



EMOTIONALLY BASED SCHOOL NON-ATTENDANCE

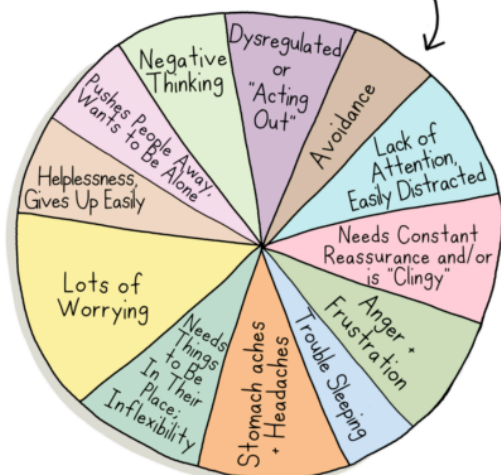
www.littlebeessend.com

Emotionally Based School Non-Attendance ("EBSNA") is when a child experiences extreme anxiety and distress in relation to attending school and as a result, remains absent or unfocused. Other phrases used have included: School phobia, School avoidant, School refusal, School anxiety.

WHAT WE OFTEN THINK ANXIETY LOOKS LIKE IN KIDS:



HOW KIDS ACTUALLY SHOW THEY ARE FEELING ANXIETY:



WholeHearted School Counseling

Some potential causes may include:

- | | |
|-------------------------|---|
| Academic pressures | Unpredictable school day |
| Friendship difficulties | |
| Sensory difficulties | Unstructured times such as lunch or break |
| Separation anxiety | Ineffective SEN Support |
| Classroom disruption | Changes to routine |
| Undiagnosed SEN | Transitions and moving around school |
| Bullying | |
| Learning difficulties | |

...and many other reasons.

These signs and symptoms can cause significant physical and mental distress and can lead to EBSNA. Children may present as reluctant to attend school and can escalate to not being able to attend.

Masking: is a term used to describe neurodiverse individuals who seek to hide or minimize their natural personality, anxieties, or autism traits to fit in and not stand out.

The fight-flight-freeze response is your body's natural reaction to danger. It's a type of stress response that helps you react to perceived threats. It is not a conscious decision. It's an automatic reaction, so you can't control it.

Fight

- Yelling, screaming, mean words.
- Hitting, kicking, biting, throwing, punching.
- Blaming, defensive.
- Demanding, controlling.
- Oppositional, defiant, non-compliant.
- Moving towards being threatening.
- Irritable, angry, aggressive.

Flight

- Need to escape, running away.
- Unfocused, struggles to pay attention.
- Fidgeting, restlessness and appearing hyper.
- Demanding, controlling.
- Preoccupied.
- Procrastinating, avoidant and ignores the situation.
- Anxious, panicked, scared, overwhelmed.

Freeze

- Shutting down, mind blank.
- Urge to hide and isolate themselves.
- Verbally unresponsive, will say 'I don't know'.
- Struggles to complete tasks.
- Zoned out.
- Unable to move.
- Depressed, numb, apathetic, helpless.



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"Schools have an important role to play in supporting the mental health and wellbeing of their pupils, by developing approaches tailored to the particular needs of their pupils. All schools are under a statutory duty to promote the welfare of their pupils, which includes: preventing impairment of children's health or development, and taking action to enable all children to have the best outcomes." 1.1 DfE Mental health and Behaviour in schools guidance

The SEND Code of Practice identifies four broad areas of need: Cognition and Learning; Communication and Interaction; Social, Emotional and Mental Health (SEMH); Physical and Sensory. It is likely that a child experiencing EBSNA will have needs that fall under the category of SEMH, possibly other areas as well.

Schools must use their "best endeavours" (Section 66 Children and Families Act 2014) to ensure any child with SEN gets the support they need and must make "reasonable adjustments" (Section 20 Equality Act 2010) to support a disabled child in accessing education. If they can not provide adequate support within their own resources then a EHCNA should be requested.

School can:

- Implement a tailored support plan. It is a **myth** that they cannot implement support unless they are attending.
- Provide schoolwork to complete at home to aid preventing a gap growing through missed learning.
- They must inform the local authority If the child is absent for more than 15 days, whether consecutive or cumulative.
- Make referrals to external support teams such as:
 - CAMHs, Educational Psychology, Mental Health in Schools Team (MHST), Inclusion Services, Specialist teach (Outreach) and Early Help.

Recording absences:

Schools have a legal duty to ensure that registers are accurately completed.

Children suffering from EBSNA should have their absences authorised due to illness: The child is ill because the physical and mental symptoms of Anxiety are making them unwell, preventing them from attending school.

'364. The pupil is unable to attend due to illness (both physical and mental health related). Schools should advise parents to notify them on the first day the child is unable to attend due to illness.'

365. Schools are not expected to routinely request that parents provide medical evidence to support illness absences. Schools should only request reasonable medical evidence in cases where they need clarification to accurately record absence in the attendance register – i.e. making a decision that code I is the absence code that accurately describes the reason the pupil is not in school for the session in question. In the majority of cases a parent's notification that their child is too ill to attend school will be that evidence and can be accepted without question or concern. Only where the school has genuine and reasonable doubt about the authenticity of the illness should medical evidence be requested to support the absence.'

Working Together To Improve School Attendance 2024.

If you suspect their absences have not been recorded correctly, if you haven't already, you should request a copy of your child's attendance record so that you can see what codes have been used. You can write to the Head Teacher requesting that they authorise use of the correct attendance code for absences due to EBSA. You may wish to use the [Not Fine In School template](#).



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How you can help your child

You may wish to request a meeting with the SENco and/or key staff members to discuss the support in place for them.

Seek support from the GP. This can be an important step in accessing further mental health support for them as well as documenting their anxiety symptoms in their medical records. They may be able to write you a letter explaining their difficulties which can help support any absences.

In some areas, CAMHs referrals are better to come from the school, if this is the case then it would be reasonable to request a referral is made.

Document everything to create a paper trail. Record everything you have tried and anything relating to their struggles. A diary can be really helpful, for example:

- Describe what happens daily with your child – what they say or do.
- Make a log of the days when your child doesn't want to go to school. This will give you a better sense of when and how often they feel like this, and can also help you raise it with the school
- Record evidence of the action you and the school are taking in writing. Keep notes and records of all conversations with school or medical staff.
- Follow up conversations with written summaries, and ask for written confirmation of any verbal agreements.
- Keep records of all medical appointments and any assessments or meetings .
- Keep all relevant letters and print outs of emails.
- For every absence send an email to school detailing why, each time.

Keep school informed and maintain positive communication with them. Working together with school can allow support to be more effective. If there are any strategies you feel may help then discuss this with school.

If they have an EHCP then you may wish to request an Early Annual Review if one is not due. This can enable provision within the plan to be reviewed to identify more effective support.

If they do not have an EHCP and school strategies have proved ineffective then requesting a EHCNA may be necessary. If school are unable/willing to do this then you have the right to submit a parental request.

If school doubt the authenticity of your child's illness you may wish to:

- Submit your own evidence to school such as your logs.
- Make a formal complaint to school may be appropriate if school continue to doubt the authenticity or refuse to implement appropriate support.
- Request a Needs Assessment if school are not meeting their needs.

'The Local Authority (LA) has an absolute legal duty to secure suitable, full-time alternative education for those children of compulsory school age who, by reason of illness, exclusion or otherwise, may not for any period receive suitable education unless such arrangements are made for them. This applies whether or not your child has an EHC Plan. They cannot choose not to provide this support, and they cannot use arguments of lack of resources to justify a failure to do so. LAs have a power (not a duty) to arrange education provision, where not already available, for pupils aged 16-18.' Section 19 Education Act 1996