School Refusal

Every school day counts
Acknowledgements

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About this resource

This resource School Refusal: Every School Day Counts has been produced to assist education staff and the families that they work with in identifying and supporting children and adolescents who are avoiding going to school in the context of mental health difficulties. This resource provides basic information for primary teachers, high school teachers and parents/carers in understanding school refusal and what can be done to help support children and young people who are refusing to attend school and experiencing mental health challenges.
Background

In NSW, all children between the ages of six years and below the minimum school leaving age are legally required to enrol at, and attend school, or be registered for home schooling. All students must complete Year 10, or its equivalent, and until they turn 17 years old, students must be in:

- School, or registered for home schooling; OR
- Approved education or training (e.g. TAFE, traineeship, apprenticeship); OR
- Full-time paid employment (average 25 hours per week); OR
- Combination of work, education and/or training

Parents and carers are responsible for making sure that their children comply with these legal requirements. Schools support parents and carers by monitoring student attendance and by helping to address attendance issues when they emerge (former NSW Department of Education and Communities: Public Schools NSW – Compulsory School Attendance 2015).

It is important to start by clarifying and clearly understanding the multifaceted nature of school absences by differentiating the various terms that are often used interchangeably and to delineate the different terms as they represent different behaviours and motivators. Kearney (2008) defined absences as the following categories:

- **Absenteeism** – any form of absence from school or class.
- **School Refusal** – refers to when a child or young person refuses to attend school and/or problems remaining in class for an entire day and is anxiety-based (e.g. separation, generalised or social anxiety driven). It can present as extended absences from school, periodic absences from school, missed classes or chronic tardiness with the child or young person experiencing intense dread (or anxiety) about school that precipitates pleas for future non-attendance. Parents/carers are aware of school refusal absences and no attempt by the child is made to conceal these absences.
- **Truancy** – refers to concealed absences by the child or young person, without parent/carer knowledge. Truancy is not anxiety-based and usually involves the child or young person in engaging in alternate behaviours.
- **School Withdrawal** – refers to when a parent/carer deliberately keeps a child away from school for various reasons including family illness, parental conflict or family holidays.
Sarah is an eight-year-old girl having difficulty attending school. Since she began Year 3, two months ago, her problems have significantly worsened. Every morning she begs to stay home from school and has tantrums that delay her dressing and often result in her missing the bus. After arriving at school, Sarah frequently complains of stomach-aches, headaches and a sore throat to her teacher and asks to visit the sick bay. When she gets to the sick bay, she then pleads to call her mother, who has been picking her up early twice a week. When Sarah gets home she spends the remainder of the afternoon watching TV and playing with her toys. When her mother is unable to pick her up early, Sarah calls her mother’s mobile phone periodically throughout the afternoon to “check in” and reassure herself that nothing bad has happened. Sarah’s teacher is concerned that Sarah’s frequent absences are leading to incomplete assignments, difficulty learning and difficulty connecting with her peers.

Scott is a 13-year-old boy who has missed 12 days of school since beginning Year 7 one term ago. When home from school, Scott spends most of the day online or playing video games. On the days he does attend school he is typically late for his first period, which lets him avoid hanging out with other kids before class. He always goes to the library during lunch. When he does go to class, he sits in the back of the classroom, never raises his hand and has difficulty joining in with others to work on group projects. Scott’s teachers have noticed that he is always absent on days that tests or oral reports are scheduled. His parents are concerned about him, especially since he failed his first English assignment. The year coordinator has received numerous doctors’ certificates from a range of different doctors about his absences. The reasons described for his absences have been inexplicit and vague such as “not feeling well” and “feeling too sick to be at school”.

Tyler is a 15-year-old boy in Year 10 who lives with his mother. He has no contact with his father. Tyler has a younger sister in Year 8 at the same school and she has recently disclosed to the school counsellor that the mother is having some difficulties with depression and that there is a past history of family violence. Tyler’s high school attendance record is irregular with several partial and whole days of school missed since he started Year 9. In the last term, his non-attendance has escalated. He has missed 18 whole days of school and has not completed assessment requirements for three of his subjects. There have been insufficient reasons for his absences such as, “he wouldn’t get out of bed” or “he refuses to go to school” or none at all. His year coordinator has had difficulty contacting his mother to raise the concerns and has left numerous phone messages and mailed several letters to the home.

What is School Refusal?

Schools have seen students with similar behaviours to those described in the examples. This resource will clarify what school refusal is and aim to address some of the processes that can be utilised to identify and support students who are refusing to attend school and their families, and to encourage positive school attendance for the whole school community. As you work through the resources, keep the above scenarios in mind and how the material in the resource may be able to assist you.

Many children and young people will express a reluctance to go to school at different times in their schooling but for a small number of these children and young people the difficulties around attending school escalates to become school refusal. School refusal refers to when a child or young person does not want to go to school, or actually refuses to go to school, involving a high level of stress and/or anxiety about school attendance, and the parent/carer knows their child is staying home from school over
a prolonged period because the prospect of going to school causes them emotional distress (Community Connection – School Refusal Scoping Study, 2009; Kearney, 2008). It differs from other absences from school such as truancy (i.e. absence from school without parent/carer knowledge to pursue other activities) and school withdrawal (i.e. family intentionally keeps a child at home for various reasons).

Research has struggled to provide a consistent school refusal figure due to the difficulty in quantifying school refusal behaviours, but a general consensus suggests a prevalence of approximately 1-5% of all school aged children and young people (Kearney, 2008; Sewell, 2008; King & Bernstein, 2001). School refusal can occur through the entire range of school years but there are noticeable peaks around certain ages (i.e. usually between 5-6years and 10-11years) and transitions (i.e. starting primary school and starting high school) (King & Bernstein, 2001; Sewell, 2008). Some of the difficulties in capturing school refusal data is due to the nature of school refusal behaviours (complete absences, partial absences and/or lateness to class from anxiety-based difficulties in attending school) and that schools each define and track absenteeism differently (Kearney, 2008; King & Bernstein, 2001).

School non-attendance or refusal can occur in the context of child wellbeing and child protection concerns and may occur as part of a picture of other concerns related to parenting vulnerabilities leading to child abuse and neglect. To determine this refer to the NSW Keep Them Safe Mandatory Reporters Guide (MRG) and/or contact the NSW Education Child Wellbeing Unit for consultation.

The Mandatory Reporters Guide (MRG) under the Neglect Concerns – Education: Habitual Absence decision tree refers to when a ‘child/young person is of compulsory school age AND is habitually absent’. Habitually absent is a minimum of 30 days absence within the past 100 school days. Other factors may warrant action earlier than the 30 days indicated (Keep Them Safe: A shared approach to child wellbeing, 2009-2014).

**Why target School Refusal?**

School refusal could be thought of as a symptom, like when a child develops a fever. Investigating to find out the cause early on and then taking appropriate steps is the best way to keep the situation from developing into something more serious.

The typical Australian primary school student misses 16 days on average per school year adding up to approximately half a school year by the end of Year 6 (Zubrick, 2014; Victorian Department of Education & Early Child Development; NSW Centre for Education Statistics & Evaluation). For adolescents in high school, the average days missed rises to 24 days per school year or the equivalent to half a term (Zubrick, 2014).

Studies have found that students from as early as Year 1 exhibit clear school attendance and non-attendance patterns, and these patterns are highly predictive for subsequent schooling years (Zubrick, 2014). As non-attendance continues in high school, the effects accumulate and impact on academic and social development. Therefore, there is no safe threshold for absences from school (Zubrick, 2014).

The relationship between the absence from school and achievement suggests that every day of attendance in school contributes towards a child’s learning and there is ‘no safe threshold’ of absences. When a child or adolescent regularly misses school there are ongoing impacts on education and personal development, including poor academic performance, poor peer relationship skills and potential for developing mental health disorders in adulthood (Zubrick, 2014; Hilt, 2014; King & Bernstein, 2001).
Missing one day of school each week adds up to 2 months’ worth of learning missed over a year, and it has been shown that each day absent in high school has an impact on numeracy skills. Students who school refuse can become entrenched in long term patterns of poor school attendance and are at an increased risk of not completing their schooling. Prolonged school refusal has also been shown to be associated with (Sewell, 2008; Kearney, 2008):

- failure to complete school
- failure to develop satisfactory social relationships
- significant family conflict
- increased risk for adverse outcomes such as poorer physical and mental health in adulthood, substance abuse problems, and likelihood of becoming engaged in criminal activity (Queensland Department of Education, Training and Employment, 2013).

Students who school refuse and who do not complete their schooling are more likely to:

- experience difficulties with the transition from school to post-school education and training;
- have problems attaining and maintaining employment;
- encounter longer periods of unemployment; and
- be more reliant on government assistance (McLaughlin & Peace, 2012).

Early identification and response to school refusal is crucial, since the longer the underlying issues contributing to school refusal continue, the harder it is for the student to make a full return to schooling.

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Everybody has a responsibility to help children

Families, carers, the student, the school and the community

All kids in NSW must go to school by the time they turn 6. They must go to school or be involved in training or employment up to the age of 17. The law says they must attend school **EVERYDAY**.

If they do not go to school they will fall behind in their learning. Children who go to school every day do better and have more opportunities.

**Missing school matters and every day counts**

**If kids go to school...**

Consent to reprint image given by Council of Catholic School Parents, Aboriginal and Torres Strait Islander Parent Committee 2014.
What does School Refusal look like?

Most children are occasionally reluctant to go to school or have some anxiety about activities like class tests or talking in front of the class. It is normal for children to miss a few days of school during the year, however, school refusal refers to a more persistent problem.

In primary school, school refusal behaviour may be characterised by some of the following:

- tearfulness, tantrums or clinging upon arriving at school or repeated pleas to go home
- frequent complaints of illness during school such as stomach aches, headaches, dizziness or fatigue
- regular non-attendance after weekends, school holidays, school camps or sports days
- long, unexplained/unjustified absences from school
- frequent lateness to school
- long periods spent out of class in the sick bay or principal’s office.

High school students who refuse to go to school may show some of the following behaviours:

- frequent unexplained/unjustified absences (especially on Mondays, after holidays, school camps or sports days)
- frequent lateness
- frequent partial attendance
- absences on significant days (e.g., days on which tests, speeches, or physical education class are scheduled)
- frequent requests to go to the sick bay
- frequent requests to call home or to go home during the day

When to become concerned about School Refusal?

A guideline for patterns of unexplained/unjustified absenteeism that needs to be followed up assertively includes:

- **Two days or more absent over a 2 week period.**
- **It is especially concerning if these absent days have fallen on Mondays, after holidays, after school camps or after sports days.**

If you are concerned about a student’s class attendance, even if it doesn’t meet the guideline described above, you should follow up your concerns and seek advice from your supervisor and the school counsellor. It is also helpful to adopt a curious approach in trying to work out what may be happening for a student who is school refusing, and their family.
What can be done at school?

Schools are ideally placed to identify students at risk of school refusal and can implement strategies as soon as possible to prevent school refusal behaviour becoming entrenched. The key to effective management is early identification, assessment and profiling of student needs to plan interventions and/or referral to other services (McLaughlin & Peace, 2012; Sewell 2008; King & Bernstein, 2001).

- **If a student meets the above guideline or you are concerned about a student’s attendance patterns, a prompt response is required.**

- **Familiarise yourself with the required processes at your school.** Your school will have defined processes and policies about whose responsibility it is to make the first contact with the family to discuss the attendance patterns you are concerned about. It is important you are familiar with these processes, as they will differ from school to school.

- **Consultation with your supervisor** if you require additional support and advice about how to proceed.

- **Liaise with your school counsellor** as soon as practicable regarding your concerns about a student’s attendance pattern. Your school counsellor can familiarise you with common childhood behaviours and mental health presentations.

- **Liaise with** the learning support team, welfare team or student wellbeing pastoral team, depending on the resources available at your school. These teams will be able to provide ongoing support and advice regarding care management and follow up for the student you are concerned about.

- **Make contact with the student’s parents or carers** as soon as possible to understand the student’s situation. Refer to the section later on in this resource on ‘Tips on communicating with parents/carers about school refusal’ see page 10.

- **Developing a management plan.** Consultation with the family is essential. In most instances school attendance concerns can be resolved quickly by working with the family once the concerns have been raised with them. It is preferable that these meetings are conducted face to face in the form of an Attendance Planning Meeting, however in cases where parents/carers are unable to attend, this process can be conducted over the phone. Be aware that if it is necessary to manage this matter by phone it may be difficult to gauge the parents/carers understanding of the issues and their level of commitment to be an active partner in reducing their child’s school refusal. Once a management plan is established, a follow up letter to the family outlining the issues, the actions to be undertaken with a nominated review date is recommended.

- **Establish a pattern of regular communication with the parents/carers.** This is important to support and reassure families and to work with them to develop and implement a plan that will assist the student in attending school regularly. Keep the parents/carers well informed of the student’s progress at school. The parents/carers are the ones who can put into place strategies at home to help their child to return to school and overcome any emotional issues.

- **Provide parents/carers with information on school refusal, such as the handout included in this pack.** During this process it is imperative that the parents/carers and family members understand the causes of school refusal, particularly if mental health issues such as anxiety may be involved. Without an understanding of how best to help their child, even well-meaning parents/carers efforts may inadvertently exacerbate or reinforce the school refusal behaviour.
Identifying and Responding to School Refusal

As a teacher have you noticed that a student has had at least 2 days or more absences over a 2 week period and that one OR more of the following behaviours are occurring frequently?

- Lateness to school or classes
- Requests to go to the sick bay
- Unexplained whole or partial absences
- Complaints of illness
- Displays of tearful, clingy behaviour on arrival at school
- Requests to call or to be allowed to go home
- Patterns of full or partial absences on Mondays or Fridays, after school holidays, family holidays, school camps on or after sports days/carnivals

If YES then investigate further considering the following processes

- Follow school protocols and systems for non or partial attendance
- Contact and discuss your concerns with parents/carers
- Liaise with your supervisor
- Liaise with the home school liaison, learning support team, welfare team or student wellbeing pastoral team
- Liaise with the school counsellor

In consultation with student and parents develop a plan to assist the student to return to full school attendance

Once a plan has been put into place review the status in two weeks

Note to School Counsellor
If there is a known mental health issue or there is evidence of an emerging mental health concern liaise/consult with community mental health services such as the local Child and Adolescent Mental Health Service as soon as school refusal behaviours become a concern.

If a regular school attendance pattern HAS been achieved or is in the process of being achieved

Then
Have an agreed support plan in place in case of a relapse and for transition times

If a regular school attendance pattern HAS NOT been achieved within the fortnight then consult with all parties and consider whether to:

Review and modify the attendance plan
Seek external support from:
- community mental health services
- external family support agencies as appropriate
- NSW Education Child Wellbeing Unit or Child Protection Helpline
Transition to primary school has been identified in the research as a stressful time and a trigger of school refusal for some children. Children who had some separation anxiety when younger may find entry into the primary school environment difficult, and their separation anxiety may re-emerge. A small number of these students may also find the transition to high school to be difficult, especially if symptoms of anxiety have continued during primary school.

School issues such as bullying, academic difficulties, problems with teachers and peers, and stressful events such as a move or change in schools are also common reasons that may contribute to school refusal (Wimmer, 2004; Wimmer 2008).

Some students may be living in complex family situations with stressors such as the death of a loved one, parent/carer with a physical and/or mental health concerns, parental separation, unresolved legal issues, exposure to and witnessing acts of family violence and resettlement from another country. These factors can all contribute to school refusal behaviour. Some young students may be taking on the role of a young carer, caring for a family member who is living with an illness, disability, mental health issues or an alcohol/drug problem. This can be an additional stressor that can impact on school attendance.

School refusal behaviour can become entrenched for some students and when entrenchment occurs it can become very difficult to turn around. Entrenched school refusal behaviours often leads to early school-leaving, and once disengagement has set in school becomes “irrelevant” to the young person.

**Strategies to support positive school attendance**

- Create a welcoming, engaging environment that helps students feel connected to their school and teachers. This could be as simple as saying “hello” to each student and addressing them by their first name when they arrive in the morning, or introducing the morning handshake upon greeting students when they arrive.

- Set up rewards for school attendance such as certificates, house points, prizes, etc.

- Be viewed by students as approachable – this means listening, not judging, and taking a general interest in each student as an individual.

- Show empathy when students express concerns or experience difficulties. For many students, a positive relationship with their teachers can have a profound effect on their wellbeing and resilience.

- Provide a safe place where students can go when feeling stressed or overwhelmed.

- Provide academic supports for students who refuse school because they have academic difficulties.

- Where possible, be flexible in your expectations when students are experiencing difficulties. Consider making allowances for students when they are struggling with school tasks. Examples include giving an extension for homework, allowing them to work in a quiet space rather than the classroom, or providing alternative tasks.

Define what the boundaries are around your role: be aware of what you are able to do yourself, and when you might need to suggest other supports.
Tips on communicating with parents/carers about School Refusal

If you are the person who will be making a phone call or convening a face-to-face meeting with the parents or carers about their child's non-attendance at school, here are some things to keep in mind that can assist your conversation.

- Be familiar with the procedures and policies that have been defined at your school for how meetings or phone calls with parents should be managed and documented.

- Let the student know that you have noticed that they are having difficulties with attending school and that you will be contacting their parents/carers. This will show the student that you are concerned about them and that you want to understand what is happening so you can support them to overcome any challenges they are experiencing. It will also avoid the student being taken by surprise or feeling upset if the student was not informed of your plans to talk to their parents/carers.

- Make a short list of ‘what’s and why’s’, the things that you would like to address with parents/carers. This helps to organise your thoughts and gives you a chance to think through the purpose of the contact in advance. The list may include:
  - Something positive and/or helpful the student has done in class
  - Your concern and some specific examples of it
  - Assistance requested from the parent
  - Timeline for improvement
  - Review date and what changes you would like to see by then

- Double check parents/carers names, status, contact information and if there are any current custody issues. Try to call parents/carers at home, but if you are making the call during the school day you may be calling them while they are at work. If you are calling a parents/carers place of work do not identify yourself unless asked and just use your name to assure privacy for the family. When you get the parent/carer on the line introduce yourself, “Hello! This is Ms. Rice, from (name your school). I was calling to talk with you today about John. Is this a good time?”

- Once you reach the parents/carers and have established it is a good time to speak, be sure to provide a compliment or share a quick story about something helpful their child has done in your classroom. Many parents feel their children are their greatest accomplishments, and may see their children as an extension of themselves. As a parent/carer, it is hard to hear criticism about your own child or to hear that they are having difficulties at school. You want to keep parents/carers in a conversational mode and not put them on the defensive.

- Carefully ease into the concern you have, providing specific examples of what you are concerned about. e.g. “Over the last few weeks, I have noticed that John is often late to class in the mornings and that he is frequently asking to go to sick bay. I also see that he has missed 3 days of school in the last 2 weeks. I have been worried about him and also concerned that he is missing out on a large amount of his learning. Have you noticed anything different or concerning at home?”

- Try to find out if something has happened recently in the family or with their child that might be contributing to their child not attending school. If behavioural changes have been noticed at school, you could ask if the parents/carers have noticed any similar changes at home. If they agree, ask how things are going, and whether there is anything that the school can do. It is also a good opportunity to ask if there are any support services involved.

- At this point you may have to be very direct and introduce the phrase ‘school refusal behaviour’ into the conversation. Explain to the parents/carers that research indicates a joint approach between schools and parents/carers will achieve the best outcome for students and their families when addressing school refusal behaviour.
• Ask them if they are able to attend a meeting at the school, explaining that the main priority of the meeting would be to create an attendance plan for their child. Let the parents/carers know who will be attending from the school, how long the meeting will last and what will occur during the meeting (e.g. discussion and decisions made on appropriate strategies, people’s roles and timelines).

• Explain what the school considers as ‘resolved school refusal behaviour’ and ‘unresolved school refusal behaviour’. Explain that there might be a need to involve more services for their child and what types of further action might need to occur if their child still has unresolved school refusal after this initial attempt. Let the parents/carers know that there is an information handout on school refusal, and that you can post or email it to them.

• Explain to the parents/carers what you are expecting of them, what you need them to do at home to support their child in regaining full attendance. This may be as simple as asking them to look for positive notes that are sent home, reinforcing expectations at home or having a conversation with their child that acknowledges the efforts that they are making to attend school regularly. The support that you may need to provide to some parents/carers could be more complex, for example starting a communication log or setting up a documented behaviour plan. The level of assistance needed from the family will depend on the situation, so be sure to discuss a timeline for when you expect the school refusal behaviour to change.

• Tell the parents/carers what you will be doing in the classroom. Always make sure to ask them if they can see any problems with this plan and if they have suggestions to help it work better.

• End the conversation on a positive note. “Thank you so much for your open communication and your time. Having your support plays an important part in assisting John attend school regularly. I enjoy (positive observation or anecdote) contributions made by John in our classroom.”

• Always remember to keep the door open, “If there is anything you need or if you have any concerns please don’t hesitate to contact me.” Give them the number that they can contact you on.

Ideally, the conversation goes smoothly and you and the parents/carers are in agreement with the next steps; but this is not always the way conversations go, especially when the topics raised are sensitive. If the parents/carers become defensive, restate what the specific reasons for concern are, and why you are focusing on their child’s school refusing behaviour. Remember that you are talking about their child, and emotions are likely to be strong. Keep in mind that the parents/carers may have a very negative attitude about school themselves, for other reasons than the immediate situation. Keep calm and be curious. What is making the parents/carers feel defensive? What has happened outside of this situation? What is going on at home? Work?

If the conversation starts to disintegrate then wrap it up on a positive note about their child, such as, “Thank you for your open communication. I will be rewarding John for being in class over the next week. I would like to call you and share what I have noticed at that time. Is there a better time for me to reach you than (current time)?”

Sometimes a parent/carer may become argumentative, verbally aggressive and/or upset. When this happens remain calm. “I can hear you are upset and understand that you find this news upsetting. It’s really important that we work together to support (your child) to return to full attendance at school. I would like to talk with you more about this. I will, however, have to call you back.” If yelling occurs still remain calm. “I am sorry you are upset. I will call you back at another time.” If it gets to the point you need to end the phone call DO NOT HANG UP without saying, “Thank you for your time. I will call you back on another day. Good bye!” Remain calm and polite. Debrief with a colleague when possible, and make a follow-up plan (Adapted from Rice, 2013).
Other contributors to School Refusal

There is no single ‘cause’ for school refusal and reasons for school refusal will differ from student to student.

Anxiety disorders are among the most frequent, but often under-recognised mental health problem found in students who refuse to attend school (Egger, Costello & Angold 2003; Wimmer, 2008). The types of anxiety disorders that you are most likely to observe with your students who are refusing to attend school include:

- **Separation anxiety.** This is most common in younger children, but can still be seen in adolescents. Students who have separation anxiety become preoccupied with thoughts of harm befalling a loved one and are overly dependent on parents and other caregivers. Adolescents with a history of separation anxiety in early childhood are at increased risk for other anxiety problems and school refusal in high school.

- **Social anxiety and performance anxiety.** Students with social and performance anxiety worry about what others think of them, are concerned about being judged, and fear humiliation. They may have intense anticipatory anxiety about giving speeches, taking tests, participating in sports, or other social activities.

- **Generalised anxiety disorder.** Students who have generalised anxiety disorder have excessive anxiety and worry about a variety of situations and events. They may be concerned about their competence, unsure of themselves, and often perfectionistic about their school-work. They tend to perceive the world as threatening and may experience anxiety about such situations as war or natural disasters even when actually being exposed to these events is highly unlikely. Their anxiety interferes with school performance and can cause fatigue, restlessness, difficulty concentrating, irritability, sleep disturbance, and muscle tension.

**Obsessive Compulsive Disorder (OCD)**

Children with OCD suffer from unwanted and intrusive thoughts that they can’t seem to get out of their heads (obsessions), and/or overwhelming urges to perform ritualised behaviours and routines (compulsions). Sometimes obsessions and compulsions are linked: for example, a child with OCD may become obsessed with fears of being contaminated by germs, which compels them to carry out rituals to ensure they remain clean and germ free, such as excessive hand washing, washing of pens and pencils and general worry about being exposed to things that may be dirty. They may spend a long time in the bathroom to perform their cleansing rituals or may become distressed if situations in the classroom trigger their worries and/or prevent them from carrying out their rituals. OCD symptoms can interfere with attending school in a number of ways and if often due to the nature of the obsessions or compulsions: for example if the child is afraid to use school bathrooms because of contamination fears; the often large amounts of time obsessions and compulsions take up preventing getting to school or doing assignments; or to embarrassment and fear of exposure.
Post-Traumatic Stress Disorder (PTSD)

Children and young people who have experienced or witnessed a traumatic or life-threatening event may develop PTSD, which can include symptoms of intense fear and anxiety, becoming dissociated, emotionally numb or easily irritable, and/or avoiding places, people, or activities that remind them of the event. Younger children may repetitively act out the event while they are playing. Not every child and young person who experiences or hears about a traumatic event will develop PTSD. It is normal to be fearful, sad, or apprehensive after such events, and many children and young people will recover from these feelings. Children and young people most at risk for PTSD are those who directly witnessed a traumatic event, who suffered directly (such as injury or the death of a parent), had mental health problems before the event, and who lack a strong support network. Family violence at home also increases a child’s risk of developing PTSD after witnessing traumatic events (Anxiety and Depression Association of America, 2015).

Depression

Common characteristics of depression in children and adolescents include depressed mood, lack of interest in activities, irritability, difficulty getting along with others, rebellious or risk-taking behaviour (particularly in adolescents), sleep difficulties, physical complaints, tiredness, feelings of inadequacy or excessive guilt, difficulty concentrating or indecisiveness, and thoughts of death or suicide. The presence of depression in children who are school refusing increases the potential for such severe symptoms as overwhelming anxiety, deliberate self-harm, suicidal ideation and suicide attempts (Kearney & Albano, 2004).
Resources for supporting positive school attendance

The Australian Government Department of Health funds KidsMatter Primary and MindMatters as part of Australia’s National Mental Health Plan. These initiatives promote mental health and wellbeing of students in primary and high schools (respectively) through a flexible framework that provides useful professional learning, resources and support for the education sector.

The initiatives promote whole of school approaches to mental health which intend to involve all the members of the school community, i.e. school staff, parents and carers, students and the broader community, with the goal of building and refining a positive culture where everyone feels a sense of belonging.

KidsMatter Primary

“Primary schools that operate on values of social and emotional wellbeing are environments that can make a positive difference to the lives of Australian children” (KidsMatter Primary).

KidsMatter Primary have resources designed to be used in the primary school setting that aim to improve the mental health and wellbeing of primary aged children, reduce mental health problems amongst children, and achieve greater support for those children experiencing mental health difficulties and their families. The KidsMatter Primary initiative includes KidsMatter Early Childhood (KMEC) and have also developed an ‘Understanding School Refusal’ resource. KidsMatter Primary have developed a ‘Starting School’ resource. This resource is designed for primary schools, Early Childhood Education and Care (ECEC) services and families of children transitioning from pre-school into their first year of formal schooling.

For more information, visit the KidsMatter Primary website www.kidsmatters.edu.au
1800 KIDSMP (1800 543 767)

MindMatters

MindMatters promotes the social and emotional wellbeing of school communities in the high school setting. MindMatters emphasises school support for students experiencing mental health difficulties because of its impact on student performance, attendance and behaviour (as well as staff morale). It works to support school staff in recognising behaviours, emotions or thinking patterns of concern and supporting young people experiencing such difficulties to get help when needed and to remain engaged in their schooling. Essentially, staff can be part of the early warning system that enables the young person to get timely support before the difficulties become too entrenched or take too much of a toll on the student, family and school.

MindMatters modules are available to help you and other staff to support student mental health within your existing roles and responsibilities. Refer to Module 4.1 How schools help students.

For more information, visit the MindMatters website www.mindmatters.edu.au
Useful links and resources

- **beyondblue**: [www.beyondblue.org.au](http://www.beyondblue.org.au)
  The organisation provides a large number of resources and links for answering questions and finding treatments for people with depression, anxiety disorders and related mental disorders. The website includes pages of content for parents/carers and for young people.

- **Black Dog Institute**: [www.blackdoginstitute.org.au](http://www.blackdoginstitute.org.au)
  The Black Dog Institute website has information on diagnosis, treatments and prevention of mood disorders such as depression and bipolar disorder.

- **Children of Parents with Mental Illness (COPMI)**: [www.copmi.net.au](http://www.copmi.net.au)
  This national initiative promotes better outcomes for children and families where a parent experiences mental illness, by providing information and support to children and young people who have parents with mental illness, and their families and friends. The website has information on what to do when irregular school attendance is related to the child or young person’s caring role for a parent or family member with a mental illness. This information complements the online training courses developed by COPMI for professionals to support families either individually or through community services and programs.

  The Family Referral Service (FRS) brings together families, support services and community resources to support families. Referrals can be made by young people, parents, or extended family members and help to arrange appropriate referral to a variety of public and private services dealing with a broad variety of issues, including family violence, housing, financial assistance, counselling and mediation, parenting, mental health, and finding culturally appropriate support.

- **headspace**: [www.headspace.org.au](http://www.headspace.org.au)
  headspace is the National Youth Mental Health Foundation for young people aged 12-25 years. The foundation hosts an online support website: eheadspace.org.au and have over 70 headspace centres around Australia. headspace provides support in four main areas: physical health, mental health, education, employment and other services and alcohol and other drug services.

  Kids Helpline is a free, 24 hour, private, confidential, telephone and online counselling service specifically for young people aged between 5-25 years.

- **Mental Health Line**: 1800 011 511
  The Mental Health Line is a 24-hour telephone service operating seven days a week across NSW. The Mental Health Line is the centralised referral to NSW Health public mental health services.

- **Parent Line NSW**: [www.parentline.org.au](http://www.parentline.org.au) | 1300 1300 52
  Parent Line is a telephone counselling, information and referral service for parents of children aged 0-18 years who live in New South Wales. The service includes the Early Childhood Intervention Information Line, which provides information for parents who are concerned about their child’s development, or who have a child who has been diagnosed with a disability. The aim of Parent Line is to nurture and support positive, caring relationships between parents, children, teenagers and significant other people who are important to the well-being of families.
School Refusal - Every school day counts

- **Raising Children Network: raisingchildren.net.au**
  A website formed through a partnership with the Australian Government and a network of leading early childhood agencies to provide parents with reliable information and resources to support them in the day-to-day work of raising children and looking after their own needs. The website is growing all the time and covers a range of parenting topics.

- **Reach Out!: reachout.com**
  ReachOut.com is a large, nationwide online youth mental health service. It is available 24 hours a day, 365 days a year, to provide practical information, tools and support to young people from everyday troubles to really tough times.

- **ReachOut Professionals: au.professionals.reachout.com**
  ReachOut Professionals provides recommendations and advice for youth support workers, health workers and education professionals on a range of online interventions, tools and resources that can be used to support young people experiencing mental health difficulties and to build young people's wellbeing and resilience.

- **The Brave Program: braveonline.psy.uq.edu.au**
  The BRAVE Program is an interactive, online intervention for the prevention and treatment of childhood and adolescent anxiety. The programs are free, and provide ways for children and teenagers to better cope with their worries. There are separate programs for children, teens, and parents.

- **Young Carers NSW: www.youngcarersnsw.org.au | 1800 242 636**
  The Carers NSW Young Carer Program was developed to make a positive difference to the lives of young carers and their families. Young carers are children and young people, 25 years or under, who help to support a family member or friend who has a disability, mental illness, drug or alcohol dependency, chronic condition, terminal illness or who is frail. This is a free service that can support any young carer.

Queensland Department of Education and Training has developed a range of resources that aims to assist in improving student attendance at school through a shared commitment by students, parents, caregivers, schools and the community. Though the resources are not from NSW, they can be viewed as additional helpful information and strategies www.education.qld.gov.au/everydaycounts/index.html
References


