



# Understanding and Addressing School Refusal

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**A Guide for Mental Health Professionals, Medical Providers, and School Staff**

## What is School Refusal?

School refusal refers to a child's **difficulty attending school or staying there due to emotional distress** related to school attendance. Unlike normal nervousness about school, school refusal involves severe, disruptive levels of fear and anxiety that interfere with a child's ability to attend classes.

### **Key characteristics include:**

- Reluctance or outright refusal to attend school
- Staying home during school hours with parents' knowledge
- Experiencing intense emotional distress at the thought of going to school
- Absence of serious antisocial behaviors (beyond resisting parents' efforts to get them to school)
- Parents making reasonable but unsuccessful attempts to enforce school attendance

## **How School Refusal Differs from Other Attendance Problems**

School refusal is distinct from:

- **Truancy:** When children skip school and hide it from parents
- **School withdrawal:** When parents actively encourage their child not to attend school

*Note: School refusal was previously called "school phobia."*

## What Does School Refusal Look Like?

The presentation varies widely but may include:

**Physical symptoms:**

- Stomachache, headache, nausea, vomiting
- Dizziness, shortness of breath, sweating

**Behavioral symptoms:**

- Morning tantrums before school
- Refusing to leave the house
- Leaving school when anxiety increases
- Staying at school but avoiding classrooms (hiding in nurse's office or library)
- Irritability, restlessness, insomnia, fatigue
- Crying, screaming, kicking, shaking

**Common Underlying Reasons**

Children may refuse school due to:

- Difficulty separating from parents (especially in younger children)
  - Wanting to avoid specific triggers (like the bus ride, certain classes, or social situations)
  - General or specific school-related anxiety (such as fear of public speaking)
  - Social anxiety about being evaluated or judged by others
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## Why School Refusal Matters

School refusal is not a phase that children simply "grow out of." It's a significant problem affecting approximately **1-5% of school-aged children** and has serious consequences if left untreated.

**Short-Term Impact**

- Breakdown in family and peer relationships
- Increased family conflict and stress
- Social isolation
- Declining academic performance
- Daily emotional distress for the child
- Development of additional mental health problems

**Long-Term Consequences**

- Reduced career opportunities
- Poorer interpersonal relationships throughout life
- Disrupted social, emotional, and intellectual development
- Higher rates of mental health disorders in adulthood
- Increased risk of criminal behavior
- Higher likelihood of dropping out of school

**Important:** Most cases of school refusal do not resolve without professional intervention. The longer school refusal continues, the harder it becomes to successfully re-engage the child with school and the more severe the long-term consequences become.

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## Risk Factors for School Refusal

School refusal has multiple causes. Understanding these risk factors can help with early identification and prevention.

### Individual Risk Factors

#### **Mental Health:**

- **Anxiety disorders:** General anxiety, school-specific anxiety, social anxiety, or separation anxiety (especially in younger children)
- **Depression:** Can be both a cause and consequence of school refusal
- **Emotional regulation difficulties:** Trouble managing strong emotions

#### **Personal Characteristics:**

- Low self-confidence in their ability to handle school situations
- Tendency toward negative thinking
- Poor problem-solving skills
- Perfectionism
- History of trauma or difficult childhood experiences

#### **Health and Development:**

- Neurodevelopmental conditions like Autism Spectrum Disorder (ASD) or Attention Deficit Hyperactivity Disorder (ADHD)
- Frequent physical complaints (headaches, stomachaches)
- **Bullying exposure:** Being a victim of verbal, physical, or cyberbullying

### Family Risk Factors

### **Parental Mental Health:**

- Parents with anxiety, depression, or other mental health conditions
- High levels of parental stress
- *Note: This can be both a cause and result of managing school refusal*

### **Family Dynamics:**

- Poor family functioning (high conflict, poor communication, lack of adaptability)
- **Overprotective parenting:** Especially excessive communication about school concerns, which can prevent children from developing independence
- Low parental confidence in their parenting abilities
- High academic expectations and performance pressure
- Single-parent households
- Low parental education levels

### **School and Environmental Factors**

#### **School Environment:**

- Insufficient teacher support and supervision
- Unpredictable school experiences
- Poor collaboration between home and school
- Excessive pressure on teachers to meet curriculum demands
- Inadequate support for children with special needs in regular classrooms

#### **Cultural and Social Factors:**

- For minority or immigrant families: social inequalities, racism, cultural barriers, and parental stress related to migration

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## **Evidence-Based Treatment Approaches**

Treating school refusal is challenging because of its complex nature. No single approach works for all children, but research shows several effective strategies.

### **The Critical Role of Parents**

**Parental involvement is essential** for successful treatment. Parents are uniquely positioned to:

- Bridge communication between the child and school
- Help children overcome their distress through supportive behaviors
- Implement strategies consistently across home and school settings

Parents also need support themselves, as managing school refusal creates significant stress and distress for the entire family.

## **Therapeutic Interventions**

**Cognitive Behavioral Therapy (CBT)** Currently considered the most effective treatment for school refusal. CBT typically includes:

- **Exposure therapy:** Gradually helping children face school-related fears
- **Relaxation training:** Teaching children how to manage physical anxiety symptoms
- **Cognitive restructuring:** Helping children identify and change negative thought patterns
- **Skills training:** Building social, problem-solving, and coping abilities

*Limitation: CBT doesn't work for all children, and many still struggle with attendance even after treatment.*

**Dialectical Behavior Therapy (DBT)** A newer approach that focuses on:

- Teaching emotional regulation skills
- Addressing behavioral problems that maintain school refusal
- Providing real-time coaching for both children and parents

**Family Therapy** Particularly effective for:

- Younger children
- Families with generally good functioning
- Cases where school refusal hasn't become deeply established

**Parent-Child Interaction Therapy (PCIT)** Especially effective for preschool-aged children with school refusal.

## **Targeting Modifiable Parent Factors**

Research shows that addressing certain parent-level factors can significantly improve outcomes:

- **Parent mental health treatment:** Addressing parental anxiety, depression, or other mental health conditions
- **Improving family functioning:** Reducing conflict, improving communication and adaptability

- **Addressing overprotective behaviors:** Particularly excessive communication about school concerns
- **Building parental confidence:** Helping parents feel more effective in their parenting role

### **School-Based Approaches**

Effective school strategies include:

- Rapid return policies (getting children back to school quickly)
- Trauma-informed approaches integrated into curriculum
- Early identification systems for at-risk students
- Strong teacher-student relationships
- Positive, predictable school environments

### **Multi-Level Approach**

The most effective interventions combine strategies targeting:

1. **The child** (individual therapy, skill-building)
2. **The family** (parent training, family therapy, addressing parent mental health)
3. **The school environment** (teacher training, environmental modifications, support systems)

### **Importance of Early Intervention**

**Early identification and intervention are crucial.** The sooner treatment begins, the better the outcomes. Specific attention should be given to high-risk groups including:

- Immigrant children
- Children with developmental disabilities
- Children with chronic health conditions

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## **Key Takeaways for Professionals**

1. **School refusal is a serious mental health issue** that rarely resolves without professional intervention
2. **Parent involvement is essential** for successful treatment
3. **Multiple factors contribute** to school refusal, requiring comprehensive assessment and treatment

4. **CBT is the current gold standard**, but needs to be combined with family and school-based interventions
5. **Early intervention** leads to better outcomes
6. **Collaboration between mental health professionals, medical providers, and school staff** is critical for success

**Remember:** School refusal affects the entire family system and requires a coordinated, multi-faceted approach for the best chance of successful resolution.

## Bibliography:

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2. Ulaş, S., & Seçer, İ. (2024). **A systematic review of school refusal**. *Current Psychology*, 43, 19407–19422. <https://doi.org/10.1007/s12144-024-05742-x>