







EMOTIONALLY BASED SCHOOL NON-ATTENDANCE

PRACTICE GUIDANCE FOR ESTABLISHMENTS



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Glasgow Educational Psychology Service along with colleagues from NHS Greater Glasgow and Clyde are also running support and development groups for staff. This training is available on CPD manager.

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Section 1: Introduction and background information.

Introduction

Glasgow City Council Education Services, supported by a multi-agency team, is committed to ensuring that children and young people who are showing a profile of need which results in school non-attendance due to emotionally based factors (e.g., anxiety, issues related to Autism and neurodevelopmental profiles of need and other mental health presentations), are planned for.

This guidance has been written to support staff across agencies and services to provide a collaborative response to children and young people who experience Emotionally Based School Non-Attendance (EBSNA).

National and local context

Getting It Right for Every Child (GIRFEC) is our national approach to improving outcomes and supporting the wellbeing of our children and young people. The National Practice Model is used by all agencies to ensure consistency across planning and support for children, young people, and their families.

<u>View information on GIRFEC from Scottish</u> Government Policy Website.



Glasgow context

Nurture

Glasgow aspires to become the Nurturing City. Positive and attuned relationships are central to a nurturing approach. They are the foundation for supporting wellbeing and for effective teaching and learning to take place. Children and young people's life experiences are taken into consideration and care is given to their strengths and the key adults in their lives. A nurturing approach values the whole school community and it is the responsibility of all to develop positive relationships and create a nurturing ethos. It is an inclusive approach that can be applied universally, benefiting all children and young people, as well as offering more targeted for support for individuals.

Emotionally Based School Non-Attendance (EBSNA)

Definition

Over several years, the language used to define children and young people who find it difficult to attend school has been widely debated. Early literature focused on 'school phobia' (Miller, 2008). However, according to the Diagnostic and Statistical Manual of Mental Health Disorders (fourth edition), a phobia suggests that exposure to a specific phobic stimulus almost invariably provokes a fear response (American Psychiatric Association, 1994). Kearney and Silverman (1990) highlight that this is not always the case with school avoidance because behaviours could be reflective of social anxiety or separation anxiety from the caregiver. Alternative language used within the literature includes 'emotionally based school refusal' (West Sussex County Council EPS, 2004), 'chronic non-attendance' (Lachlan, 2003), 'school refusal behaviour' (Kearney, 2007) and 'extended school non-attendance' (Pellegrini, 2007).

The aim of this guidance is not to be exclusionary to those who have significant difficulties attending school. It aims to ensure that a framework is applied to understanding, supporting, and transitioning children and young people back to school, or to a positive destination and encouraging community engagement.

In Glasgow, EBSNA is an overarching term used to describe children and young people who have a profile of additional support needs which includes a difficulty in attending school. This difficulty is often due to wide ranging factors which can include anxiety, issues related to Autism and neurodevelopmental profiles of need and other mental health presentations. There may be other factors linked to the family such as parent/carer ill-health. For some children and young people, their emotional distress may be more obvious, for example, in their presentation at school or by significant levels of non-attendance. For others, their presentation may be less obvious. For example, their attendance may be more sporadic, there may be specific lessons they can/cannot attend, or they may only be able to attend school when provided with a high level of support.

Prevalence

EBSNA remains to be a persistent concern nationally. We know from our understanding of the Scottish context that children, young people, and their families who experience poverty are at risk of poorer outcomes. We also know from the SARS-CoV-2 pandemic, that families experiencing poverty have been disproportionality effected.

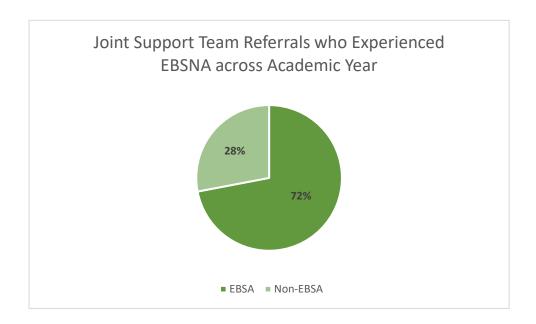
The development of EBSNA may be sudden or gradual and there tend to be peaks around key transition times for children and young people, such as the transition to secondary school (Pellegrini, 2007). Reviews have reported that EBSNA behaviours, with an element of anxiety, are estimated to affect around 1–2% of school aged children (Elliott, 1999; Kearney, 2008). Actual prevalence figures are more difficult to determine due to inconsistencies and inaccuracies in recording these figures across different countries.

Within Glasgow, evidence suggest that there has been a drop in children and young people's attendance at school over the last two years. Some of this may be directly COVID-19 related absences but it may also be linked to an increase in anxiety amongst parents/carers, children and young people. Furthermore, school related anxiety is the most common reason for school

absence in autistic children and young people. For more information <u>view National Autism</u> <u>Implementation Team website</u>.

Since August 2021, Glasgow Educational Psychology Service (GEPS) has supported three learning communities to gather data in relation to the prevalence of EBSNA cases across both the primary and secondary sector. This was achieved through gathering case numbers within a framework of staged intervention, the learning community joint support team. Figure 1 demonstrates the prevalence of EBSNA across these three learning communities; 72% of all cases referred to the Joint Support Team experienced EBSNA.

Figure 1: Percentage of Joint Support Team Referrals experiencing EBSNA across Academic Year.



Early intervention for EBSNA

When absences from school are prolonged, the impact on children and young people is far reaching. Outcomes for children and young people who experience EBSNA include poor academic achievement, including reduced performance in exams (Miller, 2008); reduced social opportunities (Pellegrini, 2007); reduced future employment opportunities; and poor adult mental health (Walter et al., 2010). Effective and early intervention is essential to promote children and young people's wellbeing and resilience, their educational success and to reaching positive destinations beyond school.

Whole Establishment Approaches (Stage 1 and 2 levels of intervention)

Educational settings can take a preventative role around EBSNA through adopting whole-establishment approaches that promote children and young people's wellbeing and positive mental health.

As shown in Figure 2, in Glasgow, there are several frameworks and whole-establishment approaches to support wellbeing, inclusion and equality for all children and young people, including those experiencing EBSNA. Table 1 provides a brief overview of each of these.



Figure 2. Whole establishment frameworks to supporting wellbeing, inclusion, and equality.

Table 1: Description of whole establishment frameworks to supporting wellbeing, inclusion and equality.

	Brief description
JST / SIIM	The LC-JSTs (Learning Community Joint Support Team) are an integral part of the staged intervention model at learning Community level. They allow for a collaborative discussion to be held and a shared responsibility adopted between those professionals involved in supporting a child/young person. This approach supports staff from Education Services, the HSCP and other associated partners to find the most inclusive local solutions to concerns about a child/young person's wellbeing to achieve consistently high standards of practice and provision. SIIMs (Staged Intervention & Inclusion Meetings) are a within education consultation forum. Again, it is a forum for a collaborative discussion about the Children and YP framed within a SOA approach.
Nurturing Approaches	Positive and attuned relationships are central to a nurturing approach and form the foundation for effective teaching and learning, and the development of wellbeing. Children and young people's life experiences are taken into consideration and care is given to their strengths and the special adults in their lives. A nurturing approach values everyone across the whole school community and it is the responsibility of all to develop positive relationships and a nurturing ethos. It is an inclusive approach that can be applied universally,

	benefiting all children and young people, as well as targeted for individuals requiring more support.			
	There are approximately 68 Nurture Groups in Primary setting Nurture Corners in Early Years settings and 14 Nurture Bas Secondary Schools.			
	Alongside small group Nurture support, Glasgow developed a poli 'Towards the Nurturing City' which set out a plan for putting Nurtuand Wellbeing at the core of education.			
	View Glasgow Educational Psychology Service Nurture Website			
	Applying Nurture as a Whole School Approach			
LCFE	Language and Communication Friendly Establishment is a framework supported by both Health (SLT) and Education to promote and deliver strategies and positive learning environments that encourage participation and inclusion for CYP. The partnership aims to develop the capacity of all education establishments to support and develop the language and communication skills of all children. Establishment receive mentoring and training throughout the process to become a validated LCFE establishment.			
	View Glasgow Educational Psychology Service LCFE Website			
Solution Orientated Approaches	Solution Oriented Approaches are strengths based and focus on identifying and using strengths to reach goals and overcome challenges. A broad range of Solution Oriented Approaches have been implemented widely across Glasgow schools. Solution Oriented Approaches are implemented at different levels of practice (individual child/family, school/ establishment, local authority) and aim to support a range of professionals to ensure children and young people reach their full potential. View Glasgow Educational Psychology Service Solution Oriented Approaches Website			
Restorative	Postorotivo Approaches encompagas a vihala community attac			
approaches	Restorative Approaches encompasses a whole-community ethos, which works to promote and maintain positive relationships and resolve 'emotional harm' between two or more individuals. It allows all parties to be listened to, reflect on all views expressed, and arrive at a collective and agreed solution to resolve the emotional harm and move on.			
	<u>View Glasgow Educational Psychology Service Restorative</u> <u>Approaches Website</u>			
CIRCLES framework	Information is included within intervention section below.			
School Counselling /	Glasgow Educational Psychology Service (GEPS) contribute significantly to promoting the mental health and wellbeing of children and young people. The service has been working with partners in NHS			
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mental health Support	GGC Health Improvement and Third Sector organisations to develop a range of resources and guidance for schools and early learning centres. What's the Harm training is offered to schools and outside agencies in collaboration with Glasgow Health and Social Care Partnership. ASIST training can also empower and support staff understanding when dealing with someone at risk of suicide. School Counselling: GCC have been allocated money from the Scottish Government to provide a counselling service to all pupils P6 – S6. The following organisations provide services to schools: Secondary School counselling and Group work – Action for Children Primary 1:1 counselling – LifeLink Primary Group work – Quarriers Primary Play therapy – With Kids Primary Art Therapy – Impact Arts
PSE	Throughout GCC, establishments engage and interact with evidence-based interventions to support the promotion of Personal and Social education. Such interventions include but are not exclusive to: PAThS (Promoting Alternative Thinking Strategies); Emotion Works; Better Relationships, Better Learning, Better Behaviour; 5 to Thrive. View Five to Thrive website View PAThS website View Emotion Works website View Education Scotland website on supporting social, emotional and behavioural needs
Loss and Bereavement	GEPS, in collaboration with NHS GGC and Glasgow HSCP created a document intended for anyone who requires advice on issues relating to loss, grief, and bereavement. Sections include how children understand death at different ages, supporting children and young people with Additional Support Needs through loss and bereavement and the impact of peer help and social media. View A Whole School Approach to Loss and Bereavement
How good is our school (HGIOS) 4	HGIOS 4 is a key aspect of the Scottish approach to school improvement, designed to support self-evaluation and reflections at all levels. View HGIOS 4

Profile of Risk

There are often complex interacting factors linked to EBSNA. Some children and young people are at higher risk and early identification means they can be supported prior to experiencing EBSNA, preventing school avoidance behaviours from escalating or becoming entrenched.

To support children and young people at risk of EBSNA, establishments need to be aware of and responsive to early indicators or risk factors. The Profile of Risk (View Profile of Risk) is designed to be used as a 'screening tool' that can help when thinking about how at risk a child or young person might be for experiencing EBSNA.

The Profile of Risk can be used with all children, for example, at the start of a new academic session and updated as necessary so that issues with attendance and risk factors which may lead to the child or young person experiencing EBSNA can be identified as soon as possible, and early interventions put into place. Information sharing using the Profile of Risk, especially at key transitions points (e.g., P7 to S1), is recommended. When completing the profile, it is important to be as objective as possible and to base assessments on information. It is recommended that the profile is completed collaboratively. Figure 3 outlines the steps establishments should take when using the profile.

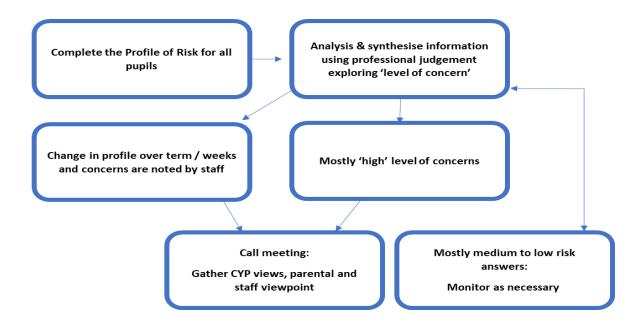


Figure 3. Process for analysing and responding to information gathered through the Profile of Risk.

Transitions

Children and young people make numerous transitions throughout their life and most especially within their educational experiences. Many of these transitions occur daily, for example, moving from one activity or lesson to another). Transitions can also include more subtle changes within a child or young persons' environment, for example, the change of a class teacher or a change in the way the furniture is arranged. These are known as horizontal transitions. At certain points in children and young people's lives, they will also experience vertical transitions. These are often known as 'big transitions' such as starting primary school or moving up to secondary school, moving to a new house or a change of care placement.

Transitions can be a period filled with a range of emotions for both children and young people and their parents/carers and can be especially challenging for children and young people experiencing EBSNA. Many of our Autistic children and young people also find transitions anxiety provoking and challenging. The need for consistency and predictability is likely to be interrupted during a transition so transitions need to be managed carefully.

Research has shown that the transition from primary to secondary school correlates with an increased prevalence in the number of children and young people experiencing EBSNA. This is likely due to the significant changes between the primary and secondary environment. For example: secondary schools are often larger; increased numbers of students; various lessons timetabled throughout the day; different teaching styles; different teaching pedagogies; increased level of demand; academic expectations; workload; travel to and from school.

Supporting transitions

Successful transitions involve the child or young person being supported to adapt to their new environment and to manage the emotions that the process of change often evokes. Glasgow articulated its position in relation to supporting transitions in its guidelines 'Every Child is Included Supported' Policy Guidelines' 6.4 (pg.18). Specific guidance is also provided to support effective procedures for children and young people with speech, language, and communication needs. If any transitional needs are identified then the appropriate support should be provided, gaining the child or young person's view around 'what could make this better/easier'.

Section 2: Theory and Psychology relating EBSNA - Anxiety, Risk and Resilience.

Understanding Anxiety and EBSNA

Anxiety has been identified as a key feature of EBSNA. Anxiety is a normal and helpful feeling that we all experience. At a certain level, anxiety is a natural part of growing up, however, for some children and young people their anxieties are more severe and persistent heightened which can impact on their functioning, including their experience of school. Anxiety related to school avoidance may present as fearful thoughts around attending school and/or their ability to cope with school.

Physiological symptoms may be present for some children and young people (e.g., increased heart rate, changes in breathing, sweating, and shaking). They may present immediately before school, during school, the night before or even a few days before (consider children and young people who find it difficult to return after a holiday period, for example).

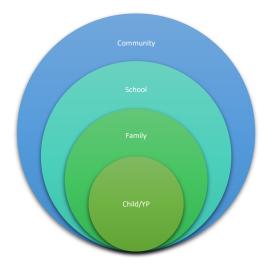
To respond to these feelings, some children and young people begin to withdraw to avoid the associated fears. For example, it may start as refusing to get dressed in the morning and over time can lead to not leaving the house and refusing to attend at all. Avoidance helps to reduce anxiety in the short term and, therefore, it can be reinforced.

Various factors contribute to the maintenance of EBSNA for children and young people. These can include worrying their friends will have forgotten about them, that they won't fit in any more or concerns about missing work and falling behind.



The cognitive behavioral model suggests that our thoughts feelings and behavior are all interlinked or connected (i.e., our thinking patterns influence how we feel). If a child or young person thinks they can't manage the work, they might feel worried about attending and going into school. Feeling worried can lead some children and young people to experience physical sensations (as described above). As these are unpleasant feelings or physical sensations, the child or young person might try to prevent or stop these by not attending school (the behaviour). This helps to reduce anxiety in the short term and the child or young person will experience initial relief as the anxiety reduces. In the longer term, by avoiding school the child or young person does not get the opportunity to test out their belief that they cannot manage work in school and are not able to discover that this might not be totally true. This, alongside other factors, can contributed towards maintaining the anxiety longer term.

EBSNA is complex and there are likely to be various interlinked factors as to why a child or young person might be finding it difficult to attend school. These factors will likely include the child or young person, their family, the school, and their wider local community.



Nuttall and Woods (2013) highlighted several primary and secondary causes which can impact upon a child or young person who finds it difficult to attend school.

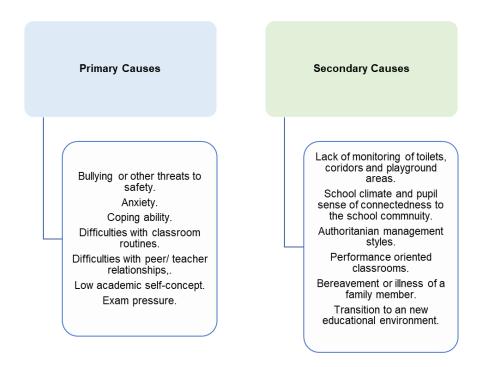


Figure 4. Primary and Secondary causes associated with school non-attendance.

Functions of behaviour

Due to these causes, there tend to be four main functions of behaviour when a child or young person finds it difficult to attend school (Kearney & Silberman, 1990). The functions are outlined in Figure 4. These factors will either negatively reinforce (the blue and green boxes) or positively reinforce (the grey and orange boxes) EBSNA. Therefore, they can be influential in maintaining patterns of non-attendance. In practice, it is important to remember that these functions are likely interlinked and may operate simultaneously.

Avoidance of uncomfortable feelings associated with school (e.g., anxiety).

Avoidance of situations that might be stressful in school.

To gain attention from significant others (e.g., parents).

To pursue nice things outside of school (e.g., shopping, computer games).

Figure 5. Four main functions of non-attendance behaviour.

Ecological Systems Theory (Bronfenbrenner, 1979)

Bronfenbrenner's (1979) ecological approach highlights that individuals do not develop in isolation, but rather in the context of the systems that surround them. When attempting to understand the development of a child or young person, it is important to consider them and their needs within the context of multiple environments. Bronfenbrenner referred to these as ecological systems, or spheres of influence (see Figure 6). A child's development, and subsequent outcomes, are a mix of within-child, family, school and community factors. Inherent qualities of a child and their environment interact with each other, influencing how that child grows and develops.

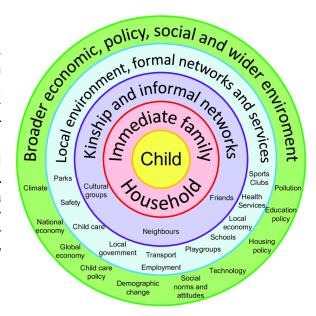


Figure 6: Bronfenbrenner's (1979) Ecological Systems Theory.

Our National Practice Model (GIRFEC) provides a perfect example of ecological theory applied to practice. This collaborative approach to assessment and planning for children and young people is used across all agencies and encourages all stakeholders to gain a shared perspective of the child/young person's needs. It involves consideration of risk and protective/resilience factors at the various levels and the interaction between these. It also

considers the role of professionals and the supports/services available to children, young people and their families.

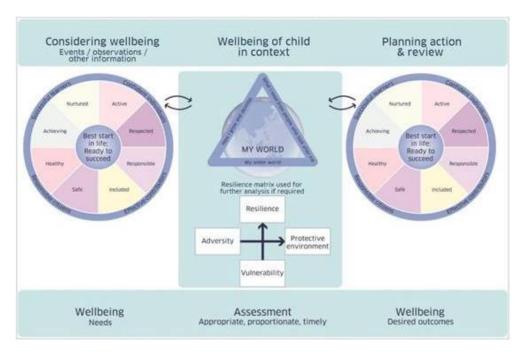


Figure 7. The National Practice Model (GIRFEC).

Section 3: Information Gathering and Assessment within a Framework of Staged Intervention.

Both Bronfenbrenner's (1979) ecological model and the National Practice Framework (GIRFEC) align with theory and literature relating to best practice to support children and young people who find it difficult to attend school. It is important that we recognise that children and young people's barriers to attending school do not operate exclusively, but instead simultaneously. As such, we need to understand each child and young person through early intervention and effective assessment and information gathering to ensure best practices to inform planning and supports. Each child and young person's situation will be unique and will need an individual and personalised plan.

Staged Intervention

In Glasgow, the Staged Intervention Framework (View Glasgow's Staged Intervention Framework) guides practitioners in meeting children and young people's additional support needs. Staged Intervention reflects the fact that children and young people who face barriers to their learning and wellbeing require differing levels of support and intervention. Establishments use the Staged Intervention Framework for ensuring that children and young people have their needs met in an open, fair, and consistent way. Staff within education are already familiar with using Wellbeing Assessment Plans to support their assessment and planning for individual children and young people.

For more information on Staged Intervention, <u>view the 'Every Child is Included Supported'</u> <u>policy</u> (Glasgow City Council, 2016).

Staged Intervention – EBSNA

Figure 7 provides an example of the staged intervention framework in relation to EBSNA.

tage 4 multi-agency Consultation/ further collaborative assessment from other relevant agencies outwith education Stage 3 - within Education Services Consultation/further collaborative assessment from other relevant agencies within education Stage 2 - within establishment Pupil participation - Landscape of Fear/Drawing the Ideal School/CIRCLE Participation Scale/SfL Department assessments/EAL input SO consultation - teacher round robin/SIIM discussion Analysis of behaviour - ABC/STAR charts Pupil/Family/School holistic assessment - school refusal assessment scale young person and parent Assessment of risk/resilience - BRITS assessment Whole-school approaches - Restorative Approaches/Whole school nurture/nurture group/LCFE Stage 1 - within class Accessing CYP's views - School refusal assessment scale/GMWP/Nurturing Me/My World Triangle Supporting understanding - Social Stories/comic strip conversations Environmental audit - CIRCLE Inclusive Classroom Scale/Sensory environmental audit Universal approaches - Whole school Nurture/LCFE

Figure 7. An example of the staged intervention framework in relation to EBSNA.

Information Gathering and Assessment - EBSNA

Information gathering and assessment is critical when working with children and young people who experience EBSNA. The literature indicates that children and young people are more likely to experience EBSNA when the risks are greater than resilience, when stress and anxiety exceeds support, and when factors that promote school avoidance 'overwhelm' the factors that encourage school attendance (Nuttall and Woods, 2013).

As with our approach to assessment in Glasgow, when supporting individuals experiencing EBSNA, it is also important to identify and build upon areas of strength or resilience at the school, family and CYP level. These factors may help to 'protect' the child or young person and promote school attendance.

Keeping theory in mind, it is helpful to consider risk and protective factors at different ecological levels when gathering information in response to children and young people who experience EBSNA. Table 2 provides a summary of key risk and resilience factors often associated with EBSNA.

Table 2. Risk and resilience factors associated with EBSNA.

Ecological level	Risk factors	Protective (resilience) factors
Education and community	 Bullying Key transitions (e.g., P7-S1, change of school) Academic demands Journey to school Exams Peer relationships 	 Positive relationships with staff Friendships Subject interest Flexibility of approaches within school Creating opportunities for success Partnership working
Family	 Parental separation/divorce Parental mental health Loss and bereavement High levels of family stress Poverty Young carer 	 Good family support network/extended family members Developing parental understanding and building their skills
Child/Young person	 Fear of failure/low self-esteem Age (4-5, 11-12 & 14-15 years) Separation anxiety Traumatic experiences Autistic Learning/communication differences 	 Motivated to achieve a future goal/career Keen to learn Positive experiences Feeling listened to and understood Understanding the relationship between thoughts, feelings and behaviours

There are several different tools and resources we can use to support our assessment process and information gathering to inform future intervention. These can be considered at the both the individual child or young person and environmental/community levels.

Consulting with children and young people

A central part of your assessment is making sure you have spoken and listened to the child or young person and their views on the current situation and their wellbeing. There are several ways of doing this as outlined in Table 4.

Table 4: Recommended tools for consulting with children and young people.

Tools	Description	When might it be useful to use this?
GMWP	The Glasgow Motivation and Wellbeing Profile (GMWP) is a questionnaire that explores young person's wellbeing and sense of motivation in the learning context. 50 item or 20 item questionnaires are available.	The 50- item version is recommended for use with 8-17 years old.
	A 20-item version with Boardmaker symbols can be printed and used with young people who would benefit from the use of visuals.	The 20-item version is similar to the 50-item version but only contains 20 all positive
	A desired outcome could be discussed following on from the information elicited. It may be useful to add this and information from the strengths, issues and actions identified in the planning sheet in the SOA grid or WAP.	statements. This may be useful when it is thought that the young person may not be able to complete the 50-item version with support.
	Access the GMWP tool.	version with support.
	Password: gmwp	It is important to read the guide on how to use this tool to facilitate a meaningful discussion, completing all parts of the GMWP.
Nurturing Me	'Nurturing Me' is a GIRFEC tool which captures the voice of the child. The main purpose is to allow the child to have their voice heard in relation to their perspective on their	This tool can be used with preschool to primary aged children.
	wellbeing. It is a mediated tool using concrete materials which allows children and young people to identify key people in their lives alongside the child's perspective on the closeness and importance of that relationship.	Aspects from this can be easily mapped onto the SOA grid.
	Access Nurturing Me guidance and materials. Password: gmwp	

My World Triangle	As part of the National Practice Model, the 'My World Triangle' enables practitioners to assess wellbeing concerns in all aspects of a child's life. It also considers their strengths which can be organised around the triangle and can be used interactively. It examines the key areas of the child's circumstances under the headings: 'how I grow and develop', 'my wider world', 'what I need from people who look after me.' Access interactive my world triangle.	This tool can be used with preschool to secondary aged children and families. The approach can be adapted to suit the abilities of a range of children.
School Refusal Assessment Scale	The School Refusal Assessment Scale-Revised (SRAS-R), developed by Christopher Kearney and Wendy Silverman, is a psychological assessment tool designed to help evaluate why children and young people may be finding it difficult to attend school. It is a self-report inventory and there are versions available which can be completed by the child or young person, parents/carers and school staff. It consists of 24 questions that measure the frequency with which a child experiences emotions and behaviours related to school attendance. The questionnaire takes about 10 minutes to complete. Access the school refusal assessment scale. Password: EBSNA2022	Designed for use with children ages 5+. To gather the views of the child/young person and parent/carer in relation to factors affecting a young person's ability to attend school.

Gathering information about the environment and/or community

In order to provide a robust assessment, it is essential that you gather assessment information at the environment and community level as well as at the individual level. There are several ways of doing this, as outlined in Table 5.

Table 5. Recommended approaches/tools for gathering information at the environment and community level.

Tools	Description	When might it be useful to use this?
		T
CIRCLE	This resource provides practical strategies to support the	0
Framework	underlying skills that pupils require to enable them to	whole school approach to
	participate in school. The CIRCLE Framework is a way of	improving inclusive practice
(Inclusive	organising and supporting input using a staged system of	but can also be used by
Classroom	support, beginning with setting up an inclusive classroom.	individual practitioners
Scale)	Checklists and planning tools are included to support	improving their classroom
	discussion and can be used to document strategies used	setting or their approach to
	and record professional learning. It includes the CIRCLE	

Inclusive Classroom Scale and the CIRCLE Participation supporting and individual Scale developed with practitioners to support the learner. measurement of progress. It begins by considering whole school approaches to inclusion. Using a staged system of intervention, it builds on the solid foundation of an inclusive classroom and then moves on to identifying learners' strengths and support needs, giving suggestions of practical supports and strategies. It also provides information to support collaborative working with partner services and agencies, and parents/carers. For secondary practitioners there is an accompanying professional learning module which allows the CIRCLE resource to be explored in more depth. Access the CIRCLE guidance and resource. My World As part of the National Practice Model, the 'My World This tool can be used with pre-Triangle Triangle' enables practitioners to assess wellbeing school to secondary aged children and families. concerns in all aspects of a child's life. It also considers their strengths which can be organised around the triangle The approach can be adapted and can be used interactively. It examines the key areas to suit the abilities of a range of the child's circumstances under the headings: 'how I of children. grow and develop', 'my wider world', 'what I need from people who look after me.' Access interactive my world triangle. The Landscape of fear for children in school can be This can be used to help Landscape of **Fear** divided into three domains. identify which aspects of school life are causing the The physical environment most anxiety for pupils in The social environment school. It can then be used to The learning environment come up with solutions to Pupils are asked to look at a map of their school and make those aspects feel safer. categorise areas into red, yellow and green depending on how anxious or calm a space makes them feel. There are accompanying questionnaires which helps the pupil map their landscape of fear along supplementary questions focused on how to make the red areas feel safer. There is a student and staff version which covers all three domains. landscape of fear and the accompanying questionnaires can be found in: 'Autism from Diagnostic Pathway to Intervention' by Kate Ripley (pp. 115-157).

Sensory Environmental Audit	View Autism from Diagnostic Pathway to Intervention on Amazon. This sensory audit is to help staff to assess and create an environment that enables the participation of young people with sensory sensitivities. It does not cover all aspects but gives ideas on the ways in which a setting might be altered if a young person experiences sensory processing difficulties and finds it hard or very anxiety-provoking to tolerate certain sensations or situations. Once completed, the results help to identify areas of strength and areas to develop that will make the environment more inclusive and should feed into a plan, do, review cycle. EPs can support with any analysis of this tool/consideration of next steps. View Sensory Audit Tool for Schools and Classrooms This resource can be used in partnership with the KIDS Scotland sensory profiling questionnaires. Access KIDS Scotland website.	Practitioners who want to consider different sensory aspects of the playroom/classroom environment and how these impact on learners.
Round Robin	The Round Robin Template is a way of accessing the views of all staff involved with a young person. It has a focus on strengths and what is going well so that strategies which have been successfully can be used elsewhere. View Solution Oriented Round Robin	Helps to gather relevant information from subject teachers to support with your assessment and planning. This can be particularly useful within the secondary school context.
Solution Oriented Meetings and Questioning	Using a solution-oriented meeting structure along with solution-oriented questioning is a valuable tool in ensuring you have all the information you need. It helps with the analysis of the information and formulating a plan. View Solution Oriented Meeting Structure	This is of particular use when you are at the planning stage of your 'Assess/ Plan/ Do /Review' cycle. This should be done collaboratively and involve the child or young person, parent/carer, and key adults.

Drawing the Ideal school

This is a structured drawing technique based on personal construct theory. With the support of a trusted adult, the young person is asked to draw the kind of school they would not like to go to and then the ideal school they would like to go to. The conversation as the young person draws is guided by the trusted adult.

with a wide range of ages. The guide is for parents/carers to use with their child/young person but could also be used by school staff.

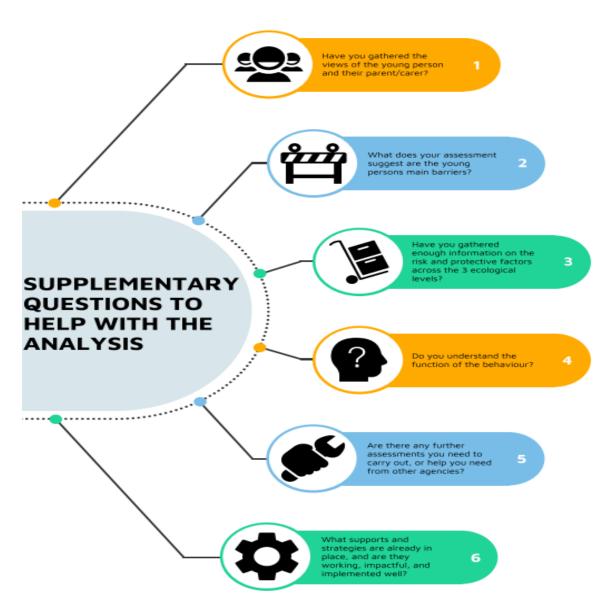
This resource can be used

Access guidance for the Drawing the Ideal School technique.

Section 4: Making Sense of Assessment Information.

What does the assessment information gathered tell you? There are some key questions which will help with this analysis. The GIRFEC 'five key questions' are a helpful starting point to do this.

- What can I do nowto help this child or young person?
- What is getting in the way of this child or young person's wellbeing?
- What additional help if any may be needed from others?
- Do I have all the information I need to help this child or young person?
- What can my service do to help this child or young person?



With thanks to S5 interns from Career Ready Mentoring Programme 2022 for designing this infographic.

Planning

Following this analysis, it can be helpful to use a solution-oriented structure to collate your assessment information and think about how this will inform planning. This should be done in preparation for a solution-oriented planning meeting. This is an ideal way of making sure that everyone's contributions are heard and that there is joined up planning and support involving all.

Within the meeting others may contribute to the risk and resilience factors, however, most of the meeting should be spent on planning the desired outcomes and the actions. For our children and young people with EBSNA it is important that we agree realistic outcomes and that the associated actions are achievable (i.e., SMART targets). Overly ambitious desired outcomes and actions at this stage can bring a halt to any progress.

Desired outcomes should be phrased "X will ..." It is much easier to observe and measure the presence of a behaviour rather than something that isn't happening or is absent. Desired outcomes can be considered under the different areas of risk/resilience: Child/Young Person; Family; School Environment/ Local Community as will the associated actions. Often the actions associated with the desired outcomes will be for the trusted adults around the young person rather than the young person themselves. Figure 8 provides an example of some desired outcomes and actions for a child or young person experiencing EBSNA.

The desired outcomes and actions should be used as your plan and should be a dynamic document. Set a date to review the actions and ensure clear communication among all involved, in particular the child or young person and their family.

Desired outcomes Actions			
	What?	Who?	When?
 X will be able to attend and manage a short period of time in school. 	PTPC will meet X and escort them to support base.	Pastoral Care Teacher	11am Monday
X will be able to manage transitions better.	Staff will allow X to leave lessons slightly earlier to avoid the crowded hallways.	Subject teachers, PTPC	Immediate effect
X will be able to contribute their view on the current situation.	PTPC will support X to complete the GMWP and the landscape of fear.	Pastoral Care teacher	Date to be confirmed with X

Figure 8. Example desired outcomes and actions for an EBSNA case.

Targeted Support

Some of the desired outcomes and actions from your solution-oriented planning meeting may involve targeted, individualised support for the child or young person. These are supports not available at a universal level and require a more personalised approach. There are a variety of tools and resources which may be of use:

Strength cards, bear cards, and therapeutic treasure chest cards. All of these can be
used in a playful way and often do not require the young person to speak if they do not
wish to. The cards are an ideal way of gathering more information about the young
person's view and are also helpful in letting them express how they are feeling.

- Download Calm Breathing
- <u>Download Muscle Relaxation</u>
- Download Coping Thoughts
- Inclusive Solutions Website Link

Cognitive Behavioural Approaches (CBA)

Cognitive Behavioural Approaches (CBA) can help individuals manage difficulties by changing the way they think and behave. It works by identifying how a person's thoughts and behaviours interact to create anxiety and then offers ways to challenge these. There is a clear evidence base for the effectiveness of CBA in helping to manage anxiety.

There are several CBA based resources that can be used by schools:

- 'Starving the Anxiety Gremlin' by Kate Collins-Donnelly.
- 'Homunculi Approach to Social and Emotional Wellbeing: A Flexible CBT Programme for Young People on the Autism Spectrum or with Emotional and Behavioural Difficulties' by Anne Greig and Tommy MacKay.
- 'Helping Your Child with Fears and Worries (2nd Edition): A self-help guide' by Cathy Creswell and Lucy Willetts.
- 'Cool connections with cognitive behavioural therapy: Encouraging self-esteem, resilience and wellbeing in children and young people using CBT approaches' by Laurie Seiler.
- 'Think good feel good: A cognitive behavioural therapy workbook for children and young people' by Paul Stallard.
- 'What to do when you worry too much: A kid's guide to overcoming anxiety' by Dawn Huebner.

If you require further advice in relation to the above resources, you can speak to your link Educational Psychologist and/or could raise a discussion through SIIM or JST.

There are also a number of other supports which could be signposted to the child or young person and their family:

- View Glasgow Youth Health Service Website
- View Glasgow Association for Mental Health Website
- View National Autism Implementation Team Website
- View National Autistic Society Moving Forward Website
- View NHS Education for Scotland Website
- View Glasgow Virtual School Information

Section 5: Autism, Speech, Language and Communication Differences (SLCDs) and EBSNA

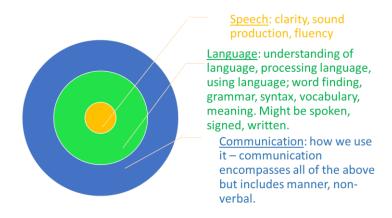
When working with children and young people it is important to consider how they communicate with the world around them. It is estimated around 10% of school aged children have Speech, Language, Communication Differences (SLCDs). For some children and young people this might mean they face additional challenges in school. All children and young people with SLCDs could be vulnerable to experiencing EBSNA.

Challenges faced by children and young people who have SLCDs can include the following:

- Separation Anxiety: finding it difficult to being separated from caregivers.
- Sensory processing difficulties: finding it difficult to manage to sensory aspects of the school environment.
- Daily routines; including attending school.
- Experience of specific phobias.
- Vulnerability to bullying.
- Difficulties managing points of transition throughout the school day.
- Feelings of being misunderstood due to speech clarity or struggling with interactions.
- Social Anxiety making it difficult to establishing and maintaining adult and peer relationships.
- Generalised anxieties.

Speech, Language and Communication Differences (SLCDs)

SLCDs are extremely broad and can impact speech, language and/or communication. Anyone can have a SLCD; parents, carers, children, young people, people with genetic conditions, people with syndromes, people with learning disability and/or people suffering distress. Causes of SLCDs are extremely varied and can include developmental delays, hearing impairment, neurodevelopmental conditions such as Autism Spectrum Condition/Developmental Language Delay/ADHD or learning disability; this is not an exhaustive list. We therefore must recognise that anyone with a relationship with someone needs to care about SLCDs.



Autism and EBSNA

Autistic learners are particularly vulnerable to experiencing EBSNA; for many this is due to finding the school environment and the demands of school unbearable. Terminology related to EBSNA, such as school refusal is often unhelpful as it implies a choice and unwillingness to attend when in fact the child or young person is unable to cope or tolerate the school environment. Additional pressures at school for Autistic learners can include the following:



- Delay in complex social skills; may experience bullying or lack of relationships due to such social skills coming naturally to others.
- Processing difficulties which make accessing curriculum subjects more challenging.
- Difficulties with organisation, planning, and prioritising.
- Experience of sensory differences; sensitivity to noise, smells, lighting.
- Literal thinking style; leads to misunderstandings, relationship barrier and communication breakdown.
- Rigid thought processes in an environment where there can be a lack of flexibility, particularly in relation to routines and expectations. Finding unexpected changes to routines difficult to manage for example.
- Difficulties managing transition across the school day.
- Heightened anxieties during less structure's times such as at break or lunch.

Supporting children and young people with SLCDs who experience EBSNA

When children and young people with SLCDs experience EBSNA a response should consider the child or young person, their family, the school environment, and their wider local community. The following supports can be considered.

Child/young person

- Listen to the child or young person's views and experiences of school; learn from when the young person has attended school.
- Support emotion regulation; including post school emotion regulation.
- Make learning meaningful.
- Support peer interactions.
- Meet sensory needs and preferences.
- Implement visual supports.
- Provide a system to get out of class.
- Create a safe space.
- Introduce movement breaks.

Home/family

- Listen to family members and those who know the child/young person well.
- Provide early practical support for home routines.

School environment/ local community

- Reduce language expectations.
- Make school environment predictable; do what you say you will do.
- Introduce enhanced transition planning.
- Listen to all those involved in the child/young person's world.
- Compassionate mindset.
- Share responsibility.
- Ensure adjustments are anticipatory.



(NAIT, 2020)

Section 6: Support Services

Glasgow Educational Psychology Service

Glasgow Educational Psychology are available, through your link educational psychologist, for consultation and advice at SIIM and LC-JST meetings and through support and development groups for EBSNA. We can also offer more targeted, individualised support for your establishment through training, development work and research.

For further information please contact Alison.woods@education.glasgow.gov.uk

Speech and Language Therapy

The SLT service works alongside the key people in children and young people's lives to support their understanding of communication differences. Our role might include increasing knowledge of communication differences and how these might impact a person's daily life and their well-being. We help the key adults to consider the environment and their own communication as well as their understanding of the young person's communication differences and how these might be contributing to EBSNA. We can do this through discussions at SIIM, consultations with young people and their families and staff within individual establishments. Each learning community has a named Link SLT who schools, and families can access for any assistance.

Children and Adolescent Mental Health Service (CAMHS)

CAMHS offers specialist input for children who have a moderate to severe mental health difficulty which is having a significant impact on daily functioning. CAMHS provides specialist diagnostic assessment and provides psychological, systemic and/or pharmacological therapy. Not all EBSNA cases will require CAMHS input. For those with a moderate to severe mental health difficulty experiencing EBSNA, CAMHS will assess and try to develop an understanding of some of the factors affecting EBSNA. Intervention will be dependent on this understanding. However, as an example, if anxiety affecting EBSNA, intervention may involve individual 1:1 work with the young person to provide psychoeducation and anxiety management strategies. It may also include a graded exposure intervention developed collaboratively to support the young person with their goals in relation to EBSNA. CAMHS will also often liaise with school/parents to ensure consistency across the system.



GVS Support

Information about GVS supports can be accessed here: GVS

Care Experienced Learners

Educational Establishments, Educational Psychologists, Social Workers and Residential Children's House Workers can refer care experienced learners directly to GVS by emailing the following email address for a CEL referral form: **cel@glasgow.gov.uk**

What is the offer?

- Advice and/or a multi-agency consultation meeting which will be solution-focussed and strengths-based
- Attendance at a looked after and accommodated review or My Meeting
- Signposting towards supports for example tutoring, mentoring, therapeutic support and involvement with the Outdoor Resource Centre or Blairvadach Outdoor Education and ILS provision, either face-to-face or through digital learning
- Staff training to schools on what it means to be Care Experienced and support Senior Staff to complete the Care Experience Self Evaluation toolkit

All Learners

The Interrupted Learners Service (ILS) is now part of GVS and by providing tuition and support to pupils, ILS attempts to ameliorate the effect of disruption to education that some children/young people can experience for a range of reasons such as health or other exceptional circumstances. Such tuition is not an alternative to school attendance but a temporary support until the child/young person can reengage with an educational establishment. There are 2 possible arrangements for providing ILS support:

ILS (School)

A teacher from a Glasgow school can act as a tutor for a child/young person out with school hours.

ILS (GVS)

There are a number of GVS tutors, including staff deployed flexibly to meet the needs of pupils. Provision will be either through digital learning or face-to-face. This support may be either one-to-one or in a small group setting.

References

American Psychiatric Association (1994) Substance Abuse and Mental Health Services Administration. Impact of the DSM-IV to DSM-5 Changes on the National Survey on Drug Use and Health. MD: Rockville.

Bronfenbrenner, U., 1979. *The ecology of human development*. Cambridge, Mass.: Harvard University Press.

Elliott, J. G. (1999). School refusal: Issues of conceptualisation, assessment, and treatment. *Journal of Child* Psychology *and Psychiatry, 40*(7), 1001–1012. <u>DOI:</u> 10.1111/1469-7610.00519

Glasgow City Council. (2016). Every Child is Included and Supported: Getting it Right in Glasgow, The Nurturing City. Glasgow: Glasgow Education Services.

Lauchlan, F. (2003) Responding to Chronic Non-attendance: A review of intervention approaches, Educational Psychology in Practice, 19:2, 133-146, DOI: 10.1080/02667360303236

Kearney, C. A., & Silverman, W. K. (1990). A Preliminary Analysis of a Functional Model of Assessment and Treatment for School Refusal Behavior. *Behavior Modification*, *14*(3), 340–366. https://doi.org/10.1177/01454455900143007

Kearney, C.A. (2008) School absenteeism and school refusal behavior in youth: A contemporary review, *Clinical Psychology Review*, 28: 3, 451-471, DOI: 10.1016/j.cpr.2007.07.012

Miller, A. (2008). School phobia and school refusal. In N. Frederickson, A. Miller, & T. Cline (Eds.), *Educational psychology: Topics in applied psychology* (pp. 215–232). London: Hodder Education.

Nuttall, C and Woods, K. (2013) Effective intervention for school refusal behaviour, *Educational Psychology in Practice*, 29:4, 347-366, DOI: 10.1080/02667363.2013.846848

Pellegrini, D. W. (2007). School Non-attendance: Definitions, meanings, responses, interventions. Educational Psychology in Practice, 23 (1), 63-77.

Walter, D., Hautmann, C., Rizk, S., Petermann, M., Minkus, J., Sinzig, J....Doepfner, M. (2010). Short term effects of inpatient cognitive behavioral treatment of adolescents with anxious-depressed school absenteeism: an observational study. European Child & Adolescent Psychiatry, 19, 835–844.

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.