

School Refusal in High School



Formative
Psychological Services

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Case Example

Jacob is a junior attending his neighborhood high school. He does not have an IEP, but does have a Section 504 Plan. Jacob has a history of anxiety and teachers have noted in prior years that he physically manifests his anxiety in class by shaking his leg and picking at his hands. For the past two years, Jacob has been successful in class (passing all of his classes) despite his anxiety and has not had to leave class to seek the support of a social worker more than a few times a month. This year, there has been a dramatic increase in Jacob's absences from class and school. When at school, he typically spends at least two class periods in the social worker's office. However, Jacob only makes it to school about 65% of opportunities.

Scope of Problem

- Depends on the definition of school refusal
- Used to be considered a problem of young children
- Now common in middle and high school
- 25 % adolescents experience it some time in their lives
- More common than #s reported and co-occurring w/DSM diagnoses
- Unrelated to gender (NCES 2006A)
- Suggestive but not definitive evidence this is disproportionately observed in low SES group
- Heterogeneity of causes >> heterogeneity of responses needed

Defining School Refusal

Absenteeism = excusable + inexcusable:

- Excusable: related to medical illness/ injury
- Inexcusable: related to child refusal or parent withdrawing children for economic purposes, to hide maltreatment, prevent abduction from an estranged spouse, protect a child from perceived threat, or assist a parent with psychopathology

School refusal: inexcusable

- Upper range: Extended absences
- Lower range: Periodic absences, missed classes, chronic tardiness, and intense dread about school

Terms Assoc w/ School Refusal & Truancy

(Wimmer, 2013)

School Phobia	An outdated term used to refer to a child's intense anxiety about being at school. Often does not reflect adolescent behavior or full range of motivations, including mood and self esteem issues
School Refusal	Emotionally motivated absenteeism from school
Truancy	Unexcused absence from school
Habitual Truancy	Applied to students who are referred to court in violation of state compulsory attendance law
Problematic Absenteeism	A descriptive term that does not imply cause. For example, students who are absent at least 25% of total school time for at least 2 weeks.

Impact of problem

Personal/individual consequences

- Academic achievement
- Social disconnection
- Substance use
- Violence
- Health/mental health

Social consequences

- Delinquency
- Economic/workforce readiness

Warning Signs

- Frequent tardiness
- Missing special classes (speech, test, physical education)
- Increased absenteeism
- Health concerns (asthma, pregnancy)
- Housing difficulties

Common Triggers in High School

(Raggie et al 2018)

- Perfectionistic thinking
- Corrective feedback
- Witnessing or experiencing negative or aggressive peer interactions
- Competition
- Performance related situations

Conceptualization: A Functional Assessment

- Beginning in the 80s: focus on co-morbidity with anxiety/depression/substance abuse and functional diagnoses of behaviors
- Young children: separation anxiety, social anxiety, generalized anxiety, specific phobia
- Adolescents: to avoid social situations or negative assessment
- Two major functions of behavior: avoidance and attraction

Assessment

Structured:

- School Refusal Assessment Scale - Revised (Gonzalvez et.a., 2016)
- 24 items
- Scales for parents and children
- Measures: escape from negatively charged situations, escape from social/evaluative situations, pursuit of positive attention, tangible rewards.

Clinical:

- Medical, legal, psychiatric, academic
- To understand avoidance of negative reinforcers: fears of people, school, performance/evaluation
- To understand pursuit of positive reinforcers: to seek attention at home, enjoy non-school activities

Approaches to Treatment

School-based

Family-based

Community-based

Interventions Based on Function

Avoidance	<ul style="list-style-type: none">● Psychoeducation● Coping techniques● Gradual re-exposure● Self-reinforcement of gains
Escape	<ul style="list-style-type: none">● Psychoeducation● Coping techniques● Cognitive restructuring● Role play, modeling● Gradual re-exposure
Attention	<ul style="list-style-type: none">● Modify parent commands to be brief/clear● Set morning routine● Rewards and discipline● Consider escort
Rewards	<ul style="list-style-type: none">● Contingency contract● Establish time & place for family prob solvg● Communication skills training● Escort● Increased monitoring● Peer refusal skills training

Approaches to Treatment

School-Based

- FBA/BIP
- Counseling services; Most often CBT orientation:
 - Relaxation strategies
 - Cognitive restructuring
 - Exposure
- Goal setting
- Motivational Interviewing
- Safe Place Pass
- SRO

Approach to Tx: Motivational Interviewing

- MI conversations provide a way to problem-solve how to overcome obstacles

“...Johnny not attending school creates a real dilemma because it flies in the face of your family value of his learning, but it also feels like he’s being pushed over a cliff by making him go, and you’re the one doing the pushing....would you be ok talking about ways we can build a safety net for him to honor this value and support Johnny?...”

Approaches to Treatment

Family Based

- Often necessary when chronic and/or severe
- Improving communication and commands
- Establishing regular routines
- Contingency contracts
- School-based or private family therapy
- Medication

Getting Your Child to Say “Yes” to School (Kearney 2007)

Approaches to Treatment

Community Based

- Community mental health agencies
- Private practitioners
 - CBT, Psychodynamic, DBT
 - Can be helpful with exposure events
- Wrap around approach
- Court referral is a last resort when there is repeated noncompliance

“We generally recommend tailoring or condensing empirically supported treatment procedures for this population to school-based settings when a child’s school refusal behavior is conceptualized as mild to moderate in nature.” (Kearney & Bates, 2005, p. 215)

Predictors of Response to Intervention

- Severe internalizing difficulties
- Higher levels of maternal depression
- Older-age students
- Presence of depressive disorder
- Marked family conflict
- Severe non-attendance

Legal Compliance Issues

Takiff, N. E. (January, 2018) Consultation.
<http://www.whittedtakifflaw.com/>

Hypothetical: Questions

1. Is Jacob entitled to an IEP
2. What services and supports would be appropriate?
3. Should a BIP be provided to Jacob, either through RTI, a Section 504 Plan or an IEP?
4. What is the responsibility of the school to ensure Jacob attends?
5. Should Jacob's educational placement be changed?

Is Jacob entitled to an IEP

- Child Find responsibilities – affirmative duty
- Referral for initial Case Study Evaluation (“CSE”)
 - May be made by a parent or a public agency (i.e. employee of school district, a State agency, another State agency, or a community service agency)
 - For any child suspected of having a disability
 - RTI does not delay District’s need to respond to a parent request for CSE
 - NOTE – typically, referrals are made by school district, parents, or professionals with knowledge of the child

Factors in determining whether to conduct a CSE

- Grades
- Behavior
- Peer relationships
- Emotional well being
- Attendance
- Home Issues
- Court Involvement
- Drug and Alcohol Issues
- Hospitalizations

Is Jacob entitled to an IEP?

Yes, a school district's child find obligation toward a specific child is triggered when there is knowledge of, or reason to suspect, a disability and reason to suspect that special education services may be needed to address that disability. A disability is "suspected," and a child must be assessed, when the district is on notice that the child has displayed symptoms of that disability or that the child may have a particular disorder. (*Timothy O. v. Paso Robles Unified School Dist.* (9th Cir. 2016) That notice may come in the form of concerns expressed by parents about a child's symptoms, opinions expressed by informed professionals, or other less formal indicators, such as the child's behavior. The threshold for suspecting that a child has a disability is relatively low. (*Cari Rae S. supra*, 158 F.Supp.2d at p. 1195.) A school district's appropriate inquiry is whether the child should be referred for an evaluation, not whether the child actually qualifies for services. (*Ibid.*)

District Services for School Refusal

1. What services and supports would be appropriate?
2. Should a BIP be provided to Jacob, either through RTI, a Section 504 Plan or an IEP?

Parent Training: A 2015 Illinois Due Process Hearing Decision

Parent counseling and training is a related service that assists parents in understanding their child's special needs, provides information about child development, and helps parents develop the skills needed to support the implementation of their child's IEP. 34 C.F.R. §300.34(c)(8)(i)-(iii).

A district must provide parent counseling and training when the IEP team determines it is necessary for the child to receive a FAPE.

In the case, the student missed 12 days of school in 2013-14, and according to the district's social worker, those absences were due to feeling frustrated and anxious during school, breaking down at home, and then refusing to return to school the next day. T.M.'s absences increased significantly in 2014-15, primarily due to hospitalizations, either in-patient or partial.

Although the student's IEP reports a connection between school, home, and absences, it does not consider parent counseling and training to support the student's attendance at school in 2013-14. Based on this evidence, the undersigned finds that the district should have offered parent counseling and training in 2013-14.

BIPs: A 2015 Illinois Due Process Case

A district must consider positive behavioral interventions, supports, and other strategies to address behavior that impedes a student's learning or that of others. 34 C.F.R. §300.324(a)(2)(i).

The evidence shows that the district's initial IEP includes a FBA and a BIP. The FBA and BIP parallel the sole goal in the student's IEP: both recognize difficulty in identifying and communicating feelings when overwhelmed, confused, or frustrated, and both require T.M. to implement coping skills. Although the BIP required the student to keep a self-monitoring log, he did not want to do so and was given a point sheet instead. The BIP was not amended to include this change, and there are no logs or other data sheets in the record to show how the student progressed on his BIP. The undersigned finds the social worker's "recollection of service dates" self-serving and unreliable evidence on progress.

The FBA was updated in 2014 **to address attendance**; however the BIP was not updated to reflect this. More importantly, the 2014 FBA has the same substantive problem as its 2013 counterpart: these documents are the same as the student's IEP goal for each year and thus do not add anything to the student's educational plan. Based on the foregoing, the undersigned finds that the FBAs and BIPs do not effectively address the student's behavioral problems.

Homebound Services

Pursuant to Illinois' special education regulations, an IEP team must consider the need for home or hospital services when a student has a medical condition that will cause an absence of two or more consecutive weeks, or ongoing intermittent absences. 23 Ill. Adm. Code §226.300(a). The consideration must be based on a written statement from a licensed physician that specifies the child's condition, the impact on the child's ability to participate in education, and the anticipated length or nature of the child's absence from school. 23 Ill. Adm. Code §226.300(b). The amount of instructional services shall be determined in relation to the child's educational, physical, and mental health needs and shall not be less than five hours/week unless the physician has provided written certification that the child should not receive as many as five hours/week. 23 Ill. Adm. Code §226.300(c), (d).

IEP Goals and Related Services: From an Illinois Due Process Case in 2013

The Individuals with Disabilities Education Act (IDEA) requires that school districts write both academic and functional goals that result from the disability. The IDEA further requires that these goals then enable the child to make progress in the general education curriculum.

The District completed six (6) IEPs for the Student from January 15, 2010 through May 4, 2012. During that period, the Student's IEP reflected the same two goals once the Student started: a math goal and a writing goal,"despite the Student's high school teachers suggesting goals for many other areas of identified need. During this same two-year period, the Parents, the Student's outside providers (including a clinical psychologist and psychiatrist), provided almost weekly evidence of the Student's needs in the areas of **attendance** , work completion, self-advocacy and pragmatic language, overall social/emotional health and well-being.

As a result, the District failed to suggest or undertake the steps necessary to address the identified areas of need as required by the IDEA.

Supported Attendance

Definition of Related Services:

Related services means transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech- language pathology and audiology services, interpreting services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services for diagnostic or evaluation purposes. Related services also includes school health services and school nurse services, social work services in schools, and parent counseling and training.

Supported Attendance

Note that there is nothing in the definition that specifically includes “supported attendance.”

Nothing precludes a school district from providing supported attendance, but there are no cases holding a district liable for not providing supportive attendance.

Ultimately, providing such a service may allow a student to remain in that student’s current placement without needing a more restrictive setting. However, it appears from the case law that the District can satisfy its obligations under the IDEA by offering a more restrictive setting when attendance becomes an issue and in-school supports and services are ineffective, without needing to first provide supported attendance.

What services and supports would be appropriate?

Jacob may be eligible for:

- Social work services
- Parent training
- A behavioral intervention plan
- Goals addressing attendance
- Goals addressing self-esteem
- Homebound services

The District can, but is not required, to provide:

- Supported attendance

What is the school's responsibility to ensure Jacob attends?
Should Jacob's educational placement be changed?

Least Restrictive Environment and School Refusal: Although much of the case law centers on whether a student needs a residential placement due to school refusal, the analysis used by the Courts is equally applicable in determining whether a student needs a therapeutic day school.

The Seventh Circuit rule applied when determining whether districts are financially responsible for the residential placement of truant children is: **whether the placement may be considered necessary for educational purposes, or whether the placement is a response to medical, social, or emotional problems that is necessary quite apart from the learning process.** *Bd. of Ed. of Oak v. ISBE, 21 F. Supp. 2d 862 (N.D. Ill. 1998).*

When is a District not Responsible: The Dale M. Case

The student in Dale M. had serious behavioral and emotional problems, including drug use, residential burglary, and car theft. Dale M. had substance abuse problems and a criminal history. The court found that the student had "a lack of socialization" and that his problems were not primarily educational.

Determining Whether Residential Placement is Necessary under the IDEA: Illinois Due Process Case from 2015

In a recent due process case, the district, citing *Dale M. v. Bd. of Educ. of Bradley-Bourbonnais High Sch. Dist. No. 307*, argued that residential placement is only appropriate when the residential services are primarily oriented toward enabling the student to obtain an education.

The hearing officer rejected that argument. She stated that unlike Dale M., the student involved, T.M., had no substance abuse problems or criminal history. T.M.'s problems were psychological in nature and, as the district's CSE determined, qualified him for IDEA services as a student with an emotional disability. T.M. also struggled with attendance issues. Although the severity of T.M.'s emotional problems had increased over the past year, nothing in the record indicates a similarity to Dale M. She held that the inclusionary criteria that the district noted in the initial evaluation existed at the time of the hearing, and the district could not step back from its determination now that the severity of the student's emotional disability had increased.

Illinois Due Process Case from 2016

IDEA requires that placement in a residential facility be necessary to provide special education and related services to a child with a disability. 34 C.F.R. §300.532. As stated above, this Hearing Officer finds that a residential placement is necessary because of the significant history of **school refusal**, ongoing hypersexual and behavioral difficulties, general level of unresponsiveness to treatment interventions and a continued struggle to meet the Student's basic educational needs. The Student requires more intense, consistent, round the clock interventions that cannot be provided in a day program. Further, a residential placement would provide consistency for the Student across all settings and environments. The Student's behavior plan and supports would be carried with her throughout the day and she would benefit from the intensive supports available. In re: Student with a Disability, Illinois State Educational Agency, 116 LRP 52032 (January 11, 2016).

What is the school's responsibility to ensure Jacob attends?
Should Jacob's educational placement be changed?

The District must address Jacob's deficit areas and provide related services and specialized instruction (IEP goals) in the areas identified (i.e. social emotional functioning and attendance)

Since Jacob does not yet have an IEP, it may be premature to consider a more restrictive setting. However, please note that there is no requirement to exhaust each level of the continuum of placements, and instead, Districts are required to meet the student where they are functioning. Therefore, the IEP team should consider whether Jacob's functioning has deteriorated to an extent where his needs exceed the services at the local high school.

References

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