing to engage in social encounters when speech is not required. They may not initiate or reciprocally respond when spoken to by others, but may respond minimally.

Children and young people with SM:

- might freeze, move awkwardly, find it difficult to make eye contact and appear shy and withdrawn when they feel anxious, but this is not a true reflection of their character;
- are likely to become more anxious under pressure, worry more than their peers and be sensitive to the reactions of others.

This news [clip](#) featuring Michael Jones (Early language Consultant) explains the condition.

The following documentary "[Help Me to Speak](#)" provides a good introduction of SM from the perspective of two children and their families.

Common myths about SM are described by [The Selective Mutism Foundation](#) and [Selective Mutism Group- Childhood Anxiety Network](#).

## Co-morbidity

Children and young people with SM sometimes, but not always, present with co-morbid difficulties, most notably:

- anxiety difficulties;
- speech and language problems, such as articulation difficulties, expressive language conditions or stuttering;
- developmental delay (eg cognitive, speech, language, or motor delay);
- depression;
- sensory processing difficulties;
- autism and social communication difficulties.

## English as an Additional Language (EAL)

Children learning English as an Additional Language will sometimes experience a “silent phase”. It is important to monitor this phase; you can use a [Monitoring Sheet](#).

## Outcomes

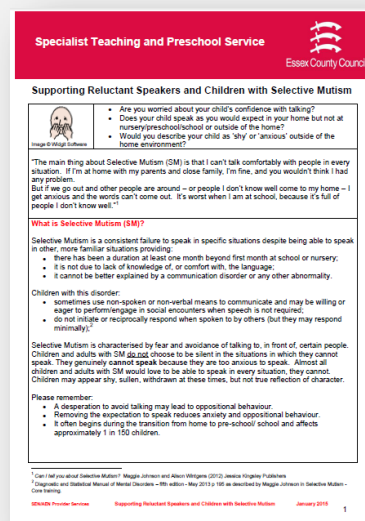
SM may impact upon children and young people’s social emotional development and learning in the following ways:

- increasing social isolation and difficulty with making and sustaining relationships with peers and adults in a range of situations;
- limited life experiences and acquisition of general knowledge;
- mental health and wellbeing as an adult;
- ability to access the curriculum, academic attainment and employment opportunities;
- participation and communication in the community during childhood, adolescence and into adulthood.

## Support for Parents and Carers

Key professionals in all educational settings aim to foster warm positive relationships with families as an integral part of supporting the developmental and educational outcomes for children and young people. It is particularly important that parents and carers of children who suffer from anxiety conditions such as SM are given the understanding and respect they need to support their child. The condition may be most apparent in the educational setting however it can affect the child’s life in many ways.

Collaborative approaches and supportive attitudes are necessary to enable the setting and family to work together in the best interest of the child or young people. Educational settings can access [Advice for Parents and Carers](#) from the Essex Local Offer website. Being familiar with this advice can enable settings to support family members appropriately.



## Early Years settings

### Early identification and assessment

Early identification is essential to support the child and family before the condition becomes more of a part of how the child feels about themselves and functions within their environment.

Observe the child with reference to the [Environment Checklist](#).

Sensitively discuss your observations with the child's parents/carers. It is helpful to talk about the child as being reluctant to talk if Selective Mutism isn't exactly as described in the diagnostic criteria. (DSM V)

“**Listen**” to the child's views through the use of a [talking mat](#) or [communication rating scale](#). It may be helpful if these are done at home or with the parent in setting.

### Creating the right environment

- Develop communication friendly areas, and consider carefully the use of outdoor space.
- Refer to your setting's policy on supporting children into preschool.
- To alleviate anxiety and help children become more confident with talking in your setting:
  - try to reduce the anxiety of separation by working with parents/carers;
  - welcome parents into the classroom to help/ open afternoons;
  - encourage non-English speaking parents to learn and use English at school; accept non-verbal communication until they feel ready; discuss this with parents;
  - encourage participation by doing something within group activities;
  - include activities where the children talk or sing in unison;
  - agree a hand sign or ask “Is ... here?” (so all the group say “yes” together) for registration;
  - buddy the children with supportive peers for play;
  - make chatty comments rather than ask questions.

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#### ***Supporting Quiet Children***

by Maggie Johnson & Michael Jones

(Lawrence Educational)

This book describes a set of activities that gradually encourage confident talking in young children. [Useful resources](#) can be found at Michael' Jones's website [Talk 4 Meaning](#).

After three months or one term, review the effectiveness of the intervention/s, using the graduated approach.

If the child is beginning to relax more in the setting s/he may be ready to move further forward. Staff and parents/carers can work together using a small steps programme. Specific advice by Maggie Johnson describes how to manage this programme. Discuss the situation with your [Area SENCO](#) (if one is assigned to your setting); other settings within your Learning Community may have experience and advice to share with you. (Refer to '[Managing a Small Steps Programme](#)').

## Referral

If the family and setting staff feel that further advice is needed, refer to Speech and Language Therapy services and (if appropriate) seek advice from your [Area SENCO](#).

## Transition to primary school:

- Support parents/carers with a transition plan that gives the child greater opportunities to become familiar with the primary school environment, people and routines. This could be done through the One Planning process.
- Setting staff will need to liaise with primary school staff to create the right environment and to continue with a programme of small steps towards confident talking.

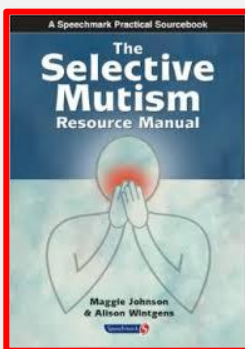
## Primary School

### Early identification and assessment

Early identification is essential to support the child and family before the behaviour becomes habitualised within the primary school environment.

A good starting point is to observe the child in the environment and collect information about **the child's views, the views of their family** and how the child presents across contexts. This should be done as part of the [One Planning](#) process. This information will be useful for initial conversations with a Speech and Language Therapist, a Specialist Teacher and planning meetings with your link Educational Psychologist. Some useful resources to help you do this may be:

- [Basic Information](#)
- [School Information Form with Parents/Carers](#)
- [Communication Rating Scale](#) or [Talking Mat](#) ("What's important to ...?"): see [One Planning Project](#) for more details
- [Speaking Habits](#) or Talking Map (p71-73 SMRM) to complete with parents/carers



Refer to a copy of **The Selective Mutism Resource Manual** by Maggie Johnson and Alison Wintgens.

### Creating the right environment

Firstly look at the school environment. Use an [Environment Checklist](#). Refer to the [Basic Information](#) sheet, with key staff discuss your observations and agree adaptations.

Observe the child at regular intervals to review the effectiveness of the adaptations after a period of a few weeks.

### Intervention:

Develop a One Plan and begin a Small Steps Programme. Depending on the experience of school staff in managing SM it may be appropriate to begin a small steps programme. If the child is beginning to relax more in school s/he may be ready to move further forward. Specific advice by Maggie Johnson ([Planning and Managing a Small](#)

[Steps Programme](#)) describes how to manage this programme with key staff and parents/carers.

## Referral

To discuss and clarify next steps, consult your area [Specialist Teaching Team](#). It may also be appropriate to make a referral to the [Educational Psychology Service](#) and/or Speech and Language Therapy services.

## Transition to secondary school

Children with SM will need a detailed transition plan to support their move to secondary school. This should include a One Planning meeting held in Year 6 in the Spring or Summer term. To provide optimum support for a successful transition a Specialist Teacher and/or Educational Psychologist and key manager and support staff from the secondary setting should be invited to support this transition.

The One Plan should be reviewed within six weeks of the young person starting Year 7 to identify successes and address any difficulties promptly.

## Secondary Schools

It is hoped that children with SM get the support to help them become confident talkers in primary school. Ideally these children would have been identified to the secondary school SENCO before they start school in Year 7. An exemplary transition should have taken place ([Transition Checklist](#)). However some children may continue to need support in secondary school. It is essential that **all** staff within the secondary setting have a level of awareness of the condition so that their interaction with the young people is supportive. The [information sheet](#) (shown at the end of this guide) can be circulated to all staff. Key workers, tutor and Inclusion Manager/SENCO will need a level of knowledge about supporting young people with SM so that positive outcomes can be reached within the shortest possible time.

## Referral

An immediate referral to the Educational Psychology Service should be made for children with SM who start Year 7 who have not had previous Educational Psychologist involvement to support their transition to secondary school. To make a referral, contact the [Educational Psychology Service](#).

The Educational Psychology Service will be able to provide a secondary school training package on supporting young people with SM. The link Educational Psychologist for the school will be able to carry out individual assessments and make recommendations to support the young person's specific needs.

## Creating the right environment

Providing the right environment for young people with SM will make a difference in reducing their anxiety and supporting them to have greater confidence with speaking. We know from research that children and young people with SM are most effectively supported in school environments that:

- listen to the child/young person's views;
- listen to parents/ carers' views;
- build trusting relationships within school and between home and school;
- minimise anxiety;
- support self-esteem and confidence; support learning, communication and participation.

The secondary school SENCO/Inclusion Leader can consult the [Transition Checklist](#) to check provision for the young person with SM.

## Supporting strategies

The Supporting strategies below are for early years and primary settings. They have been drawn from current practice and the 'The Selective Mutism Resource Manual'.

### When supporting children with SM:

- Don't give too much eye contact or expect it from the child.
- Give advance warnings of changes of plan.
- Do not accept non-verbal communication at first but tell the child how they can communicate to you regarding – polite requests (toilet, drink, problem, feeling ill), such as class systems for toilet, help, etc. With older children use written notes as responses to questions etc.
- Give the child the message that mistakes are a positive process in learning. These children can be highly sensitive individuals who can be perfectionist with their learning and are very responsive to feedback.
- Build in activities that have different levels of demand on spoken language to include the child with SM.
- Manage any comments from other children, for example: "I know that ... can talk and he/she will talk with me when he/she is ready".
- Avoid drawing attention to any differences or any times the child talks. Be relaxed and behave as if this is unremarkable.
- Check that the child understands any home learning. Use of homework clubs and communication books with parents can help.
- Ensure that other staff supporting the child understand their needs, know what systems are in place for communication and do not expect the child to talk.
- Keep the seating plan/room layout the same for the child with SM, having the same place and supportive friend alongside nearby can ease anxiety and build confidence.
- Plan small group activities that do not need talking for contribution (writing on a shared sheet of paper, etc)

### Supporting the child to communicate

- Encourage confidence in communicating non-verbally by building rapport. Be aware of your own body language, proximity and expression. Note the child's expression and degree of eye contact.
- Record any verbal information relating to learning on a dictaphone and child agrees on where this will be played and who hears this.
- If possible give the child some one-to-one time to reassure and build confidence, even just to check how they are coping at the moment.
- Sometimes it's easier when everyone talks in unison, (class or group reciting something, the child may say the words in their head).
- Try different environments, such as outside (the child could be less aware of their own voice in open spaces).

### With young children reassure them that:

- You understand how difficult it is for them to speak out and how it feels.
- They are not the only child who has this difficulty.
- The important thing is to be happy and to have fun; they do not need to talk until they feel

ready.

- When the difficult feeling goes away (and it will go away) they will be able to talk.

### With older children and young people:

- Make clear to them, privately, that there is no expectation to speak.
- Tell them that if they want to tell you what helps them, they can write you a note.
- Tell them that you understand that it is very difficult to talk in school at the moment.



You can view our [Pinterest](#) boards for information and ideas on supporting children with Selective Mutism.

*Circulate the following [guide](#) to all secondary school staff, including site staff*

### Quick Guide for Secondary School Staff re: Selective Mutism

- **Make clear to the student, privately, that there is no expectation to speak.** Tell the student that if they want to tell you what helps them, they can write you a note.
- **Keep the seating plan the same.** For the student with SM, having the same place and supportive friend alongside in class can ease anxiety and build confidence.
- **Don't give too much eye contact or expect it from student.**
- Give **advance warnings** of changes of plan.
- Do not accept non-verbal communication at first but **tell the student how they can communicate to you** regarding – polite requests (toilet, drink, problem, feeling ill etc), written notes as responses to questions etc.
- Give the student the message that **mistakes are a positive process in learning.** These young people are usually bright sensitive individuals who can be perfectionist with their learning and are very sensitive to any feedback.
- **Check student understands homework.** Use of homework clubs and email with student can help.
- Manage any comments from other students **'Listen, I know that ... can talk and he/she will talk with me when he/she is ready.'**
- **Ensure that supply teachers and cover supervisors understand** and do not expect student to talk and know what systems you have in place for communication.
- **Plan small group activities that do not need talking for contribution** (writing on a shared sheet of paper etc).
- **Avoid drawing attention** to the student about anything. If the student talks, be relaxed and behave as if this is unremarkable.

(Ref: *The Selective Mutism Resource Manual* by Maggie Johnson and Alison Wintgens)

#### Useful websites:

[www.smira.org.uk](http://www.smira.org.uk)

[www.ispeak.org.uk](http://www.ispeak.org.uk)