

Mutism and Selective Mutism

Mutism is a condition where a person is unable or unwilling to speak, either temporarily or permanently. In the UK, mutism is not a single standalone diagnoses in most cases. It is usually identified as part of a broader condition including medical conditions, neurological disorders, severe anxiety, trauma, or developmental differences. Some people may understand language normally but still struggle to speak. One well-known form is **selective mutism**, where a person can speak in some situations but not in others, often because of intense social anxiety (NHS, 2023 and Hertfordshire Community NHS Trust, no date).

How it is identified

the process often starts with concerns from parents, teachers or the individual's GP when a person consistently does not speak in certain situations despite being able to speak in others.

Key Signs include-

- Speaking normally in some environments, (for example at home) but not in others (for instance, school).
- Persistent silence lasting at least a month (beyond initial shyness).
- Difficulty that interferes with education, work or the individual's social life.

For selective mutism specifically, it is strongly linked to anxiety rather than defiance or inability.



What is Selective Mutism?

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Characteristics of Mutism

Mutism is a communication condition characterised by **little or no spoken communication**, despite the individual often having the physical ability to speak. People with mutism may experience a complete absence of verbal communication in many or all situations, which can significantly affect social interaction, education and daily functioning. In many cases, individuals rely on **nonverbal forms of communication**, such as gestures, facial expressions, nodding, writing or pointing, to express their needs and emotions. Mutism can be associated with psychological, neurological or developmental factors and may present differently depending on the underlying cause. Research also highlights that mutism is not always a voluntary refusal to speak, but may instead result from anxiety, fear, trauma, or other medical conditions that interfere with speech production and communication (National Center for Biotechnology Information, no date and MTAV Speech Therapy (no date)).

Characteristics of selective mutism

Selective Mutism is an anxiety-related communication disorder in which an individual can **speak comfortably in certain environments**, such as at home with close family members, but is **unable to speak in other social situations**, including school, public settings or around unfamiliar people. This difficulty is not caused by a lack of language ability or a physical problem with speech but is strongly linked to **severe social anxiety** and fear of social interaction. Individuals with selective mutism may appear withdrawn, avoid eye contact or rely on nonverbal communication such as nodding, gestures, or writing when expected to speak. The condition most commonly begins in early childhood and can significantly affect educational achievement, social development, and emotional wellbeing if left untreated. Research suggests that the silence experienced by individuals with selective mutism is involuntary and triggered by feelings of anxiety or fear in specific social contexts rather than deliberate refusal to speak (American Psychiatric Association, 2013; NHS, 2023).

Barriers of mutism and the impact

Mutism can create significant challenges in both communication and social functioning. Individuals with mutism often have trouble **expressing their needs**, emotions, thoughts or physical discomfort verbally, which may result in frustration, misunderstandings and increased feelings of **isolation**. As spoken communication is limited or absent, many individuals rely on alternative forms of communication such as gestures, facial expressions, or written communication to interact with others. Mutism can also create **educational and social barriers**, as difficulties participating in classroom discussions, group activities or workplace interactions may affect learning, relationship-building and overall social inclusion. These communication challenges can negatively impact confidence, **emotional wellbeing** and opportunities for **social development** over time. Research suggests that communication disorders such as mutism may significantly influence an individual's quality of life and ability to participate fully in everyday activities (NIDCD, 2023; NHS, 2022).

Barriers of selective mutism and the impact

Selective Mutism can present significant social, emotional and educational challenges for individuals affected by the condition. People with selective mutism often experience **severe anxiety** in social situations where speaking is expected, such as in schools, workplaces or public environments. This intense fear can prevent them from communicating verbally despite being able to speak comfortably in familiar settings, which may **reduce confidence and limit opportunities** for social interaction. In children and young people, selective mutism can also negatively affect **academic and emotional development**, as difficulties participating in classroom discussions, asking questions or engaging with peers may impact learning, relationship-building and self-esteem. Over time, the inability to communicate in certain situations may contribute to feelings of **isolation**, frustration, and increased anxiety if appropriate support is not provided. Research highlights that selective mutism is closely associated with social anxiety and can significantly interfere with educational achievement and daily functioning (Koskela *et al.*, 2023; Muris and Ollendick, 2021).



The diagnosis of both Mutism and Selective Mutism involves a comprehensive assessment carried out by healthcare professionals such as psychologists, psychiatrists, doctors, and speech and language therapists. The process typically includes gathering detailed developmental, medical, and behavioural history from parents, caregivers, and teachers, alongside direct observation of the individual's communication in different settings. Professionals assess whether the individual can speak physically and whether communication difficulties are linked to neurological, developmental, or psychological causes, or in the case of selective mutism, whether speech failure is situational and associated with anxiety. Selective mutism is diagnosed when an individual consistently fails to speak in specific social situations despite speaking normally in others, and when this pattern interferes with social, educational, or occupational functioning for a sustained period.

Additional assessments, such as speech and language evaluations, psychological screening, and sometimes medical tests, are used to rule out other conditions like hearing impairments or autism spectrum disorder and to ensure an accurate diagnosis that supports appropriate intervention (American Speech-Language-Hearing Association, 2024 and Child Mind Institute, 2024).

Support strategies for children with Selective Mutism and Autism focus on reducing anxiety, building communication confidence, and creating safe, pressure-free environments for speech. A key strategy is **gradual exposure**, where the child is slowly encouraged to speak in increasingly challenging situations, starting with comfortable environments and trusted individuals before progressing to unfamiliar settings. **Positive reinforcement** is also widely used, rewarding attempts to communicate (not just speech) to build confidence and reduce fear of speaking. In educational settings, teachers can support children by using non-verbal communication methods (such as gestures, writing, or visual aids) and by avoiding pressure or forcing the child to speak, which can increase anxiety. **Collaboration with parents, teachers, and speech and language therapists** is essential to ensure consistent support across home and school environments. In addition, **anxiety-based interventions**, such as cognitive behavioural therapy (CBT), may help children manage fear and gradually increase verbal communication. Overall, effective support strategies aim to create a safe, patient, and understanding environment that encourages communication without pressure or punishment (NHS, 2023; Child Mind Institute, 2025; ASHA, 2024).