

School Anxiety & Attendance Challenges: Practical Strategies for Elementary School Professionals

Dr. Alex DiGiacomo, Dr. Sarah Anderson & Dr. Rosalind Catchpole January 20th, 2021

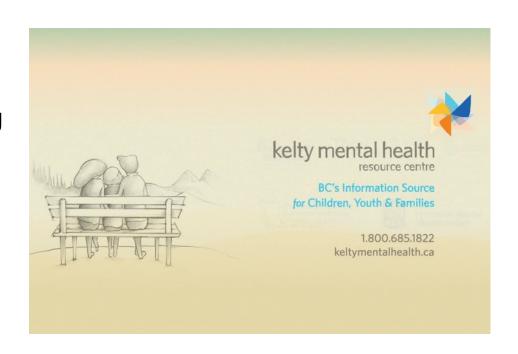
Welcome! We will begin the presentation shortly. Please note that your microphones have been muted automatically.



Kelty Mental Health Resource Centre

We help families across the province by:

- Helping with understanding and navigating the mental health system
- Listening and offering peer support, and
- Connecting families to resources and tools.







Housekeeping

- Attendees are automatically muted and cameras are turned off.
- Please submit questions for the speakers through the "Q&A" function. There
 has been an option enabled where you can vote for questions that you want
 answered.
- Please submit technical questions or comments through the "Chat" function.
- The webinar will be recorded and made available on the keltymentalhealth.ca website.
- At the end of the webinar, a survey will pop up that we invite you to complete.
- A PDF of the slides will be posted following the webinar.
- This information applies to the context in British Columbia. If you are in another jurisdiction please consult local health and school authorities for further information.



Speakers



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Land Acknowledgments

We acknowledge with immense gratitude that we live, work, and play on the traditional, ancestral, and unceded territory of the Coast Salish peoples, including the territories of the x^wməθkwəyəm (Musqueam), Skwxwú7mesh (Squamish) and Səlílwəta?/Selilwitulh (Tsleil-Waututh) Nation

WHAT ARE WE COVERING TODAY?

- Theoretical foundation of school avoidance
- Practical strategies to assess the nature of student struggles
- Concrete steps for coordinating successful school attendance & troubleshooting common traps





But first, thank you.



Our goal: to support YOU

as you support your students with school anxiety & school attendance challenges





What's behind the struggle?





Challenges with school attendance usually anxiety-based (at least in part)

Affects 2-5% of youth (that's Pre-Pandemic)

Most common during transition periods (K, middle/high school, after breaks)

Not the same as "skipping school" or acting out (but there can be overlap)



Case Example "Alfie*"

Info:

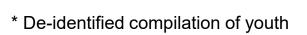
- 9-year-old male; currently in grade 4
- Mother on long-term disability as of this year

Attendance:

 Multiple periods of 2-3 weeks of nonattendance this year, limited engagement at school

Observations:

- Has historically met academic expectations but struggling in math this year
- Difficulty with rules being broken at school; some challenge fitting in with peers
- Frequently asks to phone mother about physical ailments
- Meltdowns at school (some aggression, knocking over chairs)





Risk Factors

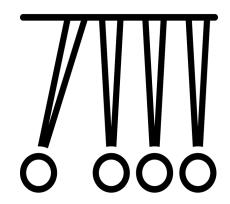
- Social Factors
 - bullying, social skills
- Educational Factors
 - LDs, developmental delays
- Family Factors
 - conflict, parental separation
- Mental Health Factors
 - anxiety, depression, trauma
- Societal Factors
 - racism, economic vulnerability





Early Warning Signs

- Physical complaints (headaches, stomachaches)
- Anxiety in the classroom
- Frequent trips to school counsellor
 & out of classroom
- Frequent calls/texts to parents and requests to go home during the school day
- Attempts to miss all or part of the school day
- Attention problems, irritability, changes in mood & class participation



Impacts of School Non-Attendance

Short term

- Poorer academic performance
- Increased social stress & isolation
- Risk of depressive symptoms

Long term

- Limited higher educational opportunities/premature school dropout
- Lower earning potential, unemployment
- "Failure to launch"
- Higher risk for psychiatric disorders



What is anxiety, actually?

Makes us have WORRIED thoughts

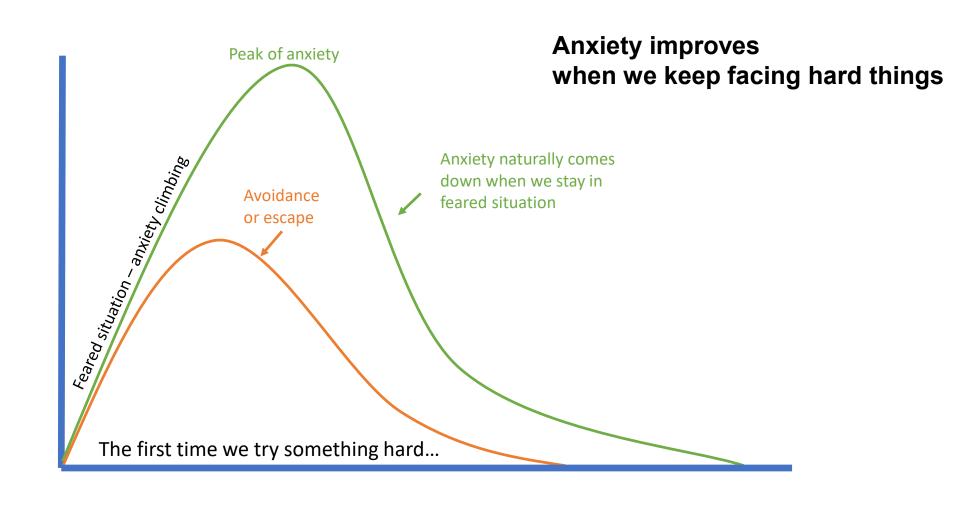
Makes us want to AVOID

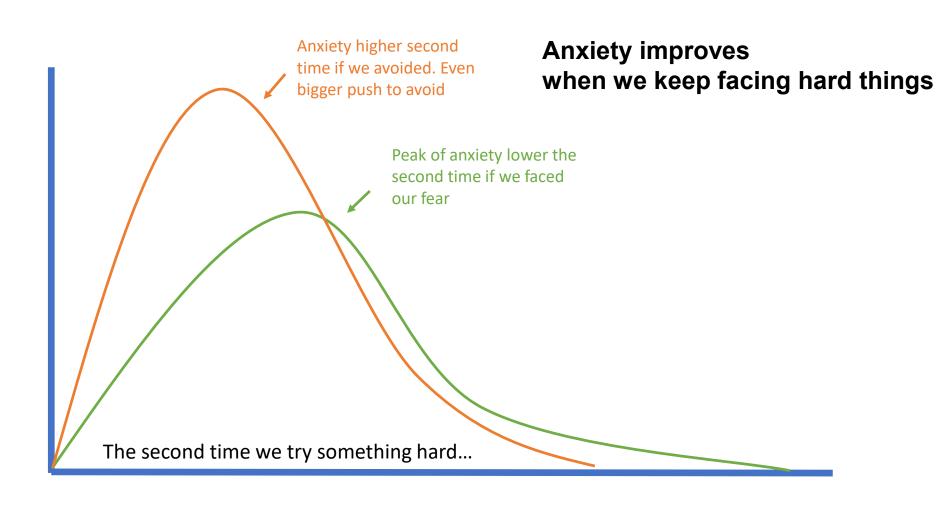
Gives us uncomfortable PHYSICAL symptoms Makes us have distressing EMOTIONS a NORMAL & NECESSARY human experience

 Uncomfortable (sometimes extremely so) but not HARMFUL

EXPECT SOMETHING BAD!! SOMETHING BAD IS COMING!

Can think about it as a false alarm

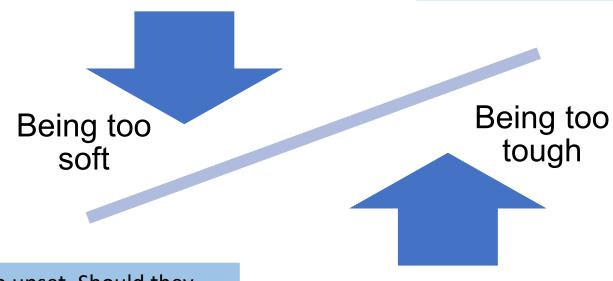




Very common and well-intended but unhelpful responses to school avoidance

"These absences are not acceptable."

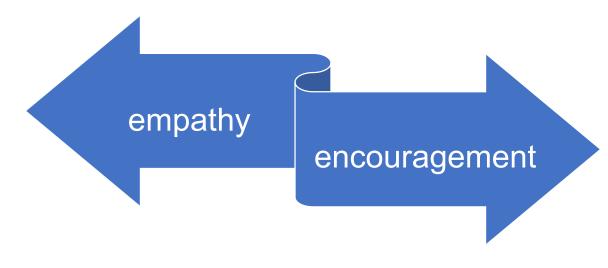
"They can't be allowed to get away with this."



"This kid is so upset. Should they even be here?"
"I don't want to push them. I really want them to trust me"



Helpful & effective responses contain BOTH



To Child "I know it feels hard being here"

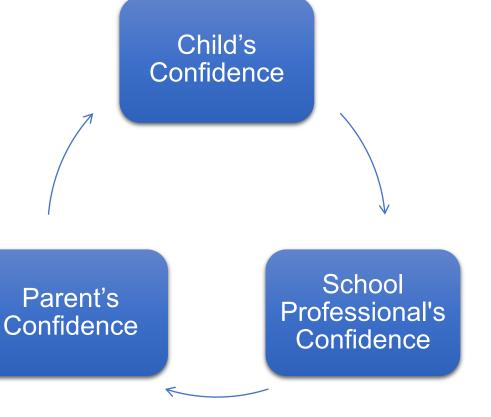
"and I know you can do it. You are so brave."

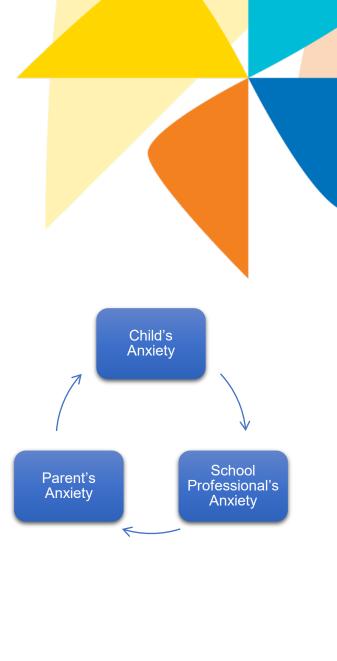
To Parent

"I know this feels really stressful and it would be easier to keep him home" "and I know he's going to get through this one day at a time. Great work dropping him off today."



So, communicate confidence* (even if you don't feel it) ©







A note on self-compassion

- It is not easy to support kids with school attendance challenges, especially when they are very longstanding
- School professionals have many competing demands
- It is unrealistic to support families on your own: a team-based approach is essential

What on earth is wrong with him?





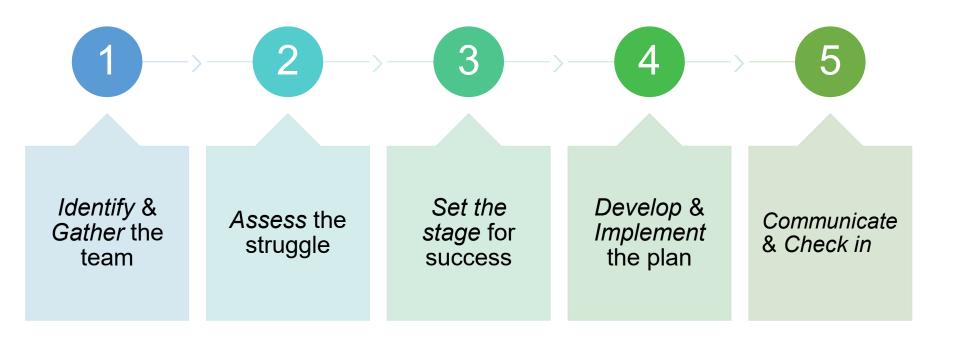
This is hopeless

I do not have time for this.

So, you think a student may be having difficulty with school attendance.

Here's what to do in 5 steps...early intervention is best!





^{**}These steps are fully explained in the companion manual accessible via Kelty**.

Step 1: Identify & Gather the team

Coordination is KEY to successful outcomes

- Who is on the child's team?
 - Caregivers
 - School professionals
 - Who will be part of the school-based team?
 - External MH professionals (potentially)



- Who will the school point person(s) be?
 - They will lead the assessment & facilitate development of the plan
 - They communicate with family, rest of school-based team, & external MH professionals





point person in conjunction with school-based team

Goal:

- Understand what's been going on for the youth and what is contributing to the challenges attending school, including...
 - history of school attendance
 - learning issues
 - mental health challenges
 - social or other stressors at school
 - family / home stressors

in case of bullying or other structural challenges, a systemic approach is needed first

Methods:

- talking with child (if age-appropriate) and parent
- consider school School Refusal Assessment Scale Revised (Kearney & Albano, 2007)
- review of school records & attendance
- conversations with relevant school professionals

Step 2a:

Assess the function & maintaining factors

We want to understand: for this child, what is keeping the school avoidance going?

- 1. **Negative reinforcement** (escaping bad feelings) e.g., missing a class presentation
 - 2. **Positive reinforcement** (getting good things) e.g., access to YouTube, Netflix at home
- 3. **Symptom accommodation** (allowing for avoidance) e.g., adults can struggle to cope with children's distress "OK fine you can stay home today but you HAVE to go tomorrow"



Step 2b: Assess the severity

Attends school regularly with distress Misses full school days or partial school days infrequently

Regularly misses full or partial school days Misses multiple full days or weeks of school at a time

Hasn't been at school for months or more

At risk

Developing



Team *may* consist of school & caregivers only

Significant

Long-standing

Team needs to be well-coordinated and will likely include multiple people at school (e.g. teacher and counsellor), caregivers, and external mental health professional(s).

Who is responsible for what?

School Team

- Developing/executing school re-integration plan (with external consultation in some cases)
- Setting up internal school team meetings
- Liaising with mental health clinician/family

External MH Clinician (if applicable)

- Individual therapy and/or parent training
- Consulting with school team; attending school team meetings
- Keeping school up to date on plans/progress

Caregiver: Communicating confidence & setting effective limits

- Making sure the home setting is boring during school hours
- Ensuring child is getting enough sleep; awake in time for school

Child: Being brave and going to school!



Step 3: Set the stage for success

Communicating with family



- Validate & encourage
 - demonstrate that you empathize with the family's struggle and offer hope that things can get better
- Normalize the struggle & communicate confidence
- Introduce the idea of the stepwise plan that will help get things back on track
- Discuss CYMH/external mental health referral if needed
- Methods:
 - Point person will talk with the parent and child
 - Extent of child involvement depends on age



Detailed information and scripts in accompanying document



Step 4: Develop & Implement Plan



4b: Plan school re-entry



Step 4a: Develop Bravery Ladder

- Should be done collaboratively with defined rewards/praise for each step
- Ladder to address each of the problem areas discovered during assessment phase
- Reassure child that fears will be faced step by step & they will have all the support they need. Keep it light!
- You do NOT need to plan/share all the steps right away

During Step 2
(Assess the Struggle),
we discovered that
Alfie was avoiding
school due to

- Being anxious & feeling ashamed during math class
- Being afraid about separating from his mother
- Challenges with certain peers

Alfie's Bravery Ladder



This will look different for each child! Remember to link steps to assessment results!



Step 4b: Plan school re-entry

Make as many of the unknowns KNOWN

- Address logistical concerns (e.g., seating arrangement; cover story)
- Clearly communicate expectations
 - Younger child: "Tomorrow we will do circle time and you won't have to raise hand"
 - Older child like Alfie: "Tomorrow you'll sit at your desk but won't have to do any work"
- Decide on accommodations
 - Access to point person?
 - Calm down spaces?
 - Academic?
 - Social support during unstructured time?
- Document gradual re-entry plan

Step 5:

Communicate & Check in

 Plan for ongoing check ins among team to ensure gains are maintained & progress continues

 Troubleshoot barriers early (e.g., Alfie struggled with sleep & recess)

 Regular communication with caregivers is important





Do not let kids escape at the peak of their distress. They will learn that anxiety goes down when they avoid.



Remember: it's normal & expected that kids will be nervous & protest facing fears.



Ignore anxious behaviours (e.g. dragging feet walking into class)



Avoid getting caught in prolonged anxiety-driven conversations & reassurance seeking



Remember to praise & reward bravery (even if the step seems small!)



Remember: each time kids complete a step in their bravery ladder, confidence will increase!

Tips for Success

FYI What does MH intervention involve for moderate/severe cases?

The gold-standard approach involves three primary prongs:

- 1. Caregiver support and behavioural strategies
- 2. School consultation and collaboration
- 3. Individual support for youth

Each individually may have some impact, but unlikely to result in significant changes for youth with moderate-severe school avoidance unless employed collectively



- How to respond effectively to anxiety-driven behaviour
- How to respond skillfully to anxiety-driven emotion
- How to set clear and appropriate expectations & limits
- How to implement good sleep hygiene
- How to modify home environment during school hours
- How to develop a reward system that is contingent on school attendance

What does individual support look like?

- Cognitive behavioural strategies for managing anxiety
- Motivational interviewing techniques
- Social skills training
- Executive skills training
- Medication management of MH comorbidities
- Medical support for physical health comorbidities that led to school nonattendance



TAKE HOME MESSAGES

Understanding the reason(s) for school avoidance is important

Early intervention is associated with better outcomes

The intervention intensity must match the severity of the avoidance

Expect some anxiety. Confidence is key!

School refusal / avoidance requires good coordination but is <u>treatable!</u>





Resources

- Kelty Mental Health https://keltymentalhealth.ca/
- School Refusal Assessment Scale Revised (Kearney & Albano, 2007)
- Child & Youth Mental Health local team
 https://www2.gov.bc.ca/gov/content/health/managing-your-health/mental-health
 health-substance-use/child-teen-mental-health
- Confident Parents Thriving Kids https://welcome.cmhacptk.ca/ (Educators can refer)
- Kelty Mental Health Webinar Series on School Attendance Challenges <u>https://keltymentalhealth.ca/school-attendance-webinars</u>
- Anxiety Canada (formerly AnxietyBC) https://www.anxietycanada.com/





Questions for the speakers?

Please use the "Q&A" icon



Thank-you for joining.

Contact the Kelty Mental Health Resource Centre:

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