



FRONTIER
PSYCHIATRY



Understanding and Addressing School Refusal

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

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.

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

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

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:

1. Chockalingam, M., Skinner, K., Melvin, G., & Yap, M. B. H. (2023). **Modifiable Parent Factors Associated with Child and Adolescent School Refusal: A Systematic Review**. *Child Psychiatry & Human Development*, 54, 1459–1475. <https://doi.org/10.1007/s10578-022-01358-z>
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>