

Office of School Participation and Truancy Response

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Why doesn't my student want to go to school?

In trying to answer this question, there are some things to keep in mind:

- The answer is not always obvious, and it may not be what the young person says it is, or what it appears to be on the surface.
- The underlying cause should not be a matter of opinion. If efforts by the school staff and parents, working together, do not result in necessary improvement, causation should be determined by systematic diagnosis using recognized diagnostic tools.
- School itself may not be the problem, sometimes the cause is a desire to simply spend time doing other things that are more fun.
- You may hear the term school anxiety. It is important to know that this is not a
 recognized disorder by the American Psychiatric Association (DSM-5). School
 avoidance involving anxiety may be a component of a depressive disorder,
 generalized or social anxiety disorder, or other diagnoses. When such disorders
 are diagnosed, they should be treated by appropriate mental health
 professionals, who should work with you to improve school participation.
- The most recognized diagnostic tool for school refusal is the School Refusal Assessment Scale (revised) developed by Christopher Kearney and Wendy Silverman. It determines behavior reinforcers for school avoidance in four categories:
 - Avoiding things at school that the student finds unpleasant or produce anxiety and/or depression such as peers, bullying, the lunchroom, the bus, or staff.
 - To escape consequences of unfinished assignments, team activities, tests, presentations, performances, or other social expectations.
 - Pursuing attention from significant others by staying home with or going to work with parents, being with alternative caregivers such as grandparents or older siblings, or being with a romantic interest.
 - Engaging in out of school pleasurable activities like sleeping late, playing video games, consuming entertainment media (television, movies, music, etc.), delinquent behavior, and substance abuse.
- Sometimes the reason for school refusal is that the student is simply too tired or fatigued to wake up in the morning. When this is apparent, first ask what the child is doing at night instead of getting enough sleep. It varies by age and individual, but most students need 8 ½ to 10 hours of sleep a night. If young

people are up late playing video games, texting, watching television and otherwise consuming media, they will not want to get up in the morning and may report hating school or other symptoms to avoid it. Some of these activities are actually addictive in the same manner as drugs, alcohol, tobacco, and gambling.

What should I do?

- ✓ If the child complains of physical symptoms, the primary care physician should be consulted to rule out or treat any medical conditions. If no underlying medical conditions are present, the physician, working with the parent(s) and school, is a good place to start on a systematic evaluation for underlying cause.
- ✓ It is important that the student is kept in school, and arrives for school on time and ready to participate and learn. Missing or arriving late for school reinforces anxiety rather than relieving it.
- ✓ The student should remain in school for the day and not be sent home unless one of the following is present: repeated vomiting, bleeding, fever greater than 100 F., severe diarrhea, acute flu-like symptoms, parasites (e.g. bed bugs), signs of severe pain, serious injury, or other extreme medical conditions.
- ✓ Work with the school. Your school is prepared to develop strategies to help the student engage in school and to make accommodations for anxious students.
- ✓ If mental health resources are needed, the school counselor, social worker, psychologist or KSSN staff can help determine what kind of provider would be best, and also help you with community resources.
- ✓ If the student must stay home, there should be no access to media or other pleasurable activities. During school time, home should not be more stimulating than school. Unless the child is resting in bed due to illness, the only activities should be missed school work, school projects, or reading materials related to classes.
- ✓ Talk with the student in a non-threatening and non-confrontational manner. Listen carefully and work with the child to resolve fears or barriers. Be encouraging and reassuring. Make goals and give feedback regularly. Praise and reward all progress toward the goal. Form a partnership between you, the student and the school. Communicate the importance of regular, on time, and continuous school attendance. Be sure that school participation is a family value.
- ✓ Remember that you are the parent. You are in control of what media the student has access to and when. When it proves necessary for the student to get needed sleep, you can take or shut down things like cell phones, television service, and internet access. A quiet time, without media, for an hour before bed, prepares the child for better and more rapid sleep. Children do not need cell phones and they certainly don't need them during sleep time. These things can be rewards (during the appropriate times) for appropriate school participation.
- ✓ Set a positive example. Everyone needs proper sleep. Awake and get up before the student. Have a regular routine for the start of your day. Expect and require the same for the student. Have clothes, breakfast, lunch and transportation prearranged so that the start of the morning is stress free and anticipates a productive day ahead. This preparation is a good thing during nightly quiet time.