

“My child talks non-stop at home, but his teachers say they can’t get a word out of him!”

Selective mutism is a childhood anxiety disorder characterised by a child's inability to speak and communicate effectively in select social settings, such as school. These children are able to speak and communicate in settings where they are comfortable, secure, and relaxed. Most children with selective mutism also have social phobia or social anxiety: they fear social interactions where there is an expectation to speak and communicate.

Finding Your Voice highlights the different challenges a child with selective mutism might face, and provides effective, research-based behavioural intervention plans. Tips for engaging and motivating children are provided, focusing on a gradual, step-wise approach to increased speech, as well as fun and engaging activities that can be used at each step of treatment.

The Authors

Dr Kirthana Vasudevan is a Psychiatry resident in Singapore who lends her voice to advocate for child and adolescent mental health. She graduated from the National University of Singapore and continues to engage in projects related to children's welfare around the world.

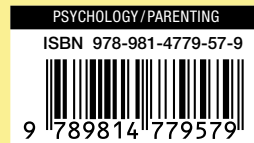
Clare Kwan graduated with a Masters in Clinical Psychology in 2010 and has successfully treated children with selective mutism using a range of therapies including CBT and narrative therapy.

Wong Zi Jun obtained her Masters in Clinical Psychology from James Cook University. While at the IMH Child Guidance Clinic, she was involved in research on clinical issues including selective mutism.

Veteran child psychiatrist Daniel Fung is CEO of the Institute of Mental Health (IMH), Singapore. Dr Fung is an Adjunct Associate Professor at all three of Singapore's medical schools; President of the International Association for Child and Adolescent Psychiatry and Allied Professions; and President of the College of Psychiatrists, Academy of Medicine, Singapore. He has co-authored over 200 peer-reviewed research papers, books and book chapters. In 2000, he completed his clinical and research fellowship at the Hospital for Sick Children in Toronto studying selective mutism. This book is based on his work with children with selective mutism and their families.

visit our website at:
www.marshallcavendish.com

mc Marshall Cavendish
Editions



Marshall Cavendish
Editions
mc

For Review only

Finding Your Voice Helping children with Selective Mutism

Finding Your Voice

Helping Children with
Selective Mutism

Kirthana Vasudevan · Clare Kwan · Wong Zi Jun · Daniel Fung

mc
Marshall
Cavendish

For Review only

“Selective mutism is often mistaken for autism. Children with selective mutism may spend many years growing up without speaking. If they do not learn to cope, they remain significantly impaired compared with their peers. Early recognition and rapid referral are essential. The overall goal is to treat the anxiety rather than force the child to speak. This book has been two decades in the making and is filled with precious Singapore experience. An increase in awareness and better understanding will lead to better outcomes for this debilitating childhood condition.”

Professor Ho Lai Yun

Director, Child Development Programmes, Ministry of Health, Singapore

“This is a much-needed book on a condition which is not well-understood. It is almost the ‘voice’ of the child with selective mutism. Thank you for providing the clinical insights and making it wonderfully suited for our local parents and professionals.”

Dr Chong Shang Chee

Head & Senior Consultant, Child Development Unit, Khoo Teck Puat–National University Children’s Medical Institute, National University Hospital
Assistant Professor, Department of Paediatrics, Yong Loo Lin School of Medicine, National University of Singapore

“*Finding Your Voice* is a wonderful manual for the treatment of children with selective mutism. Selective mutism is a highly underdiagnosed and understudied anxiety disorder, which is associated with negative educational and social outcomes if not treated early and properly. Therefore, the manual is a great gain for children concerned, their families and professionals. *Finding Your Voice* is empirically determined and takes into account important building blocks of successful therapy, such as consideration of a multiprofessional approach. The therapy materials are appealingly designed for children. With the help of this manual, many children with selective mutism will find and enjoy what the title promises: their voice.”

Professor Dr Christina Schwenk

Professor for Special Needs Educational and Clinical Child and Adolescent Psychology, Justus-Liebig University
Secretary General, International Association for Child and Adolescent Psychiatry and Allied Professions

For Review only

Finding Your Voice

Helping Children with
Selective Mutism

Dr Kirthana Vasudevan

MBBS (Singapore)

Clare Kwan

MPsych (Clinical)

Wong Zi Jun

MPsych (Clinical)

A/Prof Daniel Fung

MBBS, MMed (Psychiatry), FAMS

To Oliver – may he find his voice for the next generation

© 2021 Marshall Cavendish International (Asia) Pte Ltd

Published in 2021 by Marshall Cavendish Editions
An imprint of Marshall Cavendish International



All rights reserved

No part of this publication may be reproduced, stored in a retrieval system or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, without the prior permission of the copyright owner. Requests for permission should be addressed to the Publisher, Marshall Cavendish International (Asia) Private Limited, 1 New Industrial Road, Singapore 536196. Tel: (65) 6213 9300. E-mail: genref@sg.marshallcavendish.com Website: www.marshallcavendish.com

The publisher makes no representation or warranties with respect to the contents of this book, and specifically disclaims any implied warranties or merchantability or fitness for any particular purpose, and shall in no event be liable for any loss of profit or any other commercial damage, including but not limited to special, incidental, consequential, or other damages.

Other Marshall Cavendish Offices:

Marshall Cavendish Corporation, 800 Westchester Ave, Suite N-641, Rye Brook, NY 10573, USA • Marshall Cavendish International (Thailand) Co Ltd, 253 Asoke, 16th Floor, Sukhumvit 21 Road, Klongtoey Nua, Wattana, Bangkok 10110, Thailand • Marshall Cavendish (Malaysia) Sdn Bhd, Times Subang, Lot 46, Subang Hi-Tech Industrial Park, Batu Tiga, 40000 Shah Alam, Selangor Darul Ehsan, Malaysia

Marshall Cavendish is a registered trademark of Times Publishing Limited

National Library Board, Singapore Cataloguing in Publication Data

Names: Vasudevan, Kirthana. | Kwan, Clare, author. | Wong, Zi Jun, author. | Fung, Daniel, author.

Title: Finding your voice : Helping children with selective mutism / Kirthana

Vasudevan, Clare Kwan, Wong Zi Jun, Daniel Fung.

Description: Singapore : Marshall Cavendish Editions, 2021. | Includes bibliographic references.

Identifiers: OCN 1031342722 | ISBN 978-981-4779-57-9

Subjects: LCSH: Selective mutism--Treatment.

Classification: DDC 618.92855--dc23

Printed in Singapore

Contents

	Foreword by Professor Philip Choo	7
	Acknowledgements	8
1	Introduction	9
2	Understanding Selective Mutism	15
	What is selective mutism?	15
	What causes selective mutism?	17
	What are some common conditions associated with selective mutism?	19
	How is the assessment of selective mutism done and how can parents help?	21
	Selective mutism myths busted	26
3	Selective Mutism in Singapore	28
	Education system	28
	Healthcare system	30
4	Management of Selective Mutism	35
	Pharmacotherapy	36
	Psychotherapy	37
	What about the Meeky Mouse Manual?	45
5	Cognitive Components of the CHAT Plan	48
	Introducing Meeky Mouse	50

Learning about feelings	51
How our body reacts	62
What am I thinking?	69
6 Behavioural Components of the CHAT Plan	77
The magic of “brave-talk”	78
Relaxation techniques	85
Attitudes and Actions – a power-packed combination	90
Rewarding effort	95
7 The Complete Action Plan	101
The Exposure Ladder	108
Building the child’s confidence	112
8 The Key to Lasting Friendships	120
Making friends	125
Keeping friends	130
9 The Parental Journey	139
Roles that parents play at various stages of the child’s journey	139
Case study: Adrian’s journey	154
10 Further Reading	157
Younger children	157
Older children and adolescents	160
Caregivers – parents, teachers, therapists	162
<i>Quiet as a Mouse</i>	164
<i>The Misgivings and Misadventures of Meeky</i>	167
References	176

Foreword

Selective mutism is a rare condition that afflicts children and becomes apparent as they start schooling. The understanding of selective mutism has evolved from one in which the silent child is seen as difficult or defiant to one in which the child is seen as emotionally distressed. Children who speak normally in some situations and are mute in others get very little attention, and sufferers of selective mutism are often dismissed as just shy children.

The authors have translated 20 years of work in this area into a readable compendium of strategies to help children and families cope better. The book provides an understanding of how selective mutism may arise and what steps parents and other childcaring adult can take to help. It introduces a nifty 4-step CHAT plan based on cognitive behavioural therapy techniques to address the issues.

As our healthcare system seeks to go upstream in the prevention of serious illnesses well before they become long-term and difficult to treat, educational self-care in the form of knowledge and skills transfer is critical. This is not only a book for practitioners but one for translating practice into awareness and life skills that the population can use. I applaud the authors for contributing to population health, which is the current challenge of our healthcare systems.

Professor Philip Choo

Group Chief Executive Officer
National Healthcare Group

Acknowledgements

We would like to express our appreciation to Sherlyn Seah, who helped to proofread the book, and the inimitable Choo Ai Ling, who worked tirelessly behind the scenes coordinating meetings and discussions across two continents in the development of this book. Finally, thanks must go to our editors She-reen Wong, Lee Mei Lin and Justin Lau for their patience in getting this book out after such a long hiatus.

CHAPTER 1

Introduction

Why this workbook?

There are many books that deal with childhood emotional and behavioural problems but few that address the issue of selective mutism. Similarly, although there has been a plethora of published books on treatment and interventions of mental health disorders in the last five years, there are few on the topic of selective mutism. It is an uncommon condition, and many parents and professionals dealing with children have limited knowledge about it. Based on discussions with parents and supporting professionals in the field, it's clear that there is a pressing need to provide information and resources on selective mutism.

This book has been two decades in the making, going back to when the Meeky Mouse Program – an online Cognitive Behavioural Therapy (CBT) portal for children with selective mutism – was developed between 2001 and 2011. The materials across the therapist manual, workbook, and notebook have been concisely integrated into this book. Since then, our understanding of selective mutism and intervention strategies has also evolved. Therefore, new concepts and ideas are included and discussed within the chapters of this book.

Although the primary focus here is to help children with selective mutism, we recognise that many of the interventions that will be discussed can also help children who do not meet the criteria for this diagnosis. This includes children who are generally shy and have difficulty speaking in some social settings, as well as children who have limited self-expression in any given environment. We encourage readers to look past clinical diagnoses and

customise these interventions to suit the needs of children struggling with varying degrees of limitations in their communication and social interactions.

In conceptualising this book, we have tried to make it easy to understand and readable yet scientifically sound, to cater to both the interested parent as well as the professional. The book is also written with an Asian context in mind, Singapore in particular. Although the presentation of selective mutism cuts across cultures, languages and ethnicities, each country's education and healthcare systems as well as one's own parenting style and cultural background can influence the precipitation and perpetuation of symptoms of the disorder.

Selective mutism

The terminology used to describe the disorder has evolved over the years, reflecting different understandings of the nature of a child's non-speaking behaviour. "Elective mutism" was initially used to describe cases where children refused to speak. To elect means to choose, which implied that the children chose not to speak. This understanding has shifted to a more recent impression of selective mutism, which places less emphasis on the child's resistance and refusal to speak. Instead, it focuses more on the specific situations in which a child with selective mutism has difficulties using their voice and engaging in verbal communication. This is reflected in the diagnostic criteria of the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV, 1994).

Since then, the field has acknowledged that anxiety may be present and could be the main cause that leads to a diagnosis of selective mutism. Hence, while it was previously classified in the section "Disorders Usually First Diagnosed in Infancy, Childhood, or Adolescence", it is now classified as an anxiety disorder in DSM-5 (2013). This is especially relevant since a large majority of children with selective mutism are also anxious. This change in the categorisation of the disorder puts into perspective the role of anxiety in precipitating and perpetuating symptomatology of selective mutism.

What is the DSM?

DSM stands for Diagnostic and Statistical Manual of Mental Disorders, and it is a classification system for labelling psychiatric disorders, published by the American Psychiatric Association (APA). It was started in 1952 and has since undergone several major revisions. The latest edition, DSM-5, was published in 2013. This system of grouping psychiatric disorders is now used beyond the United States and is the lingua franca for research in psychiatry.

A similar approach has been adopted by the World Health Organisation (WHO) in its International Classification of Diseases (ICD). The latest edition (11th) of the ICD describes selective mutism as

consistent selectivity in speaking, such that a child demonstrates adequate language competence in specific social situations, typically at home, but consistently fails to speak in others, typically at school. The disturbance lasts for at least one month, is not limited to the first month of school, and is of sufficient severity to interfere with educational or occupational achievement or with social communication. Failure to speak is not due to a lack of knowledge of, or comfort with, the spoken language required in the social situation (e.g. a different language spoken at school than at home).

An important aspect of ICD-11 is that the definition of selective mutism excludes instances of mutism that occur transiently in children with separation anxiety or autism spectrum disorder. What this means is that if the mutism can be better explained by another illness, it should not be classified as selective mutism.

A quiet chatterbox

The presenting concerns and issues of a child with selective mutism are varied. To give readers some insight, here are some examples we have encountered over the years:

Marvin was a rambunctious 9-year-old when his mother sought help from us. Armed with an impish smile, Marvin did not appear to be the morose, silent boy we had expected when we heard that a selectively mute boy was coming to our clinic. He enjoyed playing with his brother Mark and the two were quite the rascals about the house. At home, Marvin spoke a lot, and when his mother was told that he never spoke in school, she had difficulty believing the teacher. “He talks no end, and he loves to ramble on about what he does in school. I mean every incident observed is an incident related. I cannot believe that he does not speak in school!” When we set eyes on Marvin, we found that he was up to his usual tricks. He promptly ran into the consultation room to rummage through the box of toys. This was our introduction to the world of selective mutism.

As we slowly met more of these fascinating children, we were struck by the diversity of presentations and stories that were told. Yes! These children did not speak in school and they were by no means similar in their presentations. From Audrey, the girl who stood frozen and was barely able to move in sessions, to Hui Li, the girl who needed her soft toy to speak on her behalf, and Faizul, the boy who aced every subject except the oral examinations. Every child presented with heterogeneous strengths and difficulties.

Overview of the book

To begin with, we look at the nature of selective mutism and its typical presentation. We also discuss atypical presentations that can often be confused with other types of disorders as well as the presence of comorbidities. We then provide suggestions as to how they can be distinguished from one another to make an accurate diagnosis.

In the chapter on the healthcare and education scene in Singapore, we seek to share knowledge and resources with our fellow colleagues and

mental health care practitioners such as counsellors, psychologists and other allied health clinicians. Resources on selective mutism in the local context are otherwise scarcely available. This chapter also serves as a platform for parents and teachers to understand the roles that they can play in supporting and advocating for young children and youths who struggle with using their voice.

Indeed, caregivers play a crucial role in supporting a child with selective mutism on their journey towards recovery. Understandably, it can be difficult to see a child’s point of view in terms of what they are going through when they struggle to speak in some situations but not others. The chapters on “Understanding Selective Mutism” and “The Parental Journey” attend to these matters. They offer day-to-day scenarios, examples and suggestions to help caregivers take on the role of co-therapist and facilitate anxiety management in children with selective mutism.

Once we have come to an understanding of the symptomatology of selective mutism and the roles of supporting figures, we then introduce Cognitive Behavioural Therapy (CBT) – a form of psychotherapy proven to improve symptoms of selective mutism. These chapters loosely follow the therapeutic content found in the Meeky Mouse Manual and incorporate updated understandings of the treatment of the disorder. You will also find practical worksheets and handouts that you can use while supporting a child with selective mutism.

We wish for this book to serve as a starting point for practitioners and parents alike to work from a common ground to help, support and advocate for children with selective mutism. The last chapter recommends further readings, with a focus on stories as an excellent means of inspiring a child to find his or her voice.

In the many cases of selective mutism that we have seen, we have come to know that these children have an inner voice that has been shackled by anxiety. A young anonymous writer once wrote a poem that beautifully illustrates the feelings of anxiety associated with mutism:

The Invisible Dragon

Author unknown

I have a dragon inside of me
He jumps in my mouth when I want to be free
He grabs at my throat when I want to speak
He makes me so scared that I feel very weak
You can't see my dragon coz he's deep down inside
But he makes me so nervous; all I want to do is hide
I wish that I could speak to you – I wish I had the choice
But the dragon inside of me has snatched away my voice
When teachers ask a question, and we raise a hand
When she calls my name and makes me stand
I simply can't answer – my throat's too tight
Coz my dragon says "BOO" and I jump with fright
It really makes me sad; all I want to do is cry
Coz I'd love to be your friend if I wasn't so shy
So if my face doesn't smile when you ask me to play
It's because this pesky dragon just won't go away

With the appropriate support and interventions, the child can overcome these feelings of anxiety and find their voice. Together, we can be warriors "fighting the pesky dragons away".

CHAPTER 2

Understanding Selective Mutism

What is selective mutism?

Selective mutism is a condition where a child selectively talks in certain situations (usually familiar ones like at home), but consistently remains mute in other social situations (such as at school or in public). This is because children with selective mutism do have a voice and are able to speak just like any other children. They can scream and shout and even be boisterous when they interact with familiar people like parents and siblings but may become shy and anxious with unfamiliar figures such as teachers, classmates or strangers.

Selective mutism is not common, as studies have shown that it occurs in less than 1% of the population. It is also seen as a childhood anxiety disorder, as it typically starts before the age of 5. However, many parents do not realise that the child has selective mutism until after the child is 5 years old, and they are usually surprised when they become aware of their child's condition. Why 5? This is when children in Singapore enter kindergarten. For many, it is the first time they will be away from their parents and must learn to be independent, be it in making new friends or making requests for themselves.

Parents may wonder if their child has selective mutism. We have compiled a checklist of symptoms on the following page.