

## Personality and Family Types on Selective Mutism among Adolescents

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### ABSTRACT

*The study investigated personality and family type factors influencing the selective mutism among secondary school adolescents. The design for the study is ex-post-facto. The population for the study is 180 participants who showed tendency towards selective mutism. Three instruments were used to collect data for the study (skill deficit diagnostic instrument, the revised Neo-personality inventory, and the demographic inventory. The reliability of the three instruments were 0.75, 0.76 and 0.81 respectively. Two hypotheses were formulated for the study. The data collected were analyzed with a t-test. The data analysis showed that the joint influence of independent variables was found to be significant. Based on the findings of this study, the researcher recommends that, the adolescents should be encouraged to improve their social skills in their interpersonal behaviours. This is being suggested to reduce those behaviours that aggravate selective mutism.*

**Keywords:** Personality (neuroticism, extraversion and openness to experience)  
family types (nuclear and extended) selective mutism

### INTRODUCTION

Selective mutism is a psychological disorder that makes an individual to select comfortable environments for oral expression. It is a disorder that is defined and described by the American Psychiatric Association (APA, 2000) as a diagnostic entity known as psychological disorder mostly occurring between infancy, childhood and adolescence. The adolescent with selective mutism disorders speak normally in one setting usually the home and will not speak in other environments, such as school. The prevalence in the general population used to be so low that school psychologist, physicians, and other helping professions had little or no knowledge about the disorder (Kolvin & Fundudis, 1981). The criteria for and essential feature of selective mutism, according to the *Diagnostic and Statistical Manual of Mental Disorders (4th ed., text rev.; DSM—IV—TR, APA, 2000)*, are the child's persistent failure to speak in specific social situations where speaking is required like in the school and at the same time, the child do not speak but speaks fluently at home, making their problem to be selective and consistent across environments. This makes diagnosis challenging. Instead of communicating by standard verbal expressions in these selectively mute situations, adolescents with this disorder may communicate by gestures, nodding or head shaking, pulling or pushing, or, in some cases, by short monosyllabic or monotone and telegraphic (holophrastic) speeches with an altered voice.

The *DSM—IV—TR* (APA, 2000) stipulates that, for it to be described as selective mutism, it must last for at least one month, but not limited to the first month of school. Selective mutism should not be diagnosed if the child's failure to speak is due solely to lack of knowledge of or

discomfort with the spoken language or fear required in a social situation or fear of a significant person for example the teacher. It is also not diagnosed if the disturbance is better accounted for by embarrassment related to having a language or communication disorder or if it occurs exclusively in the presence of a pervasive developmental disorder, schizophrenia, or other disorders like psychosis (APA, 2005). Typically, it is the school psychologist, school counselor, or social worker who is the first to be called to consider possible explanations for why the child is not speaking. Often, parents will believe this was a sudden onset, when in reality it may be the first time that speaking demands are placed on the mute child from someone other than their parents or other immediate family members. In some cases, parents may believe the problem lies with the classroom teacher or school climate because the mute child speaks freely at home. Adolescent with selective mutism disorders may have difficulty making friends or may have difficulty effectively communicating with teachers and extended caregivers, such as grandparents, aunts, and uncles. It is not uncommon for these adolescent to become emotional or overly sensitive when speaking and when demands are placed upon them. Adolescents with selective mutism may suffer from low self-esteem, feeling different from their peers which forces them into further silence and isolation (Wood, 2006). Most often, the layman or fantasists refer to selective mutism as a spiritual attack that prohibits oral expressions.

One of the basic components of the society is the family. The family is the first institution for the socialization of the child and from where the child learns cooperation and adequate child rearing practices. This is the first family unit for the child. A family unit according to Macionis & Plummer (2007) is a social group of two or more people related by blood or adoption that usually live together. Individuals are born into a family. Edoh (1984) maintained that, a family comprises three important members namely; father, mother and the adolescent. If there are no adolescents, the unit cannot be described as a family. Once a family is established by marriage a sequence of authority is also established in which the husband is the head and has some reserved powers in family affairs. The wife is the second in order of authority to the husband and has a representative power in all decisions affecting the family. As for the adolescent, they have to obey what the head of the family says with the support of their mother. Families could be nuclear, extended, single parent, and step parent families.

Berndth (2007) stated that, the single parent family has been one of the fastest growing types in most parts of the world. Single parent family has come into existence as a result of divorce, dissolution, death, separation and births out of wedlock. Adolescent from such families may suffer from guilt and loneliness, feelings of anger to mention a few. Young ones in single parent families' contend with intense emotions due to their parents' abrupt departure or death. For many adolescents, the absence of one of the parent's seems to have profound negative effect on them. Another family type is the stepparent family, Berndit (2007) pointed out that, this type of family comes into existence as a result of either a parent's divorce or death.

Adolescent in this type of family are found not to be well adjusted at home and at school; they may manifest behaviour problems that may affect their performance poorly at school. These adolescent tend to react negatively if one of their divorced parents remarries and they become part of a new family described as step family. Problem arises for these adolescent at this stage of development because of conflicting authority from the parents and new parents. But, because in step parent's family, monitoring is inadequate, and sometimes totally absent,

as a result the adolescents suffer from a number of conduct disorders. Many researchers have come to the conclusion that selective mutism may develop due to family dynamics that includes overprotective mother and an abnormally strict or very distant father. As at 2002, these factors have not been completely eliminated as causes of selective mutism in most cases, but it is generally agreed that they may be associated with selective mutism.

Researchers tend to explain that, adolescents with the disorder may have inherited predisposition to anxiety. They often manifest temperaments, which are hypothesized to be the result of over-excitability of the area of the brain called the amygdala. This could cause anxiety, a development that shows that individuals are overwhelmed, especially in unfamiliar situations that may cause the adolescents to “shut down” and not to be able to speak. In addition, many adolescents with selective mutism disorder are believed to have some auditory processing difficulties (Adelman, 2007).

Adolescents with selective mutism often display severely inhibited personality temperaments. Studies show that individuals with inhibited temperaments are more prone to anxiety than those without temperaments (Manassis & Bradley, 1994). When confronted with a fearful scenario, the amygdala receives signals of potential danger from the sympathetic nervous system and begins to set off a series of reactions that will help individuals protect themselves. In the case of adolescents with selective mutism, the fearful scenario in social settings such as birthday parties, school, family gatherings, routine errands. Hence, this study intends to examine personality and sociological factors on selective mutism among secondary school adolescents.

## **OBJECTIVES OF THE STUDY**

The objective of this study is to examine the influence of personality and sociological factors on selective mutism among secondary school adolescents. But in specific terms, the study intends to find out:

1. Whether personality factors (neuroticism extraversion, and openness to experience) influence selective mutism among secondary school adolescents?
2. Whether nuclear and extended family types influence selective mutism disorder among secondary school adolescents?

## **HYPOTHESES**

1. Personality factors (neuroticism, extraversion, and openness to experience) do not jointly and independently influence the development of selective mutism among secondary school adolescents.
2. There is no significant difference between nuclear and extended Family types that influence Selective Mutism disorder among secondary school adolescents.

## **RESEARCH METHOD AND PROCEDURES**

180 secondary school adolescents from Ika North/East LGA of Delta state, Nigeria was used for this study. They were randomly and independently selected for the study using purposive sampling technique. This technique is appropriate for this study because the researcher is only interested in the adolescents with the disorder and those who showed symptoms of

selective mutism. Two adopted instruments were used to collect data for this study. They include; Skills Deficit Diagnostic Instrument (SDDI), and the revised Neo-personality inventory (NEO-PI-R). The test re-test was used to determine reliability and the scores obtained was 0.75 and 0.76 respectively.

**DATA ANALYSIS**

Data collected was analyzed with multiple regression for the first hypothesis while t-test was used to analyze the second hypotheses.

**Ho 1:** Personality factors (Extraversion, Neuroticism and Openness to Experience) do not jointly and independently influence the development of selective Mutism among secondary school Adolescents

**Table 1: Showing the influence of personality factors on selective mutism**

Variables	F-Ratio	R	R <sup>2</sup>	Adj. R <sup>2</sup>	t	P	
Extraversion	21.266	.516	.266	.254	.307	4.405	.000
Neuroticism					-.226	-3.187	.002
Openness to Experience					-.157	-2.262	.025

The table above showed that the linear combination effect of Personality factors (Extraversion, Neuroticism and Openness to Experience) on the development of Selective Mutism among secondary school Adolescents was significant ( $F(3,176) = 21.266$ ;  $R = .516$ ,  $R^2 = .266$ ,  $Adj. R^2 = .254$ ;  $P < .05$ ). This implies that, the independent/predictor variables jointly accounted for a variation of about 27%. Furthermore, the result of the study shows the relative contributions of the independent variables: Extraversion ( $\beta = .307$ ), Neuroticism ( $\beta = -.266$ ) and Openness to Experience ( $\beta = -.157$ ) and this shows that, the results of data analysis of all the independent variables were found to be significant ( $P < .05$ ).

**Ho2:** There is no significant difference between nuclear and extended family types that influence Selective Mutism disorder among secondary school adolescents

**Table 2: Showing the influence of family types on selective mutism**

Family type	N	$\bar{X}$	Std.Dev.	Crit-t	Cal-t	df	P
Nuclear	89	30.28	5.07	1.96	5.765	178	S
Extended	91	34.24	4.09				

The result of data analyzed showed that, nuclear family had  $\bar{X} = 30.28$ ,  $SD = 5.07$ , extended family  $\bar{X} = 34.24$ ,  $SD = 4.09$ , with a cal. t. 5.765,  $df = 178$ , crit. t. = 1.96. Since cal. t is higher than the crit. t. it therefore means that the hypothesis of no significant difference is rejected. That is, there is difference between nuclear and extended family on the development of selective mutism. Extended family influences the development of selective mutism among secondary school adolescents studied (see table 2 above)

## **RESEARCH FINDINGS AND DISCUSSIONS**

From the result of this study personality traits of neuroticism and extraversion jointly influence selective mutism among secondary school adolescents. This result is in agreement with earlier works carried out by Paris (2000) who found that, neuroticism influences mutism among adolescents because strong emotion to adverse events affects individuals who are high on this dimension and are more sensitive to stress because their responses are more rapid, more intense and slower to return to baseline. Individuals who are high on neuroticism are more susceptible to psychological distress, irrational ideas, and have less deficient coping skills which could result in selective mutism (Schinka, 2004; Sen, 2004; Stein & Bienvenu, 2004). Conversely, those who are low on the trait of neuroticism are able to “shake off” stressful events and socialize freely with others in situations where it is expected. As a result, they are better equipped in the time of distress to avoid the rampage effect of mutism.

Findings by Lauterbach & Vrana (2001) showed that, neuroticism often exaggerate the impact of an event. For example, when under stress, people respond in habitual ways that is, people scoring high in neuroticism might be easily predisposed to develop selective mutism as they could become anxious, nervous, and depressed. Conversely, Chess & Thomas, (2009) stated that, adolescents who are low in extraversion personality type have difficulties adjusting to change and new situations, presenting withdrawal responses, a condition that will facilitate selective mutism. In addition, Kessler (2001) reiterated that, the way an individual react in social settings is often a function of the level of extraversion. In other words, individuals who are high on extraversion and have a positive perception about self, optimism, and interact freely with peers, while those who are low on extraversion and respond negatively to ugly experiences could be favourably predisposed to develop selective mutism.

It could be recalled that, the result of this study rejected the null hypotheses of no significant difference between nuclear and extended family. That means, extended family type influences the development of selective mutism among adolescents. This findings support the result of Silverman (2007) who stated that, extended family type where high levels of parental negativity and/or the absence of parental warmth, and frequent parental attempts at rigidly controlling the child’s behavior have been frequently linked to child anxiety symptomatology and the development of selective mutism. Higher levels of familial conflict and lower parental expectations regarding their adolescent’s ability to cope with stressful situations have also been linked to symptoms of child anxiety and consequently, the development of selective mutism.

## **CONCLUSION AND RECOMMENDATIONS**

Selective mutism is described as “persistent failure to speak in situations” where it is expected that the adolescents will naturally speak (American Psychiatric Association, 2000). Adolescents with selective mutism often interact, and communicate verbally within comfortable surroundings, such as the home or with trusted peers. However, when placed in structured social settings such as school, they are mute and socially withdrawn. The findings clearly showed that, neuroticism and extraversion personality and family types could cause the development of selective mutism among adolescents. While, openness to experience personality does not however, it is therefore recommended that, Individuals with mutism disorder, including those already with the symptoms should be provided with a strength – based approval than a deficit – based one that is, providing them with high stimulation



learning environments grounded in what they enjoy to do and can succeed in. This will amount to giving them a kind of educational psycho-stimulation that will make them work well and adequately in order to adjust to their environments-whether school or home..

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