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School Phobia/School Avoidance/School Refusal: A Handout For Parents

By: (1998)

School phobia/school avoidance/school refusal are terms used to describe children who have a pattern of avoiding or refusing to attend school. Different from truancy, these behaviors occur in approximately 2% of school aged children. Historically called "school phobia", many researches now prefer to use the terms "school avoidance" or "school refusal."

Background

School phobia/School Avoidance/School Refusal are terms used to describe children who have a pattern of avoiding or refusing to attend school. Different from truancy, these behaviors occur in approximately 2% of school aged children. Historically called "school phobia", many researches now prefer to use the terms "school avoidance" or "school refusal." There is confusion regarding the terms because children who experience significant difficulty in attending school do so for different reasons and exhibit different behaviors. In general, children who refuse to attend or avoid school stay in close contact with their parents or caregivers, and are frequently (although not always) anxious and fearful. They may become very upset or ill when forced to go to school. Truants may be distinguished from this group by their antisocial or delinquent behaviors, their lack of anxiety about missing school, and the fact that they are not in contact with parents or caregivers when they are avoiding school.

Development

Part of the confusion regarding the term "school phobia" is that the behaviors are not usually considered to be a true phobia. Although some children fear school-related activities (bus ride, reading aloud in class, changing for physical education), some are anxious about home issues or about being separated from a caregiver. Children become anxious for many reasons. "Separation anxiety" typically occurs at about the age of 18 to 24 months. Toddlers will cry, cling and have temper tantrums when they are about to be separated from their caregiver (for daycare or a babysitter, for example). This is normal at this age, but some older children continue to have difficulty separating from caregivers.

Sometimes school-aged children who were previously able to separate from their caregivers will suddenly become anxious and fearful. A recent crisis in the community or the family (such as a death, divorce, financial problems, move, etc.) may cause a child to become fearful or anxious. Some children fear that something terrible will happen at home while they are at school. Children who are struggling in school with academic or



social problems may also develop school refusal. Many children have social concerns and may have been teased or bullied at school or on the way to school. Some neighborhoods or schools are unsafe or chaotic.

Children who have missed a lot of school due to illness or surgery may experience difficulty returning to the classroom routines as well as academic and social demands. Still other children prefer to stay home because they can watch tv, have parental attention, and play rather than work in school. Children and youth who are transitioning (from elementary to middle school, or middle school to high school) may feel very stressed. All of these factors may lead to the development of school refusal/avoidance. Additionally, many children avoid or refuse school for a combination of reasons, further complicating treatment.

If untreated, chronic school refusal or avoidance may result in more than family distress. Academic deterioration, poor peer relationships, school or legal conflicts, work or college avoidance, panic attacks, agoraphobia and adult psychological or psychiatric disorders may result.

What can parents do?

Prevention

Toddlers and preschoolers can benefit from structured experiences with other adults. Parents can help young children to separate from caregivers in several ways. Reliable and safe babysitting or daycare are excellent examples. Many communities have opportunities for preschoolers such as story hour at the library, preschool religious training such as bible school, recreational activities, preschool, etc. When the child fusses at separation from the parent, the best strategy is to inform the child calmly that the parent will return and that the child is to stay. Then leave quickly. Children typically have more difficulty separating if their parents hover, linger, become upset, wait for the child to calm down or attempt to reason with the child. A firm, caring and quick separation is usually better for both parent and child. Preschool caregivers will typically report that the child's distress quickly disappears. However, children whose parents prolong the separation or who have had unsuccessful preschool separation experiences may need more time or support to calm down. This may be because they have learned that their distress results in parental rescue from separation! Successful preschool experiences ease the transition to preschool or kindergarten.

When children refuse or avoid school

If complaints of illness are the excuse for not attending school, have the child checked by the family medical provider. If there is no medical reason to be absent, the child should be at school. The parent should attempt to discover if there is a specific problem causing the refusal. Sometimes the child feels relief just by expressing concerns about friends or school expectations. If the child is able to pinpoint a specific concern (such as worry about tests, teasing, etc.), then the parent should immediately talk to the child's teacher about developing an appropriate plan to solve the problem. Some common sense strategies to try include having another family member bring the child to school, or if the child does stay home then rewards such as snacking, tv, toys, or parental attention should be eliminated. A school schedule may be duplicated at home.

However, if the child is extremely upset, if the child needs to be forced to attend school, if there is significant family stress, or if the refusal to attend school is becoming habitual, the family should not hesitate in asking for assistance from the school psychologist, school counselor, or other mental health professionals. Parents and the school need to work together to identify what is causing or maintaining this behavior and to develop a comprehensive plan of intervention. A key to success is rapid intervention; the longer the behavior occurs, the harder it is to treat.

Treatment depends upon the causes, which can be difficult to determine. Many children may have started to avoid school for one reason (e.g., fear of being disciplined by a teacher, feeling socially inadequate) but are now staying home for another reason (e.g., access to video games, lack of academic pressure, etc.). several treatment plans may need to be tried. Helping the child to relax, develop better coping skills, improve social skills, using a contract, and helping the parents with parenting or family issues are all examples of possible treatments.

Resources

Martin, M. and Waltham-Greenwood, C. (1995). Solve your child's school related problems. New York: Harper Perennial (School phobia, pp. 208-213).

Paige, L.Z. (1993). The identification and treatment of school phobia. Silver Spring, MD: National Association of School Psychologists.

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