

# Selective Mutism & Reluctant Speakers: Practical Strategies for School Professionals

Dr. Alex DiGiacomo, Dr. Tamara Salih,  
& Dr. Rosalind Catchpole

May 17<sup>th</sup>, 2021

**Welcome! We will begin the presentation shortly. Please note that your microphones have been muted automatically.**

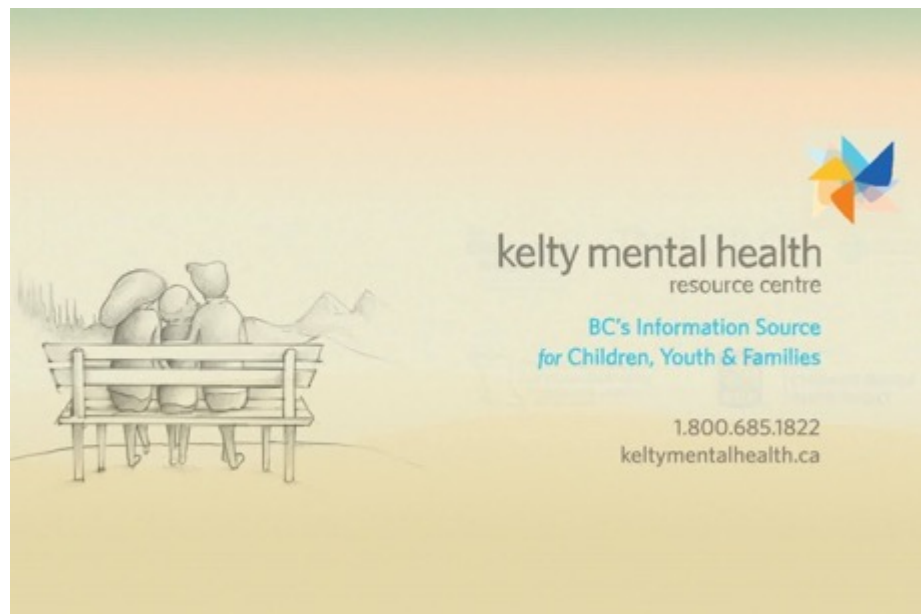




## Kelty Mental Health Resource Centre

We help families across the province by:

- Helping with understanding and navigating the mental health system
- Listening and offering peer support, and
- Connecting families to resources and tools.





## **Webinar #2 Coming up...**

**Selective Mutism & Reluctant Speakers:  
Practical Strategies for Parents & Caregivers**  
Thursday, May 20th, 2021; 12:00-1:00pm PST

Register:

[keltymentalhealth.ca/event/2021/05/selective-mutism-reluctant-speakers-practical-strategies-parents-and-caregivers](https://keltymentalhealth.ca/event/2021/05/selective-mutism-reluctant-speakers-practical-strategies-parents-and-caregivers)



## Housekeeping

- Attendees are automatically muted and cameras are turned off.
- Please submit questions for the speakers through the “Q&A” function. There has been an option enabled where you can vote for questions that you want answered.
- Please submit technical questions or comments through the “Chat” function.
- At the end of the webinar, a survey will pop up that we invite you to complete.
- A PDF of the slides is currently available at [keltymentalhealth.ca/SelectiveMutismWebinarSeries](https://keltymentalhealth.ca/SelectiveMutismWebinarSeries)
- The webinar will be recorded and made available at the same link.
- This information applies to the context in British Columbia. If you are in another jurisdiction please consult local health and school authorities for further information.



## Speakers



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**Dr. Tamara Salih, MD, FRCPC**

Child & Adolescent Psychiatrist  
Mood & Anxiety Disorders Clinic  
BC Children's Hospital



**Dr. Rosalind Catchpole, R.Psych**


Psychologist and Clinic Head  
Mood & Anxiety Disorders Clinic  
BC Children's Hospital



# Land Acknowledgments

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We acknowledge with immense gratitude that we live, work, and play on the traditional, ancestral, and unceded territory of the Coast Salish peoples, including the territories of the x<sup>w</sup>məθkwəyəm (Musqueam), Skwxwú7mesh (Squamish) and Səlílwətaʔ/Selilwitulh (Tsleil-Waututh) Nation



# Professional Acknowledgments



We would like to acknowledge the contributions of our colleagues over the years as we have developed and refined our treatment approach, including

- Dr. Steven Kurtz
- Dr. Annie Simpson
- Dr. Susan Baer
- Dr. Janet Mah
- Dr. Megan MacFadden
- Dr. Jane Garland



## WHAT ARE WE COVERING TODAY?

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- Theoretical underpinnings of selective mutism (SM)
- Practical strategies for helping children warm up their voices
- Roadmap for increasing speech in different settings & situations at school
- Q&A





# But first: thank you.

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Our goal is to *support YOU...*

...as you support the  
reluctant speakers in your  
schools

Thank You!



## What is SM ?

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**Consistent failure to speak** in social situations in which there is an expectation for speaking despite speaking in other situations

**Interferes** with educational achievement or social communication

**Duration** at least 1 month (not the 1<sup>st</sup> month of school)

- Not due to a lack of knowledge/comfort with spoken language
- Cannot be better accounted for by a communication disorder



# What SM *is* vs. what SM *is not*

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**An anxiety disorder**



Not due to trauma, abuse, or a big family secret

Not just regular shyness...kids typically don't "grow out of it"

Not a form of autism, intellectual disability, or a speech problem

Not a child being intentionally oppositional, defiant, or manipulative



# How common is SM?

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Prevalence just under **1%**  
(higher rates in ESL populations)

Seems a bit more common  
in girls

Average age of onset  
**between 2 and 4 years old**

Average age of intervention  
**between 6 and 8 years old**



# Why is it important to treat SM?

Safety concerns  
can emerge

Doesn't always  
get better on its  
own

Social &  
emotional  
development can  
be impacted

Academic  
progress  
can be affected



**Don't  
“watch &  
wait”**



## What is the prognosis for kids with SM?

- There's every reason to be hopeful!
- With the appropriate supports, kids most often get better



# Helping students to find their voice can be very rewarding.....



“It has been an amazing experience working with Dr. Catchpole. My student is selectively mute and has not spoken to anyone at the school for many years.



We were able to have him begin speaking with one of his teachers...then to several teaching staff and then to the students in his class, where we played a game in a circle of peers and ended with fun conversations among the group. The student progressed from fearing speaking to others to smiling, having fun and asking others' questions.

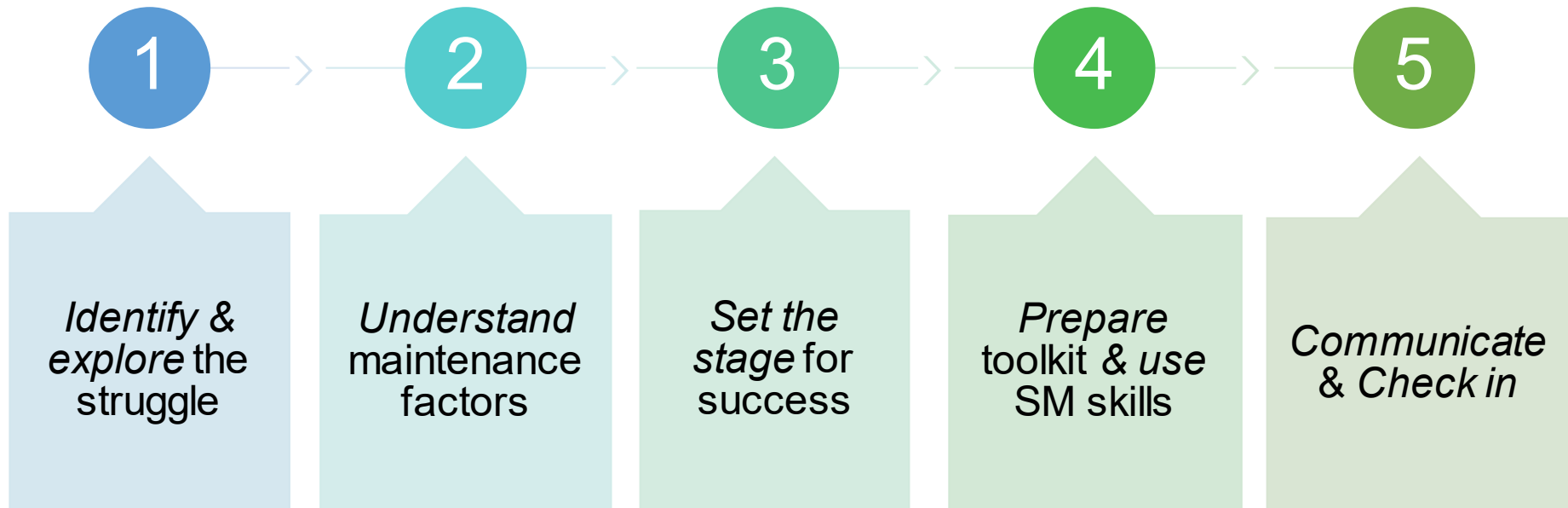


What began as a potentially threatening experience, turned out to be the time of the week that this student looks most forward to! Seeing this student benefit from this intervention has been very rewarding for me as an educator.”



**So, your student is  
struggling to find their  
voice....**

**...here's what to do  
in 5 steps.  
Early intervention is best!**





## Case Example “Sam\*”

### Info:

- 5-year-old Chinese-Canadian boy who lives with his parents and older sister. Sam is fluent in both Mandarin and English.

### Observations:

- Sam’s kindergarten teacher noticed that he hadn’t spoken in the classroom at all. He defaulted to communicating with gestures such as pointing or nodding.
- He enjoys running around & playing with bugs.
- He likes skittles & M&Ms

# Step 1: *Identify & explore the struggle*

## Talk with caregivers

- are caregivers aware of how little the child is speaking?
- is the level of verbal communication at school different from that displayed at home?
- does the child already have a diagnosis of SM?
  - if no, you may suggest contact with family doctor
  - If yes, is the child working with an external MH professional?
- ask for a video showcasing child's speech & personality at home



## Talk with child's previous teachers and involved school professionals

- who does the child seem most comfortable with at the school?
- who have they spoken to? how much have they spoken?

## Step 2: *Understand* the maintenance factors

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**No one likes seeing a kid look anxious or distressed!**

- Well-meaning people (kids, teachers, parents, strangers) can feel pulled to “rescue” a child from an anxiety-provoking situation

For SM, this can look like:

- Jumping in to answer for the child
- Allowing child to communicate non-verbally
- “Mind reading”
- Telling others not to engage the child verbally (“She’s shy”)



## Step 2: *Understand* the maintenance factors

**No one likes seeing a kid look anxious or distressed!**

- Well-meaning people (kids, teachers, parents, strangers) can feel pulled to “rescue” a child from an anxiety-provoking situation

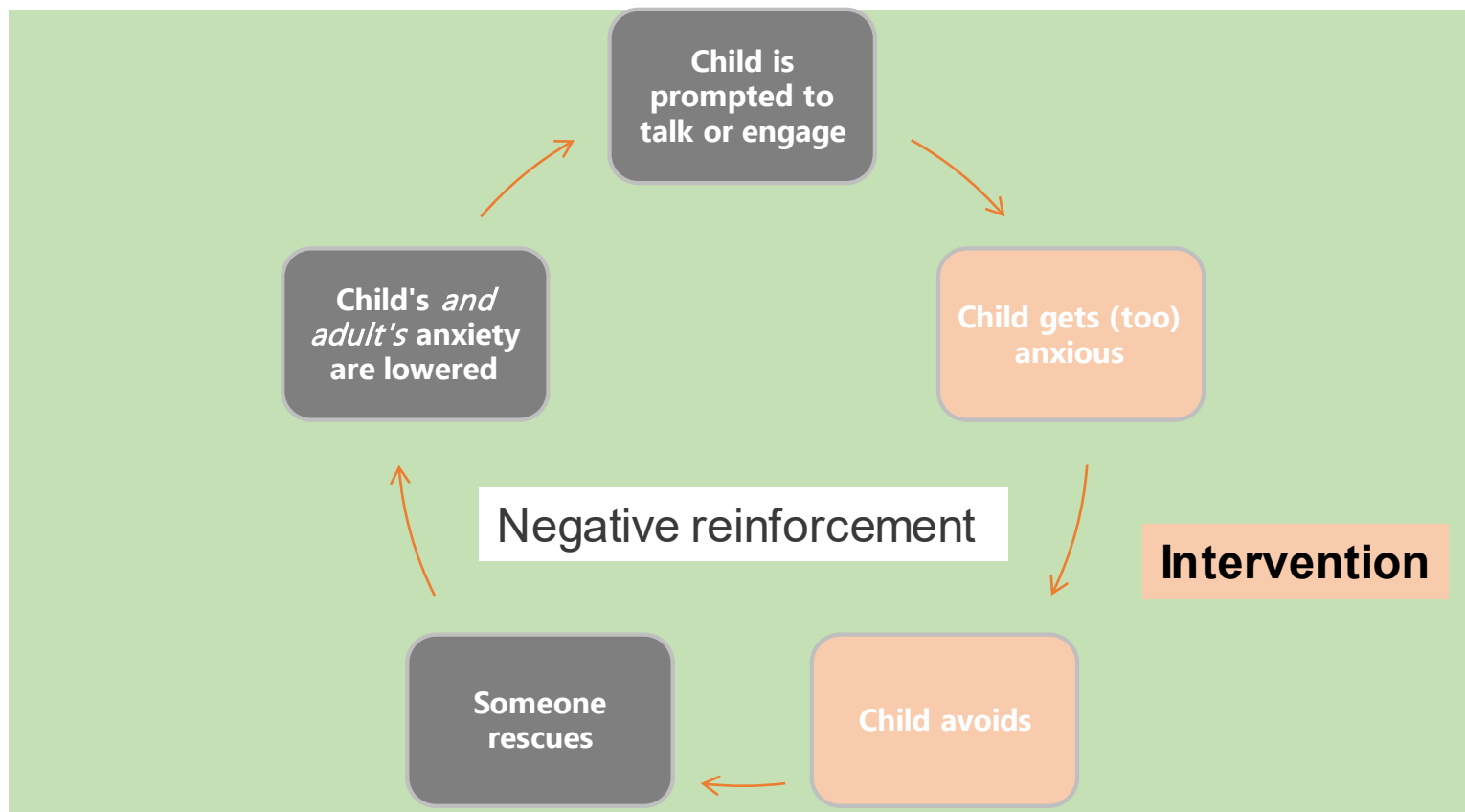
**BUT, we know two things:**



\*\*in a validating & playful way

## Step 2: *Understand* the maintenance factors

How we conceptualize the cycle of non-speaking



## **Step 2: *Understand* the maintenance factors**

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2 unanswered questions per  
minute = 20 unanswered  
questions per 10 minutes = 720  
unanswered questions per day =  
**130,120 unanswered questions  
per school year!!!**

**Not speaking is an overlearned behaviour:  
Practice anything 100 000 times and you get very 'good' at it**



## Step 2: *Understand* the maintenance factors

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Undoing the non-speaking cycle can feel stressful,  
*BUT anxiety improves* when we face hard things

- **Normal** for kids to feel anxious and protest having to brave talk. Expect some **distress!**
- With an appropriate plan it's not harmful to encourage kids to face their fears
- Confidence will increase with each step!
- Try not to let kids off the hook by communicating non-verbally

What if I  
traumatize  
them?

What if I  
push them  
too hard?



## Step 3: Set the stage for success

### 3a) Gather the school team

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- 2 main roles for the school team - can be the same person or different people



**Coach:** To co-ordinate the intervention & figure out the next move



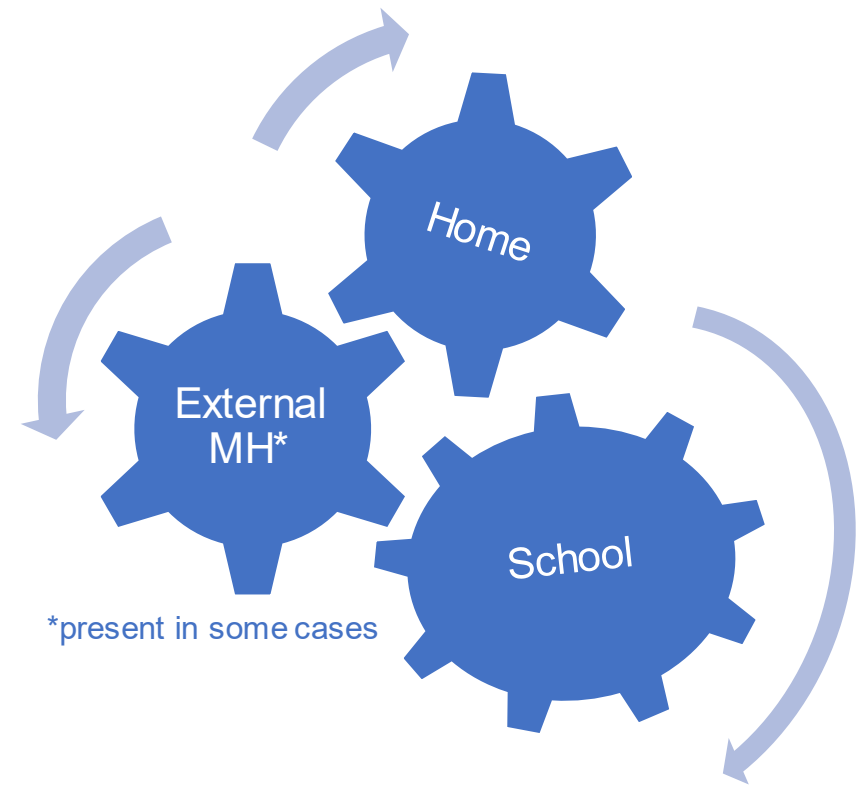
**Quarterback:** To establish speech with the child & transfer speech to others

# Step 3: Set the stage for success

## 3b) Communicating with family

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- Validate struggle & **offer hope** that things can get better
- Introduce idea of **stepwise plan** that will help the child find their voice
  - Explain that parents may be needed to transfer speech to an educator
- Educate re: importance of **consistent external reinforcers** (e.g. can be points, stickers)
  - We have had much success with a 'brave book' as part of the child's agenda
  - These are ***short-term!***



**SM intervention is a team sport!**  
**Communication between players**  
**is critical to success.**



## **Step 4:**

### ***Prepare toolkit & Use SM skills!***

- 
- 2 equally important skills
    - #1 Warm-up
    - #2 Encouraging brave talking

## SM Toolkit Must Haves: Warm-up Tools

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A quiet space &  
some time

Preferably somewhere the child  
is comfortable (e.g. resource  
room or outside)

A “hook” – do your  
homework to see  
what child is  
interested in

Popular hooks include:

- drawing supplies
- craft supplies
- building blocks or Jenga
- exploring outside
- lego



# SM Toolkit Must Haves: Brave Talking Tools

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## Reinforcers

Could be: points, stickers, candy, toy coins, points in brave book to be exchanged for prize at home

## Individual & Group Talking Games

Usually in resource room or classroom

We love: Spot It, Zingo, Guess who, Go Fish, I Spy, Hangman (Can be creative – use anything that involves talking 😊)

## Talking Quests

Usually involves going up to people in the hallways/classroom

People Bingo, Talking Scavenger Hunts, Favourites Game, Science Surveys



## **BRAVE TALKING SURVEY**

|   |   |   |
|---|---|---|
| <b>Do you have a sister or no sister?</b>                 | <b>Do you like pizza or sushi better?</b>                 | <b>Have you been on an airplane or not been on a plane?</b> |
| <b>Have you been camping or not been camping?</b>         | <b>Do you like ice cream or you don't like ice cream?</b> | <b>Do you like broccoli or cake better?</b>                 |
| <b>Do you have a brother or you don't have a brother?</b> | <b>Do you like to read or you don't like to read?</b>     | <b>Have you ever played Guess Who or you haven't?</b>       |



**PEOPLE  
BINGO  
OR  
SCAVENGER  
HUNT**

**Find Someone Who:**

|                                   |                                   |   |
|-----------------------------------|-----------------------------------|---|
| <b>Has three<br/>brothers</b>     | <b>Likes to eat<br/>anchovies</b> | <b>Has lived in<br/>another<br/>country</b> |
| <b>Doesn't like<br/>pizza</b>     | <b>Has a pet</b>                  | <b>Loves<br/>ice-cream</b>                  |
| <b>Doesn't like<br/>ice-cream</b> | <b>Is a good<br/>singer</b>       | <b>Likes to<br/>swim</b>                    |

# SKILL #1 OF 2: WARM UP

**Goal:** To get kids comfortable one-on-one

**How?** Build the relationship **WITHOUT ASKING QUESTIONS!!!!**

Sam's resource teacher did this part outside with him, running around and looking for bugs (i.e., the "hook")

|          |   |
|----------|---|
| Praise   | I love the way you're looking for those bugs!           |
| Reflect  | Any and all verbalizations ("It's an ant!")             |
| Imitate  | Do as the child is doing (join Sam in looking for bugs) |
| Describe | You're picking up that wiggly worm so carefully!        |
| Enjoy    | Have fun with the child                                 |

# SKILL #2 OF 2: ENCOURAGING BRAVE TALKING

**Goal:**  
To elicit  
speech

**When?**  
After a period  
of warm-up

**How?**  
Begin asking  
questions, but  
be strategic!

The type of question can increase the likelihood of a verbal response



**Forced choice** questions are the most likely to produce a verbal response:

Do you like  
chocolate or  
broccoli better?

Should we look  
for bugs or  
leaves?

# SKILL #2 OF 2: ENCOURAGING BRAVE TALKING

**Goal:**  
To elicit  
speech

**When?**  
After a period  
of warm-up

**How?**  
Begin asking  
questions, but  
be strategic!

**Open-ended** questions are sometimes harder, but encourage more spontaneous speech

- Which one is your favourite bug?
- What did you do this weekend?

**Yes/No** questions should be avoided b/c they do not encourage verbal response

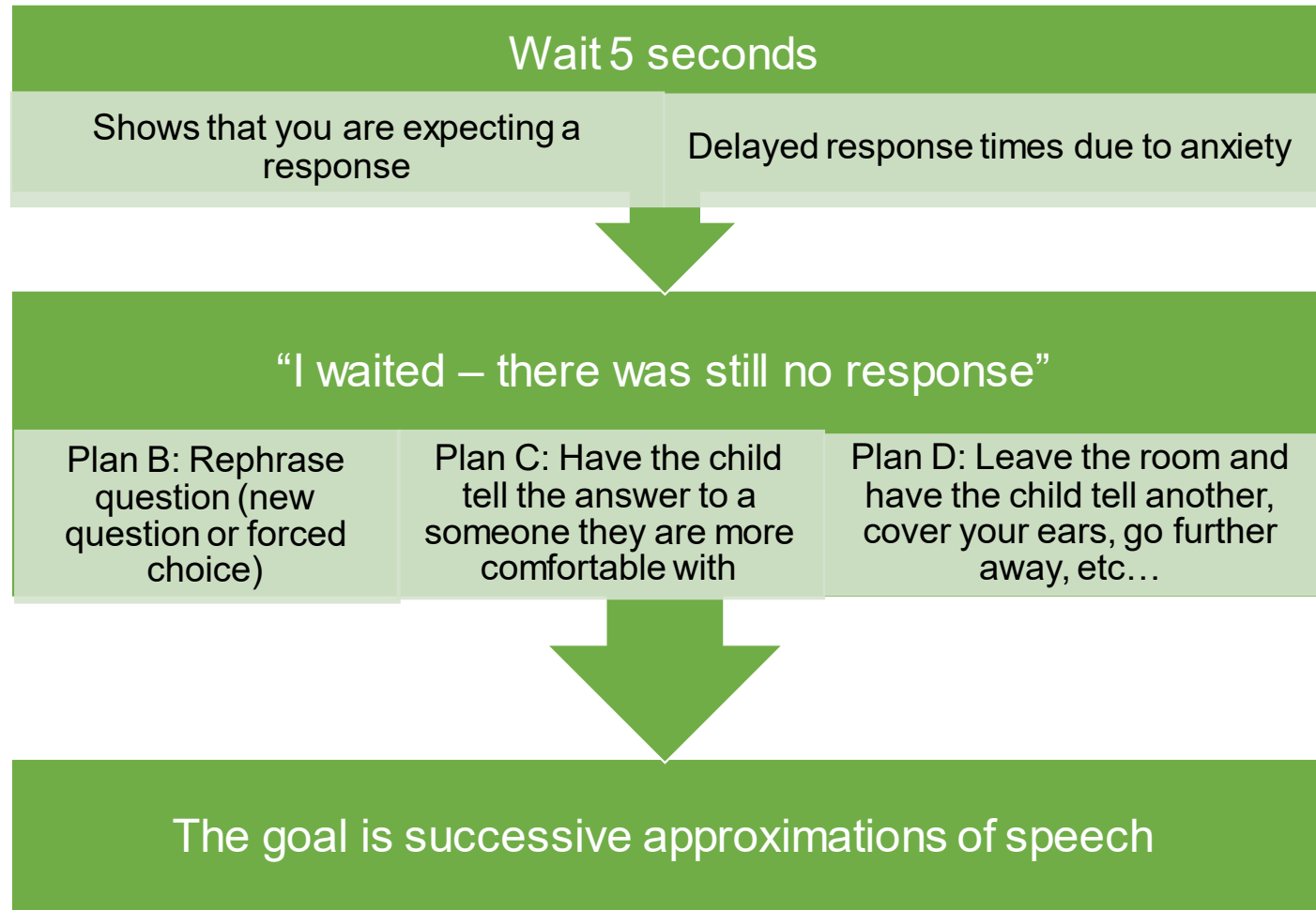
- Do you like this bug? (child can nod)
- Say, “I see that you are nodding your head, does that mean yes or something different?”

# SKILL #2 OF 2: ENCOURAGING BRAVE TALKING

**Goal:**  
**To elicit  
speech**

**When?**  
**After asking  
a question**

**How?**  
**Provide  
enough of a  
chance to  
respond!**



# SKILL #2 OF 2: ENCOURAGING BRAVE TALKING

**Goal:**  
**To reinforce speech!**

**When?**  
**After a child has spoken**

## Repeat verbatim

Shows child and others that  
child was heard

Communicates that child's  
utterance matters



## Praise

Great job letting me know what your favourite bug is! Thanks for telling me you like the ladybug!



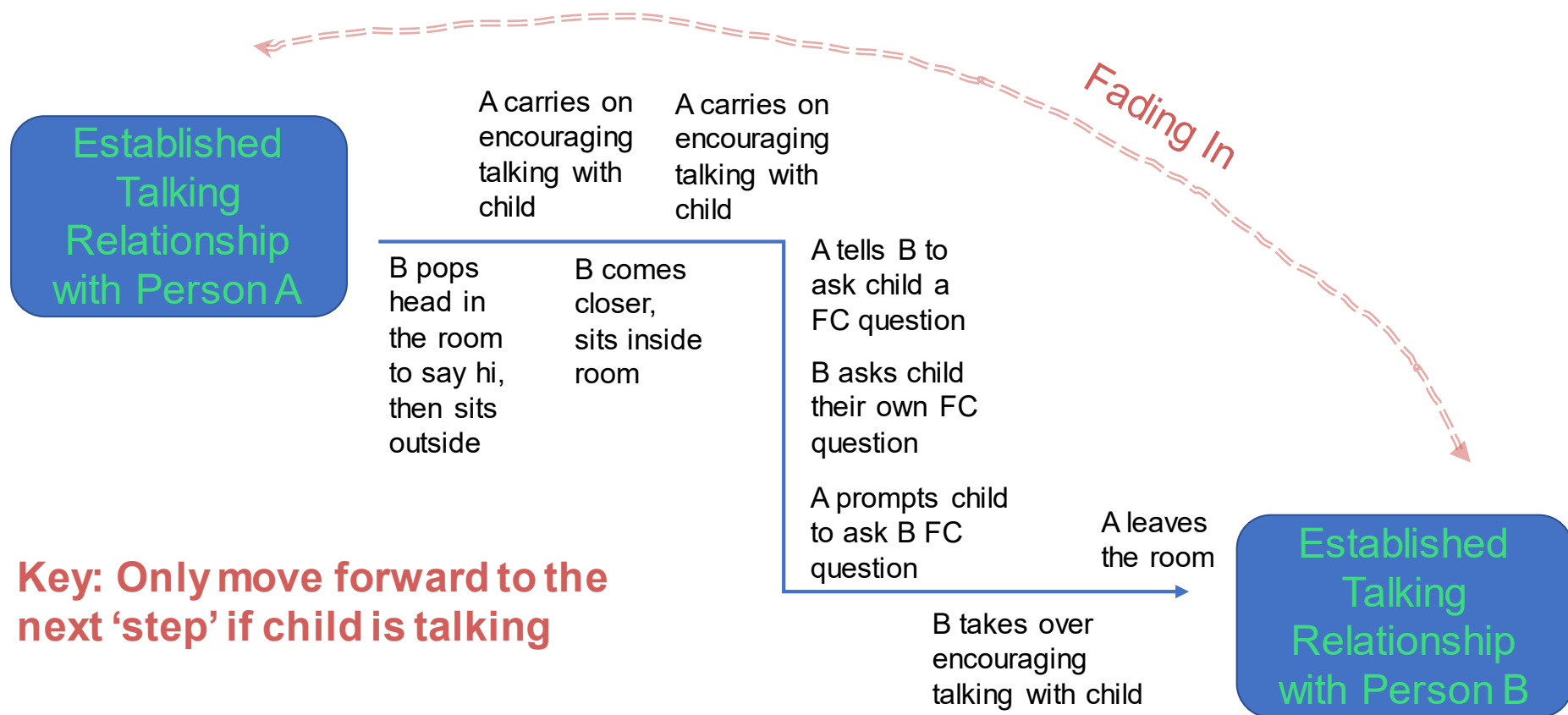
## Reward

Would you like a sticker or a point?  
Here's 5 points for that one!

# THE “FADE IN” PRINCIPLE

Also known as “transferring speech” or “passing the baton”

- At the core of SM intervention
- The mechanism by which kids expand their talking circle
- Simple in theory, but can have many steps...





# Sam's First Talking Ladder

## Goal #1: Talk to his Resource Teacher (RT)

### Keys:

- Only move on to the next 'step' if child is talking (e.g., mom wouldn't do her phone call until RT & Sam are speaking comfortably)
- Pacing will vary! Some kids will do the below in 30minutes, for others it may take several sessions
- Goals/steps will vary! Some already speak to a person at school; others struggle only with peers

### Steps

Sam and mom alone in the school yard, looking for bugs

RT pops over briefly; then sits at a distant picnic table

RT comes closer and sits within earshot

RT comes up to Sam & mom holding wrapped M&Ms

Mom tells RT to ask Sam if he just found a lady-bug or a squirrel

RT praises, rewards with M&M, asks her own question

Mom says she needs to go & make a phone call

RT continues with encouraging talking

**Established Reinforcer:**

Mom has skittles & RT has M&Ms

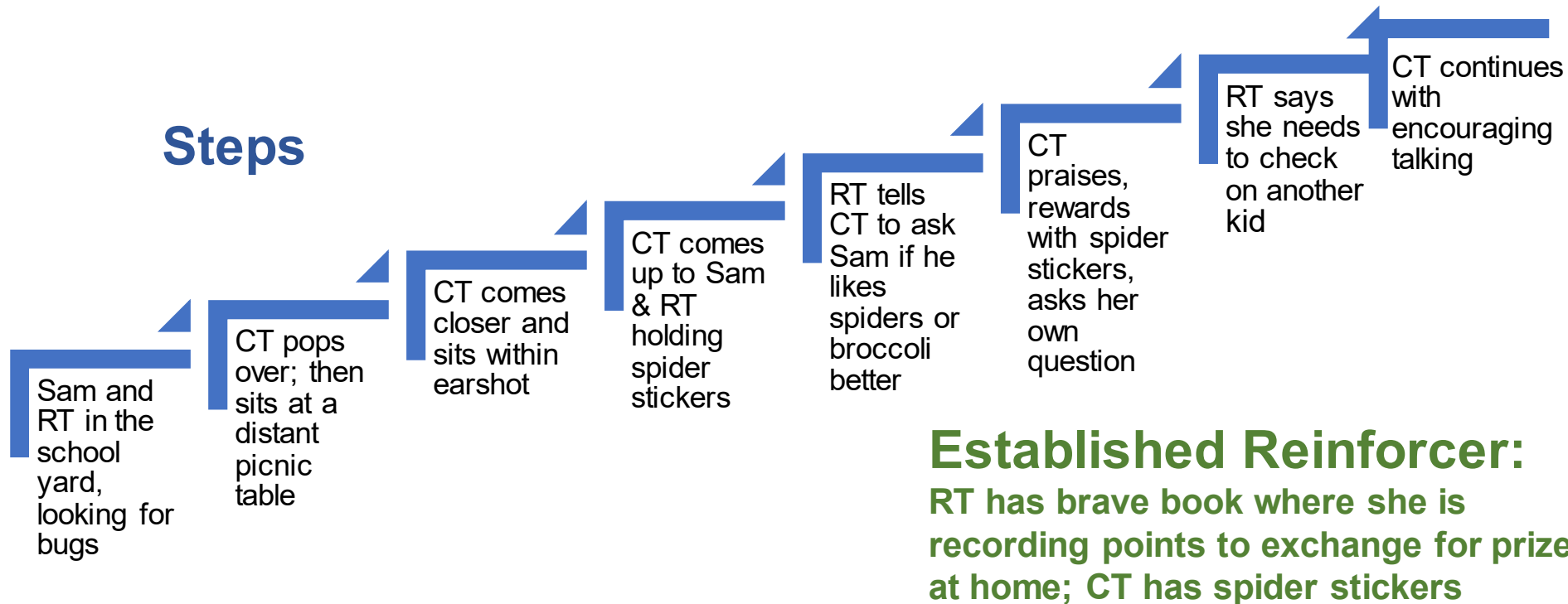
# Sam's Second Talking Ladder

## Goal #2: Talk to his Classroom Teacher (CT)

### Keys:

- Only move on to the next 'step' if child is talking (e.g. RT wouldn't leave until CT & Sam are speaking comfortably)
- Pacing will vary! Some kids will do the below in 30minutes, for others it may take several sessions
- Goals/steps will vary! Some already speak to a person at school; others struggle only with peers

### Steps



# Sam's Third Talking Ladder

## Goal #3: Talk to a Peer

### Keys:

- Only move on to the next 'step' if child is talking (e.g. RT wouldn't prompt peer to ask question if Sam wasn't answering her own questions)
- Pacing will vary! Some kids will do the below in 30minutes, for others it may take several sessions
- Goals/steps will vary! Some already speak to a person at school; others struggle only with peers

### Steps

Sam and RT playing Spot It in the resource room

RT makes sure Sam's brave voice is very warmed up

RT tells Sam we will invite a friend to come and play

Friend comes. RT spends 2 min on warm-up; explains Spot-It rules to peer

Spot-It starts. RT continues to record Sam's points in Brave Book

After Spot-It, RT uses talking skills with both kids asking 'Favourite Game' questions

RT prompts peer to ask Sam a question

RT prompts Sam to ask peer a question

**Established Reinforcer:**  
RT has brave book where she is recording points to exchange for prize at home



# Tips for Success

Don't underestimate the value of momentum!  
Success breeds success!

Remember the brave talking ladder! Work on new goals whenever possible (change one thing at a time: person, space, activity)

Movement & silliness are magic – both decrease inhibition & counteract the desire to avoid

Have caregivers work on goals at home (e.g., can practice questions teacher will ask)!

If you get stuck, change your course but try not to reinforce non-responding

Be kind to yourself. Using the SM skills takes a lot of energy and can be hard work!

## Step 5:

# Communicate & Check in

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- Keep caregivers in the loop – more frequently at the beginning
- Review with school-team & troubleshoot barriers early (e.g., Sam wouldn't talk with a certain teacher)
- If brave talking is progressing (e.g., moving forward each month or so, keep going up the ladder!)
- If brave talking progress is plateauing or regressing, seek help



# When To Seek Help

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If student remains stuck on a step for several weeks



If student remains very frozen



If student doesn't progress to any new talking partners after 4-6 solid attempts



If student is older and/or if there are barriers with collaborating with caregivers





# How To Seek Help

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Can direct parents to:

- self-refer to local CYMH team:  
<https://www2.gov.bc.ca/gov/content/health/managing-your-health/mental-health-substance-use/child-teen-mental-health>
- obtain referral to pediatrician from family doctor
- obtain referral to Mood & Anxiety Disorder Clinic at BCCH from family doctor (in severe cases only)



# TAKE HOME MESSAGES

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Don't watch & wait: early intervention is preferable

Key intervention skills are warming up and encouraging speech strategically

Remember the fade-in principle

Expect some anxiety.  
Confidence & playfulness are key!

Selective Mutism is a very treatable anxiety disorder – there is every reason to be hopeful!





# Resources

Selective Mutism Association <https://www.selectivemutism.org>

Anxietycanada.com (search 'selective mutism' for all resources)

<https://anxietycanada.com/disorders/selective-mutism/>

Video: Understanding & Managing Selective Mutism:

<https://www.youtube.com/watch?v=tAkIXpykB5U>

Video: Selective Mutism: Giving Kids a Voice with Dr. Annie Simpson:

[https://www.youtube.com/watch?reload=9&v=C\\_qeJWkkwHU&feature=youtu.be](https://www.youtube.com/watch?reload=9&v=C_qeJWkkwHU&feature=youtu.be)

Resources from Dr. Steven Kurtz

- <https://www.kurtzpsychology.com/selective-mutism/sm-learning-university/>
- Dr. Kurtz is now offering certification in PCIT-SM



# Questions for the speakers?

## Please use the “Q&A” icon

**Thank-you for joining.**

Contact the Kelty Mental Health  
Resource Centre:

e-mail: [keltycentre@cw.bc.ca](mailto:keltycentre@cw.bc.ca)

phone (toll-free): 1-800-665-1822

