

CLINICAL EDITOR COMMENT

This article discusses the expectations of family and school personnel that were placed upon the play therapist as he worked with a child who struggled with Selective Mutism.

Play Therapy with Selective Mutism

When Melissa Speaks Everyone Listens

By David Crenshaw PhD, ABPP, RPT-S

I owe a huge debt of gratitude to Melissa, a six year-old girl, who taught me a lot about how to approach and how not to work with children with Selective Mutism. Melissa was a strong-willed first grader, the youngest of four children, with three older brothers. She had frustrated the efforts of a large number of dedicated school personnel who had done their best to encourage her to talk in school to no avail. She had gone to nursery school, and kindergarten, and was now in the fifth month of her first grade year without uttering a single word in school. At home she was quite talkative within her immediate family but often did not speak in the presence of grandparents, aunts, uncles, and cousins much to the consternation of her parents and the extended family.

The family entertained high hopes at the beginning of the school year because the first grade teacher was a friend of the family and is an extremely capable and experienced teacher. Both the teacher and the parents were quite optimistic that Mrs. Roberts would be able to get Melissa to talk in school. When that did not happen and the school year entered the second half, a great sense of urgency arose in the family and Mrs. Roberts was feeling increasing pressure. The school psychologist and social worker had been called in earlier in the year to render their assistance and the school social worker had seen Melissa on a weekly basis at school but even in the one to one situation of the school counseling, Melissa would play but not speak. The school social worker who had been for several years in a supervision group I conduct for therapists, said to the family and teacher,

"If anyone can get Melissa to speak, Dr. Crenshaw can." What a set-up!

The parents' expectations were high and after eight sessions they were greatly disappointed and concerned that in spite of my best efforts and attempts Melissa was not speaking in the sessions. I had treated other children with Selective Mutism using a variety of approaches, usually a combination

of individual play therapy and family therapy and never before found it so difficult to facilitate the child's

"coming to voice." At that point, I engaged in some serious "soul searching."

It paid off handsomely.

I realized that as a result of the build-up by my supervisee, "I had something to prove." I understood that whenever this attitude infiltrates our therapeutic work, it becomes an obstacle to success. Prior to my next visit with Melissa, in spite of the growing impatience of her parents, I decided that I would adjust my mindset. I would dispense

with all expectations that she would speak, rather I would just focus on being fully in the moment with her and see 'what-if' anything happens.





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During the course of play we engaged in hide and seek play, as we had done in some prior sessions using the puppets to hide and to also seek. She had hid a bear puppet and I built up as much suspense as I could as I used the frog puppet to look for the bear, when I spotted the hidden puppet, I loudly exclaimed, “I found the elephant!” She shouted, “You did not, you found the bear!” She looked like she was in shock. I tried not to punctuate the moment; rather I simply replied matter-of-factly, “My mistake. It’s my turn to pick a puppet to hide and you are not going to be able to find the parrot!” She said, “Yes, I will.” In the next few sessions, she retreated somewhat in that she would whisper in the ears of the puppets what she wanted to say but it was audible enough for me to hear it so I just replied as if she were speaking in a normal voice. After 10 sessions she talked nearly non-stop and she was loud and boisterous like she had always been at home.

It is interesting that when the family reported this breakthrough to her teacher, the teacher expressed some chagrin to my supervisee. Claiming that basically that “hot-shot” psychologist at Rhinebeck got her to talk but “Big deal, she is still not talking in school, so what good is it.” Mrs. Roberts was right. Unless Melissa was able to talk at school the therapy had accomplished very little. So the next time I saw Melissa with her family, I announced that we are going to have a contest. She was very interested in this idea. I told her that whoever won the contest would be awarded a prize that I negotiated with her family. Her parents, Melissa, her three brothers and I were the participants in the contest. We each would make a guess as to what day, Monday, Tuesday, Wednesday, Thursday, or Friday, it would be when Melissa first speaks to Mrs. Roberts. We would also have to guess whether it would be in the morning or afternoon and whether it would be a sunny day or a cloudy day.

So we all wrote down our choices. Melissa’s oldest brother helped her to write out her choices and then we put all the guesses in a jar. The next week, Melissa raced excitedly into the office and shouting that she had won. She said, “It was Tuesday, in the morning, and it was a sunny day. Melissa claimed her prize of being taken out for pizza as the guest of honor in the family. Mrs. Roberts was very happy although I later heard that Melissa had become a bit of a chatterbox and it was somewhat disruptive at times in class.

The psychodynamics of children like Melissa with Selective Mutism can be complex but a common pattern that I have observed is that often these children are somewhat anxious or fearful by temperament. Often they have older siblings who talk for them when they are timid and shy. Adults at some point begin to pressure the kids when they refuse to talk. This serves to increase anxiety about vocalization and has the secondary complication of placing the children in a position of considerable power. Although anxious, many of these children are strong-

willed like Melissa. I initially fell into the trap by joining with all the other adults who had a need for Melissa to talk. In my case to demonstrate that I could live up to the lofty expectations of the referral source and the family. Inadvertently, the same dynamics that had maintained her silence were duplicated in the therapist’s office. It was only after I realized the mistake that I was making and adjusted my expectations that Melissa was able to come to voice in our sessions. Using the same playful approach it became a natural extension of our work to extend these gains to her functioning in school. Play therapy is a natural choice for problems of Selective Mutism because play has inherent healing qualities, it is disarming, and it reduces anxiety, naturally desensitizing children to their fears.

I will be forever grateful to Melissa. I learned a lot from my work with her. Since then I always keep in mind the lessons she taught me when working with children with Selective Mutism and it has not taken eight sessions with any of the ten children I have seen subsequently to overcome their self-imposed silence, four of them in the first session. When a new child with Selective Mutism comes to my office for the first time, I make sure that there is no demand placed on them to speak. In fact, when I greet them, I don’t really give them the opportunity to speak and thereby passing over that moment when they typically “freeze.” I typically just say, “Hello Suzie, come in, let me show you and your parents my office. I want you to see some of the toys and play things that we can use together.” I have learned to not place any premium on the child’s communication to me, which just increases his/her anxiety and reduces the chance of success. I allow them to break their silence when is natural for them to do so in the context of a playful and relaxed therapeutic context that play therapy uniquely provides. I never cease to be amazed what children can teach us.