



School Refusal

How to support children and young people who actively avoid school...



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What is School Refusal?

There are many different definitions out there on the internet with regards to School Refusal, I have chosen the following two as they are non-diagnosis specific to begin with focussing more on the anxiety being the route of school refusal. This will give us a platform to explore what is happening when the overlap with the Autistic Spectrum happens.

The first definition is taken from an online self-help forum - <http://www.schoolrefuser.org.uk/>

“The term ‘school refusers’ can incorporate pupils with varying difficulties who, for whatever reason, do not attend school regularly. Research has shown that practitioners use the term ‘school refuser’ in different ways. Sometimes it is used interchangeably with the term ‘school phobics’, but at other times school refusers refers to a broader group of pupils with more general issues of non-attendance relating to disaffection.

Children who are very anxious, have problems with social relationships, are bullied, have poor literacy or numeracy skills, or who become disaffected, may refuse to go to school for prolonged periods.

The school refuser may remain at home with their parent's knowledge or may set off for school as normal but truant during the day.

The second definition is taken from a site dedicated to Anxiety - <https://www.anxietybc.com/educators/school-refusal>

What is School Refusal?

Children can have difficulty attending school due to a variety of factors, ranging from post-holiday blues to test anxiety, as well as peer teasing or conflict, and academic pressures. When these difficulties are fleeting, resulting in minor complaints or a rare day off from school, most families can cope without intervention. However, some youth struggle to attend school on a more consistent basis.

These youth typically refuse, or attempt to refuse, school for four distinct reasons:

- To escape from school situations that cause distress (e.g. Riding on the school bus, a teacher, or a particular class or area of school)
- To escape from unpleasant social or performance situations (e.g. Playing or working with peers, speaking or reading in front of the class, or attending assemblies)
- To get attention from others (e.g. To spend time with a parent)
- To pursue fun activities outside of school (e.g. To spend time with friends, go to the mall, or to be home alone sleeping, watching TV, etc.)

Some families can easily identify a single reason for why their child is struggling; yet for others their child's presentation of school refusal may be vague, diverse, or even confusing. For example, some children are unable to identify any specific fear or concern, while other children provide diffuse or nonsensical reasons. Others still, appear to fall into many or all of the above categories. Regardless of the reason/s, school refusal can significantly interfere with or limit a child or teen's life. Youth who refuse school can fall behind or fail to meet academic milestones, have difficulty developing and maintaining friendships, and become isolated from peers, and miss opportunities to learn new things and engage in fun activities. Some youth may also engage in high-risk behaviours, such as drug or alcohol use to manage the boredom that comes from lengthy and unstructured time out of school.

A Child and Adolescent Mental Health Services Definition of School refusal -
<http://www.younghealthymindsni.co.uk/faqs/school-refusal/>

School refusal is the term used to describe children and young people who refuse to attend school. This is a complicated issue that can cause children and families a lot of upset. Some young people can stop attending school regularly due anxiety related to either being in school, or getting on in social situations in school. Other young people refuse to go to school because they prefer the life they have at home – with TV and x-box! Some young people are worried about being away from home, because their parents have difficulties such as mental health problems. The law says that all young people under the age of 16 must be in full-time education. If a lot of school is missed, families get referred to the Education Welfare System and parents can be taken to court. It is important that young people get an education, but also that they get to mix with other people their age. Being busy and active is also important for your mental health. If a young person is coming to CAMHS and an emotional problem is making it hard to go to school, we will work with you to overcome this. With hard work from you and your parents, it is possible to overcome your fear and get back into a school routine.

Let's start by exploring some of the information gathered out there, where better than when I stumbled upon an article in the Guardian entitled "Jenn Ashworth: Why I refused to go to school". Again let's remember we remain non-diagnosis specific at this point.

<https://www.theguardian.com/education/2012/jan/13/jenn-ashworth-refusing-to-go-to-school>

"I'm not the first or the last to do this. There's even a name for it: school refusal. They distinguish it from common-or-garden truancy because there's no attempt to deceive – I never pretended to get the bus. **Us school refusers are normally academically bright or, if not bright, at least willing. That was me.** When school, convinced that I was ill in mind if not in body, sent work for me to do at home, I'd sit up in my bedroom and complete it, arranging my books inside a bag that never left the house. When I did go outside (which was rare), I'd haunt the library. School refusers are, apparently, depressed. They are anxious. It's a phobia, of a sort."

This is a key snippet of the article as it seeks to show that even those academically able are able to become school refusers, it is not just about those who struggle academically. It is also important to note that she explains that school refusal is a child or young person that has no intent to not go to school, there is no pretence of attempt to deceive, they simply cannot go.

Now onto some much needed research. (As with much research out there it is led by the American's so just be weary of some of the terminology)

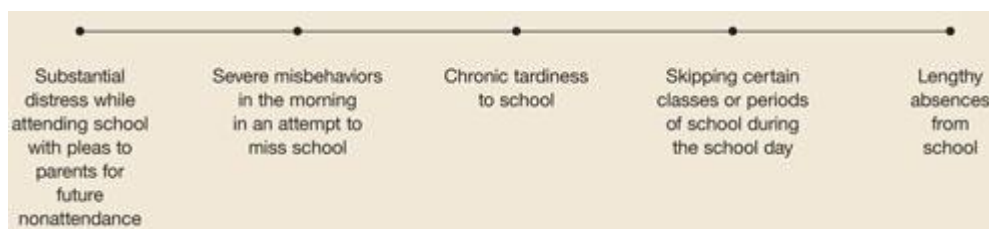
Dealing with school refusal behavior: A primer for family physicians
J Fam Pract. 2006 August;55(8):685-692

Author(s):

Christopher A. Kearney, PhD - University of Nevada Las Vegas

Child-motivated refusal to attend school or to remain in classes for an entire day is not that uncommon. The problem affects 5% to 28% of youths at some time during their lives and is often referred first by parents to the attention of a family physician. The behavior may be viewed along a spectrum of absenteeism and a child may exhibit all forms of absenteeism at one time or another. In this article you will learn characteristics of school refusal behavior to watch for and assess, and treatment strategies for youths aged 5 to 17 years. You will also find advice and techniques.

A child may exhibit each behaviour on the below spectrum at different times:-



Characteristics of young people with school refusal behaviour

School refusal behaviour is a term that encompasses all subsets of problematic absenteeism, such as truancy, school phobia, and separation anxiety. Children and adolescents of all ages, and boys and girls alike, can exhibit school refusal behaviour. **The most common age of onset, however, is 10 to 13 years.** In addition, youths who are entering a school building for the first time, especially High School and junior school are at particular risk for school refusal behaviour. Little information is available regarding ethnic differences, although school dropout rates for Hispanics are often considerably elevated compared with other ethnic groups.

Approximately 52% of adolescents with school refusal behaviour meet criteria for an anxiety, depressive, conduct-personality, or other psychiatric disorder later in life.

Common symptoms that could signal school refusal behaviour

Internalizing/Covert Symptom

Depression

Fatigue/Tiredness

Fear and Panic

General and social anxiety

Self-consciousness

Somatization - the manifestation of psychological distress by the presentation of bodily symptoms.

Worry

Externalizing/Overt Symptom

Aggression

Clinging to an adult

Excessive reassurance-seeking behaviour

Noncompliance and defiance

Refusal to move in the morning

Running away from home or from school

Meltdowns and crying

Primary psychiatric disorders amongst children and young people with school refusal behaviour

Diagnosis	Percentage
No diagnosis	32.9%
Separation Anxiety Disorder	22.4%
Generalized Anxiety Disorder	10.5%
Oppositional Defiant Disorder	8.4%
Major Depression	4.9%
Specific Phobia	4.2%
Social Anxiety	3.5%
Conduct Disorder	2.8%
Attention deficit/hyperactivity disorder	1.4%
Panic Disorder	1.4%
Enuresis	0.7%
Posttraumatic Stress Disorder	0.7%

Anxiety, School Refusal and Autistic Spectrum Conditions

Anxiety – including social anxiety – is very common among children and teens on the autism spectrum. Many of these kids have a particular problem going to school. In fact, the problem is so common that we have a term for it: school phobia, or school refusal. Sometimes, school phobia involves the broader fear of leaving the house, also known as agoraphobia. Sometimes these phobias stem from a specific fear such as a fear of having a panic attack in public. In other cases, it reflects more general social anxieties and fears around embarrassment or humiliation in public.

The first step in this process involves helping the child or teen identify the root of his or her fears. In second step involves taking small, incremental steps to approaching the feared situation and becoming more comfortable, or “habituated,” with the situation.

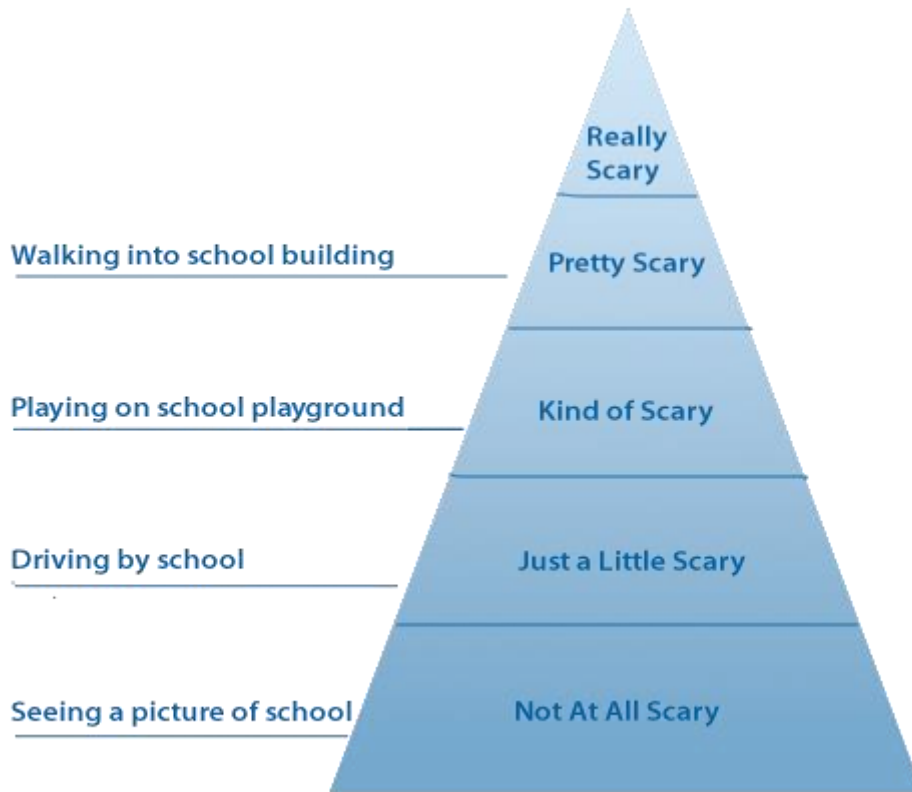
School refusal is the emotional distress faced by children, with and without an ASD, in response to the idea of going to school. Refusal to go to school is common among students who are just starting school or are in a time of transition, such as starting high school. Regardless of how or when your child is showing you that he or she does not want to go to school, it is important to find out why this is the case. Only then can you provide your child with effective strategies for coping with the aspects of school that he or she finds overwhelming.

Figuring out the 'why'

In order to help your child manage anxiety toward school it is important to consider the function of his or her school refusal behaviour. Like other problem behaviour, school refusal has two main functions: attention and escape/avoidance. For example, younger children may refuse to go to school to gain parental attention (Kearney, Pursell, & Alvarez, 2001). Older students may seek to avoid social or academic situations. For students who do stay home, school refusal may be positively reinforced by alternatives, such as playing with preferred objects at home or spending the day with mom or dad (Heyne & King, 2004). Play detective and find out what function your son’s or daughter’s school refusal behaviour is serving.

Fear Ladders

For refusal that is functioning as an escape or avoidance of school, try using a fear ladder (see below). Fear ladders help children identify the level of anxiety experienced at each step involved in going to school (e.g., riding the bus, walking through the hallway, etc.). As such, they help children identify which parts of school they can cope with and which components of school they find overwhelming.



Fear hierarchy for school refusal (Peacock & Collett, 2010)

Depending on your child's age, reading level, and language use, you may choose to use a fear ladder that is based on pictures rather than words.

Looking at ASD and helping students with ASD attend school I came across the following article in the 'SEN' Magazine - <https://senmagazine.co.uk/articles/articles/senarticles/school-refusal-how-can-we-help-those-with-asd-attend-school>

Attending to school refusal

Steve Tyler looks at what can be done to help students with ASD attend school

Some young people with autistic spectrum disorders (ASD) have extended absences from school. Take Paul, for example. Paul is an able student, as highlighted by his recent results at GCSE. However, he has experienced long-term issues with school attendance. These started at primary school, where he complained of feeling unwell. Although medical investigations proved inconclusive, it was apparent that something was wrong. As a result, he received support from a local child and adolescent mental health service. From Year 4, it was evident that his mental health meant he was not well enough to go to school, and Paul started receiving home tuition.

When he reached Year 10, Paul was referred to a non-maintained special school for young people with ASD that had a discrete centre for those who have been out of formal education for some time. Initially, Paul attended the centre on a part-time basis. As he became familiar with the staff and other students, it quickly became a full-time placement. Paul successfully achieved A* results in maths and science, as well as other qualifications, before taking up a science course at sixth form college.

Paul's story is not particularly unusual among young people with ASD. Although extended non-attendance of mainstream schools is a pattern of behaviour that has long been recognised, a review of recent reports on the issue suggests that there remains little agreement as to terminology and underlying causes (Archer et al., 2003; Pelligrini, 2007; Kearney, 2008). However, one recurring thread that runs through reports is that many of these children and young people show signs of anxiety, including social anxiety.

Anxiety and stress

Young people with ASD are more likely to be excluded from school than any other students and their challenging behaviour, which is often the result of anxiety, may be the most significant factor. The classroom can be a daunting place that provokes this emotion, although the reasons for the apprehension may be different from those that concern the typical pupil.

Given the nature of the condition, young people with ASD have much to be anxious about in a school setting. It has been argued that they follow a dual curriculum. As well as following the set curriculum, there is a social curriculum, comprising areas of social understanding and skills that are usually intuitively understood by other pupils. This can cause a lot of additional pressure for students with ASD.

Misunderstandings

Modes of speech that are commonly used to enliven lessons can be misunderstood by students with ASD. For example, at the end of a workshop run by a colleague of mine, in which jokes were explained to a group of young people with ASD, one student said: "I still don't understand why others find them funny, but now at least I know that they are not laughing at me." For some young people, the pressure of social interaction and communication may be just too much and could contribute to extended school non-attendance.

Cognitive differences, such as having a narrow focus of attention, leading to a failure to understand lessons, as well as problems with organisation and planning are also likely to have an impact on the pupil's emotional wellbeing. Increasingly, there is evidence suggesting that young people with ASD experience sensory differences and areas such as a noisy dining hall may make school a difficult place to tolerate.

Workloads and strains

Young people with ASD tend to be less flexible in their thinking and behaviour than others, which can put them at a distinct disadvantage in the classroom. This can manifest itself in a number of different ways, for example, not being able to spend time following a specialist interest may cause concern for some.

Some young people with ASD are perfectionists and set themselves very high standards which may be difficult to achieve. One student, having achieved A grades in almost all his work during the first term at secondary school, found the pressure of maintaining this high standard overwhelming. This was a significant factor in causing him to miss school for long periods of time, because in his mind, not going to school was better than going and "failing".

Many young people with ASD also find undertaking school work at home extremely hard, not because the work itself is difficult, but because it is at variance with their established home routine. Failure to complete homework, however, may lead to obvious consequences in school.

Bullying, which may occur because the pupil is perceived by others as being different, is reported by many pupils with ASD (Humphrey & Lewis, 2008). Fear of the behaviour of others may also be an important factor contributing to non attendance at school.

A helping hand

Given these difficulties, it is remarkable that some young people with ASD are able to attend school at all. However, there are things that can be done to support students in these situations.

Kearney (2008) argues that the school climate and the feeling of being connected to the school are important. In Paul's case, he was put into a small group where he had the opportunity to build relationships with pupils and staff. He was provided with support from a speech and language therapist to develop further social understanding and skills, and he was also given some down time when he didn't have to engage with others. The pace of learning was adjusted to a level he could cope with, and the reduced curriculum he followed allowed him time within the school day to focus on his special interests.

Paul was also given the opportunity to discuss his autism and to learn more about it. He had been diagnosed with Asperger's syndrome and was still coming to terms with this. He once said: "Sometimes my Asperger's syndrome is like a little thing inside me and sometimes it is a big thing that I'm in the middle of". Paul needed help to make sense of this, and support when his autism became "too big".

Perhaps most importantly, Paul needed to know that he was valued, would not be pushed into things that he felt he could not manage, and that he had a degree of control over his school life.

Finding the solution

Prevention is usually better than cure, as once a young person stops going to school, it is often hard to go back. Although Paul's return to education was facilitated by a specialist centre, mainstream schools can follow these examples of best practice to support young people with ASD – and there are some that do. For schools that need support with such students, there is help available.

However, attendance at mainstream school – or any school setting for that matter – is not necessarily always the priority. Sometimes, the challenges the young person with ASD faces are too great. In these instances, the priority is to ensure that the emotional wellbeing of the individual is promoted and maintained and this is achieved through understanding and personalisation.

General Strategies and strategies specific for Autistic Spectrum Conditions

Gradual reintroduction to school

A preferred approach to resolve school refusal behaviour usually involves gradual reintegration to school and classes. This may include initial attendance at lunchtime, 1 or 2 favourite classes, or in an alternative classroom setting such as a guidance counsellor's office or school library.

Gradual reintegration into a regular classroom setting may then proceed.

If possible, a child should remain in the school setting during the day and not be sent home unless intense medical symptoms are present.

A recommended list regarding the latter includes frequent vomiting, bleeding, and temperature greater than 100°F, severe diarrhoea, lice, acute flu-like symptoms, or an extreme medical condition such as intense pain.

Exposure is a key component for students who exhibit school refusal behaviours, as the ultimate goal is to have them attend school willingly and on a full-time basis. The first step is engaging your child and his or her teachers in conversations about going back to school and determining which coping strategies (described above) your child can use in situations he or she finds overwhelming. Be sure to begin exposure with situations that are “just a little scary” to ensure that that your child experiences success (Peacock & Collett, 2010). Next, try a step-by-step approach, in which your child attends school in steps, for example, attending one class the first day, two the next, etc. For each level of exposure, children are taught a strategy (e.g., deep breathing) to cope with the situation and calm themselves down. It is also important to ensure that a parent, teacher, or support worker is with the student to provide coaching when distress is experienced to help the student successfully retrieve relaxation techniques (Peacock & Collett, 2010). As your child becomes better practiced at retrieving these strategies, fade adult support to foster independence in each situation.

Child-based

Anxiety management techniques include relaxation training, breathing retraining, cognitive therapy (generally for youths aged 9–17 years), and exposure-based practices to gradually reintroduce a child to school.

Parent-based

Contingency management techniques include establishing morning and evening routines, modifying parental commands toward brevity and clarity, providing attention-based consequences for school nonattendance (e.g., early bedtime, limited time with a parent at night), reducing excessive child questioning or reassurance-seeking behaviour, and engaging in forced school attendance under strict conditions.

Family-based techniques include developing written contracts to increase incentives for school attendance and decrease incentives for nonattendance, escorting a child to school and classes, and teaching youths to refuse offers from peers to miss school.

Coping strategies

For those aspects of school that your child finds overwhelming and has difficulty coping with, teach them calm-down strategies, such as progressive muscle relaxation and deep breathing. Strategies such as these will help your child control his or her anxiety in situations he or she finds difficult, and are commonly taught to students as a means of self-regulation or coping in a variety of situations. During progressive muscle relaxation, children are taught to recognize the difference between when their muscles are tense and when they are relaxed and practice relaxing through tense-release exercises of the major muscle groups (Wimmer, 2003). Several scripts have been developed for progressive muscle relaxation; guided imagery may also be incorporated for younger students, such as “squeezing lemons” when tensing their muscles (Heyne & King, 2004).

Social skills instruction

Many students with ASD have some component of social skills instruction at school. This area of focus will be particularly important for students who identify social situations at school as those they find really scary. Talk to the school counsellor or your child’s case manager about the opportunity for social skills instruction focused on the “really scary” situations identified by your son or daughter. Instruction should involve modelling of the desired social behaviours, rehearsal through role-play, and corrective feedback and reinforcement.

Take Home Message

School refusal is a common problem among students, both with ASD and without. Often times, students refuse to go to school as a result of distress or anxiety experienced in particular situations at school. We can help children self-manage in these situations by teaching coping strategies, teaching social skills, and exposing them to school gradually. It is essential that home and school work together to coach, model and prompt these strategies.

Approach the school

- You can go and speak to the school, try to find out (if you don't already know or suspect why the refusal is occurring) why this is happening to your child.
- Speak to a member of staff who you feel comfortable with and where possible, follow this up with an email to keep a track of the communication and a record of any attempt to liaise with school.
- Try to be open and approachable. Schools are there to provide support to the child and in the majority of cases will want to support your child back to school. Ask school if there is a counselling service available to pupils as this may be helpful, enquire about any pastoral support available.
- Keep the paths of communication clear, even if you are feeling frustrated and angry and try not to respond emotionally to what may feel like criticism.
- If you work with the school to try to improve attendance, this will demonstrate good will to Education Welfare, which can be useful if non-attendance becomes severe or permanent.

Seek advice from GP

See your GP and again ensure it is a GP that you feel comfortable talking with. If that means waiting a few extra days for the appointment then so be it. Better to wait a few days and be heard, than to take an appointment offered and leave feeling judged and frustrated.

If the refusal is ongoing or you are worried about your child's mental health, ask for a referral for your child to CAMHS (Child and Adolescent Mental Health Service) They are the service that are there to help when children are experiencing difficulties with their mental health and wellbeing. There will be a reason for school refusing even if it does not seem obvious.

CAMHS are available in every area and have counsellors, psychologists and psychiatrists, although you may have to ask about this service and there could be a waiting list.

Treat the underlying cause of the refusal for example, anxiety, may help with communicating with your child about any difficulties around attending school.

Seek a Statutory Assessment as soon as possible

Use the Education, Health and Care Plan process to identify SEN needs relating to the reasons for school refusal.

**[The National Autistic Society - School refusal strategies -
http://www.autism.org.uk/about/in-education/exclusion/school-refusal-strategies.aspx](http://www.autism.org.uk/about/in-education/exclusion/school-refusal-strategies.aspx)**

Autistic children and young people can find the school environment challenging and they can sometimes refuse to attend. School refusal may not just happen one day, it may continue until the reasons behind it have been identified and addressed.

Here we look at reasons that could be behind this. We also suggest strategies to try at home and school to help them maintain school attendance or reintegrate them back into school.

Children and young people on the autism spectrum can face additional pressure at school. For example they may:

- Lack social skills that are intuitive to others. These can be very complex and they may struggle to maintain social relationships with their peers.
- Have difficulty coping with the curriculum. This may be because they have reduced focusing skills and difficulty with understanding questions and/or text.
- Struggle to cope with the demands of a school timetable due to difficulty with organisation and prioritising.
- Have a sensory processing disorder that makes it difficult for them to tolerate the noise and busy school environment.
- Be striving for perfection in their work and may feel that anything less means they have failed.
- Find transitions, such as moving classroom or changing teacher causes anxiety at school.
- Have separation anxiety, finding it difficult to be apart from family, or away from the familiar routines of home.

If your child is unwell due to stress or any other condition that means they will be absent for longer than a few days, then you should get a medical certificate from their GP. You should also let the school and the local or education authority know and discuss arrangements for alternative education.

Reasons why your child or young person may be refusing school

Consider whether there is a pattern to the absences. Are they trying to avoid a particular situation, lesson or person that causes anxiety?

Speak to a member of staff at school who knows your child well and ask for their help. They may be showing signs of anxiety in school at particular times. Alternatively, your child may display different behaviour at home to that in school.

Consider whether your child may be being bullied. Or, is your child misinterpreting the actions and intentions of others as hostile when they are not?

Strategies for home

If your child starts to become reluctant to go to school then it is important to take action early. Some of the following may help:

- Encourage your child to communicate with you about the problem. Using visual supports may help. Ask your child to rate events or places at school on a scale from “not scary” to “very scary”. This may help you to see when and where the problems occur, and help build your child’s resilience.
- If you have an understanding of the reasons behind their reluctance, then share it with school staff.
- Create a worry book for your child to record anxiety during the school day. If appropriate, read the book together as part of their evening routine. You can then help them deal with any worries by suggesting how to cope with them in future.
- Reward and praise any progress, such as completing something that they find difficult or putting on their school uniform and walking past school.
- Provide structure at home by using visual supports.
- Although difficult, try to work with them to help develop their social skills.
- Help your child to understand the benefits of education.

Strategies to discuss with school

The help your child needs will depend upon the causes of their anxiety.

There may be a specific problem which requires immediate action from school. For example, your child may be being bullied.

Here are other triggers and strategies to consider:

School environment.

Many children and young people with autism have sensory sensitivities. There are specific strategies that can help with this, such as a calm and quiet place, a suitable work space or wearing ear defenders.

Does your child need more support at school, or that which is more effective?

They may need help with organisation, transition between lessons or some specialist input from a speech and language therapist to help them manage social complexities.

Use the understanding you have of your child to identify coping strategies that can be used in school and discuss them with the person responsible for special educational needs (SEN) or additional support needs (ASN) This could be something like time out cards, stress scales

Ask school if a member of staff that your child feels comfortable with could meet them at the school gate or from your car.

Your child may find it beneficial if they are given the opportunity to discuss their feelings at the end of each school day. Ask your child's teacher or support assistant if they could go through the timetable with them and ask them to give a mark out of ten for each lesson. For those lessons they score low, ask them why.

Suggest to school that they use your child's interest to help them learn. Intense interests can be used to differentiate work so that it motivates your child.

Think about ways that school can reward your child for small steps of achievement.

What if this doesn't resolve the problem?

If you feel that your child needs more support to help them reintegrate and progress at school then consider getting extra help for them in school.

If anxiety or other mental health conditions are contributing to your child's difficulty with attending school, ask your GP to make a referral to the Child and Adolescent Mental Health Service (CAMHS). They will have a team that includes psychiatry, clinical psychology, counselling and other therapies.

The school could involve the Education Welfare Officer, as their role is to work with schools, pupils and families to support regular school attendance.

If your child's school refusal continues then you may decide to choose a different school for your child or consider home education.

Emotionally Based School Refusal This guide has been written by Dawn Hull and Dr Jo Clarke of the Derbyshire Educational Psychology Service to provide information and guidance to primary and secondary school staff around the issue of Emotional Based School Refusal (EBSR).

<https://schoolsnet.derbyshire.gov.uk/site-elements/documents/keeping-children-safe-in-education/emerging-school-safeguarding-themes/emotionally-based-school-refusal-guide.pdf>

Indicators of EBSR: what you might notice

- ★ Difficulty attending school with periods of prolonged absence
- ★ Child determined not to leave home and stays away from school with the knowledge of the parent/carer
- ★ Patterns in absences, for example, particular days and/or subjects
- ★ A history of anxiety (including EBSR) in the family
- ★ Reluctance to attend school trips } Frequent absences for minor illnesses
- ★ Anxiety on separation and inappropriate dependence on family members e.g. anxiety expressed about the safety of those at home
- ★ Evidence of under-achievement of learning potential
- ★ Social isolation and avoidance of class mates or peer group
- ★ Regular absence without indication of anti-social behaviours
- ★ Challenging behaviours, particularly in relation to specific situations at school
- ★ The young person expresses a desire to attend classes but is unable to do so
- ★ Severe emotional upset with excessive fearfulness, outbursts of temper and complaints of feeling ill on school days
- ★ Depression and sense of isolation resulting in, low self-esteem and lack of confidence
- ★ Confusion or extreme absent mindedness shown in school due to lack of concentration resulting in, lower attainments
- ★ Physical changes i.e. sweating, sickness, aching limbs, headaches, panic attacks, abdominal pain, rapid weight loss or gain
- ★ Disruption of day-to-day activities that affect the family and put parents/carers under a great deal of pressure

Supporting a successful reintegration back to school

Good practice for schools includes:

- ★ Identifying a member of staff for the young person to 'check in' with throughout the day
- ★ Ensuring that any contributing school factors identified have been explored and addressed
- ★ Flexibility in terms of timetabling
- ★ On-going dialogue with parents, carers and the pupil
- ★ Informing staff, including supply teachers or cover staff, about the young person's difficulties and the agreed reintegration plan
- ★ Identifying a safe place or base in school that the young person can go to if needed
- ★ Utilising a pastoral support programme to identify the effective strategies being used with the young person. This can then be shared with all staff
- ★ Considering whether or not the Common Assessment Framework (CAF) and Team around the Child meetings (TAC) would be helpful in terms of bringing services, school and home together in planning and reviewing progress over time
- ★ Accessing services, as appropriate, to provide support to the family and to help address any contributing factors
- ★ Having access to a variety of school based interventions to support the pupil, which may include: buddying, mentoring or a Circle of Friends approach
- ★ Supporting the pupil or young person with managing anxious or difficult feelings.
- ★ This may be done through sessions with pastoral staff or for younger children through school-based resources such
- ★ Seeking advice from external agencies and developing staff awareness around the issue of Emotionally Based School Refusal (EBSR)

How we can help – by filling out the below questionnaire and emailing emma.grimbly@asdhelpphings.org.uk we can compile a report that gives an indicator as to the function the school refusal is seeking...

SCHOOL REFUSAL ASSESSMENT SCALE-REVISED (P)

Children sometimes have different reasons for not going to school. Some children feel badly at school, some have trouble with other people, some just want to be with their family, and others like to do things more fun outside of school.

This form asks questions about why you don't want to go to school. For each question, pick one number that describes you best for the last few days. After you answer one question, go on to the next. Don't skip any questions

The **School Refusal Assessment Scale-Revised (SRAS-R)**, developed by Christopher Kearney and Wendy Silverman, is a psychological assessment tool designed to evaluate school refusal disorder symptoms in children and identify their reasons for avoiding school. This self-report inventory, which is also available in parent response form, consists of 24 questions that measure the frequency with which a child experiences emotions and behaviours related to school attendance. Respondents are asked to answer each of the 24 items on a scale of 0 ("never") to 6 ("always").

The questionnaire takes about 10 minutes to complete and it is designed for use with children ages 5 and up. Several research studies support the SRAS-R as a reliable and valid measure of children's school refusal symptoms

Interpretation:

Function 1 = Child refuses school specifically because he or she is *distressed about something at school.*

Examples: school-related objects, places, or people that s/he wants to avoid; may have had negative experience(s) at school

Some mental health considerations: Panic disorder and/or Agoraphobia, Generalized Anxiety Disorder, Specific Phobias, Depression, and Suicidal Behaviours

Function 2= Child refuses school specifically because he or she *wants to avoid unpleasant social or performance situations at school.*

Examples: writing or speaking in front of others; meeting new people; interacting with aggressive peers; performing during recitals, tests, or athletic contests; or being in or approaching large groups of people.

Some mental health considerations: Social Anxiety Disorder, Depression, and Suicidal Behaviours

Function 3 = Child refuses school specifically because he or she wants to get attention from a significant other

Examples: you may see clinging, reassurance seeking, refusal to move, tantrums, interest in calling home, verbal demands for attention, guilt-inducing behaviour, and running away to get to a parent.

Child may have had a negative experience that changes behaviour towards significant other.

Some mental health considerations: Separation Anxiety, Oppositional Defiant Disorder or noncompliance to most parental commands

Function 4 = Child refuses school specifically because he or she wants to get tangible rewards from some source outside of school.

Examples: time with friends, alcohol/drug use, TV/video games, play time, outings in community.

Some mental health considerations: Conduct-Disordered behaviours, Substance Abuse, Lack of Motivation

*****Note: Any of the mental health considerations described above could apply to any function of school refusal. The lists are only those most commonly associated with each function. There are others that can apply to any function, including ADHD, Learning Disorders, and Developmental Disorders.***

The School-Refusal Assessment Scale - taken from Christopher A. Kearney, Anne Marie Albano When Children Refuse School: Assessment.

Please select the answer that best fits the following questions:

1. **How often does your child have bad feelings about going to school because he/she is afraid of something related to school (for example, tests, school bus, teacher, fire alarm)?**

Never	Seldom	Sometimes	Half the Time	Usually	Almost always	Always
<input type="radio"/> 0	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6

2. **How often does your child stay away from school because it is hard for him/her to speak with the other kids at school?**

Never	Seldom	Sometimes	Half the time	Usually	Almost always	Always
<input type="radio"/> 0	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6

3. **How often does your child feel he/she would rather be with you or your spouse than go to school?**

Never	Seldom	Sometimes	Half the Time	Usually	Almost always	Always
<input type="radio"/> 0	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6

4. **When your child is not in school during the week (Monday to Friday), how often does he/she leave the house and do something fun?**

Never	Seldom	Sometimes	Half the Time	Usually	Almost always	Always
<input type="radio"/> 0	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6

5. **How often does your child stay away from school because he/she will feel sad or depressed if he/she goes?**

Never	Seldom	Sometimes	Half the Time	Usually	Almost always	Always
<input type="radio"/> 0	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6

6. **How often does your child stay away from school because he/she feels embarrassed in front of other people at school?**

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

7. **How often does your child think about you or your spouse or family when in school?**

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

8. **When your child is not in school during the week (Monday to Friday), how often does he/she talk to or see other people (other than his/her family)?**

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

9. **How often does your child feel worse at school (for example, scared, nervous, or sad) compared to how he/she feels at home with friends?**

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

10. **How often does your child stay away from school because he/she does not have many friends there?**

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

11. **How much would your child rather be with his/her family than go to school?**

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

12. When your child is not in school during the week (Monday to Friday), how much does he/she enjoy doing different things (for example, being with friends, going places)?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

13. How often does your child have bad feelings about school (for example, scared, nervous, or sad) when he/she thinks about school on Saturday and Sunday?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

14. How often does your child stay away from certain places in school (e.g., hallways, places where certain groups of people are) where he/she would have to talk to someone?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

15. How much would your child rather be taught by you or your spouse at home than by his/her teacher at school?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

16. How often does your child refuse to go to school because he/she wants to have fun outside of school?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

17. If your child had less bad feelings (for example, scared, nervous, sad) about school, would it be easier for him/her to go to school?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

18. If it were easier for your child to make new friends, would it be easier for him/her to go to school?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

19. Would it be easier for your child to go to school if you or your spouse went with him/her?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

20. Would it be easier for your child to go to school if he/she could do more things he/she likes to do after school hours (for example, being with friends)?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

21. How much more does your child have bad feelings about school (for example, scared, nervous, or sad) compared to other kids his/her age?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

22. How often does your child stay away from people at school compared to other kids his/her age?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

23. Would your child like to be home with you or your spouse more than other kids his/her age would?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

24. Would your child rather be doing fun things outside of school more than most kids his/her age?

- | | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost always | Always |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 |

If you have a concern re your son/daughter you could ask for them to be placed under the Medical Needs Team at Norfolk County Council due to Anxiety

<https://www.norfolk.gov.uk/children-and-families/send-local-offer/introduction-to-send/roles-of-professionals-in-sen-support/local-authority-medical-needs-coordinator>

Norfolk's medical needs provision

- The Short Stay School for Norfolk are commissioned to provide this service
- School makes the referral (using SSSfN referral form)
- School will need to provide medical evidence (from consultant or GP) indicating the child is medically unfit for school – otherwise SCHOOL remain responsible for providing support
- Schools plan the work to be delivered by a home tutor (number of hours will vary based on how much the child can manage, determined by medical professional)
- Provision commences following initial planning meeting.
- Aim to reintegrate young person to the home school at earliest opportunity – not intended as long term provision
- Updated medical evidence is required (at least termly)

Who is the service for?

Parents can contact the Medical Needs Coordinator in order to discuss their child's specific circumstances relating to medical needs provision. This may be particularly appropriate in instances where they feel their child's medical needs are not currently being addressed. Schools can contact the Medical Needs Coordinator in order to obtain support, advice and guidance in relation to medical needs provision, both generally and in relation to specific cases. The Medical Needs Coordinator will also liaise with professionals and colleagues within both health and education as appropriate in order to ensure children with additional health needs are able to access a suitable education.

Norfolk County Council's named person is Sam Bartram, Medical Needs Coordinator

His working days are Wednesdays, Thursdays and alternate Mondays.

Contact Telephone Number: 01603 223609 and his email is sam.bartram@norfolk.gov.uk

Government statutory guidance

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

- *Duty is on the governing body/proprietor*
- *They must ensure that arrangements are in place to support pupils with medical conditions.*
- *Children to access and enjoy the same opportunities at school as any other child.*
- *Staff to be properly trained to provide the support that pupils need.*
- *Staff must not give prescription medicines or undertake healthcare procedures without appropriate training.*

No child with a medical condition can be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, governing bodies do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so.

Resources

<https://www.facebook.com/groups/134075460275220/> - Support for Professionals - School Phobia, Refusal & Separation Anxiety

Department for Education (2012) Improving Attendance at School
<https://www.gov.uk/government/publications/improving-attendance-at-school>

Department for Education (2013) Advice for School Attendance
<http://www.education.gov.uk/aboutdfe/advice/f00221879/advice-on-school-attendance>

West Sussex County Council Educational Psychology Service (2004) Emotionally Based School Refusal: Guidance for Schools and Support Agencies. West Sussex County Council, West Sussex Educational Psychology Service.

Northamptonshire County Council (2006) Anxiety – tackling it together: Information for Young People, parents, carers, teachers and other professionals. Hospital and Outreach Education.

North Somerset Council (2010) Emotionally Based School Refusal: guidance for education providers and support services in North Somerset. North Somerset, North Somerset Council.

<http://www.schoolrefusal.co.uk/>


https://www.amazon.co.uk/School-Refusal-Parent-Adolescent-Training-ebook/dp/B000SASXOW/ref=as_sl_pc_wdgt_ex?&linkCode=wey&tag=schphorefanxi-21

https://www.amazon.co.uk/Understanding-School-Refusal-Professionals-Education/dp/1843105675/ref=pd_bxgy_14_img_2?_encoding=UTF8&psc=1&refRID=DM4FJVS24WDZW522T9J2

<https://www.anxietyuk.org.uk/products/anxiety-condition/children-and-anxiety/school-phobia/>
- £2.50 to have delivered

Keep in touch

Find out more about how we can help you and your family, and how you can get involved with our work. Just fill in this form and post it back to us



Title
First Name
Surname
Address (line 1)
Address (line 2)
Address (line 3)
Town
Postcode
Telephone number
Mobile number
Email address

ASD Helping Hands would like to keep you informed about our services, upcoming news, events and fundraising activities. We will look after your data as set out in our privacy and data protection policy.

If you prefer not to receive information by post, please tick this box

If you prefer not to receive information by telephone, please tick this box

We'd like to keep in touch by email, if you are happy with this, please write your email address in the space provided above

What is the date of birth of the person you are contacting us about?

□□ / □□ / □□

Please return this form to:

Room 219 Breckland Business Centre
St Withburga Lane
Dereham
Norfolk
NR19 1FD

We would like to tailor our communication with you to ensure they are relevant to your interests.

What is your connection with autism?
(Please tick all that apply)

I am autistic

I am the parent/carer of someone on the Autistic Spectrum

Someone in my family is diagnosed with autism

I know someone who's autistic

I am a professional working in the field of autism

I have another connection with autism
Please Specify _____

I have no connection with Autism

“ASD Helping Hands will support all service users affected by an Autistic Spectrum Disorder (ASD) regardless of age or what stage of life they are at. We aim to offer guidance, practical advice and support whether you are personally affected or you are an associated family member, carer, friend or professional. We will actively champion the rights of all people affected by ASD’s and aim to make a positive difference to their lives while delivering a service that is accessible, reliable and trustworthy.”

The organisation is for all affected by the Autistic Spectrum, this covers a wide variety of difficulties. We believe that all families and individuals have the right to good quality information, support and guidance in order to promote empowerment to allow positive choices to be made, enabling access to the same opportunities as everybody.

Currently working across Norfolk and Suffolk

ASD Helping Hands

219 Breckland Business Centre
St Withburga Lane
Dereham
Norfolk
NR19 1FD

Autism Helpline: 01362 853018
Email: asdhelplinghands@gmail.com
Website: www.asdhelplinghands.org.uk

ASD Helping Hands is a voluntary organisation and relies on voluntary income to support its work, including the development of resources like this one for parents and carers

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