



**Review of book by Maria Bystrzanowska,
*Selective mutism. A guide for parents, teachers
and specialists* (Mutyzm wybiórczy.
Poradnik dla rodziców, nauczycieli i specjalistów),
„Impuls” Publishing House, Kraków 2017, pp. 137**

The book by Maria Bystrzanowska *Selective mutism*, is the fourth publication on the Polish market (following Anna Herzyk, *Aphasia and child mutism: selected issues of diagnosis and therapy* (Afazja i mutyzm dziecięcy: wybrane zagadnienia diagnozy i terapii), Lublin 1992, Wydawnictwo Polska Fundacja Zaburzeń Mowy, pp. 38; Anna Skoczek, *Mutism: issues of theory and practice* (Mutyzm: zagadnienia teorii i praktyki), Kraków 2015, Akademia Ignatianum, Wydawnictwo WAM, pp. 354; Monika Cabała, Agnieszka Leśniak-Stępień, Renaty Szot, Katarzyna Szyszka, *Selective mutism: three views* (Mutyzm wybiórczy: trzy spojrzenia), Kraków 2016, Oficyna Wydawnicza „Impuls”, pp. 48) concerning selective mutism. The book, as the article indicates, is a guide for parents, teachers and specialists (e. g. speech therapists, psychologists, educators, paediatricians), written by a practician – a speech therapist with over twenty years of experience, a specialist in early child development support who had been dealing with the support of persons suffering from selective mutism and their families, but also experienced in the organisation of conferences, training seminars and workshops concerned with selective mutism.

The work of Maria Bystrzanowska is composed of an introduction (pp. 7-9), a guide part composed of six chapters (pp. 11-109) and a summary (pp. 111-112). Pp. 113-115 include quite a broad literature list provided by the author, mainly in English. Regrettably, the work does not refer to

Polish publications concerned with mutism. The work ends (pp. 117-137) with an annex with 11 attachments.

In the introduction, the Author explains in detail, whom the book is foreseen for. Among its recipients she indicates parents that initially have difficulty accepting the fact that a child in the family functions as usual, but goes mute having passed the threshold of preschool or school. Parents often also cope with negative remarks from the environment, such as: the child is manipulating its environment, is picky when it comes to its conversation partners, or that the parents do not let it speak. The presented guide is supposed to aid parents in understanding the core of the disability, the problems of the child so as to support it and aid it in therapy. The monograph is also aimed at teachers and specialists (speech therapists, psychologists and educators) who should have sufficient knowledge on the core of this disability, and in terms of specialists – also of the course of therapy. The obtaining of knowledge is so important, because up to this point many children with SM remains undiagnosed, and terrifyingly enough, one can still find teachers and specialists who are of the opinion that an autistic child does not wish to speak. I have also recently heard such an opinion during a scientific conference from a specialist with a long professional career and academic experience. As the Author writes in the introduction, the content of the book as opposed to foreign-language, mainly English, literature, also considers the specifics of therapy for a child suffering from SM under Polish condition. Bystrzanowska expresses the hope that after studying this guide, teachers and specialists would broaden not only their theoretical, but also their practical knowledge of the discussed illness.

Chapter one, entitled *Selective mutism as a disturbance of verbal communication based on fear* the Author quotes the definition, discusses its core and causes. She also places selective mutism within the ICD-10 International Statistical Classification of Diseases and Related Health Problems and the DSM-V Diagnostic and Statistical Manual of Mental Disorders. She noted the physiology of fear in selective mutism, which is both the cause and the symptom of disturbances in emotional functioning. As Bystrzanowska writes, „in persons with SM, the cerebral cortex remembers a difficult situation of fear related to not speaking. The child relates this situation to a place, persons, symptoms and experiences. It then repeats this situation many times, solidifying it” (p. 17). She lists and describes the factors influ-

encing the emergence of selective mutism: a) risk factor, meaning supporting genetic predispositions, selective mutism in the family, wrong behaviour concerning sensitive children entailing comparing them to other, more talented children, humiliation of the child, reducing its value, b) factors causing SM: loss of a close one, separation of the parents, change of the place of residence, birth of siblings, feeling of rejection, making excessive demands of the child that it is not able to meet, multilinguality, c) supporting factors: acceptance of the mutism by the environment, lack of attention of warning signs on time, forcing the child to speak, blackmailing the child so that it speaks, using various methods of therapy because they „might help”, using alternative communication modes (pp. 19-22). Subsequently, based on ICD-10 and DSM-V classifications, the author presents classic signs of selective mutism, both the basic ones, as well as accompanying ones. She describes selective mutism of minor and major intensity, quotes descriptions of specific cases of children with the two grades of symptom intensity.

In chapter two, devoted to selective mutism as compared to other co-existing disturbances, the Author presents results of own research concerning SM. Based on an on-line questionnaire conducted through Facebook (mutyzm.org.pl), completed by 100 persons – parents of children with SM, Bystrzanowska collected responses to the question concerned co-existing disturbances. The conclusions from this research are as follows: beside the fear of speaking and increased emotional tension, there also exist difficulties in eating at certain locations, speech deficiencies, hypersensitivity to touching (p. 31). The survey results confirmed an increased frequency of SM in girls. It is important that the most numerous group of children with SM in the analysed population are five- and six-year-olds, meaning children bound to attend preschool. The subsequent subchapters are devoted to the following issues: selective mutism and social phobias, selective mutism stemming from disturbances of speaking and of the language, selective mutism and multilinguality, selective mutism and autism spectrum disorders, selective mutism and shyness. Bystrzanowska, despite the presence of a relation between the co-existence of SM and social fears, compares mutism and phobias differentiating between these two disorders. The author rightly concludes that early therapy of SM prevents the emergence of the full spectrum of a social phobia at a later age. As she stresses, the lack of verbal relations with peers prevent the acquisition of communication skills

in natural situations, causing an increased level of fear to speak in children with mutism. The Author further concludes that „language and speech disorders belong to factors causing and sustaining the fear of speaking, so if several of these factors accumulate, including a grave speech impediment, there arises a high risk of SM emerging” (p. 35). The subchapter devoted to SM and autism, Bystrzanowska stresses the importance of the awareness of the symptoms of both these disorders not only among teachers at preschools or schools, but foremost among diagnosis specialists. Specialists, in order to provide the correct diagnosis, need to perform a differential diagnosis of these deficiencies, considering e. g. issues of selectiveness in speaking and the behaviour of children suffering from SM. Bystrzanowska rightly permits a double diagnosis for children with minor forms of mutism, which are characterised by selectiveness in speaking. Such a solution permits one to provide precise therapeutic strategies and gives an outlook when it comes to therapeutic effects.

In the subsequent, third chapter, entitled *The situation of the child with selective mutism at preschool, school and at home*, the Author notes the fear-based personality of a child with SM, the duality of its nature, made up of a different mode of functioning of a child at home (the child is free to speak, laugh, sing, frolic), and a different mode outside, e. g. at the preschool or school (here, it is silent, devoid of energy, sad, characterised by limited facial expressions and low dynamics of movements). She concludes without doubt that children and youths suffering from SM also have special development needs and special education needs, because they are diagnosed with a spectrum of symptoms hampering or preventing motor, sensory, cognitive, socio-emotional, psychological as well as communication-related functioning. The author rightly stresses the fact that in Poland, legal solutions concerning the provision of therapeutic aid to autistic children are insufficient, and lack a unified model of work with such people, specialists and special facilities providing SM therapy are lacking. She notes that „schools and facilities supporting the development of children should guarantee to children suffering from SM the equalisation of education opportunities so that they could fully utilise their psychological and physical abilities, achieving results congruent with their developmental potential” (p. 46).

In chapter four, *Diagnosis – or where, who and how should selective mutism be diagnosed*, Bystrzanowska pleads for the implementation of work with-

out waiting for a formal diagnosis of SM for children suspected of this disorder, however, under certain conditions: 1) there should be a specialist sufficiently aware in terms of SM to provide appropriate therapy for the child, 2) the child's parents should be notified by the specialist of the suspicion of SM and should receive professional advice on how to work with the child at home, 3) the specialist should conduct training for the entire personnel of the facility, 4) the preschool/ school should provide appropriate conditions for work with the child (p. 49). The author also discusses in this chapter two evaluation sheets for fast analysis during an initial diagnosis, which constitute Attachments 1 and 2. These sheets, aimed at the simplification of observation of a child suspected of SM necessary to make an initial diagnosis concerning the symptoms observed at home, in the closest environment, public places and the school, as well as at the description of basic symptoms, the knowledge of which by the teacher is imperative to observe and describe in their opinion the situation of a child suspected of SM in the class/ school, may also be of use in the control of the progress of therapy. According to Bystrzanowska, their shortness, the simple questions, friendly instruction manuals and the short time required to complete them (but few minutes), are advantageous to parents, teachers and specialists. It is possible to reuse them, however, what is most important is that their effectiveness was tested and proven during many tests of autistic children (p. 51). The author describes the progress of actions in the diagnostic and therapeutic process at a psychological and educational advisory facility, referring the readers at the same time to attachments 4 and 5. The description of this process provides parents with an idea of what a psychological, speech therapy and educational examination of a child should look like, and what steps should be taken in order for a child with SM to get the proper therapeutic help. Bystrzanowska presents also a useful interview questionnaire for parents of children suffering from difficulties in verbal communication (suspicion of selective mutism, see Attachment 6), for meetings of specialists with parents.

Chapter five, devoted to therapy of a child with selective mutism, provides ready solutions, because the Author notes in it, how to proceed with a child burdened by fear. She writes that certain attitudes, parental behaviour, need to be modified, such as e. g. forbidding the child from talking to unknown persons, permitting the avoidance of situations in which the child is supposed to speak, responding instead of the child, showing dissatisfaction by verbal failures of the child, forcing it to speak, overly enthusi-

astic approaches to the successes of a child with SM, suggesting rewards for speaking, etc. The attitudes of teachers also need to be modified, e. g. forcing the child to respond, accepting the mutism, ignoring a child with SM, etc. Based on her own knowledge and experience, Bystrzanowska presents the common opinions among parents concerning therapy of SM, which are not always in line with the proper approach to this disturbance. She provides remarks and advice on how the parents should deal with such children. She then presents one of the best and most effective therapies to date provided by children with selective mutism, meaning, the small step method based on behavioural techniques. There are three behavioural techniques letting the child activate its speaking. These are: a) reducing the intensity of stimuli by making the child at ease with the place and the persons at the preschool or school, b) modelling and c) desensitisation, with three phases: identification of the fear-raising stimuli, their gradation and relaxation of muscles. The author presents the modes of therapeutic interventions for SM as tables (pp. 71-72), distinguishing between the following: a) mode of functioning of the child, b) the method of therapeutic influence, c) the place of influence, d) persons participating in the therapy. In the subject chapter, M. Bystrzanowska presents a therapeutic action plan for the preschool, school and home. She lists example tasks for the team working with the autistic child – for the parent, teacher, coordinator-psychologist, speech therapist. She describes the basic rules of therapeutic work with a child suffering from SM. She discusses important aspects to be taken into account in the therapy of selective mutism, such as: a) the image of SM (major, minor, the span of the area of muteness), b) disturbances co-existing with SM, c) the age of the person with SM, d) the duration of the disturbance, e) the possibility of the parent participating in the therapy of the child with SM, f) experiences of a person with SM who could be covered by therapy earlier, but which did not yield the expected results, g) persons participating in the therapy. Subsequent issues handled by the author are: How to initiate a good relationship with the child? What levels of communication success was Bystrzanowska able to achieve with children suffering from SM? What is the role of the various specialists in therapy? What is the appropriate place to conduct therapy? And, what is its foreseen duration? Based on own experiences, the Author quotes the conditions to be met in order for a child with SM to be able to talk in a large group. These are very important remarks, helpful to teachers and therapists. Noted are the causes of therapeutic failures such as e. g. a wrong

diagnosis, flawed cooperation between the therapist, teachers and parents, lack of knowledge on SM, not considering the phase of speech generalisation in therapy, not providing the child of the feeling of safety during therapy, etc. The author also presents a description and analysis of a case of a three-year-old girl with SM (pp. 86-94), including: identification of the problem, the reasons and dynamics of the issue, the importance and consequences of the issue, the prognosis, suggested solutions, the implementation of influences and the effects of influences. In addition, she presents her proprietary method of therapy for autistic children, which she terms the choral speech method (from the choir to a solo, reverse sliding-in). Clear tables (pp. 97-100) show examples of wrong behaviour towards the child with SM, and indicate suggestions of changes to this behaviour. In the end, she responds to the most frequent questions posed by parents and teachers.

The final, sixth chapter, entitled *Prevention*, is devoted to practical information and advice on the symptoms to be watched for in a child by the teacher at a preschool/ school, how should the parents of a child with SM prepare it to commence pre-school, and how to psychologically prepare a child to attend such a facility.

In the summary chapter, the author stresses the fact that the book is not scientific in nature, but foremost a guide. And this is true, because it contains a series of valuable remarks concerning the diagnosis and therapy of selective mutism. The knowledge that Bystrzanowska shares with readers is the result of her long-term experience in work with autistic children. The methods of work that she recommends were frequently effectively used by her in professional work.

The annex of the book is perfectly designed; it includes eleven attachments, which constitute e. g. an observation sheet for parents of children with suspected selective mutism, an observation sheet for pupils suspected of selective mutism for the preschool/ school, a speech map and therapy plan for a child with selective mutism, procedures of evaluation at a psychological and educational consultation facility, an questionnaire for the interview to be conducted with parents of children with difficulties in verbal communication (suspected selective mutism), recommendations for teachers of children with Asperger syndrome and selective mutism, tasks for children with selective mutism taking into account the communication burden, an example ladder with tasks for children with selective mutism. Available are also ready evaluation sheets, of which every specialist would probably make use.

The book is written using a very friendly language, and the presented material is clear, well-structured, supplemented by quotes from patients, their parents, quotes from blogs and from Facebook. The work is praised by parents and specialists, who stress in on-line forums that this is a fantastic step by step guide for parents and specialists (speech therapists, psychologists, educators and teachers), from the diagnosis to therapy.

Such a worth is worth reading, as much as it is worth having on one's bookshelf.