Hello!

Our treatment facility located in the Greater Philadelphia Area has helped 6,000 children, teens, and young adults with Selective Mutism find their voice through Dr. Elisa Shipon-Blum’s world-renowned, evidence-based Social Communication Anxiety Treatment® (S-CAT®) program.

Families travel to our center from across the world for treatment. We also consult with families, schools, and treatment professionals regularly via web-conferencing to help them understand how to identify, assess, accommodate, and progress communication in individuals with Selective Mutism and/or Social Communication Anxiety.

We are happy to announce our grand expansion of treating other disorders as well as our assessments, testing, and evaluation services. We assess, evaluate, and treat individuals of all ages for all mental health, behavioral, and developmental challenges, including the Gold-Standard for Autism Spectrum Testing.

In this packet, you will find:

- Selective Mutism FAQs for Professionals
- The Social Communication Bridge®
- Short description of our service offerings
- CommuniCamp™ Intensive Group Treatment & Parent Training Program flyer
- Assessments, Testing, Evaluations, and Counseling Services for mental health, behavioral, and developmental challenges
- Information about our webinar workshops (ASHA CEUs and NASP CPDs for select webinars!)
- Social Media flyer
- The SM Interview Game™, a strategic tactic used in Dr. Shipon-Blum's Social Communication Anxiety Treatment® (S-CAT®) program to help children and teens with Selective Mutism (SM) build social skills and achieve the “give-and-take” of communication.

Work with us directly or refer a family! We are looking forward to a successful collaboration!

Sincerely,

Dr. Elisa Shipon-Blum
SMart Center Support Team
w: www.SelectiveMutismCenter.org
e: SMartCenter@SelectiveMutismCenter.org
e: CommuniCamp@SelectiveMutismCenter.org
ph: (215) 887-5748
FAQs for Professionals

What is Selective Mutism?

- Selective Mutism (SM) is an anxiety disorder characterized by an individual's inability to speak and communicate in a socially appropriate manner in select social settings, such as in school.
- To meet the diagnostic criteria for SM an individual must be able to speak in at least one setting and be mute for at least one month in at least one other setting.
- More than 90% of children with SM also have social anxiety.
- Each child will present differently.
  - Some may get to a point where they are no longer verbal at all to anyone,
  - Others may be able to speak or whisper to a select few,
  - Some may be able to respond in short answers verbally, but never initiate verbally nor express themselves in other social situations as they can at home.

What are common misconceptions about SM?

Professionals we consult with typically have seen Selective Mutism as a child/teen who does not speak and therefore focuses treatment or school-based accommodations on getting the child to speak. They do not see SM as a social communication anxiety in which there are factors into the development and maintenance of SM (aka the Whys of SM). Therefore, professionals either:

- Do not see the connection between the known co-morbidities and SM. They see them as separate, and the treatment and school accommodations/interventions (e.g. 504s, IEPs) does not include accounting for those co-morbidities (contributing factors into the development and maintenance of SM).
- Do not know there are co-morbidities meaning all “symptoms” are attributed to his or her SM. Professionals see the child as not being able to explain something because “he/she has SM,” or the child has processing difficulties because “he/she has SM,” when, those factors (e.g. processing) are what is causing the child’s SM and keeping he/she “stuck.”

Therefore, proper assessments are critical. We conduct independent evaluations (IEEs for schools) and administer private evaluations in a way that considers the child’s/teen’s factors of SM and/or co-morbidities for families who choose that route.

What treatment services does the SMart Center offer? I’d like to refer my student/patient to your center for adjunctive treatment.

- **S-CAT® Individualized Intensive Program**: A one- or multi-day program to assess and begin treatment for an individual family, same day, based upon our evidence-based approach for success. We recommend 3-7 follow-up consultation sessions (in person or remotely) every three-to-four weeks thereafter. For more detailed information, visit: [https://selectivemutismcenter.org/individual-treatment/](https://selectivemutismcenter.org/individual-treatment/)
- **Therapy Track Program**: A treatment program for an individual family looking for more incremental, step-by-step support. This service involves an initial 90-minute session to assess and provide starting goals. We recommend follow-up consultation sessions (in-person or remotely) every two-to-four weeks thereafter. For more detailed information, visit: [https://selectivemutismcenter.org/individual-treatment/](https://selectivemutismcenter.org/individual-treatment/)
- **CommuniCamp™**: A three-day intensive group treatment and parent training program for children aged 3-17 years and their parents/families to help build their social communication skills with peers and adults in a variety of social settings and scenarios: [https://selectivemutismcenter.org/communicamp/](https://selectivemutismcenter.org/communicamp/)
I'm looking to consult with an expert on SM for guidance. Where do I start?

- Schedule a web-based or phone consultation for professional training with a SMart Center clinician. Conducted in a Q&A format, our clinicians speak with you about your student's/patient's social communication challenges and provide recommended strategies. The initial session includes a pre-appointment assessment review of school/parent feedback forms and a one-hour session by phone or web conferencing. If you are interested in ongoing sessions, they are typically one-hour in length.
- Refer the SMart Center to your patient's family. If we can evaluate and begin treatment with a child or teen, we can consult specifically about a treatment plan.
- Call the SMart Center so we can better understand your needs and find the support or service that suits you best.

Can and how do you assess these children?

Oftentimes, assessments can be inaccurate if the administrator isn't trained in testing a child/teen who struggles with social communication anxiety. Our assessments are administered by trained clinicians who are specifically skilled in working with children with SM and social anxiety who may not respond verbally to them. Some assessments utilize the parents in the process to get a more accurate picture. We perform assessment services such as:

- Social communication evaluation
- Speech and language evaluation
- Psychoeducational evaluation
- Neurodevelopmental evaluation
- Autism evaluation

Does the SMart Center offer financial assistance?

Yes, we offer financial assistance for eligible families. Please direct them to https://selectivemutismcenter.org/financial-assistance-program/ or contact our office. We look at a variety of factors such as family size, income, and any special circumstances that they wish to share with us.

What else can you do to support a child, teen, or young adult with Selective Mutism?

- Download a webinar, an e-book, or purchase books and DVDs available here: http://shop.selectivemutismcenter.org/

"Butterflies are caterpillars that struggle and come out with flying colors."
The Social Communication Bridge®
Used with Social Communication Anxiety Treatment® or S-CAT®
Used in the treatment of Selective Mutism

**NONCOMMUNICATIVE**

**STAGE 0**
NONCOMMUNICATIVE*
No Responding
No Initiating
Social Engagement is needed to communicate:
1. Frontline™
2. Handover/Takeover™
3. Waving

*Two Types of Noncommunicative:
1.Child motionless/expressionless/frozen/mute
2. Child seemingly ignores person while interacting or speaking to other(s). Mute toward others.

**STAGE 1**
NONVERBAL (NV)
1A–Nonverbally Responsive
1B–Nonverbally Initiative
1. Nodding
2. Pointing/Gesturing
3. Writing

**STAGE 2**
TRANSITIONAL (TV)
2A–Transitionally Responsive
2B–Transitionally Initiative
1. Verbal Intermediary®
   (Transfer of speech via another person or object)
2. Sounds to Words
   (Informal Sounds to Ritual Sound Approach® (RSA)
3. Augmentation Device
   (Tape & Play)

**STAGE 3**
VERBAL (V)
3A–Verbally Responsive
3B–Verbally Initiative
1. Whispering/Quiet Speech
2. Script Approach
   (Audible Reading)
3. Altered Speech

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Assessments, Testing, and Evaluations

The SMart Center provides comprehensive approach to assessments and evaluations for individuals of all ages who suffer from Selective Mutism, Social Anxiety, and a wide array of anxiety, depressive, behavioral, and developmental disorders.

Learn More >

Selective Mutism Services

Dr. Elisa Shipon-Blum’s evidence-based S-CAT® program for Selective Mutism, utilized exclusively at the SMart Center, covers:

- Assessments, Testing, & Evaluations
- Individual Treatment
- CommuniCamp™ Group Treatment
- Parent Training
- General Education
- School Staff Training
- Case Management for Treatment Professionals

Learn More >

Counseling Services

The SMart Center provides evidence-based treatment for a wide array of anxiety, depressive, and developmental diagnoses:

- Obsessive-Compulsive Disorder
- Generalized Anxiety Disorder
- Specific Phobias
- Autism Spectrum Disorder
- Adjustment Disorder
- Oppositional-Defiant Disorder
- and more

Learn More >
CommuniCamp™ is a 3+ Day Intensive Group Treatment and Parent Training Program to help children and teens ages 3-17 with Selective Mutism, social anxiety, and extreme shyness speak in school, in real-world settings, and other social environments. CommuniCamp™ accepts children/teens at every stage of social communication e.g. shut-down and non-communicative, nonverbal, somewhat verbal, etc. CommuniCamp™ is held in the Greater Philadelphia Area multiple times per year.

Our mission is two-fold:

1. Intensive treatment for children/teens in small, peer-groups in an actual, local school—not just a school simulation! Over the course of a long weekend, our professionally trained counselors, under the direction of our lead clinicians, work directly with campers to facilitate learning of coping skills using S-CAT® strategies with respect to each camper’s individual baseline for social communication, comfort, and confidence. Our campers see and hear themselves communicating confidently in a school setting which translates to their school environment when they get home!

2. All day parent education, training, and support seminars! While campers are in treatment, we simultaneously provide full-time parent education, training, and support sessions to keep the communication going! Families are immersed in the world of Selective Mutism and learn step-by-step strategies, ask questions, share stories, and receive support from SM specialists. Parents will leave feeling hopeful, confident, and motivated to implement the goals, strategies, and interventions the entire family learned at camp, at home in everyday life.

“No child or teen should remain mute.”
-Dr. Elisa Shipon-Blum
The SMart Center takes a ‘whole-person approach’ with assessments and treatment for individuals with a wide array of anxiety, depressive, and developmental disorders. We provide evidence-based therapy (i.e. CBT and S-CAT®) for individuals and host weekly group therapy for coping and social skills development, art therapy, and education on anxiety and depression. We also host parent support groups to assist their knowledge and understanding of their child’s diagnosis/treatment, family therapy sessions to improve communication and family dynamics, and speech and language therapy.

Our clinicians are trained to specifically assess and rule out diagnoses such as Selective Mutism*, ADHD, dyslexia, learning disorders, and Autism Spectrum Disorder*. We conduct a full battery of testing, not just a screening tool, and provide a comprehensive report with recommendations and referral options as next steps.

### Diagnoses We Treat:
- Selective Mutism (S-CAT®)*
- Social Communication Pragmatic Disorder
- Obsessive Compulsive Disorder
- Generalized Anxiety Disorder
- Specific Phobias
- Autism Spectrum Disorder
- Adjustment Disorder
- Oppositional-Defiant & Conduct Disorders
- Attention-deficit/hyperactivity disorder

### Assessments We Offer:
- Autism Assessment and Diagnosis (ADOS-2 & ADI-R)*
- ADHD, Behavior, Developmental, & Early Childhood Assessments
- Selective Mutism
- Speech and Language Evaluations
- Psychoeducational Testing
- Neuropsychological Assessments
- School Accommodations, Learning Styles, Test Anxiety, & Academic Achievement
- Dyslexia/Dysgraphia
- I.Q. and Gifted Program Testing
- Private School Admission

### Types of Services:
- Individual psychotherapy
- Group treatment (e.g. social skills, coping strategies, anxiety, and depression)
- Family therapy

Call 215-887-5748 to initiate the triage phone process to provide us with helpful information. An appointment will then be scheduled with to conduct an intake and subsequent session(s).
GET SMART
WITH WEBINAR WORKSHOPS
Selective Mutism Specialists at Your Fingertips!

Our expert Selective Mutism clinicians host live, Selective Mutism and S-CAT® strategy webinars. Our comprehensive, educational topics are perfect for treatment professionals, educators, and parents! Register and learn how to implement our globally successful strategies for your patients, students, or children/teens with SM!

Recordings of previous webinars are available for download at:
www.Shop.SelectiveMutismCenter.org/Product-Category/Webinars-Podcasts

*ASHA and NASP available for select webinars.

Webinar Training Schedule is available:
www.Shop.SelectiveMutismCenter.org
www.SelectiveMutismCenter.org
www.facebook.com/SelectiveMutism.SmartCenter
Following our Facebook page provides you with a priceless benefit: the opportunity for conversation with other parents of children with Selective Mutism. Share stories and experiences to help each other! www.facebook.com/SelectiveMutism.SMartCenter

If you’re a visual learner, you’ll benefit from following our Instagram account. You’ll see SMart Tips, tools and strategies to help you and your child. We also feature photos of our therapy dogs so our animal-lovers will enjoy it, too! www.instagram.com/selectivemutismcenter

Studies surrounding #SelectiveMutism are scarce and textbook descriptions are often nonexistent or limited, and in many situations the information is inaccurate and misleading. As a result, few people truly understand #SelectiveMutism. Let’s get it trending on Twitter to spread awareness so we can help those who suffer in silence. www.twitter.com/SelMutismCenter

Who doesn’t love YouTube videos?! Want to learn more about Selective Mutism and the SMart Center but don’t have time to call or read our website? Our YouTube channel is perfect for you. www.youtube.com/user/SelectiveMutismCtr

We share professional articles and updates about Selective Mutism and other related social communication anxiety disorders on our Linkedin page. Stay current with research and statistics! www.linkedin.com/company/selectivemutismcenter.smartcenter

Make a SMart Decision. Join Our Community!
PH: (215) 887-5748
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The SM Interview Game™

A Strategic Tactic Used in Social Communication Anxiety Treatment® (S-CAT®)
By: Dr. Elisa Shipon-Blum

To most effectively build social communication skills and lower anxiety, The SM Interview Game™ needs to be implemented into an S-CAT® treatment plan designed by an experienced treating professional. Random or sporadic use of The SM Interview Game™ is not recommended.

What is the S-CAT® SM Interview Game™?
This specific approach, using the Social Communication Bridge® and the SM Stages of Social Communication®, helps children with Selective Mutism (SM) build social skills and achieve the “give-and-take” of communication.

The Interview Game™:
- helps children respond to and initiate with others, which are crucial communication skills. It is helpful when transitioning a child from one stage of communication to another and can be adapted to all phases of communication.
- is an excellent tactic to use for children and teens with receptive and/or expressive language disorders.
- needs to be designed after defining a child’s anxiety level, abilities, and interests.

Understanding where the child is on the Social Communication Bridge® (what Stage of Communication the child is starting out in a variety of settings) is key to the effectiveness of The Interview Game™.

- **Nonverbal Communication (Stage 1)**: Helping the child build Nonverbal responding skills (Stage 1a) and Nonverbal initiation skills (Stage 1b)
- **Transitioning (Stage 2)** from Nonverbal (Stage 1) to Verbal (Stage 3) Communication and building both transitional responding (Stage 2a) and transitional initiating skills (Stage 2b)
- **Verbal Communication (Stage 3)**: Helping the child build Verbal responding skills (Stage 3a) and Verbal initiation skills (Stage 3b)

In the beginning, strategies to minimize the need to process information will help alleviate anxiety, which will help with the success of this approach. To accomplish this, the child should know the questions and know the answers ahead of time. Seeing the questions and answers (use of visuals) is also suggested. (Note: This is somewhat like the anxiety many people experience when they are introduced to someone new. For example, we are so focused on the impression we will make on the new person, that we aren’t able to remember the new person’s name!)

Most children with SM can respond nonverbally if given enough warm-up time and appropriate circumstances (e.g. one-on-one interaction with minimal eye contact and no expectations). However, children with SM often have great difficulty initiating. Even when children enter the verbal phase of communication, it is common for nonverbal or verbal initiation to still be difficult. The following situations are examples of tasks that are often difficult:
- Handing money to a store clerk
- Indicating the need to use the bathroom
• Asking for help when not understanding a lesson, getting hurt, or feeling ill
• Asking for a snack or a drink when visiting friends
• Making and answering a phone call
• Giving an order at a restaurant

Tasks like these become more difficult over time unless the child learns to initiate.

How does the S-CAT® SM Interview Game™ work?
The child’s location on the SM Communication Comfort Scale® dictates how the interview process is implemented. The game must always be explained to the person you are working on communicating with. First, specific questions are written on a card, in a booklet, or in a journal. Some children choose to make a book in relation to the person or people they are interviewing. For example, “A Book About My Friends,” or “A Book About My Teacher.” It is recommended that the child know the answers ahead of time to eliminate extra processing time and to enable for predictability and a lower anxiety.

The SM Interview Game™ can be used when working one-on-one with a teacher, other school personnel, peers, family friends, or relatives. At first, playing The SM Interview Game™ with few others present is recommended. Never introduce a new person or play the game in a group setting with unfamiliar people. Start off with one person then expand to others being present.

Across all phases of communication, the person with whom the child is building social and communication skills should always:
• Allow a warm up time before playing The SM Interview Game™.
• Allow time for the child to respond or to initiate a question. The appropriate and typical time span in the give-and-take of a conversation will be longer. The child will feel less anxious and more secure if the person does not try to rush or seem as if they are waiting.
• Minimize eye contact with the child.

It is important that an experienced treating professional guide the game in terms of what stage to work on and what tactics to use. Playing the game without the guidance of a treating professional can worsen anxiety if parents or school personnel are not sure of the stage of communication the child is in or what tactics are the best ones for the child to use.

Children must be agreeable to playing The SM Interview Game™. Using positive reinforcement (e.g. stickers, tokens, rewards, etc.) to represent accomplishments is recommended to add to the interest and fun of the game. For children who are more resistant, the same process can be used with school-related tasks such as polling, surveying, and counting columns of answers.

Sample questions:
• What is your favorite color?
• What is your favorite movie?
• What is your favorite animal?

Sample topics for the nonreader:
Topics vary depending on individual interests and situation where the game is being used.
• Colors (cards or a journal page filled with colored 1-inch shapes)
• Letters (cards or a journal page filled with letters) *For the child who is mastering the nonverbal responding, the interviewer asks the child to write the alphabet or to point to a specific letter.
• Shapes (As above with letters)
• Numbers (As above with letters)
• Pictures (e.g. pictures of animals) *The complexity of the picture is determined by the age and developmental level of the child.
Sample topics for the reader:

- “Getting-to-Know-You” interview questions
  - What is your favorite food/dessert/pet/season/color/holiday/sport/stuffed animal?
  - (Advanced) What is your favorite TV show/movie/family vacation/activity to do in the summer/book/school subject/actor/actress?

- Color Game
  - What color is the ocean/leaves on a tree/sand/grass/the sun/a rain cloud/pizza sauce/an elephant?

- Disney movie questions
  - What is the name of the famous Disney elephant?
  - What is the name of the Little Mermaid?
  - What type of animals are Mickey and Minnie?
  - What type of animal is Bambi?
  - How many dwarfs are there in Snow White?
  - Finish the name of the movie
    - The Lion __________
    - Beauty and the ______
    - Snow White and the _____ Dwarfs
    - Toy _______

For the child who is Nonverbal and building nonverbal responding skills (Stage 1a):
The child is the interviewee, and the interviewer is a teacher, peer, or family friend, etc. The individual you are attempting to facilitate non-verbal responding with will ask the child a question. The child then can point to the answer. Suggestions are to use pictures, colors or simple sight words. Interview questions are then developed for the non-reader. For the reader, the answers to the interview questions could be written on a card or on a piece of paper.

Aunt Kristy is over for dinner. Emma, the child with SM, is unable to speak to or communicate with Aunt Kristy. Emma will play is The SM Interview Game™ to help build her nonverbal responding skills (Stage 1a). Mom and Emma have picked questions, and Emma knows her answers What is your favorite pet? (dog), what is your favorite color (red), etc. On a 3”x5” card, Emma drew a picture (or cut a picture out of a magazine) of a dog. On a second 3”x5” card she colored a red square. After some warm-up time (indicated by Emma’s more relaxed body language and improved eye contact), Emma plays The SM Interview Game™ with Aunt Kristy.

Mom gives Aunt Kristy questions to ask Emma. “What is your favorite pet?” Emma hands the card with the picture of the dog to Aunt Kristy, or she can point to the picture of the dog. Emma gets a sticker, token, or perhaps just a high five. She is learning the skill of responding with Aunt Kristy!

For the child who can respond nonverbally and building nonverbal Initiating skills (Stage 1b):
For children beginning to interact and build communication skills with others, the child should prepare answers ahead of time, progress to yes/no questions, to choice-questions, and then to open-ended questions.

Questions can be written on a card or in a journal. The child approaches the teacher/peer/family friend and hands them a question, thereby progressing to the initiating stage. For some children, this may require the other person to approach the child in the beginning, and prompt the child to hand the card. For younger children, a parent or person the child is comfortable with may need to take the child’s hand and together hand a card to the other person. The person should read the question you want the child to answer. If the child can respond nonverbally, he or she can point to or write the answer (strengthens nonverbal responding skills).

Rather than Aunt Kristy already having the questions, Emma will hand a card with a question to Aunt Kristy (Stage 1b). Emma will respond by pointing/hand back a card with the response, etc. Emma is learning the skill of initiating with Aunt Kristy while strengthening her nonverbal responding skills. To reinforce nonverbal initiation skills, Emma’s mom asks her to hand Aunt Kristy a soda, take her coat, hand her a plate, etc.
Perhaps within the same visit or the next time Emma sees Aunt Kristy, Aunt Kristy can ask Emma questions. Emma can respond by nodding “yes” or “no”. Eventually as comfort is established, Aunt Kristy will ask Emma choice-questions such as, “Which animal do you like better, a cat or a dog” As comfort increases, Aunt Kristy will ask Emma open-ended, thought-provoking questions like, “What is the name of your best friend,” and “What did you do this summer?”

As Emma builds communication skills and becomes more comfortable with her aunt, Aunt Kristy can apply the concepts to everyday questions. For example, if they are going to go out shopping, Aunt Kristy could ask, “Do you want to go to the mall or to the movies?” and “Do you want to draw with the red crayon or the blue crayon?”

**For the child who is transitioning across the Bridge® into the verbal stage and working on verbal responding (2a):**
Because responding is easier than initiating, The SM Interview Game™ can start by the interviewer asking the child a question. In the beginning, it is recommended the child know the answers ahead of time.

Use a Verbal Intermediary to play the *Whisper Game*. When a question is asked of the child, the Verbal Intermediary will say to the child, “Tell me.” The child will whisper his or her answer to the Verbal Intermediary. The parent or staff member then repeats the answer over a set distance. Over time, based on comfort with positive reinforcement as an incentive, the distance is expanded:

- Whisper close-up → Fist length → Half arm length → Full arm length → Across table

  *Aunt Kristy asks Emma the interview questions. Emma will whisper her answer “close-up” into her sister's ear. Emma’s sister tells Aunt Kristy what Emma said. Emma indicates this is easy, so it is suggested the next time Emma whispers, she does so at a fist's-length away. This is continued until questions are being asked and Emma is replying verbally at increasing distance away. The sequence of questions is direct, yes/no, choice and open-ended questions.*

**For the child who is using SOUNDS or the Ritual Sound Approach® (RSA):**
This process has been reviewed and practiced during treatment sessions.

A sound represents a word. The child can respond by using the sound:

- “Ssssssssssssssssss” = Yes
- “Nnnnnnnnnnnnnnn” = No

  *Aunt Kristy asks yes/no questions and Emma responds using the sounds. Seeing (visual) the sounds written down is helpful.*

  **The child to play a tape recorder with a pre-recorded answer:**
  The child plays a prerecorded message of the answer or goes into another room and tapes and then plays.

**For the child who is transitioning across the Bridge® and working on verbal initiating (2b):**
Like above for nonverbal initiating, where the child hands-over a card with a question, the child will approach the person e.g., teacher/peer/family friend and ask a question, thereby progressing to the verbal initiating stage.

To initiate a question using the RSA, the child must be able to sound-out or use phonetic speech to say words. For example, *Wh+A +T IS Y+Our F+Av+Or+It+e P+E+T?*
For the child who is in verbal stage and working on building comfort with verbal responding (3a) and verbal initiating (3b):
The child can play a tape recorder with question pre-recorded. The goal is to approach others, ask direct questions, and then respond directly. This should be accomplished often until it is “easy” for the child to do.

For the child who is building verbal and responding skills (3a):
The child hands the question to another individual, then the child reads the answer off a card or journal page. The tactic of reading and using a script is ideal for most, if not all children with SM. This process helps with minimizing the need to process. By focusing on reading, eye-to-eye communication is minimized which helps alleviate anxiety and sense of expectation.

Emma will have her answers to questions written on 3”x5” index cards or in a book. After Aunt Kristy asks her a question, she reads her reply. Emma will then ask Aunt Kristy a question from her card or book. The focus is on reading rather than speaking to Aunt Kristy.

The concept of The SM Interview Game™ is to begin one-on-one conversation with someone and then slowly expand to others and gradually increase the size of a group. This concept is a common intervention used within schools since it can be done in The Spot in the classroom and during friendship and social skill based groups. The key to success is understanding that social comfort proceeds communication and progress does not occur in a group. The interview process helps with comfort building as well as communication skills.

“Butterflies are caterpillars that struggle and come out with flying colors.”

Dr. Elisa Shipon-Blum is the President and Director of the Selective Mutism Anxiety and Related Disorders Treatment Center (SMart Center), Director of Selective Mutism Research Institute (SMRI), and Founder of Selective Mutism Group. She is also Associate Professor of Family Medicine and Psychology at Philadelphia College of Osteopathic Medicine.