TĂCEAREA CARE SPUNE MAI MULT DECÂT VORBELE : UN CAZ DE MUTISM ELECTIV

SILENCE THAT SPEAKS MORE THAN WORDS: A CASE OF ELECTIVE MUTISM

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REZUMAT:

Mutismul elective este o tulburare psihică asociată cu anxietatea socială. O persoană care are limbaj, este capabilă de a vorbi, nu poate să vorbească în anumite situatii sau cu anumite persoane. Mutismul electiv este un diagnostic destul de rar întâlnit în rândurile copiilor cu tulburări de comunicare. Prezentăm un astfel de caz care exempli că principiul sistemic conform căruia tulburările manifestate de un copil reprezintă 'simptomul' disfuncţionalităţilor familiei. O abordare din perspectiva teoriei ataşamentului și a unor principii sistemice vor aduce lămuririle necesare pentru a înţelege încrengăturile cauzale care au generat tulburarea de comunicare la copil. În același timp, perspectiva comprehensivă sugerează și speranţele și posibilităţile de intervenţie.

Cuvinte cheie: mutism electiv, limbaj, teoria ataşamentului, abordare sistemică, evaluare teoria atasamentului, abordare sistematică, evaluare

ABSTRACT:

Selective mutism is a psychiatric disorder associated with social anxiety disorder. A person who is normally capable of speech is unable to speak in speci c situations or to speci c persons. It is very seldom disorder among children with speech disorders. We are going to present here a case study of such a disorder. e case re ects the systemic principle based on which the manifested disorders of a child are the symptoms of family's dysfunctions. e approach in the study case here is based on attachment and systemic theories which allow us to understand the complex causal relations involved in generating the selective mutism of the child. A comprehensive perspective comes with hopes and suggests the possibilities of interventions.

Keywords: selective mutism, language, attachment theory, systemic approach, assessment

INTRODUCERE: DE CE VORBESC COPIII?

Mutismul electiv reprezintă o contradicţie în sine: copilul deţine instrumentele comunicării (nu este mut), dar acestea sunt funcţionale doar în raport cu anumite persoane și în anumite situaţii sociale. Comunicarea verbală reprezintă un rod al gândirii simbolice şi în acelaşi timp este o punere în acţiune a capacităţii de simbolizare a persoanei. În acest sens, tăcerea ne spune la fel de mult, deşi poate mai puţin clar, ca şi cuvintele. Analiza mutismului electiv ne trimite la principiile care stau la baza dezvoltării sănătoase a intrumentelor de comunicare la copil, în principal a limbajului. «Elementul central în această imagine este relaţia strânsă dintre copil şi adulţii semnificativi din jurul său. Copilul participă îndeaproape la ceea ce părinţii săi fac sau spun, bucurându-se de atenţia şi răsplăţile lor. (Kiernan, Reid, Goldbart, 1987, p.16). Dorinţa de a fi cu ei, de a-i mulţumi şi de a fi ca şi ei sunt motivele care-l fac să aibă apetit pentru comunicare. Prima şi cea mai importantă cale de învăţare la copil, este imitarea. Atent la ceea ce fac şi spun părinţii, copilul va încerca să le imite comportamentele, inclusiv vorbirea. Observându-şi şi imitându-şi părinţii, copilul învaţă funcţiile subtile ale limbajului şi comunicării : cum poţi atrage atenţia celorlalţi, cum poţi cere anumite lucruri sau acţiuni, cum să-l deter-

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would cope if her husband would not be with her, she says 'It is all the same to me'. She does not think that it would be hard for her without him "anyway, I have been carrying him on my back like a parasite ever since I knew him!". He does whatever she says, but has no initiative, does not solve any problem by himself. She makes him a list with what he has to do.

Mrs C. grew up in her grandmother's house from the age of 2 weeks to school age, when she returned to her parents. The reason was that both parents were working in agriculture and were building the family house at the time, thus could not handle the kids. The grandmother (on the father's side) who brought her up now lives with them and takes care of D. The grandmother was gentle and tolerant with her and the children. She did not impose rules. All her children were sleeping with her, she used to tell them stories, and show them filmstrips every night. Grandpa was mostly gone away.

The most important and beloved persons in Mrs C's life are grandma and her dad. Grandma is the closest. It is the grandmother, not G, with whom she talks any matter over. ("Either I tell him or not, it's indifferent"). She does not tell mother because she says she does not trust her. ("She disparages me ..."). Grandmother helps her daily in all tasks, including the child. Grandmother is 82 years old. Mrs C. is not telling quite everything to her grandma. She fears that she would worry her too much. She recounts in great, not all the details. She talks about all issues but not the ones related to her husband, to her health or her troubles. The reason is "She is old, I do not want to worry her; if I tell her something then she keeps thinking there all the time". She tries to calm her down whenever she sees that she is too concerned about something. She had a recent discussion with her grandmother about G., complaining that he does not want to take a job. Grandmother advised her to send him to work herself, but to G., Grandma does not say anything. Now and then, Mrs C. argues with her grandmother. The latest argument happened a few days before and was due to grandmother's 'negligence', who, although she felt a cable melted, did not do anything. Mrs C. quarrels with her grandmother about once a month, always due to grandmother's negligence. However, Mrs C. thinks that she can rely on grandma. However, Mrs C. controls everything by phone when she is not present. With reference to the possibility of grandmother's absence from her family life, Mrs C. says, "I could do without her, but it would be a bit hard!" If she were away, she would miss her. Grandma is used to do what she wants and she "does not like to do" physical labour. Nevertheless, she likes to play with the baby.

Her father is 62 years old, they communicate by phone daily, she trusts him, but her father is ill and he is treated in Italy. Her dad has a serious chronic disease and therefore the whole family, including Mrs C., protects him.

Mrs C. claims that she has a friend whom she trust to a certain extent, but she does not tell her too much about the events in her life. She claims that her life events are insignificant. The only serious problems that she faces are only those with her husband's family, although these frictions do not affect her daily.

She communicates easily with G. She tells him everything that "crosses her mind", with details, she makes plans. Only money is a limit to their collaboration. She feels that she cannot rely on him because he ruins all the money. When they need money, the husband says, 'Ask money from your mother'.

When they lived alone in another village, where they have their home, they did not have these issues, then he went to work and they got along well together. Then, her mother-in-law, G's mother, came to them daily, to take care of the child who was about three years old. Mrs C. mentions that, however, the mother-in-law would not come on her own initiative and 'I think she used to come just because G told her" and felt obligated. At the time, both women were arguing so that "the whole street could hear me." Her neighbours told Mrs C. that her mother-in-law did not even give D any food.

Her friend lives in the town where they also have a house. Mrs C. pays her a visit from time to time. When they meet, Mrs C. tells her details of her life, because they have similar problems. Their conversations, however, have certain limits. Such limits are about money, family, and the intimate relationship with G., of which Mrs C. does not speak. Her girlfriend does not give her advice nor is she worried about her. The last issue that she discussed with the girlfriend was about the latter's teeth under repair because and Mrs C. too was interested to repair her teeth. One reason they do not speak about the other things is that they are never alone, but accompanied by their children. However, they tell stories together and laugh, they love

to meet each other. Mrs C. has but a reproach to the friend, she believes that she is a "little liar". Moreover, she even told her friend "she is a little misleading". These two women do not argue, however; that is because "I see her how she is and I leave after her." Nevertheless, she thinks that she can rely on her, that she can talk to her. Mrs C. also appreciates the fact that sometimes they go out together, in family. If she were not to see the friend, would easily do without her, she would not miss her. She feels good with her friend but she does not rely on her too much.

There are no other important people in Mrs C.'s life.

Trusting people seems to her the hardest thing, because "I have always met bad people". When she meets someone, she has misgivings and they prove out later on. She wonders why those bad things that she senses happen and the answer that she gives is that the others are envious of how they get ahead, because they carry it off well ... Overall, she trusts people in the family (this does not include the husband's family). Her mistrust is directed especially to those outside the family. When friends of G. come along she serves them; But when she goes to them, "they take the pot off the table, hide tray with cakes." "In [name of the village where their house is] there are very bad people! ". Grandma says the same: "People are like this by nature they think only about themselves, about their own good." Although she is aware of this situation, it does not change her hospitable behaviour, although "I only declare that if I they come again, I shall do the same!" She finds it hard to have close relationships with others for they "think she is stupid". With women, it is more difficult. "Because they are so evil and so …". The explanation that she can find for this situation is that perhaps having only brothers, she knows better how to speak and act with the boys. When he has the opportunity to make a new acquaintance, she is talkative. When requested, she gives help, but she does not ask for help because "I prefer to do everything alone…" If she had a problem, she would address to her elder brother, to the other brother and possibly, in the end, to her friend. However, she would avoid some people at all costs in such situations, "her husband's family, his brothers and his mother. Because they would not help, and they would tell tales about her to everyone. Perhaps, because of misunderstanding from the very beginning, I did not agree with the rules imposed by his mother ..." She does not remember to have lived the experience of feeling betrayed during childhood and youth. When someone wants to tell her something, she enjoys the fact that the person trusts her. Nevertheless, when she tells someone something, it happens that she is going to regret ulteriorly, because "the entire street would found out" later. She felt hurt, rejected by people who ought to be close. Such experiences have made her recede into the background. She thinks she can deal with any problem alone, but she is not very sure ... still she admits she needs the help of others, 'without help, I don't think'. She likes to have her independence (her money). "I think I'm rather lonely, I like to have everything, what's mine should be mine." She asks for advice when needed, but it is not sure she follows it, 'Eventually I just do as I think fit.' 'I like to know the others' opinions, whether they make me angry or I like them, but I do what I want. It is all the same to me, as to G., if the others' views make me angry. Most decisions are taken only according to my mind.' She disregards the opinion of G. or of the others. "I love it when I feel that I am right and I control things and I am right. I feel the need to go out somewhere, more people ... not just the two of us. Although I am lonely, I like to be around people." However, she also feels good when for some time she is in the company of only the child and G. She would like to meet with her friend more often and with other friends. Nevertheless, there were times with his family, when she believed that they met too often, especially with the sister-in-law. "I think it was because I could not stand them. That one used to come and told me straight I was stupid and then she asked me for help."

Mrs C. declares, "I am a possessive person. I am jealous of my brother C. because he gets on better than we do." She is not scared at the thought that G. should go somewhere, "if I know he is coming back." If he did not come and did not announce she would feel scared. She does not like goodbyes; she finds it difficult to break away. She has never left the child overnight without her. If she cannot talk to G. she worries. If G left, he would miss him, especially during the night, this because she feels "weary" at night, but also because the child prefers him. She does not break relationships, but she often quarrels with others 'if it does not suit me, I say it.' It happens to cool relationships with others. She gives the example of the situation of the family that went to the seaside with them. "I did not argue with them because I was on the verge of beating them. We cooled our

relationship … for my part ... as for them, they keep trying ... ".

She has nothing to blame her parents, and brothers, "Sometimes I am sick of C. he is pretentious with food. I say to him, laughing 'I'm sick of you.'" Related to her childhood, she is satisfied with it; she does not think that is given the choice she would want it to be different from what it had been. She thinks people have not done enough for her. This complaint does not apply to her parents, too. "I have received even what I did not think about". However, outside the family, she thinks that the others did not give her, they did not take her into account the same way as she took them. She thinks she knows how to make connections easily. Nevertheless, she admits, "there are times when I do not want to see anyone. I wish I was better with G., maybe I could be better with the baby ... sometimes I think maybe with his kin [her husband's family] I could have said something else, done things differently ... I could have been nicer, Showing them out of the door without saying bad words." In connection with the child's manifestation of elective mutism she reflects "I have scolded the child a lot since he stopped speaking although I noticed that since I have started to scold him, it seemed that he used to speak even with me with a shade of fear... now I try to let him go. "

The ASI assessment brings the following clarifications[2]:

Mother's ability to make and maintain relationships with others is **somewhat** present so can be rated 3.

This ability is shown in the following relationships:

a). relationship with the partner (husband, Mr G.) with whom she has no major discrepancies, although the relationship is weak. Trust in the partner goes as far as the financial aspect of family life (3). She feels that she has active emotional support from her spouse (3) but is bothered by his good relationship with his biological family. Even if she defies, making contrary statements, their interactions have a good quality (4), although the negative aspects of the relationship (distrust about money, dissatisfaction with the fact that he is unemployed, the grudges that make her forbid him to use the car) are also present (3) in the relationship with the partner. Mrs C.' attachment to her spouse is quite good (3) but the overall support from her husband, though without major discrepancies, is insufficient.

b). relationship with the paternal grandmother, probably Mrs C.'s attachment figure; she is the person who brought her up until it was time for her to go to school. Now they are living together. Grandma was chosen as the **first significant person**. Her confidence in grandmother is moderate (2) and Mrs. C. controls her continuously. Regarding the emotional support that she perceives from her grandmother, it is moderate (2), because there are many issues which she cannot share with her, especially about her worries with her husband's unemployment. Positive aspects of interactions with Grandma are also moderate (2) being limited by distrust in grandmother, by tne limiting of the subjects that may be entrusted to grandmother and by the feeling that grandma is careless and does whatever she likes. If all these limits are regarded as such, they build a big enough share (3) of the negative aspects of interactions with Grandma. Attachment to the grandmother is also moderate (2) being undermined by mistrust and a sense of failure of the support received. On average, however, Mrs C. is receiving good support from grandmother and there are not too large discrepancies between them.

Distrust in relationships with others is at a remarkable level (1). She affirms that one cannot trust others and tells spicy aspects of her hospitality and the opposite answer of her acquaintances. In fact, there is no person in whom she has thorough confidence, or one who could convey the feeling that she could get help unconditionally and without hidden intentions.

Concerning closeness in relationships with the others, Mrs. C felt many **constraints** (moderate: 2) produced by her distrusting them as well as by the others' envy and jealousy manifested for the welfare of her family.

Fear of being rejected is not too strong (moderate: 2), Mrs C. claiming that she is a lonely person concerned about the welfare of her family.

Self-confidence is also at a moderate level (2) which makes Mrs C. recognize that in a problematic situation she could not do without the others' help, although there are people whom she would never ask for help.

Wish to have company is quite low (3) while recognizing that sometimes she spends time with other people or families. However, these moments are often an unfortunate outcome for Mrs C, which

2 In parentheses, we have the rates, which are set out from 1 to 4.

makes her claim that the presence of her child and of her husband is sufficient.

Surprised by the questions related to the **fear of separation from significant people in her life**, Mrs C. acknowledges some separation anxiety (3/4)., sometimes with detours and returns in the story.

The dominant characteristic of Mrs C's accounts is but anger, frustration in dealing with others. This marked anger (1) impregnates her relationships with the loved ones (with D., her child, with G., her husband, with her grandmother, her attachment figure in childhood) and with the neutral ones (acquaintances who are not hospitable with her) or with people whom she perceives as enemies (her husband's family).

CONCLUSION

The overall impression is one of a style that is dual, ambivalent, angry resigned and fearful at the same time, in relationships with others. It is a moderate insecure attachment style, that could mean a loss or trauma that has not been overcome yet.

Discussions and answer to the question: Why does not D. speak?

Around the age of 3, when D. had already good speech skills, his mother, who had found a job, was forced to leave him to stay at home during the day, with her mother-in-law. At the same time, mother detested her mother in-law with whom she had heated and endless noisy scandals; because of the mother – in – law, the couple was arguing in front of the child, too. What mother conveyed to D. was a strong and maddening double message: on the one hand was the hatred and aggression with which she abolished her mother-in-law, on the other hand she used to leave her precious child in her care. It is interesting to note how, in this message, one may find all the principles of double messages[3] described by G. Bateson and his team at Palo Alto (1956). Being at an age when he needed the care of the grandmother that his mother hated, still, the child could not accept to communicate with his grandmother because this would have been a betrayal, a lack of loyalty for the mother. Gradually, he ceased to talk to Grandma. In the first stage, caught in the ambivalent situation where she resorted to the help of the person whom she hated, mother did not pay attention that D. did not speak with his grandmother. Maybe sometimes, at the beginning of these manifestations, she even praised her child for his mutism towards grandmother. The child grew, with his mother's consent, the symptom of this noisy and full of resentment relationship. The symptom is a message that "is communicated in a context and in a form in which the content and / or addressee are both affirmed and denied" (Bateson, 1972, p.28). This definition should be seen in the light of the double message theory.

The child, in refusing to talk to his grandmother, imitated the mother's rejection of the mother in-law. The language created and acquired to facilitate human relationships and to connect people had become a weapon to destroy the other. For the mother, the weapon meant aggressive verbal outbursts and the quarrels in the ears of the entire street. Nevertheless, as the systemic approach records, there are three ways of response: total agreement (confirmation), disagreement with joint negotiations and search for meaning (rejection) and denial, ignoring the existence of the other. Actually, just ignoring, complete silence means the denial, the killing of the other. When I do not address you a word, for me you do not exist. D., in his desire to be loyal and to please his mother, he stepped on the platform of non-communication, in which the other does not exist. He managed to surpass his mother, who used to situate herself on the endless spiral of contradictions, conflicts and aggressive dialogues. For language does not reflect the world, but creates it. (Watzlawick,1978). Mother and son are in a revolutionary alliance against grandmother, creating together a world that is hostile to the grandmother. In fact, during the past two years, the mother imposed a ban to communicate with that grandmother even to her husband, G. However, the latter would violate the prohibition.

Unfortunately, mother is not only in conflicting relationships with her mother-in-law, but in a somewhat generalized state; her anger and frustration, based on insecure attachment, are directed against the whole world. D.'s mutism extended and his communication remained reserved within the family boundaries: mother, father, "good grandmother."

3 1. e two persons are engaged in a vital relationship; 2. A recurrent traumatic experience that includes fear of abandonment and de nitive exclusion; 3. A primary verbal injunction; 4. A non-verbal injunction, as a rule a secondary one, contradicting the rst injunction; 5. A third injunction, requiring conformation to both of the contradicting injunctions; 6. e victim has learned to perceive him/herself in the context of the double message where there is no way out.

INSTEAD OF CONCLUSIONS

Caught in a world of conflict and confusion, between the unhappy mother who is at war with the world and his father, who is calm but somewhat apathetic and resigned, D. has already learned solid handling techniques. These, set against the background of the tendency to dominate, which is highlighted in in the different behaviours, could be blamed on an ambivalent insecure attachment. A systemic intervention could introduce extra information and therapeutic changes in the unhealthy family communication system. Maybe the child's going to school could be such a change. Mother's assessment brought a moment of reflection that can only be beneficial to the child and the family. Mother realized that she 'could have been nicer' with everyone, including the child whom she used to punish physically because he did not speak, but whose refusal to talk with his grandmother was well received. Mother had brought with her, from her own childhood, an insecure attachment, fearful and aggressive at the same time. The child and the whole family are in an unhealthy situation, generating symptoms. The intervention was too short in time (it comes down to three meetings) to bring profound changes. However, the extra information that the mother received with the ASI assessment could be a point of coagulation for changes. What she claims she had learned is the abandonment of physical punishments imposed to child in connection with his refusal to talk to neighbours, acquaintances, neighbourhood kids. She also understood that the school is for the child a chance to practice the language that has already acquired; in this sense, it is the parents' responsibility to make school interesting for the child, to present it in the messages they transmit to the child that school is an interesting space, without conflicts.

What we have tried in this paper was to introduce elective mutism (a diagnosis, which we have not invested with too much confidence before coming across this case) from the perspective of attachment theory and of the systemic principles strongly congruent with of attachment theory; at the same time we wanted to pay due importance affective-cognitive combination of our behaviours.

BIBLIOGRAPHY

1. Bateson, G., Jackson, D.D.., Haley, J., Weakland, J.H. (1956), Toward a theory of schizophrenia, in Behavioral Science, nr. 1, p. 251-264
2. Bateson, G. (1972). Steps to an Ecology of Mind, tome 2, New York, Ballantine
3. Bifulco, A., Thomas, G. (2012). Understanding Adult Attachment in family relationships. Research Assessment and Intervention, Routledge, London
4. Bloom, L., Lahey, M. (1978), Language Development and Language Disorders, John Wiley and Sons, new York, London
5. Bowlby, J. (1988). A secure base. Clinical applications of attachment theory London: Routledge
6. Bruner, J. (1993). Le developpement de l'enfant: savoir faire, savoir dire, PUF, Paris
7. Carlson, E.A. (1998). A Prospective Longitudinal Study of Attachment Disorganization/Disorientation, in Child Development, vol.6, nr.4, pp.1107-1128
8. Clark, H.H., Clark, E.V. (1977). Psychology and Language: An Introduction to Psycholinguistics, Harcourt Brace Jovanovich, Inc
9. Chomsky, N., Piaget, J. (1988). Teorii ale limbajului. Teorii ale învăţării, Ed. Politica, Bucureşti
10. Fonagy, P. (1999). Transgenerational Consistencies of Attachment: A new Theory, prezentat la Developmental and Psychoanalytic Discussion Group, Dallas Society for Psychoanalytic Psychology, în 13 mai 1999 ; descărcat de pe site-ul societăţii; lucrare nepublicată
11. Jaccard, R. (1994). Nebunia, Editura de Vest, Timişoara
12. Kiernan, C., Reid, B., Goldbart, J. (1987). Foundations of communication and language (FOCAL), Course Manual, Paperback, Impact series
13. Killen, K. (2003). Copilăria durează generaţii la rând, ed. First, Timişoara
14. Smyke, A.T., Dumitrescu, A., Zeanah, Ch.H. (2002). Attachment Disturbances in Young

Children. I: The Continuum of Caretaking Casualty, J. Am. Acad. Child Adolesc. Psychiatry, 41: 8, pp.972-982
15. Stroufe, A., Egeland, B., Carlson, E., Collins, A. (2005). The Development of the Person, The Guilford Press, New- York
16. Vygotski, L.S. (1985). Pensee et language, Editions Sociales, Paris
17. Zeanah, Ch. H., Berlin, L.J., Boris, N.W. (2011). Practitioner Review: Clinical application of attachment theory and research for infants and young children, in Journal of Child Psychology and Psychiatry, DOI: 10.1111/j.1469-7610.2011.02399.x
18. Watzlawick, P. (1976). How Real is Real? New York, Random House