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## Evaluation of Selective Mutism

Aimee Kotrba, Ph.D.

Moderated by:  
Amy Hansen, MA, CCC-SLP, Managing Editor, [SpeechPathology.com](http://SpeechPathology.com)



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## Evaluation of Selective Mutism

Aimee Kotrba, Ph.D



Thriving Minds Behavioral Health Center

[www.selectivemutismtreatment.com](http://www.selectivemutismtreatment.com)

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## Learning Objectives

After this course, participants will be able to:

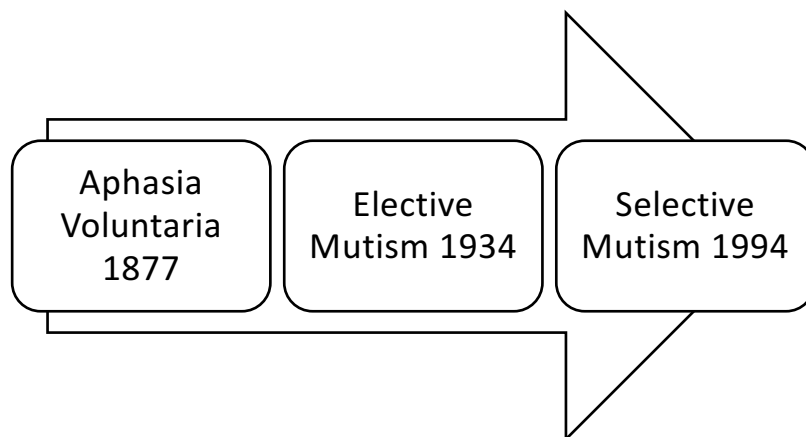
- Identify and explain how to score the assessment tool specific to selective mutism.
- List important members of the evaluation team
- Describe the diagnostic interview process.

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# Introduction to Selective Mutism

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## History of Selective Mutism



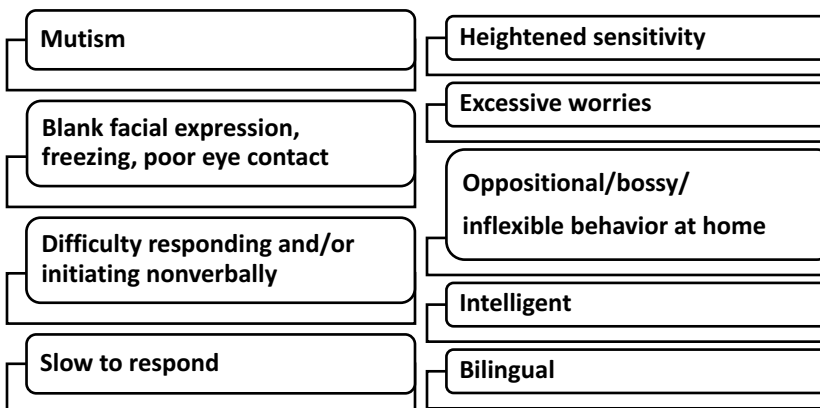
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## Definition of SM (DSM-5)

- Specific anxiety disorder
- Consistent, ongoing failure to speak in specific social situations, especially school
- Not due to a primary language disorder
- Other disorders (e.g., stuttering, autism) have been ruled out
- A relatively rare childhood disorder, affecting approximately 1% of children in elementary school settings
- Behavior is deliberate self-protection, not deliberate oppositionality

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## Common Traits



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## Shyness vs. Selective Mutism

### Shyness

- Slow warm up period
- Can often respond with a nod or small smile
- Same demeanor everywhere – quiet and reserved

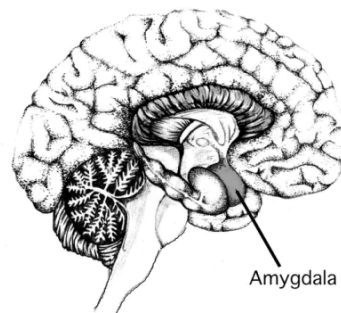
### Selective Mutism

- Warm-up time MUCH longer than expected
- Cannot respond at all – may appear frozen
- Dual personality – restrained at school and talkative at home

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## Where Does SM Originate?

- NO evidence of causal relationship to abuse, neglect, or trauma
- Genetic predisposition model (genetic loading)
- Biological indicators
  - Decreased threshold of excitability in amygdala
  - Amygdala reacts more and takes longer to return to normal



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## Prevalence Statistics

- Most recent stats show approximately 1%....and growing?
- 1.5-2.6 / 1 female / male Garcia et al (2004)

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## Coexisting Problems

- Generalized Anxiety Disorder
- Other Specific Phobias
- Obsessive Compulsive characteristics
- Speech problems (35-75%)
- Defiance/Oppositionality
- Enuresis
- Sensory Dysfunction
- Separation Anxiety
- Hearing issues (MEAR)

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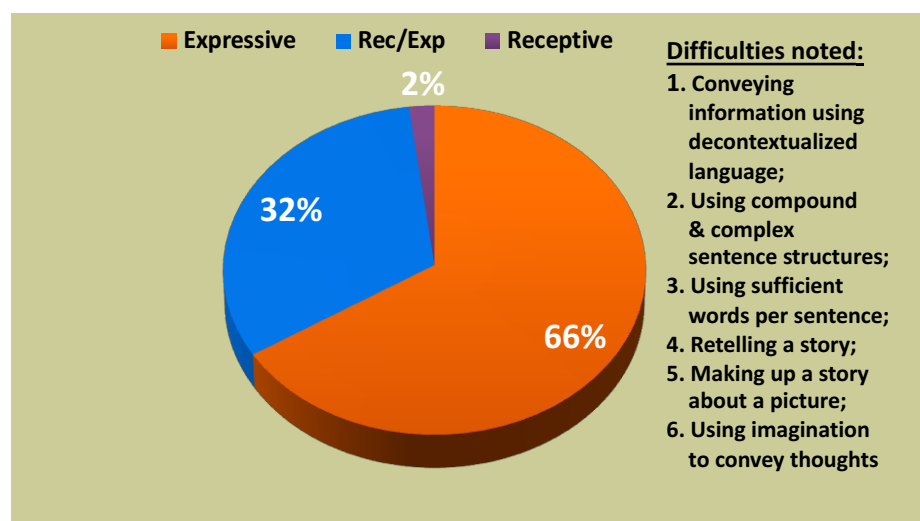


## Coexisting Problems Cont.

- Language Based Learning Disorder or communication deficits
  - Including pragmatics, grammar, semantics, articulation, voice, and fluency
  - produce shorter, linguistically simpler, and less detailed language than typically developing children (McInnes, Fung, Fiksenbaum, & Tannock, 2004)
  - possibly weaker auditory-verbal memory span (Kristenson & Oerbeck, 2006)
  - lower receptive language scores than age matched peers (Nowakowski et al., 2009)
- May be:
  - Independent of SM
  - Precursor to SM
  - Be exacerbating SM
  - Arising from lack of experience communicating due to the social anxiety of SM

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## 59.6% (87 of 146) Children Presented With Language Deficits



Klein and Armstrong, 2014

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## Types of Selective Mutism

Anxious

Anxious-Oppositional

Anxious-Communication Delayed

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## Parenting Factors

Preventive  
Factors

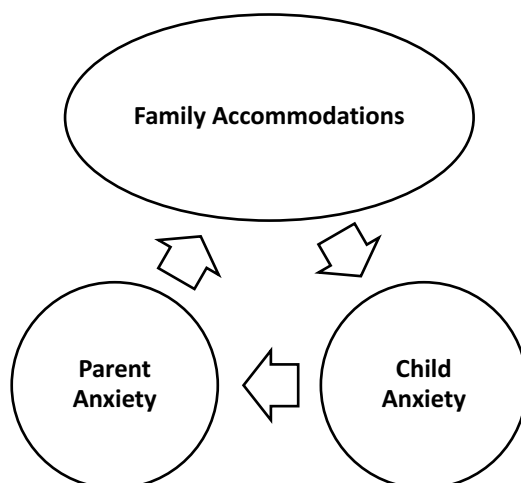
- High expectations
- Lack of family accommodation
- Involved parent and school in intervention

Maintaining  
Factors

- Social isolation
- Denial of an issue
- Family accommodation
- Accidental reinforcement
- Speaking for the child

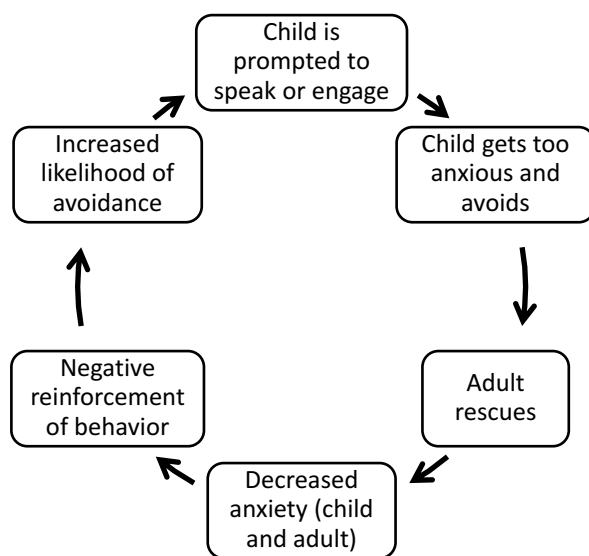
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## Family Rescuing/Accommodating



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## Conceptualizing Selective Mutism

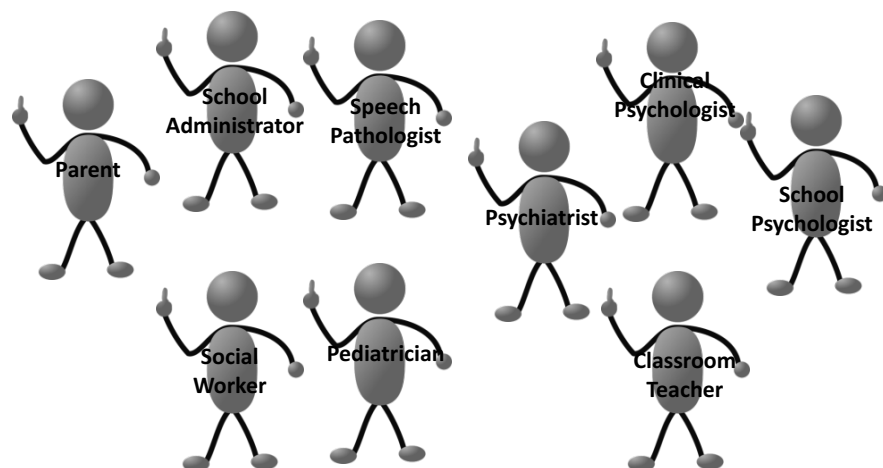


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## Evaluation of Selective Mutism

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### Team Approach



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## Diagnostic Interview

Modes of Communication	Family	Child
<ul style="list-style-type: none"> <li>• Who</li> <li>• What</li> <li>• Where</li> <li>• How</li> <li>• Speech issues?</li> </ul>	<ul style="list-style-type: none"> <li>• Genetic history</li> <li>• Home life description</li> <li>• Recent stressors</li> </ul>	<ul style="list-style-type: none"> <li>• Behavioral characteristics</li> <li>• Medical history</li> <li>• Repetitive or restricted interests, obsessive thoughts, etc.</li> </ul>

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## Modes of Communication Continued....

- Who are the communication partners?
- More likely to talk to novel or known individuals?
- What type of communication does the child use with specific individuals?
- What environments does the child communicate in?
- What seems to help/hinder the child's engagement?
- Does the child speak to parents in front of others or in public places?

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## Evaluative Tools

- Selective Mutism Questionnaire
- SCARED (Screen for Childhood Anxiety Related Disorders)
- BASC or CBCL
- And....
  - Autism Diagnostic Observation Schedule (ADOS), ADI-R, SCQ
  - Speech/language evaluation
  - IQ (nonverbal)
  - FBA

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Name of Child: \_\_\_\_\_ Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

### Selective Mutism Questionnaire\* (SMQ) (to be filled out by parents)

Please consider your child's behavior and activities of the past month and rate how frequently each statement is true for your child.

#### AT SCHOOL

	3 Always	2 Often	1 Seldom	0 Never
1. When appropriate, my child talks to most peers at school.				X
2. When appropriate, my child talks to selected peers (his/her friends) at school.				X
3. When called on by his or her teacher, my child answers.				X
4. When appropriate, my child asks his or her teacher questions.				X
5. When appropriate, my child speaks to most teachers or staff at school.				X
6. When appropriate, my child speaks in groups or in front of the class.				X
How much does not talking interfere with school for your child? (please circle)	Not at all	Slightly	Moderately	Extremely

$$0+0+0+0+0=0/6=\text{School}=0$$

#### WITH FAMILY

	3 Always	2 Often	1 Seldom	0 Never
7. While at home, my child speaks comfortably with the other family members who live there.	X			
8. When appropriate, my child talks to family members while in unfamiliar places.		X		
9. When appropriate, my child talks to family members that don't live with him/her (e.g. grandparents, cousins).		X		
10. When appropriate, my child talks on the phone to his/her parents and siblings.	X			
11. When appropriate, my child speaks with family friends.		X		
12. My child speaks to at least one babysitter.		X		
How much does not talking interfere with family relationships? (please circle)	Not at all	Slightly	Moderately	Extremely

$$3+2+2+3+2+2=14/6=\text{Family}=2.33$$

#### IN SOCIAL SITUATIONS (OUTSIDE OF SCHOOL)

	3 Always	2 Often	1 Seldom	0 Never
13. When appropriate, my child speaks with other children who s/he doesn't know.				X
14. When appropriate, my child speaks with family friends who s/he doesn't know.			X	
15. When appropriate, my child speaks with his or her doctor and/or dentist.		X		
16. When appropriate, my child speaks to store clerks and/or waiters.				X
17. When appropriate, my child talks when in clubs, teams or organized activities outside of school.				X
How much does not talking interfere in social situations for your child? (please circle)	Not at all	Slightly	Moderately	Extremely

$$0+1+2+0+0=3/5=\text{Other}=.6$$

$$\text{Total } 0+14+3=17$$

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- Scoring**
1. Add totals in each section
  2. Divide by number of items in section
  3. For total score, add up totals in each section – DO NOT divide

## continued™

The Selective Mutism Questionnaire (SMQ) assesses the degree of a child's speech inhibition in various situations. The SMQ includes 17 statements describing typical situations in which children are expected to speak spanning three domains: at school, with family, and in social situations. Parents rate the frequency of each item using a 4-point scale (3=always, 2=often, 1=seldom, 0=never for speaking situations).

Lower scores represent less frequent speaking behavior (more severe selective mutism symptoms).

	Child's Score	Average Scores For Children with SM who are Age 3 – 5 years	Scores for Children with SM	Scores for Children without SM
School	0	33 (.11 - .77)	30	2.65
Home/Family	2.33	1.62 (.99 - 2.25)	1.70	2.90
Public/Social	6	28 (.12 - .68)	34	2.50
Total	17	13.18 (7.14 - 19.22)	12.99	46

At school, child is more severe than most children with SM  
(average = .33)

	Child's Score	Average Scores For Children with SM who are Age 6 - 8 years	Scores for Children with SM	Scores for Children without SM
School		.54 (0 - 1.08)	30	2.65
Home/Family		1.52 (.90 - 2.14)	1.70	2.90
Public/Social		.40 (-.07 - .87)	34	2.50
Total		14.37 (6.93 - 21.81)	12.99	46

At home, child is less severe than most children with SM  
(average = 1.62)

	Child's Score	Average Scores For Children with SM who are Age 9 - 11 years	Scores for Children with SM	Scores for Children without SM
School		.62 (.06 - 1.18)	30	2.65
Home/Family		1.58 (.85 - 2.31)	1.70	2.90
Public/Social		.53 (-.03 - 1.09)	34	2.50
Total		15.73 (7.9 - 23.56)	12.99	46

In public, child is less severe than most children with SM  
(average = .28)

Total shows the child is less severe than many children with SM

Bergman, R. Lindsey, Keller, Melody L., Piacentini, John and Bergman, Andrea J. (2008) *The Development and Psychometric Properties of the Selective Mutism Questionnaire*. Journal of Clinical Child and Adolescent Psychology, 37: 2, 456-464.

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## continued™

### Direct Observation

- Observation and coding occurs:
  - Speech in private with parent
  - Speech in room with novel adult
  - Response to yes/no questions
  - Response to forced-choice questions
  - Response to open ended questions
  - Return to baseline in private with parent?

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## School-Based SLP

Responsibilities when assessing a student with dysfunctional social-emotional communication include...

assisting educators in identifying behavior patterns that may be related to language dysfunction as well as identifying behavior that negatively affects communication (e.g., selective mutism)...

**Guidelines for the Roles and Responsibilities of the School-Based Speech-Language Pathologist**

**American Speech-Language-Hearing Association, 2000**

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## Role of SLPs

ASHA's Scope of Practice in Speech-Language Pathology includes treatment and intervention (i.e., prevention, restoration, amelioration, compensation) and follow-up services for disorders of:

“language (involving the parameters of phonology, morphology, syntax, semantics, and pragmatics; and including disorders of receptive and expressive communication in oral, written, graphic, and manual modalities)...

social aspects of communication (including challenging behavior, ineffective social skills, lack of communication opportunities)”

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## Social Pragmatics Involve 3 Communication Skills:

- (1) *Using language* for different purposes,
  - such as greeting,
  - informing,
  - making demands,
  - promising, and
  - requesting;

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- (2) *Changing language* to suit the needs of a listener or situation,
  - such as talking differently to different people in different places,
  - providing needed background information, and

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- (3) *Following rules for communication* such as
  - engaging in conversations and telling stories with the ability to take turns in conversation,
  - introduce topics of conversation,
  - stay on topic,
  - paraphrase when not understood,
  - use verbal and nonverbal signals,
  - know how far to stand from someone when communicating, and
  - how to make eye contact and use facial expressions for social communication.

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## What skills should be assessed?

- Expressive language
- Receptive language
- Articulation
- Social pragmatics
- Fluency
- Etc....

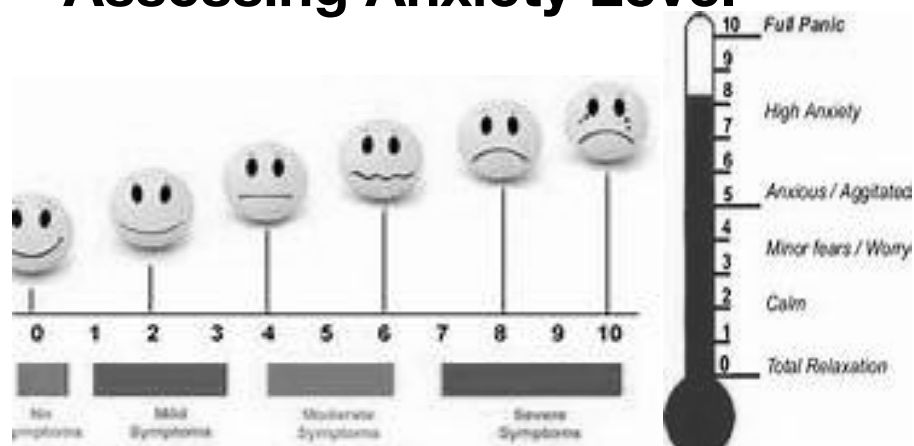
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## Assessing Anxiety Level

- Child's self-report
- 1-5 temperature rating
- Provides us with information to develop treatment
- Helps monitor progress
- Provides child with a way of communicating about fear/anxiety (but I describe it as things that are "hard")

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## Assessing Anxiety Level



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Speech Frequency (How?)	Communication Partners (Who?)	Setting Variable (Where?)	Intervention Recommended
Limited	Most people	Most environments	Contingency management
Typical	One or limited people	Most environments	Stimulus fading of new people in specific environments
Typical	Most people	One environment	Stimulus fading of environments
Limited	One or limited people	One environment	Stimulus fading of new people into comfortable environment AND stimulus fading of environments
No speech	No people	No environments	Shaping AND Stimulus fading of new people and environments

(Shriver, 2011)

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## Development of a Fear Hierarchy

Example:

Speaking to teacher in classroom

Speaking to teacher in hallway

Speaking to teacher in private office

Whispering to teacher in private office

Speaking to mom in front of teacher

Whispering to mom in front of teacher

Answering teacher with nonverbals

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continued™

## Questions?

- Consultation services – families, schools, professionals
  - Individual treatment
  - Training video for sale
  - Intensive In-School Interventions
  - Confident Kids Camp
- 
- Information on all can be found at [www.selectivemutismtreatment.com](http://www.selectivemutismtreatment.com)

## SELECTIVE MUTISM

AN ASSESSMENT AND INTERVENTION GUIDE  
FOR THERAPISTS, EDUCATORS & PARENTS

