

## **Analysis of Information collected from Children and Parents in Bridgend County Borough looking at those with school avoidant behaviours and school attendance difficulties.**

The Children and parents completed six questionnaires about the behaviours presented by children in Bridgend regarding their school/lesson avoidance. The parents completed the School Refusal Assessment Scale-Revised (SRAS-R P) (Kearney & Silverman, 1993) and the Risk and Resilience Profiles 1 & 2 (Holder, 2022). The children completed the School Refusal Assessment Scale-Revised (SRAS-R C), the Strengths and Difficulties Questionnaire (SDQ) (Goodman, 2001) and the PERMAH questionnaire (Butler & Kern, 2015) based on the Positive Psychology ideas of Martin Seligman (2013). From these self-reported scores, we can create a picture of what functions are at play for the children when it comes to the difficulties of attending school and lessons.

Emotionally Based School Avoidance (EBSA) is, "... a broad umbrella term used to describe a group of children and young people who have severe difficulty in attending school due to emotional factors, often resulting in prolonged absences from school." (Thambirajah, Grandison & De-Hayes, 2008). The terminology covers School Avoidance, Truancy, School Withdrawal, Non-attendance and Anxiety-related non-attendance. When we consider children and young people and the impact EBSA has on them, we need to broaden our understanding of what could be at play for them. Berg et al. (1969) stated that EBSA criteria include difficulties in attending school, emotional distress, staying at home with the knowledge of parents, carers and school staff, and the absence of anti-social behaviours. EBSA takes into consideration the child's attendance, patterns in attendance and presentation at school, as well as transition points between home and school. It can also be seen as inconsistent attendance to school and not just complete withdrawal. According to Gulliford and Miller (2015), it affects roughly 1-2% of school-aged children.

In total, 25 children and parents from the Bridgend County Borough area completed the questionnaires. Of the 25 Children, 7 were male and 18 were female. The children completing the questionnaires were from Year 4 to Year 11, aged from 9 to 16 years old. The average age of the children was 13 (SD =1.63), for both males and females. One child attended a Welsh Medium school, and one child attended a Pupil Referral Unit.

### **SRAS-R C/P**

This questionnaire measures the function behind the school avoidance behaviours:

- Function 1 - Avoidance of School Stimuli,
- Function 2 - Avoidance of Social Situations,
- Function 3 – Separation Anxiety, and
- Function 4 - Tangible Rewards.

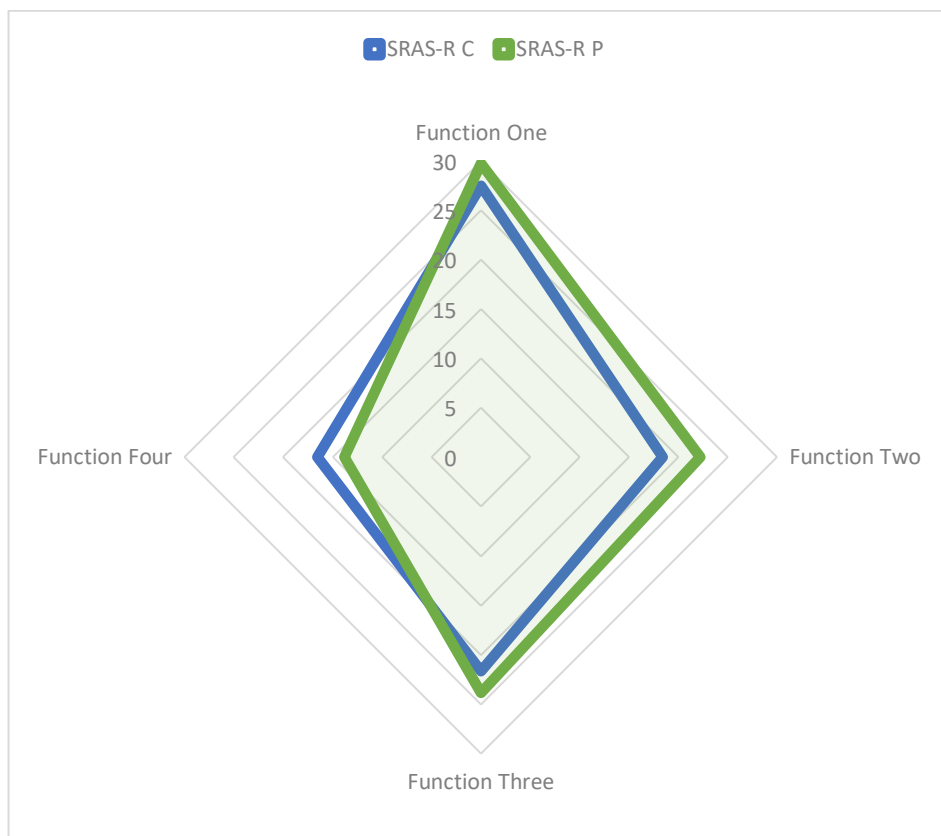
The SRAS-R C and P consists of 24 questions that the participants give a self-reporting score between 0 and 6, Never to Always. 25 children and families completed the questionnaire. These results have been averaged out to give an overview of possible functions behind the behaviours.

Breaking down the results, looking specifically at the most likely function scoring for both the Child and Parent questionnaires, we can see that Function 1 was the most common outcome

for both questionnaires, 68% and 76% of the outcomes for the Child and Parent questionnaires. As for the second outcome, 16% of the Parent questionnaires highlighted Function 3 whilst 12% of the Children questionnaires had outcomes that scored more than one function as the most likely, such as Function 1 and Function 3 scoring the same. Function 4 only appeared as the most likely function in 4% of the Children's outcomes, and not at all in the Parent outcomes. The Children's questionnaires also showed that Function 2, and Function 3, appeared as the most likely outcome 8% of the time. Combination of functions, and Function 2, appeared as the most likely outcome in 4% of the Parent questionnaires.

Looking at overall average scores, we can see how the Children and Parent questionnaires compare against each other.

| Test         | Function 1 | Function 2 | Function 3 | Function 4 |
|--------------|------------|------------|------------|------------|
| SRAS-R C     | 27         | 19         | 22         | 17         |
| SRAS-R P     | 30         | 22         | 25         | 14         |
| SRAS-R C S.D | 6.6        | 8.3        | 8.7        | 4.6        |
| SRAS-R P S.D | 5.1        | 7.9        | 9.6        | 5.2        |



The results show that both Parents (P) and Children (C) scored Function 1, the avoidance of school stimuli, as the most likely reason behind the school avoidance behaviours. This means that they could be avoiding specific aspects of the school environment that may evoke feelings of anxiety, fear, or distress. This can include attending certain lessons, interacting with teachers or peers, or engaging in certain school activities. They may start to feel

overwhelmed, sensing that they cannot cope with these demands. They may exhibit psychosomatic symptoms in response to their emotional state. This could include, stomach-aches or headaches, particularly when anticipating or being exposed to anxiety-provoking stimuli. They may also display other physical and behavioural responses such as crying, aggression, pleading, and attempting to stay at home. The behaviours may also be present whilst in school, such as frequently asking to go to the toilet or trying to visit safe spaces. Gaining a better understanding of the specific triggers can help with creating a suitable support plan, focusing on ways to ease their anxieties around school.

Both also scored Function 3, Separation Anxiety, as being another possible function behind the Children's school attendance difficulties. This would lead us to the suggestion that their behaviours could be related to having difficulties separating from important people in their lives. They may feel that something bad may happen to themselves or to those who are close to them if they are away from them. This might make it hard for them to focus on certain tasks and activities when in the classroom. As part of the avoidant behaviour, they may seek to elicit attention from their family by expressing feelings such as persistent worries, insecurity, and a need for reassurance. They may also attempt to stay near those who are close to them. This may get the attention and emotional support they desire. They may also try to seek a connection with their family in their behaviours. This might be through physical complaints, such as aches and pains, or through emotional responses such as tantrums and emotional outbursts, to display their levels of distress about the possibility of an anxiety provoking situation such as being away from their family. This may commonly be seen at home, reinforcing the idea that being at home provides them with the connection they desire with their families, ensuring that they are safe, therefore meeting their emotional needs.

It is worth noting that Function 2, Avoidance of Social Situations, was scored as another possible reason behind the school avoidant behaviour. This could lead us to consider that they may display signs of distress when in aversive social or evaluative situations. This may present as anxiety, agitation or even panic attacks. These social situations may include participating in drama, music, or PE, having to read aloud in class, being called upon in class by the teacher and even sitting tests and examples. They might try to avoid attending school on days when they might be expected to put themselves in a situation where they are being seen or observed by their peers or teachers. They might feel judged, have a fear of being criticised, or want to avoid not doing well. They may try to not attend or get themselves sent home from school by feigning illness or having emotional outbursts, which might be seen as challenging behaviour. Helping them to understand the anxieties and feelings that come when having the expectation of academic performance will support them in making positive progress in this area.

## SDQ

The 25 children completed the questionnaire that consisted of 25 questions to score the emotional, conduct, hyperactivity, peer problems and prosocial components. 5 of the questions were inversely scored. The scores, apart from the prosocial component, are added up to make a title score. The children then stated whether they feel they had difficulties in any of the components, whether that has a minor, major or severe impact on them, and how long they have been impacted by their difficulties, if at all. There were a further six questions that looked at the impact of the components on the child. These scores were self-reporting.

From the scores, we can see that 68% of the children scored Very High in the Emotional Component. 48% scored Very high in the Conduct, and 20% in the Hyperactivity component. 68% of the children scored the Peer Problems very high and 26% scored Very low in the Prosocial component. In the Total and Impact components, 88% and 80% respectively scored Very high.

The average scores show that:

| Component     | Score | Outcome   | S.D  |
|---------------|-------|-----------|------|
| Emotional     | 7     | Very High | 0.55 |
| Conduct       | 4     | Raised    | 0.45 |
| Hyperactivity | 8     | Very High | 0.55 |
| Peer Problems | 6     | Very High | 0.45 |
| Prosocial     | 6     | Lowered   | 0.45 |
| Total         | 25    | Very High | 1.71 |
| Impact        | 6     | Very High | 3.42 |

## Outcome

The SDQ scores indicate that the children might be experiencing some difficulties in their emotions, Hyperactivity, Peer Problem and Prosocial behaviours and their overall mental health and wellbeing. The questionnaires also showed that six have been minorly impacted by these difficulties, 11 have been affected majorly, and 9 severely. The questionnaires also highlighted that three have been impacted by their difficulties for 1-5 months, two for 6-12 months and 21 for over a year.

The very high score in the Emotional component indicates that the children experience significant emotional distress. This distress may manifest as anxiety, frequent worries, intense fears, or persistent sadness, which can disrupt their daily routines and overall mental health. The emotional challenges faced by the children may affect their ability to engage in typical activities and maintain healthy relationships. The children may struggle to regulate their emotions effectively, leading to frequent mood swings, outbursts, or emotional breakdowns. These difficulties in emotional regulation may significantly impact their ability to function in daily life, causing disruptions in their schoolwork, relationships, and overall wellbeing.

A raised score in the Conduct component reveals that the children exhibit more behavioural problems than typically observed in their age group. These behavioural issues might include tendencies towards aggression, defiance, rule-breaking, or disruptive actions. Such behaviours can strain relationships with peers and authority figures, creating a challenging

environment both at home and in school. The children's actions may be perceived as intentionally problematic, and they might face consequences that further complicate their social and academic experiences.

The very high score in Hyperactivity indicates that the children exhibit significant levels of hyperactive and impulsive behaviours. These behaviours may include difficulty sitting still, acting without thinking, interrupting others, and trouble focusing on tasks or instructions. The children's hyperactivity can interfere with academic performance and social relationships, leading to frustrations for both the child and those around them. This high level of activity and impulsivity can cause the child to miss important information in school and disrupt group activities, making it harder for them to succeed in structured environments.

The very high score in Peer Problems signifies that the children face considerable challenges in their social interactions with peers. These difficulties could include problems making and keeping friends, frequent conflicts, feelings of being bullied or excluded, and overall social isolation. Such issues can have a profound impact on the children's self-esteem and emotional well-being. The children might feel misunderstood and struggle to find their place in social settings, leading to withdrawal or further negative interactions with peers.

A lowered score in the Prosocial component indicates that the children show fewer positive social behaviours such as helping, sharing, and showing empathy towards others. This deficit might indicate challenges in understanding and responding to the needs and emotions of others, which can impact the child's ability to form and maintain strong, supportive relationships. The child might come across as indifferent or self-centred, potentially leading to further social isolation or misunderstandings with peers and adults.

The very high total score indicates that the children experience a significant overall level of difficulties across multiple domains of emotional and behavioural functioning. This cumulative impact suggests that the children's challenges are pervasive and affect various aspects of their lives. The high total score highlights the extent to which these difficulties permeate their daily experiences, affecting their interactions, performance, and overall sense of stability and security.

A very high score in the Impact component suggests that the child's emotional and behavioural difficulties significantly affect their daily life. These challenges likely interfere with academic performance, social interactions, and overall quality of life. The extent of the impact may be seen in the child's struggles to keep up with schoolwork, maintain friendships, and engage in typical activities. The child might face ongoing obstacles that prevent them from fully participating in and enjoying everyday experiences, leading to a cycle of stress and difficulty that affects their overall development.

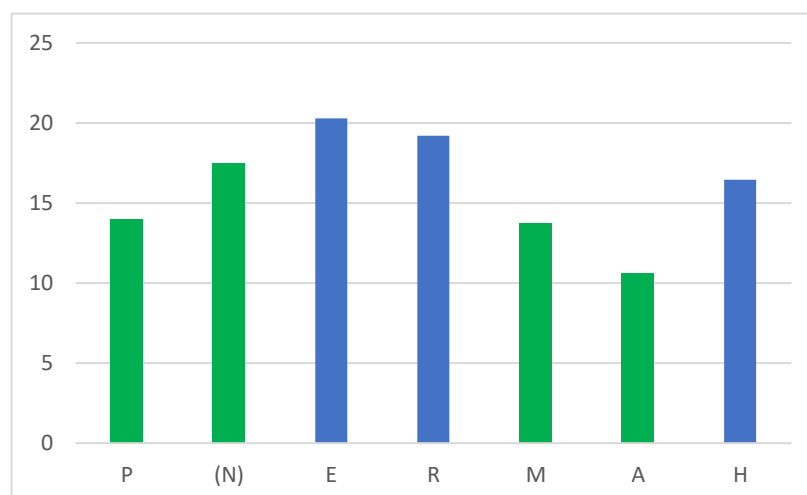
## PERMAH

In the book “Flourish” by Seligman (2013), he states that, “... wellbeing is a construct; and wellbeing, not happiness, is the topic of positive psychology.” And “... no one element defines wellbeing, but each contributes to it.” The idea was to move away from the idea of making people “Happy” by improving life satisfaction, but to improve their wellbeing and supporting individuals to flourish. Butler and Kern (2015) built on this idea, adapting the original 24 measures for PERMA, and adding a Health element. These were then completed as a self-reporting questionnaire by the child, scoring the questions from 0 to 10.

When looking at the results, we can see that only 48% of the 25 children scored over half in the Positive Emotions domain. In contrast, 76% of children scored over half in the Negative Emotion domain. 84% of children scored above half in the Engagement and Relationship domains, whereas 56% and 68% scored above half in the Meaning and Health domains. 72% of children scored less than half in the Accomplishment domain.

We can now see the average scores across all domains of the PERMAH questionnaires.

| Domain         | Score | S.D  |
|----------------|-------|------|
| Positive       | 14    | 5.33 |
| Negative (N)   | 17    | 4.96 |
| Engagement     | 20    | 7.04 |
| Relationships  | 19    | 4.44 |
| Meaning        | 14    | 5.83 |
| Accomplishment | 11    | 4.41 |
| Health         | 16    | 6.33 |



The Children’s PERMAH questionnaire outcomes reflect a mix of emotions and experiences. Their score for positive emotions suggests that they frequently experience happiness, joy, and contentment in their life. This indicates a generally optimistic and cheerful outlook, which can contribute positively to their overall sense of wellbeing and resilience in the face of challenges. However, their score for negative emotions indicates that they also contend with a significant level of negative feelings such as sadness, anxiety, or stress. It's essential to address these negative emotions to ensure their emotional wellbeing and cultivate a healthier mindset.

In terms of engagement, the children exhibit a high level of involvement and interest in activities. This suggests that they can become deeply engaged and invested in their pursuits, experiencing frequent states of flow and satisfaction. This high level of engagement bodes well for their overall happiness and fulfilment, as they are likely to derive a sense of purpose and accomplishment from the activities. Additionally, their strong score for relationships shows their ability to form and maintain meaningful connections with others. The children's positive relationships with family, friends, and peers provide them with essential support, companionship, and a sense of belonging, contributing significantly to their overall wellbeing and resilience.

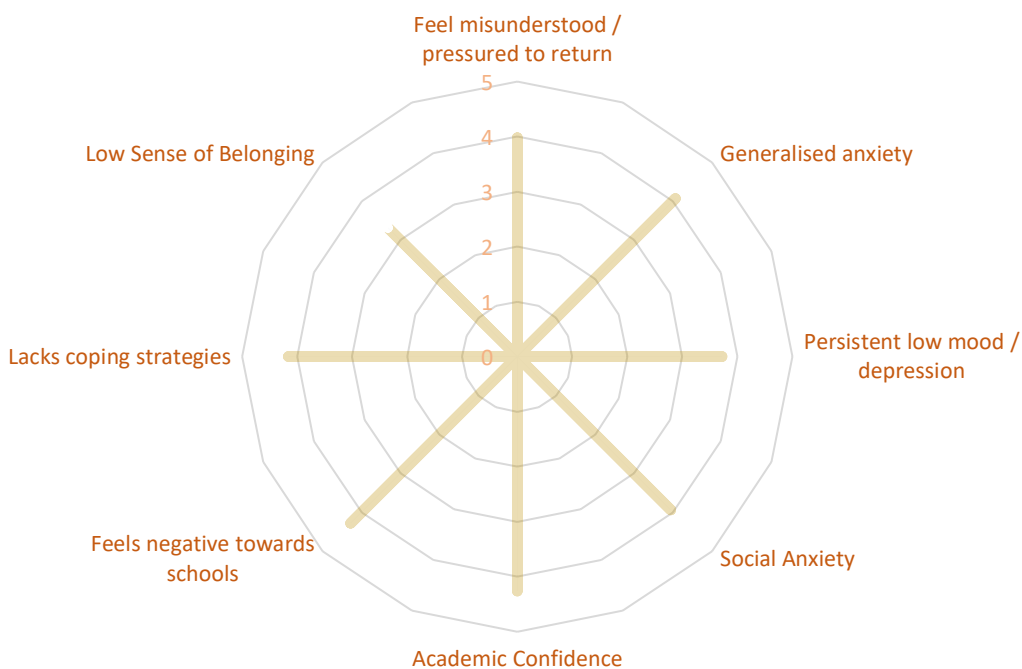
Regarding meaning, the children's scores were moderate, which means that there are opportunities for growth in finding purpose and significance in their lives. Exploring activities, hobbies, or pursuits that align with their values and interests can contribute to enhancing their sense of meaning and fulfilment. Engaging in meaningful activities that resonate with their values and aspirations can provide them with a sense of direction and satisfaction, contributing to their overall wellbeing and life satisfaction.

Furthermore, the score for accomplishment indicates that the children may benefit from support in setting and achieving goals to boost feelings of competence and satisfaction in their pursuits, whether academic or personal. By identifying meaningful goals and working towards them, they can further enhance their sense of accomplishment and self-efficacy, contributing positively to their overall wellbeing and sense of purpose. Providing them with opportunities to develop these skills and talents, and recognising their achievements, can develop their sense of pride and fulfilment, enhancing their overall wellbeing and psychological resilience.

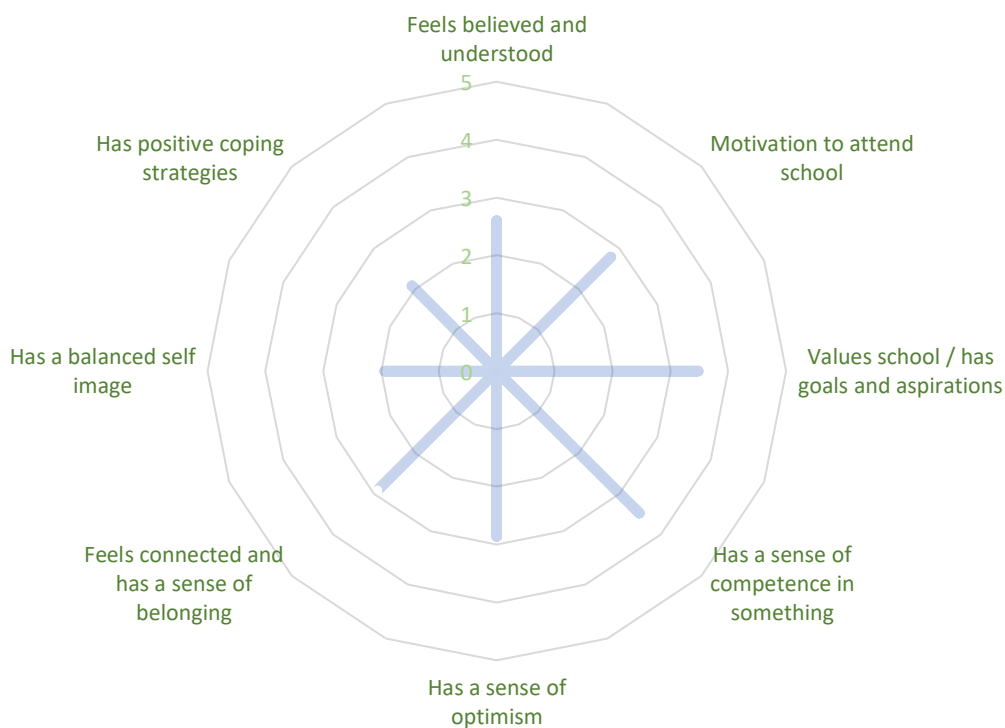
The health component scored just above half, showing that there are mixed beliefs in the children's views of their overall physical health. While there may be occasional health-related concerns or challenges to address, they demonstrate a balanced approach to maintaining their wellbeing. Overall, these outcomes provide valuable insights into the children's wellbeing, highlighting their strengths and areas for potential growth and development.

**Risk and Resilience Profile**

## CYP Risk Factors

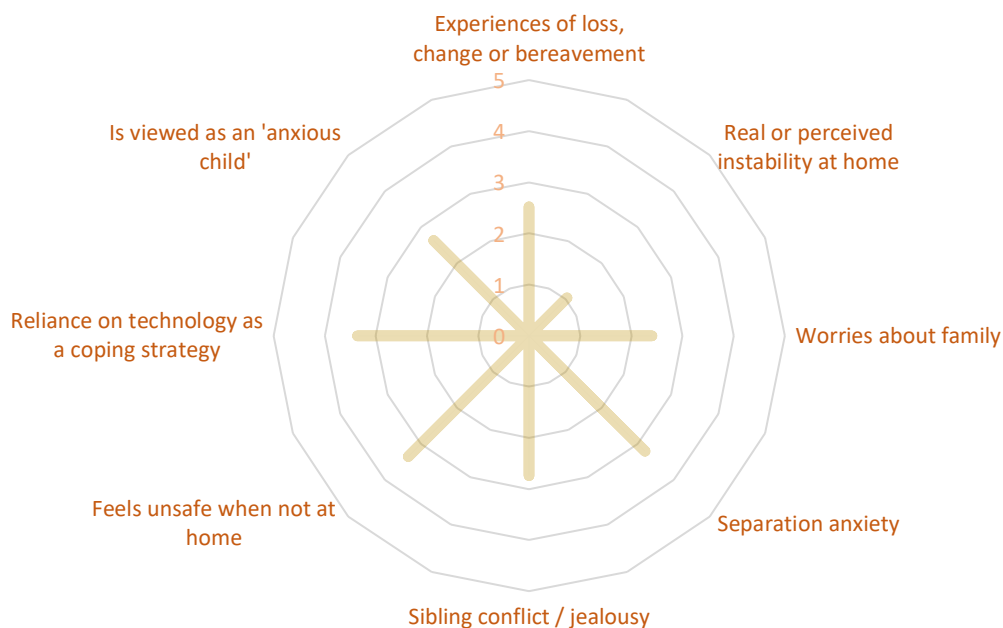


## CYP Resilience Factors

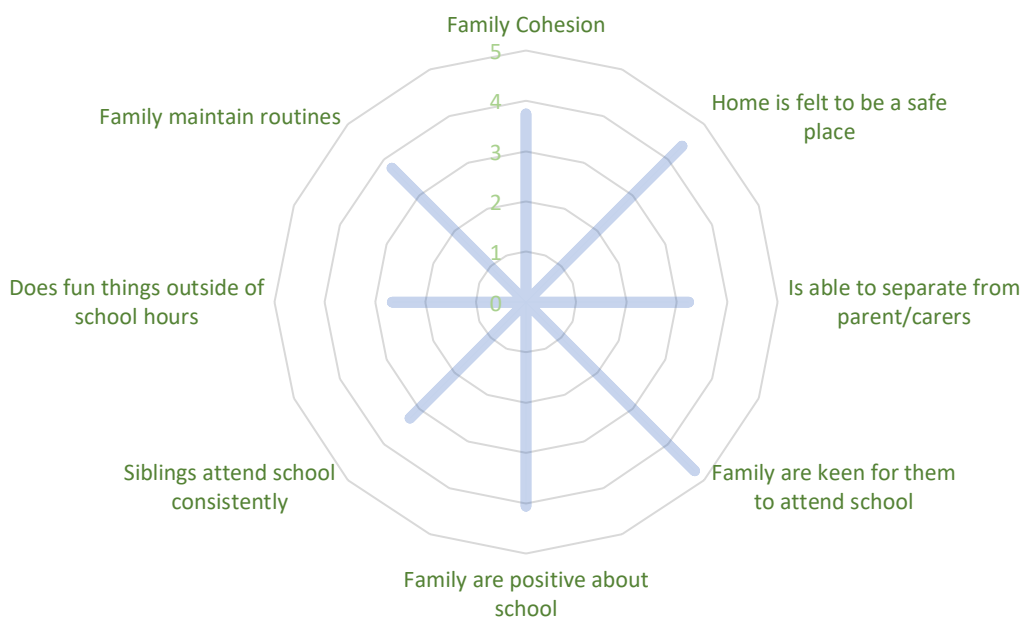




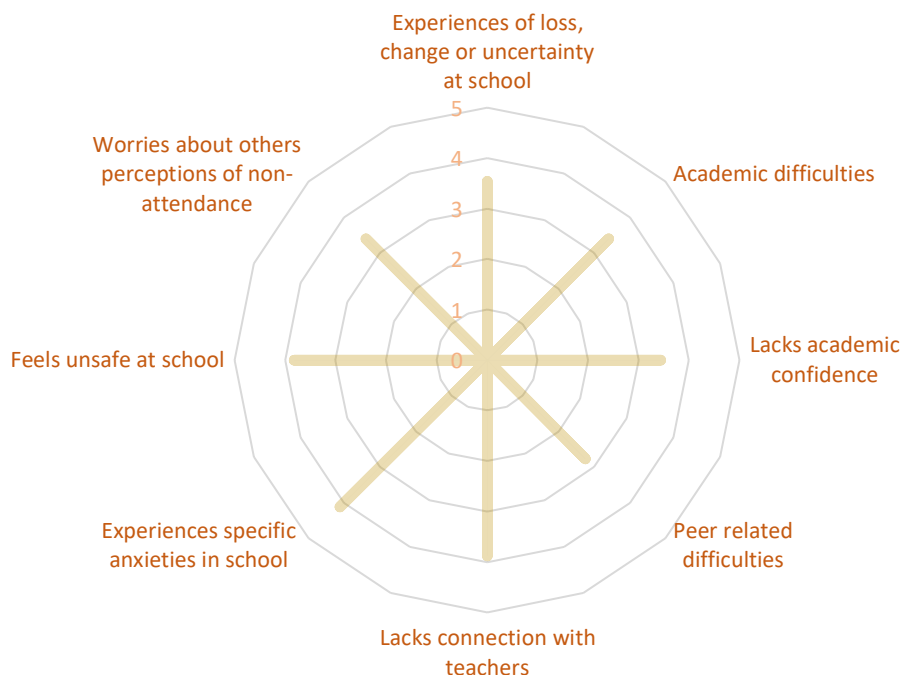
## Family Risk Factors



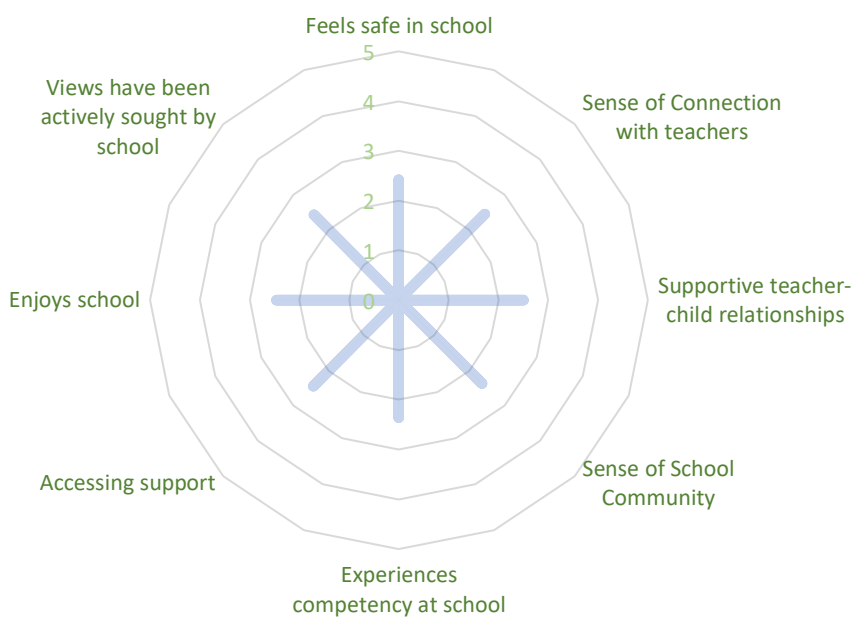
## Family Resilience Factors



## School Risk Factors



## School Resilience Factors



## Risk Outcomes

The Risk Profile questionnaire consisted of 48 questionnaires that were measured from 1-5, Never to Always. From the completed Risk profiles questionnaire, we can on average see some of the greatest risks to success for the young people. These questionnaires were completed by the parent/carer of the child. The risk factors have been broken down into Child and Young Person (CYP), Family and School. The threshold set for the risk factor being considered is 3.5 out of 5. Alongside the quantitative questions, they were also asked other questions based on attendance figures, whether there have been any recent transitions and whether the child has experienced Trauma or other Adverse Childhood Experiences, as described by Felitti (1998).

We can see that from the 25 parents who completed the questionnaires only a “Low Sense of Belonging” scored on average under the threshold, scoring 3.3, for Child and Young Person Risk factors. This would lead us to consider that all the other outcomes are possible risk factors for the children whose parents/carers completed the questionnaires. With this in mind, a “low sense of belonging” can also be considered as a possible risk due to its proximity to the threshold.

When looking at the Family Risk factors, we can see a different picture with “Separation Anxiety”, “Feels unsafe when not at home” and “Reliance on technology as a coping strategy” scoring closest to the threshold; 3.2, 3.3 and 3.4 respectively. This would lead us to consider that there are no significant family risk factors for the children’s school attendance difficulties, but we should be aware of the factors that did score closest to the threshold.

With the School Risk factors, we can see that a few scored over the threshold, they were, “Experiences of loss, change or uncertainty at school”, “Lacks connection with Teachers”, “Experiences specific anxieties in school” and “Feels unsafe at school”. “Academic difficulties”, “Lacks academic confidence” and “Worries about others perceptions of non-attendance” all scored close to the threshold, 3.4, 3.44 and 3.4 respectively. Only “Peer-related difficulties” scored below the threshold.

From the qualitative questions, when asked about the current levels of attendance, the answers were varied. They ranged from the parent/carer not knowing, stating it was low, or 0% all the way up to 60+% and even 93% but misses classes when in school. There was even one learner with 100% attendance but was having issues internally with attending lessons.

When looking at some of the common themes around why the child found it difficult to attend school, they were able to be categorised as such, using thematic analysis (Braun & Clarke, 2006).

## Transitions and Change

- **Morning Routine:** Waking up, getting ready, hair and makeup must be perfect before leaving the house, getting up for school, mornings going to school, leaving the house.
- **Transition to School:** Arriving at school, going to school whether morning or afternoon, transition coming home from school.
- **Within School Transitions:** Changing lessons with new people, transitioning from one lesson to another, always being late or skipping the next lesson.

- **Before and After School:** Before school, after school, before bed, bedtime is often a bad time.

### Social Interactions

- **Interpersonal Communication:** Someone talks to them, making conversation with visitors, avoiding being downstairs with siblings (when at home).
- **Social Situations:** Break times, lunch hall, assembly, lunchtime

### School Environment

- **Noise and Crowds:** Overwhelmed by noise and smells, noise in the school hall during break/lunch/assembly, canteen too loud, school feels too big.
- **Sensory Overload:** Sensory overload in lessons, being overwhelmed by the school environment in general.

### Academic Challenges

- **Specific Lessons:** Dislikes certain teachers/lessons, lessons requiring prolonged sitting/concentration, and written tasks.
- **General School Work:** Not understanding the work, school in general.

### Performance Anxiety

- **Public Speaking and Performance:** Speaking in front of the class, Drama class, preparing food for themselves, getting frustrated/angry if they make a mistake.
- **Expectations and Rules:** Being told off by teachers for not wearing the correct jumper and for being late, hates rules being broken.

### General Anxiety

- **Anxiety Linked to Change:** Anxiety linked to needing to go to school, somewhere new or busy environments, anxiety about change.
- **Sleep and Rest:** Sleep time, bedtime, getting up for school

Further in the result, it was highlighted that 76% of those questioned (19 out of 25) stated that their child has experienced ACEs or Trauma, both recently and historically. 64% (16 out of 25) stated that there has been a recent transition for the child, including moving home, changing schools even returning after an extended time away from school. 40% (10 out of 25) confirmed that there has been a history of school avoidance in the family, with the most common example being a sibling.

### Resilience Outcomes

The Resilience Profile questionnaire consisted of 48 questionnaires that were measured from 1-5, Never to Always. From the completed Resilience profiles questionnaire, we can on average see what some of the greatest risks to success are for the young people. These questionnaires were completed by the parent/carer of the child. The risk factors have been broken down into Child and Young Person (CYP), Family and School. The threshold set for the risk factor being considered is 3.5 out of 5. Alongside the quantitative questions, they were also asked other questions based on what makes school easier to attend and what strategies have worked.

We can see that from the 25 parents who completed the resilience questionnaires that no Children and Young People factors scored above the 3.5 threshold. Two outcomes, “Values school/has goals and aspirations” and “Has a sense of competence in something” scored relatively close to the threshold, at 3.48. We can consider these as possible resilience factors within the children that can be used to support their wellbeing and progress.

When looking at the Family Resilience factors, we can see that some have passed the threshold. These were, “Family Cohesion”, “Home is felt to be a safe place”, “Family are keen for them to attend”, “Family are positive about school” and “Family maintain routines”. As we can see, these factors can provide us with lots of areas to utilise to support the children with their difficulties. They can also be areas that could be looked at for replication in school, such as maintaining routines.

As for school resilience factors, on average, none scored above the threshold. They all scored between 2.36 and 2.5. From this we can see that from the parent’s perspective, there are no factors within the school that are seen as possible supportive areas to help the children attend school.

We can see from the qualitative questions, that there were some common themes around what children found easiest when it comes to attending school. By using thematic analysis (Braun & Clarke, 2006), we could categorise them as:

#### Activities and Hobbies

- **Creative Activities:** Drawing, crafting, designing homes on computer, art class, cooking, drama, playing the piano, creative work.
- **Sports and Physical Activities:** Playing football, playing tennis, swimming, being outdoors, sport in school.

#### Technology and Gaming

- **Screen Time:** Using technology, playing VR with friends, and gaming.
- **Computer Activities:** Creative games, and screen time in the bedroom.

#### Social Interactions

- **Family and Friends:** Fun times with family or friends, meeting friends after school, being with friends in school.
- **Comforting Social Interactions:** Cuddling with parents, and talking to the class about interests.

#### School Environment

- **Preferred School Settings:** Registration class, in school wellbeing/nurture provisions, pupil reception, health and wellbeing hub.
- **Break Times:** Break times, calm moments during school breaks.

#### Routine and Structure

- **Morning Routine:** Calmest in the morning at home, playing VR with friends.
- **Evening Routine:** Calmer after dinner when it cools down and gets dark.

### Learning Preferences

- **Subjects and Lessons:** Enjoys subjects like IT, art, and maths. Any lesson with a liked teacher, hands-on work, and not being sat down.
- **Independent Learning:** Watching educational content like historical topics or the universe.

### Comfort and Relaxation

- **Home Environment:** Being at home, lying in bed, eating nice food, quiet time with crafts.
- **Specific Preferences:** Prefers not having to attend school if possible, doing hair and makeup well, and likes to be in their room.

### Overcoming Anxiety

- **Stable Environment:** Once settled in school, participate in activities.
- **Managing Anxiety:** Recognises that anxiety can be unsettling throughout the day but finds comfort in structured, enjoyable activities.

Further to results, we can see that when asked about what the parent believes has made a difference for their child when it comes to attending school, common themes were:

### Flexible and Personalised School Schedule

- **Flexible Start and Finish Times:** Flexible start and finish times, check-ins and check-outs, limited hours/days in schools, staggered lessons, and arriving after everyone else had gone in.
- **Reduced Pressure:** Allowing the child to walk into school after everyone else when the yard was quiet, stopping pressure about being late.

### Individual Support and Small Groups

- **One-on-One Support:** Working with a TA or ELSA teacher, one-on-one support
- **Small Group Settings:** Small group settings, accessing the alternative provision instead of form, lessons they enjoy, tutoring at The Bridge.

### Safe and Comfortable Environment

- **Feeling Safe and Comfortable:** Good relationship with class teacher and TA, having a teacher they feel safe to go to, feeling most comfortable if they know they can leave any time.
- **Avoiding Crowds and Overwhelming Situations:** Staying in a specific area (e.g. wellbeing/nurture space) all day to avoid crowds and different teachers, spending time in quieter environments.

### Parental and Social Support

- **Parental Support:** parent walking the child to the class door, parent staying during tutoring sessions.
- **Friendships and Social Support:** Friendships going well, wanting to see current best friend, and spending time with friends.

### Special Accommodations and Adjustments

- **Special Days and Events:** Enjoying non-regular school days such as sports days, eisteddfod, children in need, etc.
- **Clothing and Uniform Adjustments:** Less pressure regarding uniform, allowing flexibility with uniform to reduce anxiety.

### Routine and Structure

- **Structured Routine:** Strict bedtime routine, waking earlier.
- **Allowing Absences When Needed:** Being allowed to miss lessons when overwhelmed.

### Enjoyable and Engaging Lessons

- **Interest-Based Learning:** Lessons they enjoy, School of Hard Knocks program.
- **Specialised Programs:** Engaging programs that the child finds enjoyable and motivating.

### Handling Anxiety and Emotional Needs

- **Addressing Anxiety:** Reducing pressure, allowing flexible attendance to reduce anxiety.
- **Emotional Support:** Ensuring emotional support through understanding and accommodating the child's feelings and anxieties.

Using thematic analysis (Braun & Clarke, 2006), the common themes from the parents' responses regarding strategies that have helped their child when it comes to attending school can be categorised as follows:

### Flexible and Reduced Timetables

- **Reduced Timetable:** Reduced timetable to alleviate pressure.
- **Phased Returns:** Allowing phased returns, although noting the pace may need adjustment.
- **Flexible Attendance:** Arriving later than others, attending only certain lessons or times (e.g., attending at lunch).

### Emotional and Psychological Support

- **Wellbeing Sessions:** Attending wellbeing base for the first lesson, wellbeing sessions with support staff and outside agencies.
- **Therapeutic Interventions:** Involvement of therapy dogs, and listening to music for relaxation.
- **Trusted Adults:** Time to speak to a trusted adult, having someone to listen to them, trusted staff members available.

### Parental Involvement and Support

- **Parental Presence:** Having a parent close by to provide reassurance, and planning involving the whole family.
- **Gentle Encouragement:** Perseverance and gentle encouragement without rushing into extra lessons.
- **Staying Calm:** Parents staying calm and not escalating situations by shouting.

### Communication and Planning

- **Clear Communication:** Using a timetable app on the phone to keep track of lessons, having clear plans and "get out" strategies.
- **Listening to the Child:** Listening to the child's needs and feedback, and implementing their suggestions.

### School Environment and Support

- **Supportive School Environment:** Support from school staff, meetings with trusted school personnel, previous school support.
- **Safe Spaces:** Time out of class when not coping, having a safe space to retreat to.

### Social Support

- **Peer Support:** Being with friends in lessons, socialising to reduce anxiety.

### Special Accommodations

- **Personal Preferences:** Allowing the child to wear preferred clothing (e.g., jumper of choice), incorporating personal interests.

### Challenges and Unsuccessful Strategies

- **Limited Success:** Acknowledging that some strategies have not worked or have not been retried recently.
- **Ongoing Challenges:** Noting ongoing issues with implementing strategies or overcoming anxiety.

### General Observations

- **Mixed Outcomes:** Varied success with different strategies, recognising that some approaches have not yielded significant improvements.

When asked about patterns in attendance, common themes were around lessons that were enjoyed, school holidays, and non-education-based days and activities. 64% of the responses stated that there are no patterns around attendance at all.





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## References

Berg, I., Nichols, K., and Pritchard, C. (1969) 'School phobia: Its classification and relationship to dependency'. *Child Psychology & Psychiatry & Allied Disciplines*, 10(2) pp. 123–141

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), pp. 77–101

Butler, J., & Kern, M.L. (2015) *The PERMA-Profilers: A brief multidimensional measure of flourishing*. Available at <http://www.peggykern.org/questionnaires.html> (accessed: January 2022)

Felitti, V.J. *et al.* (1998) 'Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study', *American Journal of Preventive Medicine*, 14(4) pp.245-258

Goodman, R. (2001) 'Psychometric properties of the strengths and difficulties questionnaire.' *Journal of the American Academy of Child & Adolescent Psychiatry*, 40(11) pp. 1337-1345

Gulliford, A., and Miller, A. (2015) Coping with life by coping with school? School refusal in young people. In Cline, T., Gulliford, A., & Birch, S. (eds.) *Educational Psychology*. 2nd Ed., East Sussex: Routledge, pp. 299-321.

Holder, J. (2022) 'EBSA Horizons'. 3.7: *EBSA Risk and Resilience Profiles*. Available at: <https://www.edpsyched.co.uk/ebsa-horizons-schools> (accessed: November 2022)

Kearney, C. A., & Silverman, W. K. (1993) 'Measuring the function of school refusal behavior: The School Refusal Assessment Scale', *Journal of Clinical Child Psychology*, 22(1) pp. 85–86,

Seligman, M. (2013) *Flourish*. New York: Simon & Schuster.

Thambirajah, M.S., Grandison, K.J. and De-Hayes, L. (2008) *Understanding school refusal: A handbook for professionals in education, health and social care*. London: Jessica Kingsley Publishers.