Quality of Peer Relationships Among Children with Selective Mutism
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Abstract

The current study examined the quality of peer relationships among children with selective mutism. Previous research suggests that children who are selectively mute have difficulty making friends and have poor outcomes in terms of social adjustment. The current study extends the literature on selective mutism by examining peer relationships. The study utilized a descriptive, non-experimental design. Participant data was obtained from the UNLV Child School Refusal and Anxiety Disorders Clinic. Data from families entering treatment in 2011-2014 and post family intake clients were included. Hypothesis 1 predicted that children with selective mutism will have fewer close friends. Hypothesis 2 predicted that children with selective mutism will be reported by their parents as having either zero or one friend. Hypothesis 3 stated that children with selective mutism will have trouble making friends, keeping friends, and fear joining conversations as reported by their parents. The first hypothesis was that children with selective mutism will be reported by their parents as having either zero or one friend. Children with selective mutism were found to have no close friends. Results are in Table 1.

Hypothesis 1

The first hypothesis was that children with selective mutism will be reported by their parents as having either zero or one friend. Children with selective mutism were found to have no close friends. Results are in Table 1.

Hypothesis 2

The second hypothesis was that children with selective mutism will be reported by their parents as not being related to other children, to be cruel or mean to others, to get in many fights, physically attack people, be teased a lot, and be seen as too shy or timid, and withdrawn. Children with selective mutism were more likely to be reported by their parents as having little or no friends, to be cruel or mean to others, to get in many fights, physically attack people, be teased a lot, and be seen as too shy or timid, and withdrawn.

Hypothesis 3

The third hypothesis was that children with selective mutism will have trouble making friends, keeping friends, and fear joining conversations as reported by their parents. Children with selective mutism will have trouble making friends, keeping friends, and fear joining conversations as reported by their parents.

Methods

Participants

Participants (n=97) included youth with selective mutism. assessed at the UNLV Child School Referral and Anxiety Disorders Clinic aged 3-11 years. Participants were 59.6% female (n=56) and 40.4% male (n=31). Youth were European American (84.8%), Hispanic (21.1%), multiracial (12.1%) and African American (8.3%). Family income was $32,000-$74,999 (7%), $25,000-$49,999 (24.0%), $40,000-$49,999 (24.0%), $50,000-$69,999 (13.0%), $70,000-$99,999 (8.4%), $100,000 or more (15.2%) or not reported (20.7%). Parents were reported as married (52.7%), divorced (17.4%), separated (15.1%) or not reported their marital status (17.2%). Families had 1 additional child (36.8%); 2 additional children (26.5%).

Measures

Descriptive Forms: Parents completed a demographic form to assess for child’s gender, child’s ethnicity, child’s age, and gender of information for father and mother, current marital status of the child’s parents, family income, and gender and age of child’s siblings. Child Behavior Checklist (CBCL; Achenbach, 2003). The CBCL is a 113-item rating scale used to measure externalizing and internalizing problems in children and adolescents aged 6-18 years. A form for children as young as age 4 years is also available. Both of these was used to complete the study. The CBCL allows for teachers, guardians, and children to complete a profile of the child’s behavior. The CBCL contains several norm-based scales: anxious/depressed, withdrawn/depressed, aggressive behavior, social problems, thought problems, attention problems, and problem behavior. Overall scores for Total Problems, Externalizing problems, and DSM-oriented scales are also provided. Items on the CBCL that capture peer relationships and peer interactions were used in the current study.

Diagnostic Interview Schedule for DSM-IV—Parent and Child Version (ADIS-C/P; Silverman and Albano, 1996). The ADIS-C/P is a diagnostic semi-structured interview that assesses symptoms frequency, severity and duration of anxiety disorders in children. This study utilized only the parent version (ADIS-P). A parent-rated impairment level on a 3-point Likert-type scale (0=not at all to 2=very much or often) was included in the parent version. A score of 1 or greater indicates a clinically significant problem. The ADIS-C/P has good test-retest reliability (0.42-1.0; Silverman & Albano, 1996) and excellent interrater reliability (0.68-1.0). The ADIS-C/P is a semi-structured diagnostic interview that assesses the presence of anxiety and related disorders in children. The ADIS-C/P also assesses other disorders that may be comorbid with anxiety, such as depression, disruptive behavior disorders, and pervasive developmental disorders.

Procedure

Participant data was obtained from the UNLV Child School Referral and Anxiety Disorders Clinic. Data from families entering treatment in 2011-2014 and post family intake clients were included. Hypothesis 1 predicted that children with selective mutism will have fewer close friends. Hypothesis 2 predicted that children with selective mutism will be reported by their parents as having either zero or one friend. Hypothesis 3 stated that children with selective mutism will have trouble making friends, keeping friends, and fear joining conversations as reported by their parents. Children with selective mutism were found to have no close friends. Results are in Table 1.