

Parents' views on EBSNA: A solution-based exploration into successful
reintegration.

Rachel Sawyer

Registration Number: 100074241

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Summary

This document has been written and organised into three sections: a review of the literature, an empirical chapter, and a reflective account. Firstly, the literature review will consider the evolving narrative around 'Emotionally-Based School Non-Attendance' (EBSNA), including the varying terminology, conceptualisations and frameworks adopted across previous decades. This will subsequently contextualise modern-day practice in this field, including highlighting current issues and barriers faced by parents and professionals. Secondly, the empirical chapter will detail a mixed-methods study, in which parent views and experiences of EBSNA were gathered with a 'solution-oriented' focus. The research employed both a questionnaire and semi-structured interviews to consider retrospective experiences of successful EBSNA support, with an aim of informing future practice and facilitating positive support for children experiencing EBSNA and their families. Following analysis of this data, implications for professional practice and directions for future research are discussed. Finally, the reflective chapter provides an account of the researchers' journey throughout the process of designing, executing, and interpreting the present study. This section will consider the researchers' experience, including reflections on their epistemological stance, research topic and design, as well as how the findings are situated alongside both literature and practice to promote positive and productive outcomes. Consideration is also given to the impact of the present study on the practice of educational psychologists, and how the findings can be appropriately disseminated.

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Literature Review: Understanding the Evolving Narrative and Informing Future Research

Introduction

School attendance is a statutory requirement in the United Kingdom (UK), with all children and young people (CYP) of ‘compulsory school age’ being entitled to access full-time education (Department for Education; DfE, 2015). The importance of school attendance for CYP’s social and emotional development has long been documented, with suggestions that disruption impacts upon academic achievements (Taylor, 2012; Sheppard, 2009), and development of life skills, (Kearney & Graczyk, 2014). Furthermore, findings indicate higher unemployment rates in individuals with low school attendance (Attwood & Croll, 2014), as well as significantly greater psychiatric difficulties, such as anxiety and depression (Thambirajah, et al., 2008). This prognosis, alongside the short-term impact on social relationships, highlights the benefits of regular engagement with education.

The DfE reported that over 10% of CYP were classed as ‘*persistent absentees*’ in 2018/9, meaning that they had missed over 10% of learning across the school year (DfE, 2020). Multiple reasons, such as illness or (un)authorised holiday, are cited, however one of growing concern is ‘*Emotionally-based school non-attendance*’ (EBSNA), referring to severe emotional difficulties when attending school (West Sussex County Council; WSCC, 2010). This difficulty, also commonly referred to as ‘*school refusal*’ (Kearney & Silverman, 1991) and ‘*emotionally-based school avoidance*’ (WSCC, 2010), is estimated to impact between one and two percent of CYP (Nuttall & Woods, 2013), although understanding its true prevalence is complicated by the lack of official measures and statistics (Thambirajah, et al., 2008; Kawsar et al., 2021). Previously, this phenomenon has been identified and classified in various ways (Heyne, 2019), with little consensus on how it should be best described and defined. However, a commonly accepted set of criteria originates from Berg, et al., (1969):

- (1) Severe difficulty attending school,
- (2) Severe emotional upset at the prospect of attending school,
- (3) Staying at home with the knowledge of parents (*later revised to ‘parents make reasonable attempts to secure child’s attendance’; Berg, 2002*)
- (4) Absence of anti-social behaviours.

This description of behaviour associated with ‘EBSNA’ (labelled ‘*school phobia*’ at the time of conception), provides a clear separation from alternative school attendance difficulties, such as truancy; a distinction advocated for within the literature (e.g. Heyne, et al., 2001; Egger, et al., 2003), yet not consistently acknowledged within legislation and practice. The above

criteria will therefore be adopted throughout this review as the definition of EBSNA, with further discussion around varying classifications of this difficulty presented below.

The presentation of EBSNA can vary considerably between individuals (WSCC, 2010), with characteristics including refusing to attend, persistent worrying about school-related issues, and possibly aggressive behaviour towards adults encouraging attendance (Thambirajah, et al., 2008). Havik, et al., (2014) additionally found a relationship between EBSNA and somatic health complaints (e.g. headaches, stomach ache), further suggesting its heterogenous and subjective presentation (also see Bernstein et al. 1997). There does not appear to be an association between EBSNA and gender, age, or socio-economic status, however it is believed that difficulties 'peak' around times of transition (Pellegrini, 2007). As recent findings suggest the negative impact that EBSNA has on families and wellbeing (Not Fine in School, 2020), alongside the potential later life outcomes, there appears a pressing need to improve understanding and research in this area.

This review aims to consider existing literature surrounding EBSNA, including theoretical underpinnings, and subsequent implications for intervention. Adopting a narrative approach, the evolving conceptualisation and approaches to supporting EBSNA over time will be considered, to provide context and understanding of current issues and uncover areas for further development. The following search terms were entered into prominent research databases (PsychInfo, Science Direct, EBSCO) as an initial point of access to the wide range of existing literature spanning multiple decades:

This search (undertaken in February 2021, and October 2021) produced a broad sphere of qualitative and quantitative findings, many of which lay beyond the scope of this review. Papers that focused exclusively on 'truancy' or medical absence were excluded to maintain focus on EBSNA alone, however papers from countries outside of the UK (e.g. the United States, Europe) were included due to the limited range of UK-based findings. Initial searches additionally excluded papers that were not published or subject to peer review, however due to the direct relevance and insight provided by multiple unpublished thesis papers, a select few have since been included. On this occasion, a 'snowballing' strategy was employed alongside the initial search terms, whereby relevant papers signposted additional reading on the subject to promote a holistic understanding. This additionally allowed for the broad range of terminology (see below) to be captured, with popular terms being employed within the initial search, whilst not excluding any additional terms that exist within the literature (e.g. *'school phobia'*).

Table 1*Initial search terms employed*

Main search term	Additional search terms
Emotionally-based school non-attendance	'Supporting –'
Emotionally-based school avoidance	'- factors'
School Refusal	'- parents'
School Avoidance	'- schools'
	'anxiety based-'

The aim of this discussion is subsequently to explore the historical context of EBSNA, and demonstrate the progression of understanding in this area, leading to modern-day implications for research and professional practice.

Terminology

EBSNA has been known by a variety of terms, which has arguably fostered confusion (Heyne, et al., 2019). This phenomenon was first acknowledged by Broadwin (1932), describing the role of anxiety in preventing school attendance as a form of 'neurosis', later becoming known as '*school phobia*' (Johnson, et al., 1941; Berg, et al., 1969). However, with time, researchers have shifted away from 'medicalised' language towards descriptive labels, with the term '*school refusal behaviour*' growing in commonality (Kearney & Silverman, 1990; Last & Strauss, 1990) during the 1990s. Although this could be acknowledged as a step away from viewing EBSNA as a 'psychiatric' disorder, it is argued that this term is too broad (Heyne, 2019), with Kearney and Silverman (1991) describing '*school refusal behaviour*' as '*non-attendance for child-motivated reasons*', without specifying the nature of these. '*School refusal behaviour*' has therefore become a term akin to '*school attendance problems*'; representative of a wide range of difficulties. Authors such as Havik, et al., (2014), as well as Elliott (1999) have emphasised the importance of distinguishing EBSNA from other attendance difficulties, such as truancy; a key difference being motivation or 'volition' to attend (Elliott, 1999) whereas, with EBSNA, '*strong negative emotions*' are the primary barrier to attendance. This has led to the rise of terms such as '*emotionally-based school avoidance*' (WSCC, 2010) in attempt to clarify and distinguish this need, resulting in a range of terms being used interchangeably by professionals.

The importance of this language shift is discussed by Pellegrini (2007), arguing that previous terms subscribe to a 'within-child' model, removing focus from the school environment itself. He instead argues that language should aim to be descriptive, rather than offer judgement,

advocating for the term '*extended school non-attendance*' rather than '*refusal*' or '*avoidance*'. This aligns with comments from Lauchlan (2003) that these difficulties exist on a 'spectrum' for "*a diversity of reasons*" (pp.133) and represents the phenomenon's heterogeneity.

This review acknowledges this shift in discourse through adopting the term '*emotionally-based school non-attendance*', with an aim of embracing the non-judgmental and objective language advocated for by Pellegrini (2007), whilst maintaining the distinction from alternative school attendance difficulties. Whilst this may further cloud understanding and consistency (Heyne, 2019), the hope is to promote an increasingly neutral position on this topic. This term has recently begun to gain popularity within research contexts (e.g. Browne, 2019; Ford, 2018), and has therefore been selected to align with this, although it is recognised that terminology across the literature is varied and inconsistent. Researchers such as Holder (2021) continue to advocate for terms such as 'emotionally-based school avoidance' when referring to this difficulty, arguing that the phrase 'non-attendance' does not capture the full spectrum of CYP that face school-related anxiety. Whilst the author does not disregard this view, the term EBSNA has been selected due to this review focusing primarily on CYP who's anxiety has resulted in non-attendance, as the association with negative later life outcomes, and the impact on their wider families, arguably renders this population as the most pressing in terms of researching and understanding their needs.

UK Legislation and EBSNA

In the UK, schooling is compulsory for all children between the ages of five and 16 (DfE, 2015), with parents holding ultimate responsibility for their child's attendance (Education Act, 1996). Should CYP display prolonged or irregular periods of 'unauthorised absence' (i.e. not due to physical illness or prior arrangement with the school), the parent could be liable to prosecution under Section 444 of the Education Act (1996). The DfE defines a 'parent' as "any person who has parental responsibility over the child, or who has care of a child or young person" (2015, pp.5), with this individual being subject to 'parenting orders' and/or 'fixed penalty notices' should they not secure their child's school attendance (DfE, 2015). At present, local authorities hold legal powers to enforce such measures.

The importance of CYP's school attendance must be acknowledged, with a review from Taylor (2012) highlighting the negative later life outcomes associated with non-attendance, included the higher likelihood of being recognised as 'NEET' (Not in Education, Employment or Training) after leaving compulsory schooling. The legal reinforcement of school attendance is therefore understood and justified, with Taylor commenting that 'persistent failure' to secure a child's attendance could be perceived as a "clear sign of neglect" (pp.8), given its role and significance in child development. With the DfE (2020) reporting that over

10% of CYP fall within the category of 'persistent absenteeism', it is not surprising that greater emphasis and guidance has been produced in recent years (DfE, 2013; 2020) in attempt to tackle this issue.

The DfE (2020) provides a range of codes for schools to utilise when recording a child's absence, including attendance at an alternative provision, illness, religious observance, authorised holiday, and, more recently, absence related to 'Covid-19'. However, EBSNA or school-related anxiety is not included within this list, remaining unacknowledged within the legislation, providing a potential explanation as to why its true prevalence and impact is largely unaccounted for (Kawsar et al., 2021). Furthermore, this lack of acknowledgement leaves parents of these CYP liable to parenting orders, fines, and prosecution under the Education Act (1996), with Section 444 (1A) additionally stating that parents who are aware of their child's school absences may face larger fines than those who are not. This directly impacts parents of CYP with EBSNA, with 'staying at home with knowledge of parents' being clearly included within Berg et al's criteria (1969). This therefore places the onus of school attendance onto parents, despite the range of contributing factors (discussed below), as well as these parents making 'reasonable attempts to secure attendance' (Berg, 2002). This would suggest that the threat of punishment in addressing EBSNA is likely unhelpful and achieves little impact; a suggestion supported by a recent survey (Not Fine in School, 2020). These findings indicated that 98% of parents previously experiencing prosecution for their child's EBSNA reported that this did not alter their child's situation, highlighting the need for greater understanding and collaboration with families on this matter. In the absence of updated legislation at present, it therefore seems appropriate that further research into how schools and education professionals can support these difficulties in practice should take place.

EBSNA and Special Educational Needs

Despite the heterogenous nature of EBSNA, there is evidence to suggest that those CYP with recognised 'Special Educational Needs' (SEN) may be at higher risk of experiencing this difficulty. In March 2020, the DfE reported that the rate of 'persistent absenteeism' across the population of CYP with an 'Education, Health and Care Plan' was at 24%, in comparison to 10% across the wider population. This suggests that those individuals with SEN are missing education at a considerably higher rate than their peers. The DfE does not give further details on the reasons behind 'persistent absenteeism', meaning that these absences could be related to a range of factors, such as medical appointments, illnesses, or changes in provision, however this could also indicate higher levels of EBSNA. Although this phenomenon is largely under-researched within this population, this would support

comments from Casoli-Reardon et al., (2012) that learning difficulties contribute greatly to school-related anxiety, which can result in 'school avoidance'.

Research completed by Munkhaugen, et al., (2017) found that CYP with a diagnosis of Autism Spectrum Disorder (ASD) were significantly more likely to display 'school refusal behaviour' than their typically developing peers. Furthermore, Fillipello et al., (2020) found an association between 'specific learning difficulties' and 'school refusal', with 'escaping aversive social situations' deemed to be a considerable mediating factor. The importance of social mediating factors was additionally found by Ochi et al. (2020), discussing the contribution that bullying and peer relationships can have in predicting school refusal in children with SEN. It must be acknowledged that much of this research discusses the prevalence of 'school refusal behaviours' more broadly, with little specific reference to EBSNA, meaning that a multitude of factors and difficulties are likely relevant, however these studies highlight the potentially higher risk of EBSNA held by children with SEN in relation to the general population.

Nelson and Harwood (2011) furthered this by finding a relationship between learning difficulties and high levels of anxiety, which may render them more likely to display EBSNA. They suggest that this may be due to a 'secondary reaction', whereby anxiety is driven by SEN-related experiences, such as difficulty forming relationships or accessing the curriculum. However, many CYP experiencing EBSNA will not have any diagnosis or learning difficulty, with anxiety being their primary presenting need. Under Section 6.32 of the SEND Code of Practice (DfE, 2015), 'Social, Emotional and Mental Health Difficulties' are listed as a category of SEN, suggesting that all CYP experiencing EBSNA should receive appropriate SEN support. This aligns with comments from Kearney and Graczyk (2014) that a 'Response to Intervention' approach, which mirrors principles advocated for by the SEND Code of Practice may be appropriate. This will be discussed in more depth in later sections of this review. The overarching message, however, indicates the need for schools, and alternative educational professionals to play a greater role in identifying and supporting this need as a recognised result of SEN (Pellegrini, 2007; Nuttall & Woods, 2013).

Understanding EBSNA

This section will consider factors that motivate and perpetuate EBSNA, and how perception of these has evolved over time. In modern practice, EBSNA is understood as a multi-faceted and heterogenous phenomenon, with many co-occurring factors across multiple levels contributing to this difficulty (Thambirajah, et al., 2008). Through exploring previous research within this area, this will provide theoretical and contextual understanding into current approaches and frameworks of EBSNA, as well as how this can be best supported.

EBSNA and Anxiety

EBSNA is defined by the severe emotional upset and negative emotions experienced at the prospect of attending school (Berg, et al., 1969; Berg, 2002; Elliott, 1999). In most cases, this is believed to take the form of anxiety (Maynard, et al. 2015; WSCC, 2010; Thambirajah, et al., 2008), referring to a 'multi-dimensional' concept comprised of physiological, cognitive, and affective components (Rappo, et al., 2017). This likely explains the vast heterogeneity observed across cases of EBSNA (Maynard et al, 2015), as well as the association with subjective health complaints (Havik, et al., 2014). A systematic review completed by Finning et al. (2019a) was the first of its kind to explicitly explore this relationship, including quantitative studies that measured 'anxiety' using validated scales. Their conclusion suggests a relationship between 'school refusal' and anxiety, most notably 'Generalised Anxiety Disorder' (American Psychiatric Association, 2013) suggesting that individuals presenting with this diagnosis are significantly more likely to display anxiety related to school attendance. As discussed above, this strengthens our understanding of the relationship between EBSNA and SEN, with anxiety and emotional difficulties being categorised as such within the SEND Code of Practice (2015). This may therefore highlight the presence of SEN, particularly difficulties with social, emotional, and mental health, as a contributing factor to EBSNA, with attendance difficulties potentially acting as a catalyst to the recognition of such needs.

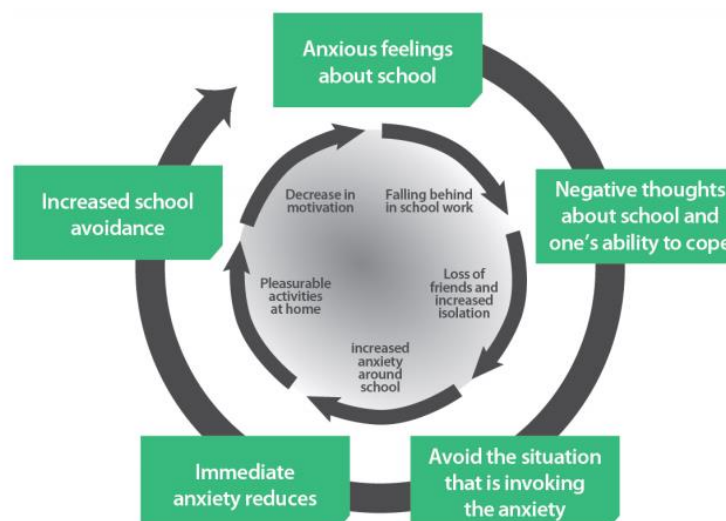
For many years, EBSNA (previously termed '*school phobia*'; Johnson, et al., 1941), was classified and understood as a direct result of psychiatric difficulties. Case study research completed by Coolidge, et al., (1957) supported this, reporting that CYP displaying 'school phobia' were either temporarily 'neurotic' or synonymous with "characterological disturbance" (pp.305). Despite being based upon observational, circumstantial, and often limited participant data, this cognitive-behavioural diagnostic framework became the focus of research in this field for years to come (Lee & Miltenberger, 1996). For example, Bools et al., (1990) interviewed parents of children experiencing school attendance difficulties, finding that over 50% of participants meeting criteria for 'school refusal' also met diagnostic criteria for psychiatric or 'neurotic' disorders. A further 30% additionally displayed high levels of anxiety confined to certain parts of the school day, whilst not meeting the threshold for psychiatric diagnosis, suggesting that EBSNA is characterised and driven by a spectrum of anxiety-related difficulties. These findings were supported by Berg et al., (1993), who found similar rates of mental health difficulties present in individuals displaying low school attendance (defined as at least 40% absence), highlighting the potential for unmet mental health needs within this population. Recent research has added to this, with separate literature reviews from Finning et al. (2019a, 2019b) providing evidence for the relationship

of both anxiety and depression with EBSNA respectively, as well as Egger, et al., (2003) finding an association between 'anxious school refusal' and diagnosable psychiatric disorders. These authors additionally recommended the use of psychiatric screening for CYP experiencing this difficulty to provide better understanding and treatment of their emotional needs.

However, this evidence is limited, and no research has found perfect correlations between school attendance and psychiatric diagnoses, with many individuals experiencing EBSNA not meeting the diagnostic threshold. This led to comments from Berg et al. (1993) suggesting that EBSNA may be a manifestation of psychiatric disorder, whilst also remaining non-exclusive to this. One explanation is put forward by WSCC (2010), and the role of anxiety maintaining or perpetuating EBSNA over time, where it is not necessarily the sole cause of the difficulty (see Figure 1). In these circumstances, increased time away from school raises anxiety levels about returning, described by Havik, et al., (2014) as a difficult cycle to break. This may therefore explain mixed success attributed to cognitive behavioural and psychosocial interventions in promoting school reintegration (e.g. Maynard, et al., 2015; Last, et al., 1998); whilst evidence suggests that this may hold benefit, it may not treat the underlying 'cause' that initially triggered the EBSNA. Ingul and Nordahl (2013) further this through arguing that anxiety itself does not predict absenteeism, but rather acts as a 'risk factor' alongside alternative contributors, such as the presence of bullying and individual resilience. Subsequently, the theoretical suggestion that anxiety or psychiatric difficulty alone predicts EBSNA holds connotations of a 'within-child' and medical model, forming an insufficient understanding of this complex behaviour (Thambirajah, et al., 2008).

Figure 1

Diagram showing the anxiety that initiates and maintains school attendance difficulties.



Note: From West Sussex Educational Psychology Service (2010). Emotionally-based school avoidance: Good practice guidance for schools and support agencies. Accessed via: www.westsussex.gov.uk

It may therefore be more appropriate to consider instances of EBSNA alongside the 'lens of intersectionality', whereby multiple factors or characteristics, bringing their own unique challenges, come together to influence an individual's experience or behaviour (Carbado et al., 2013). Consideration of wider factors must therefore take place to identify and implement appropriate support.

Parental and Home Factors

Another believed contributor to EBSNA and school-related anxiety, are factors related to parenting style and home environments (Thambirajah, et al., 2008; Garfi, 2018). The framework of 'Attachment Theory' (Bowlby, 1969) has historically been applied in attempt to understand this phenomenon, creating an approach to 'treatment' that focuses on the parent-child relationship. Attachment Theory is a psychological model that gained prominence in the 1970s, emphasising the role of parent-child relationships in developing secure 'attachment' behaviours, that would allow for success in later life. Drawing upon evolutionary psychology, Attachment Theory posits that 'attention-seeking' behaviours are driven by an adaptive need to avoid separation from the caregiver, with infants experiencing distress if this need is not met (Fraley, 2010). Work by Ainsworth (1970), commonly known as the 'Strange situation', furthered this through the study of 'Attachment Styles', suggesting that parent-child relationships can be 'categorised' into 'Secure' or 'Insecure' attachments. Insecure attachments are commonly associated with mental health difficulties, low self-esteem, and poor relationships in adulthood (e.g. Lee & Hankin, 2009; Schimmenti & Bifulco, 2015; Hill, et al., 1994).

The role of parental attachment in the development of EBSNA has been suggested from the outset of its recognition. Davidson (1960) described 'school phobia' as a "manifestation of family disturbance", basing his findings on observation of 30 families at a Child Guidance Clinic. He claimed that school attendance difficulties are a result of "perfectionist mothers....and ineffectual fathers" (p.277), suggesting that treatment directed at mothers alone may be beneficial in reducing EBSNA. This narrative, although historical, has been supported by Scott, et al., (1995), with claims that addressing parent-child relationships is key in overcoming 'school refusal', through methods such as parental psychoeducation.

This framework posits that an 'insecure attachment' between parent and child can lead to the development of 'Separation Anxiety Disorder' (SAD); "recurrent excessive distress when

anticipating or experiencing separation from home or major attachment figures” (American Psychological Association, 2013). Research has demonstrated a correlation between the presence of SAD and EBSNA, with Dabkowska (2007) reporting that SAD is the most common disorder co-occurring with ‘school refusal’, present in almost 80% of cases. This approach to understanding EBSNA is historical, with Johnson, et al., (1941) documenting experiences of children with ‘school phobia’ claiming that the overlapping characteristics included impaired maternal or family functioning, and poor parent relationships. Waldron, et al., (1975) echoed this, suggesting that parental pathology can lead to ‘school phobia’ through the mediation of SAD, evidencing that use of this framework to understand EBSNA has been stable across multiple decades. Subsequently, this may further researchers’ and professionals’ understanding into the relationship between EBSNA and anxiety as discussed above, with SAD being a primary contributing and mediating factor to school attendance difficulties.

Muris, et al., (2001), for example, studied the self-report attachment styles of 155 adolescents, as well as employing measures of depression and anxiety. Their findings indicated that, not only did ‘securely attached’ students demonstrate better quality relationships, but also lower levels of anxiety and depression, suggesting the role that attachment may play in determining wider CYP mental health. This adds weight to Dabkowska (2012) and the suggestion that EBSNA should be viewed as a symptom of SAD, rather than an independent phenomenon, suggesting attachment difficulties as a considerable predictive factor.

Modern research has added support to this theory, with Bahali et al., (2011) comparing CYP experiencing ‘school refusal’ to a control group. Their findings indicated that SAD was the most common co-occurring disorder, and that parental anxiety and psychological difficulty was higher in those that experienced EBSNA. Furthermore, Hanna, et al., (2012) discussed the role of SAD as a ‘normal developmental phenomenon’ that can return and cause maladaptive functioning at times of stress; the authors suggest that those CYP from single-parent households, or with parental mood or anxiety disorders are more likely to develop SAD and school attendance difficulties, advocating for a ‘family-based’ approach to ‘treatment’. This is also suggested by Doobay (2008), arguing that support for EBSNA should focus on treating SAD, through cognitive-behavioural approaches, suggesting that this framework holds potential for treatment at the individual and family level.

Authors have also discussed the role of wider family functioning in predicting EBSNA. A review completed by Kearney and Silverman (1995) considered the role of family dynamics within school refusal, identifying five family ‘subtypes’:

- (1) '*Enmeshed*' families; characterised by 'overprotective' parenting.
- (2) '*Conflictive*' families; characterised by unclear parent-child boundaries,
- (3) '*Detached*' families; characterised by withdrawn and unvigilant behaviours,
- (4) '*Isolated*' families; characterised by little extrafamilial relations,
- (5) '*Healthy*' families; characterised by cohesion and expressiveness.

Kearney and Silverman suggested that 'school refusal' can be found in all identified subtypes, but is less common in 'healthy' families, and that this can be treated through targeting intervention at improving family dynamics. This adds to the narrative created by authors such as Waldron et al (1975) and Hersov (1960) that EBSNA is a maladaptive response to family 'neurosis', or a result of poor family functioning. However, research suggests that this relationship may be complex and influenced by a range of factors, including low socioeconomic status, with Ready (2010) finding that children from low-income families were more likely to experience SAD. This contradicts reports that EBSNA appears unrelated to socio-economic status (WSCC, 2010), indicating that a wider range of factors beyond simply SAD must be considered.

One factor considered by the literature includes parental mental health, which is believed to contribute to the anxiety and negative emotions observed in cases of EBSNA. Martin et al., (1999) explored this relationship, studying the role of historical familial disorders in the development of 'school refusal behaviour'. The findings indicated that, in over 40% of 'school refusal' cases, both parents exhibited a psychiatric disorder, with a further 45% of CYP having at least one parent with a similar diagnosis. The authors claim that this supports the use of 'Attachment Theory' as a framework to understand and support EBSNA, with the parent-child relationship being disrupted by the presence of parental mental health difficulties. Whilst this provides strong evidence for this relationship, it must be noted that the onset and manifestation of these parental psychiatric difficulties were not documented; it is not understood whether the difficulties arose before or after the CYP's difficulty with school attendance and therefore have been influenced by the distress of the circumstances. Furthermore, participants were recruited from a mental health inpatient facility, and therefore represent the most 'extreme' cases, dismissing the wide spectrum of CYP who experience EBSNA to varying degrees without a diagnosis; these CYP therefore represent a small cross-section of this population.

However, research continues to suggest the link between parental mental health and EBSNA, suggesting that it is both a valid and important factor to consider. As mentioned above, Bahali, et al., (2011) found higher levels of anxiety in parents of CYP displaying 'school refusal', with Carless (2016) additionally suggesting that this population present with

higher levels of family psychopathology and emphasises the importance of considering this when implementing support.

This relationship may explain findings from Hughes, et al., (2020) that parenting style contributes to school attendance difficulties, mediated by maladaptive emotional development. Their research suggested that poor emotional regulation and increased externalising behaviours, indirectly caused by parenting style, could be a factor in developing EBSNA, although they admit that their findings cannot evidence causality and deny the presence of alternative factors. However, the overarching message produced by the research highlights the role of attachment, parent mental health and family functioning in the development of EBSNA, suggesting that these are all 'risk factors' (as discussed by Ingul & Nordahl, 2013; Holder, 2021) in developing the anxiety displayed within these CYP.

This is a view supported by Gubbels, et al., (2019), following their review of 'risk factors' within the literature that contribute to broad school absenteeism. However, this review also highlighted that these exist alongside various child, school and peer factors that lead to this 'multi-faceted difficulty'; factors that are largely overlooked by the majority of literature that supports the 'Attachment Framework'.

Pilkington and Piersel (1991) critique this approach to understanding EBSNA, claiming that Attachment Theory alone is too narrow to explain the full spectrum of difficulties, and that research has failed to focus on alternative narratives and frameworks, creating a bias within the literature. They additionally criticise the lack of control groups within these studies, the use of clinical populations and the absence of consideration of school-based or external factors, pathologising the behaviour rather than holding a holistic perspective. This is furthered by Baldwin and Fehr (1995), and their comments on the instability of attachment style ratings over time, suggesting that parental attachment and style, and therefore any consequences of these, are not a fixed entity, and may not fully explain all aspects of EBSNA. This directly calls into question findings such as Bahali et al. (2011), whose methods focused on adolescents' self-report data, and did not include interviews with parents themselves, highlighting an avenue for future research to explore further.

Historically, the 'Attachment Framework' has dominated understanding in this area, with considerable research support, ultimately funnelling a narrative of blame onto parenting style and family functioning as the 'cause' of EBSNA. This may have additionally fuelled the current legal context and legislation surrounding school attendance, overlooking alternative accountants, and maintaining parental responsibility. Whilst findings highlight home and parental characteristics as important contributing factors, it must be considered whether the

lens of Attachment Theory remains appropriate in modern day practice, and whether it provides practical and supportive opportunities for effective intervention.

School-Based Factors

Alongside individual, psychopathological, and familial contributors to EBSNA, recent research has considered the role of 'school-based' factors; elements of the school environment that initiate or perpetuate EBSNA. This research is regrettably limited at present, and arguably therefore inconclusive, however authors such as Gubbels, et al., (2018) and Ingul and Nordhal (2013) have begun to consider school-based characteristics as part of a wider set of 'risk factors' in developing EBSNA, highlighting the importance of considering these in both prevention and support of this difficulty.

Havik, et al., (2014), for example, studied the role of school-based factors through gathering the views of parents. Seventeen parents who had previously experienced their child's 'school refusal' were interviewed, and a range of school-based factors were identified, including lack of teacher support and knowledge, teacher-student relationships, as well as bullying and peer relationships. Interviewing parents in this way presents a contrast to earlier research cited above, representing a shift in academic understanding of this difficulty. It additionally presents a range of factors to consider that have arguably been historically overlooked, including those on a 'whole school' level, such as common staff goals, staff turnover and the surrounding classroom environment. Methodological limitations indeed exist, however, including the authors' definition of 'school refusal', aligning with the one presented by Kearney and Silverman (1990), and may therefore encompassing difficulties beyond those experiencing EBSNA. Furthermore, the authors recruited participants through counselling and/or specialist education settings, suggesting that the population may not represent 'mainstream' individuals. However, this study demonstrated the importance of gathering parental experiences, and how their perceptions of EBSNA may differ from professionals, suggesting that multiple contributing factors, stemming from multiple systems, may exist.

The role of bullying and peer relationships appears to be an important theme within this area of research. A review completed by Kearney (2008) of contemporary studies concluded that school violence and victimisation appeared to be considerable contributors to 'school refusal behaviour', although he additionally noted that further research needs to be undertaken to fully understand this. More recently, Hutzell and Payne (2018), explored the relationship between 'school avoidance' and bullying, arguing that the adverse effects experienced by CYP acts as a significant predictor of EBSNA. However, their research also suggested that increased school participation, and strong peer relationships can somewhat counteract this,

highlighting the need for schools to emphasise and encourage this to increase the 'protective factors' that promote school attendance. This is a view shared by Ingul and Nordhal (2013) and may also explain the relationship between EBSNA and SEN, when considering research presented above from Ochi et al., (2020). Bitsika, et al., (2021) further this, through researching the relationship between ASD and 'school refusal'. Their findings, which related to boys attending a mainstream setting, indicated that 80% of participants had previously experienced bullying, and that those who had been bullied more frequently over time were more likely to display emerging EBSNA. However, these CYP also demonstrated high levels of anxiety and depression, and a significant relationship was only reported with the frequency, rather than the severity of bullying incidents, suggesting that this alone does not 'cause' EBSNA, especially when further considering the lack of control groups utilised within this research. Although, it adds weight to the framework of considering a range of 'risk factors' when identifying CYP vulnerable to this difficulty, drawing back to earlier comments made about the presence of intersectionality, and individuals with SEN experiencing multi-faceted difficulties.

Research by Lehman (2020) additionally highlights the role of the wider school climate in predicting EBSNA. Through studying national attendance figures within the United States, as well as self-report perceptions of adolescents' safety at school, victimisation and bullying, Lehman concluded that victimisation and a presence of 'hate' within school culture predicts levels of 'school avoidance'. He suggests that this places vulnerable and minority groups particularly at risk, with wider cultural and community factors contributing to actions and views within the school environment. Therefore, his findings indicate a role for schools in addressing this and providing early intervention for at-risk groups.

Teacher relationships and support have also been raised as a recurring theme across the literature, with research suggesting that students feeling unsupported by school staff can contribute to EBSNA (Havik, Bru & Ertsevag, 2014). Balakrishnan and Andi (2019) studied school-factors associated with 'school refusal' in Malaysia, using a survey approach to gather the views of over 900 Primary-aged children. Their research explored a range of factors, including the role of teacher support, which was found to be negatively correlated with 'school refusal'. Two factors were found to have significant relationships with EBSNA, including academic achievement and 'school satisfaction'. The authors discuss this as akin to a 'Sense of Belonging' (Baumeister & Leary, 1995), with students displaying higher levels of this also demonstrating higher levels of attendance. This supports above findings around the role of bullying and peer relationships in developing EBSNA, with these being likely to impact upon CYP's 'sense of belonging' in school. Although this research focused on 'school refusal' more broadly rather than specifically EBSNA, findings from Havik, et al., (2014)

indicate that school-based factors have a stronger relationship with EBSNA than truancy, suggesting the validity of these findings.

The role of a 'sense of belonging' is additionally discussed by Wilkins (2008), who further suggests that the cause of attendance difficulties lay within the school setting. His research explored the views of young people attending a specialist provision, following a previous period of EBSNA at a prior setting. Whilst all experienced a mixture of contributing factors, the role of school climate and belonging arose as a key 'push' and 'pull' factor, with all preferring the positive and inclusive ethos of their new setting. Participants also cited the academic environment as important for promoting school attendance, including the attention and support provided by teachers, suggesting that a positive relationship with staff and feeling valued within school helped them to feel able to attend. Filippello, et al., (2019) argue that negative teacher-student relationships, and non-supportive academic environments lead to reduced school satisfaction, citing 'Self-Determination Theory' (SDT; Ryan & Deci, 2000) as an important framework to consider when promoting school attendance. This highlights a key area in which further research would be beneficial, in exploring how schools can promote the principles of SDT, including competence and autonomy, within education. The authors suggested that further teacher training and awareness of their impact is key in supporting EBSNA, which echoes conclusions from Wilkins (2008) discussed above. Research from Gren-Landell et al., (2015) within Swedish schools supports this, indicating that teachers within specialist provisions appeared to hold a more understanding and personalised approach to EBSNA than those working within mainstream environments; supporting EBSNA may therefore be best considered in line with supporting SEN (as discussed above), involving professionals within school rather than parents alone. This is echoed by Kearney and Grazcyk (2014), and the suggestion that a 'Response to Intervention' model is best employed when supporting this need. Following a systematic literature review, the authors suggested that a holistic approach is required for success, including identifying maintaining variables, and adopting a 'tiered' approach (e.g. employing 'universal', 'additional' and 'targeted' interventions). Subsequently, they suggest shifts in school climate and whole-school mental health support as effective universal interventions that promote school attendance, aligning with principles of the 'graduated response' within the SEND Code of Practice (2015). This strengthens the role of the school in reducing EBSNA through addressing school-based factors, thereby reducing the responsibility placed on individual and family-based support. Although much of the literature is correlational and does not remove home and psychiatric 'causes' entirely, it highlights the need for a more holistic and systemic framework of support in this area, as the impact of school and community-based factors cannot be ignored (Thambirajah, et al., 2008). The following

sections of this review will therefore consider two prominent frameworks currently applied to EBSNA as a result of these findings, and how they may be used to support and prevent EBSNA going forwards.

The Functional Model of School Refusal Behaviour

In attempt to explain this phenomenon and provide practical implications for support, Kearney and Silverman (1990) developed the 'Functional Model' (FM) as a way of classifying and understanding 'school refusal behaviour' (SRB). The authors reported formulating this approach after noticing issues with 'traditional' approaches to classification, with hopes of creating greater treatment utility (Kearney & Silverman, 1991). Following a review of the literature available at the time, the model posits that SRB is motivated by four 'functions':

- (1) Avoidance of negative emotions (N),
- (2) Escape from aversive or evaluative situations (e.g. bullying/ peer interaction) (N),
- (3) Obtaining attention from significant others (e.g. parents) (P),
- (4) Seeking tangible reinforcement or rewards at home (P).

The model explains that these functions serve as either negative or positive reinforcers (indicated through an 'N' or 'P' above), with SRB being motivated by either seeking to spend reduced time at school ('push' factors) or increased time at home ('pull' factors). Therefore, whilst acknowledging the influence of individual and parental factors, this model also somewhat highlights the role that school-based factors may have in the development of EBSNA. Although this model is intended for a range of school attendance difficulties, rather than EBSNA alone, it has been accepted by a range of professionals, providing a framework for understanding this need (e.g. WSCC 2010, Derbyshire County Council). Authors such as Lee and Miltenberger (1996) have additionally praised the model as a productive alternative to diagnostic assessment, being the first of its kind to understand the underlying function of SRB, rather than presentation alone.

Elliott (1999) argued that detailed assessment of this difficulty is important to inform effective intervention. To aid this, Kearney and Silverman (1993) utilised the principles of the FM to develop the 'School Refusal Assessment Scale' (SRAS); a sixteen-item questionnaire designed to identify which 'function' the SRB is serving. The authors claimed that the primary function uncovered by the SRAS should inform an appropriate treatment pathway, with Table 2 outlining the proposed treatment for each function (Kearney, 2008).

Preliminary support for the FM and SRAS was found by Kearney and Silverman (1990), with seven children being assigned an 'appropriate' treatment following assessment using the

Table 2

Prescriptive interventions based on function of school refusal (Kearney, 2008).

Prescriptive interventions based on function of school refusal behaviour	
1	Refusing school to avoid school-based stimuli that provoke negative affectivity (child-based) Psychoeducation regarding anxiety and its components Somatic management techniques such as relaxation training and deep diaphragmatic breathing Gradual re-exposure to school setting using anxiety and avoidance hierarchy Self-reinforcement of gains
2	Refusing school to escape aversive social and/or evaluative situations (child-based) Psychoeducation regarding anxiety and its components Somatic management techniques such as relaxation training and deep diaphragmatic breathing Cognitive restructuring to modify irrational thoughts Practicing coping skills in real-life social and evaluative situations Gradual re-exposure to school setting using anxiety and avoidance hierarchy Self-reinforcement of gains
3	Refusing school to pursue attention from significant others (parent-based) Modify parent commands toward brevity and clarity Establish a set morning routine prior to school as well as daytime routines as necessary Establish rewards for attendance and punishments for non-attendance Forced school attendance in specific cases
4	Refusing school to pursue tangible rewards outside of school (family-based) Contingency contracting that involves increasing incentives for attendances and disincentives for non-attendance Establish times and places for family members to negotiate problem solutions Communication skills training Escorting a youth to school and classes as necessary Increasing monitoring of attendance Peer refusal skills training (to refuse offers from others to miss school)

Note: From Kearney, C.A. (2008). School absenteeism and school refusal behaviour in youth: A contemporary review. Clinical Psychology Review, 28(3), p451-471. Doi: 10.1016/j.cpr.2007.07.012

SRAS, including parent training/psychoeducation, 'cognitive restructuring' and 'contingency contracting' (see Table 2). At the conclusion of the study, six out of the seven participants demonstrated improvements in their school attendance, suggesting the positive impact of the prescribed treatments. Kearney and Silverman (1991) argued that these initial findings support use of the FM by clinicians in practice and allows for a more individualised approach to treatment. More recently, the authors have acknowledged that the SRAS is best used

within a 'mixed methods' approach to assessment (Kearney, et al., 2004), however continue to claim its effectiveness in prescribing appropriate treatment to those experiencing SRB, and subsequently EBSNA. Research from Chorpita et al., (1996) supports use of the FM, following their case study of a 10-year-old girl with school attendance difficulties. After eight weeks of SRAS-prescribed treatment, she demonstrated considerable improvements in attendance, which the authors argue supports the adoption of functional assessment of these difficulties. Furthermore, Kearney, et al., (2001) additionally found support for the 'individualised approach' advocated for by the FM, with improvements in attendance being maintained at a one-year follow up after 'appropriate treatment'. However, despite these promising results, both children studied as part of this research demonstrated heightened levels of anxiety or 'difficult behaviours' at the time of follow-up, suggesting that this anxiety may have been displaced, rather than addressed by the prescribed treatment. Nonetheless, Kearney (2007) maintains the validity of the FM in understanding and treating SRB following his study of over 200 CYP. He claims that studying the behaviour or diagnosis alone cannot determine appropriate actions, which appears to be supported within the literature (e.g. Thambirajah, et al., 2008; Ingul & Nordahl, 2013).

Further research into the validity and reliability of the SRAS suggests mixed findings, and therefore inconsistent support for the use of the FM. Research from Richards and Hadwin (2011) partially supports the model, finding evidence to suggest that both 'negative functions' (e.g. 'desire to avoid negative emotions' and 'avoiding aversive social situations') may mediate the relationship between anxiety and school non-attendance in a community sample. This suggests that elements of the model may be useful in understanding the function of EBSNA, which would be logical considering that the FM aims to understand a broad spectrum of SRB, with EBSNA being a sub-section of these. Although, Richards and Hadwin (2011) additionally completed a 'Confirmatory Factor Analysis' of the SRAS, finding that the original four factor model did not demonstrate 'good fit' with the present data set without revisions, such as removal of items. However, a three- or two- factor revision of the model was also inconsistent with the data, suggesting the existence of multiple functions/factors. Higa, et al., (2002) furthered this, suggesting that the two scales of the SRAS measuring the 'negative reinforcement' functions instead measured a unitary construct. This could be a limitation of the SRAS, or the wider functional model, suggesting that these functions are not clearly distinct or defined. This finding was not supported by Lyon (2010) or Kearney (2006), who suggest that a revised version of Kearney and Silverman's four factor model remains the 'best supported', refuting Higa et al's comments. This therefore suggests mixed validity of the scale in its current form, despite revisions (SRAS-Revised; Kearney, 2002) with Heyne, et al., (2017) claiming that the scale should be

used as part of a wider comprehensive assessment rather than in isolation. This further indicates that the theoretical framework provided by the FM itself may also be reductionist, and not effective in understanding EBSNA.

The utility of the model in practice is additionally questioned by Daleiden, et al., (1999). Their research required clinicians trained in use of the FM to make judgements around the function of children's SRB, with the findings demonstrating considerable variation between individual judges. Although the SRAS was argued to be a useful decision aid, this alone did not lead to inter-rater agreement, highlighting the variability of clinical judgements despite use of the assessment tool. Daleiden and colleagues therefore suggest exercising caution when using the SRAS in clinical practice, as aspects of the child presentation and the professional completing the assessment may influence the outcome, and therefore the 'treatment utility' of the model. This could be representative of comments made by Elliott and Place (2019), around the role of 'overlapping functions' of EBSNA, including the presence of maintaining variables (WSCC, 2010; Figure 1). Kearney and Silverman (1991) note that functions of SRB may change over time, with their response to this being the suggestion of multiple applications of the SRAS as a form of periodical assessment (Kearney, 2002). This, however, does not promote a practical or efficient assessment process, and may continue to only understand elements of the difficulty, rather than the wider concern. Further exploration into the functions of EBSNA specifically is therefore needed to fully understand and apply this model across a range of ages and populations.

A positive of the FM is the concept of using assessment to inform appropriate intervention and adopting an increasingly individualised approach to support (Elliott, 1999). However, the treatments recommended by the FM and SRAS (see Table 2; Kearney, 2008) are currently aimed at changing the behaviour of the child, through approaches such as cognitive-behavioural therapy, or through 'training' the parents. This would continue the narrative of the difficulty being within-child or within-family, despite the research above suggesting the role that school-based factors have in developing EBSNA. Pellegrini (2007) argues that frameworks and approaches such as these exonerate the school environment, and that child and family-based intervention is best complemented by 'system changes'; this is not currently advocated for or described by the FM. These limitations are further discussed by Thambirajah, et al., (2008), arguing that the FM does not consider individual risk and protective factors, following largely behaviourist principles. Therefore, despite later comments from Kearney and Graszcyk (2014) and the 'Response to Intervention' model advocating for a tiered approach to support, the original FM may be too simplistic to explain and prescribe support for EBSNA.

That being said, the SRAS-R remains one of the prominent tools for use by professionals when assessing this difficulty, with a plethora of research advocating for its use within wider assessment and alongside alternative sources of information (e.g. Heyne et al., 2017; Kearney, 2006). This therefore gives credit and validity to the FM from which this was derived, despite its limitations. Subsequently, professionals involved in identifying and supporting EBSNA may not wish to disregard the FM, but rather incorporate it into initial hypotheses to be triangulated within the assessment process.

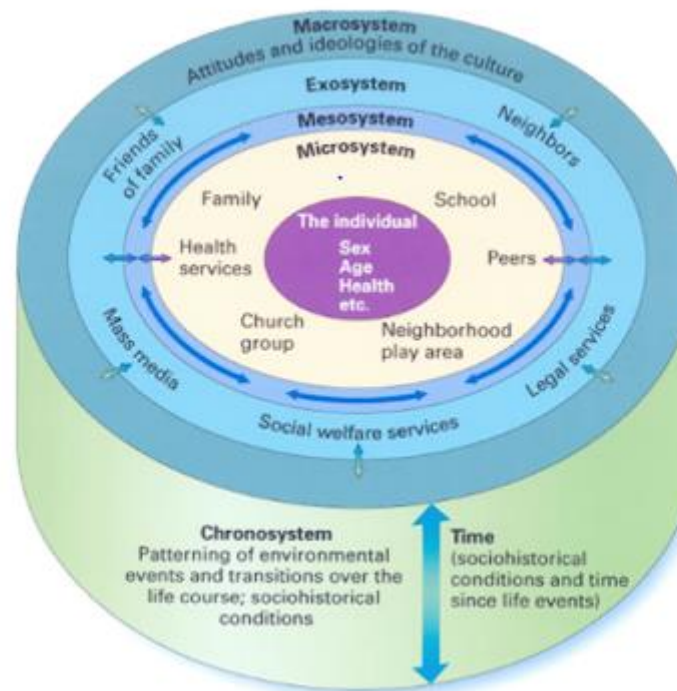
EBSNA: An Ecological Perspective

Recently, the literature has advocated for a shift away from ‘within-child’ perspectives on this issue, instead aiming for a model that incorporates the range of factors and systems highlighted to contribute to this heterogeneous difficulty (Thambirajah, et al., 2008; Pellegrini, 2007; Nuttall & Woods, 2013; Gregory & Purcell, 2014). The increasing demand for an individualised approach to intervention, called for by Lauchlan (2003), leads to the consideration of multi-system and multi-agency forms of support when addressing instances of EBSNA. This aligns with Bronfenbrenner’s ‘(Bio) Ecological Systems Theory’ (1992), which acknowledges the influence of multiple systems on child development. Drawing upon ‘Systems Theory’, and the concept of individual behaviour being directly related to surrounding environments, the ‘ecological’ theory places emphasis on interactions between these systems, as well as wider cultural contexts (Hayes & O’Toole, 2007). Given current legislation positioning parents as solely legally responsible for school attendance, despite research demonstrating the influence of school-related factors, advocating for a more ‘systemic’ framework for EBSNA seems relevant. Recently, the newly established International Network for School Attendance (INSA, 2020) emphasized the importance of embracing interdisciplinary practice in this field, arguing that intervention should intersect parental, school, community, and legal contexts. This would therefore deem the ‘Ecological Systems’ approach an appropriate theoretical framework from which to identify and support EBSNA within modern-day practice.

As illustrated in Figure 2, this model represents the influence of the individual, as well as home and school-based factors discussed above, encapsulating these as part of the ‘Micro-system’; immediate environments or systems surrounding CYP that impact upon their development. This therefore would not disregard the effectiveness of various cognitive-behavioural and parent-focused intervention that has previously been found successful (e.g. Last, et al., 1998; Chorpita, et al., 1996). Instead, this model allows for acknowledgement of wider systems and agencies that influence the development of EBSNA, such as the ‘Meso-system’ and the ‘Exo-system’, which may further explain findings discussed above that relate

Figure 2

Diagram of Bronfenbrenner's Bioecological Model



Note: From Bronfenbrenner, U. (2001). The bioecological theory of human development. In N. J. Smelser & B. Baltes (Eds.), International Encyclopaedia of the Social and Behavioural Sciences (pp. 10-6963). Routledge.

to the role of community and culture-based factors (e.g. Lehman, 2020; Hutzell & Payne, 2008; Kearney, 2008). Fillippello, et al., (2019) argue that this interaction between individual and contextual factors, as well as between individual 'Micro-systems' (known as the 'Meso-system') is a considerable predictor of EBSNA, leading to the heterogeneity of its presentation.

Place, et al., (2000) support this approach, arguing for its practical implications. They studied 17 CYP, all of which met Berg, et al.'s (1969) criteria, finding a range of factors contributing to EBSNA. These included experiences of bullying, poverty, and parental mental health difficulties. Importantly, a quarter of participants did not meet diagnostic criteria for psychiatric disorders, suggesting that their anxiety and difficulties with school attendance were likely a product of environmental factors. Therefore, the authors argued that intervention should not be targeted at one system alone; whilst acknowledging the importance of including families within interventions, they also advocate for implementing support in developing secure peer relationships, as well as individual coping skills, recognising that change is needed within multiple systems to be effective.

It would therefore seem appropriate that intervention should be targeted at the 'Meso-system', promoting collaboration between home and school environments. Epstein and Sheldon (2002) advocate for this, arguing that community and parental engagement is key in promoting positive attendance figures. Although their study focused on attendance difficulties more broadly rather than EBSNA alone, their research across 18 schools in the US found a range of school-based initiatives that promoted parent-school-community partnerships, and ultimately improved attendance. These included: clear communication with families, a consistent school contact, hosting workshops, home visits and appropriate referrals to external agencies. This would align with a 'Joint Systems' approach (Dowling & Osborne, 1994), encouraging a 'co-operative enterprise' (pp.69) between schools and parents.

An unpublished thesis paper (Passmore, 2009) may, however, be interpreted to argue that parent-school communication alone is not enough, and that wider systems need to be consistently involved to support this complex need. Passmore's research involved exploring the experiences of young people, parents, and practitioners in supporting EBSNA, finding that greater coherence and clear communication between multiple systems is required for effective support. The paper concludes a need for reflection upon current professional practices and whether more can be done to promote a multi-systems approach. Brand and O'Connor (2004) support this need for 'joint-systems working', arguing that it 'takes a team' to provide effective individual support for EBSNA. Their case study research of three students experiencing EBSNA found that a flexible and coordinated approach is needed for greater chances of success, and that targeting intervention at parents alone is unlikely to have a considerable long-term impact. As a result, these arguments uphold the need for a multi-systemic framework, such as Bronfenbrenner (1992), in identifying and supporting EBSNA in current practice.

To consider the utility of this model within school environments, Ingul, et al., (2019) developed a 'School-based Framework' to supporting EBSNA, claiming that previous literature predominantly focuses on truancy or broad non-attendance difficulties. The authors' framework proposes increased responsibilities to be placed upon schools for identifying and preventing EBSNA, including the establishment of a dedicated attendance team to regularly monitor and support families experiencing this difficulty. Their work emphasises the role and consideration of 'risk' and 'protective' factors, and how regular evaluation of CYP at risk of EBSNA, alongside understanding the 'warning signs', can promote increased understanding and support for this need. Holder (2021) supports this, despite its time-intensive nature, with the literature suggesting a need to avoid a 'wait to fail' approach to EBSNA, with schools, alongside relevant external professionals, taking

Note: From Nuttall, C., & Woods, K. (2013). *Effective intervention for school refusal behaviour. Educational Psychology in Practice*, 29(4), 347-366, doi:
<https://doi.org/10.1080/02667363.2013.846848>

Their findings produced four key themes; the CYP's psychological needs, support for psychological factors, factors supporting the family and the role of professionals and systems (depicted in the resulting model; Figure 3).

The resulting themes highlight the need for a collaborative and multi-system approach. Sub-themes discussed within their findings include school-based values such as a nurturing approach, flexible support, and development of feelings of safety and belonging. However, they also highlight themes of wider professional support. These included the availability and capacity of professionals to provide intervention, as well as early identification and referral; both of which appear of considerable significance when supporting EBSNA. Finally, working alongside parents through promoting engagement, and 'avoiding prosecution' emerged as prominent factors to success, echoed by recent research completed by Not Fine in School (2020) around the efficacy of parent prosecution with EBSNA. Their Ecological Model, although complex, promotes an approach to support that holds principles advocated for within the literature, including an increasingly individualised approach (Lauchlan, 2003), a need for joint-systems collaboration (Brand & O'Connor, 2004) and accountability of school environments (Pellegrini, 2007), suggesting that it may be an appropriate and evidence-based framework to adopt when supporting this need. The authors note, however, the limited number of participants within their research, claiming that this approach requires further research support in order to be understood and applied appropriately in practice. They therefore call for an increase in 'practice-based evidence' to further examine the role of wider systems in promoting successful reintegration.

Current Issues in Implementing Support

Despite recent literature suggesting the need for a 'Joint Systems' and multi-agency approach, it must be considered whether this is representative of current practice in supporting EBSNA. Many of the key studies discussed above (e.g. Nuttall & Woods, 2013; Passmore, 2009) preceded figures released by the DfE (2020) that suggest a continued high number of 'persistent absentees' within the UK education system, as well as the Covid-19 pandemic, of which the impact has yet to be fully understood (Ford, 2021). Research completed by 'Not Fine in School' (NFIS, 2020; a charitable organisation designed to support parents of CYP experiencing school non-attendance) highlighted the inconsistent support received by parents facing this difficulty, questioning whether a systemic approach has been truly adopted. For example, 79% of parents who responded to the online survey cited the school environment as key to perpetuating their child's difficulties, yet many also reported that professionals such as school staff and local authority (LA) services were unhelpful in supporting their child's needs. Parents added comments around the "exhausting process" (pp.40), suggesting that barriers still exist to clear and effective support. Dowling and

Osborne (1994) suggest a range of factors that may prevent a successful 'Joint-Systems approach', including negative parent-school interactions, increased focus on the 'problem' rather than solutions and the presence of 'closed systems' (systems or groups that are resistant to change; Osborne, 1994). It will therefore be important to consider literature that highlight the barriers currently preventing positive outcomes for CYP experiencing EBSNA.

Professional Conceptualisations of EBSNA

Although EBSNA is understood as a multi-faceted and heterogenous difficulty (Thambirajah, et al., 2008), research suggests that individuals or 'systems' involved in supporting this need have differing perceptions of its origin, conceptualisation, and treatment. For example, Archer, et al., (2003) studied professional perceptions of 'school refusal' across 60 LAs, and over 200 schools in England, following nationwide concerns about rates of school attendance. Their findings indicated that LAs and schools largely advocated for early intervention and use of external agencies to support CYP, however also highlighted that nearly 50% of LA professionals did not distinguish EBSNA ('school refusal') from alternative school attendance difficulties, suggesting the lack of a common understanding or definition. In addition, both school staff and LA professionals cited the home environment as the 'origin' of most school refusal behaviour, despite acknowledging that both home and school factors contribute to this difficulty. This suggests a narrative of blame, arguably perpetuated by an outdated 'Attachment' framework to understanding EBSNA, has been placed upon families by professionals. Furthermore, despite participants' perceptions that factors including family conflict, parenting skill and disadvantaged or dysfunctional backgrounds contribute to EBSNA, the inclusion of parents in support was not reported as standard practice, and was only raised in interviews with school staff, rather than LA professionals. This highlights a lack of co-ordination between theory and practice, with research suggesting the importance of including parents within EBSNA intervention (Spence, 2000; Brand & O'Conner, 2004).

These views were additionally captured within findings from Malcom, et al., (2003), with professionals across seven LAs discussing the importance of 'home factors' as a cause of 'school refusal', including parental working hours, attitude, and domestic violence. This contrasts with themes discussed within the same study when the views of young people and parents were gathered on this issue; young people described the role of bullying and academic pressures in their developing attendance difficulties, with parents additionally reporting their attempts to address and support their child's school attendance during this time. Although professionals involved in this research advocated for involving parents in support, this included their engagement in legal processes, and through indirect work via schools (e.g. parenting workshops), suggesting the lack of a preventative and supportive approach. Doctoral research from Nelson (2013) furthered explored this issue, gathering the

views of 12 educational professionals (including psychologists) around providing support for EBSNA. Many understood and described the importance of engaging parents to provide effective support, however also reported difficulties with establishing partnerships with parents, citing reasons such as availability and parental anxiety. This parent-school relationship is a key element of Ingul, et al.'s 'School Based Framework' (2019) discussed above, suggesting the lack of a joint and multi-systems approach at present. Although these findings predate the new SEND Code of Practice (2015), and may therefore represent historical views, they indicate that professionals included within these studies may not have been adopting a 'systemic' approach within their practice, contradicting the message communicated by recent literature. Furthermore, recent findings from Ford (2018) describe the continuing difficulties that school staff experience in engaging and working with parents on this issue, highlighting this as a prevailing barrier to implementing an ecological model of reintegration (Nuttall & Woods, 2013).

These differing perspectives have been further understood through research into parental views of EBSNA, with these findings presenting an alternative narrative. Studies such as Havik, et al., (2014) indicated that parents frequently cited school-based factors as considerable predictors of their child's difficulties (discussed above), which was supported within findings from NFIS (2020). Sixty-three percent of participants in the latter study reported feeling as though their parenting had been blamed, with 38% of respondents also being referred to social services following their child's attendance difficulties. This reveals potential inconsistencies in providing EBSNA support, with parents and professionals often holding contrasting perspectives of the problem. Dowling and Osborne (1994) define this as 'Circular Causality'; whereby different professionals and systems inadvertently place blame upon one another in a cyclical manner (Dowling, 1994). Presence of this systemic difficulty often acts as a barrier to joint-working, and therefore promoting shared understanding and accountability should be a focus of future research to inform effective multi-agency and systemic practice.

Parent and CYP's Views

There has been limited research into the views of parents in relation to supporting EBSNA, despite their role as key stakeholders of the problem (INSA, 2019). Research has, however, begun to consider the views of young people experiencing this difficulty, aligning with principles from the SEND Code of Practice (2015) in adopting a 'person-centred' approach. Shivlock (2010) completed interviews with young people experiencing EBSNA, using a range of tools based on Personal Construct Psychology (Kelly, 1955) to gather their views on factors that initiated and maintained their non-attendance. Three participants, identified in collaboration with school staff using Berg et al's criteria, represented differing circumstances,

reinforcing the heterogenous nature of EBSNA. All participants reported having a ‘caring’ role at home due to parental illness or disability, supporting ideas discussed by Archer, et al., (2003) that the origin of school attendance difficulties may lie in the home environment, however a range of risk and protective school-based factors were also discussed, such as academic difficulties and friendship groups. Furthermore, participants additionally discussed the difference between initiating and maintaining factors of non-attendance; all reported feeling too anxious to return to school, despite feeling motivated to do so. Shivlock therefore suggests a role for schools in providing additional support for CYP in re-establishing their attendance, regardless of the original cause.

Baker and Bishop (2015) extended findings in this area, arguing that the voice of CYP is missing in early research. Their study explored the experiences of four secondary-aged pupils currently experiencing EBSNA, noting the multi-faceted and different accounts provided by each participant. Following completion of semi-structured interviews, analysed using ‘Interpretative Phenomenological Analysis’ (IPA) the authors identified themes around the participants’ views and experiences of non-attendance. Only one participant cited a desire “to be with Mum” (pp.360) as a cause of her non-attendance, with the remainder describing experiences of bullying, anxiety or depression, as well as punishment in school. All expressed feelings of being misunderstood and unsupported, with a “pressure to return quickly” (pp.359). The authors discuss how this highlights the shared experiences of support and systems, despite the individual circumstances faced by each participant, indicating a role for greater understanding and support for this difficulty. Additionally, they claim that their findings suggest that previous research has not yet translated to practice, and that evidence-informed reviews of local systems are necessary for improvement. This view is echoed by Passmore (2009; discussed above), with a need for EBSNA support to reflect its complex and multi-systemic nature.

Passmore (2009) is additionally one of few known studies that has gathered parental views on this topic. For an overview of research that captures the parent voice, please see Table 3. As discussed above, Passmore interviewed parents using a solution-focused approach as part of a wider study that additionally explored the views of young people and practitioners, aligning with recommendations from INSA (2019) that parent views are considered alongside key stakeholders to the problem. Her research highlighted the need for greater coherence between systems and clear communication, which the above research indicates may not yet exist in practice. INSA additionally discusses the lack of parent views represented in research, arguing that embracing an interdisciplinary and multi-systemic approach is crucial for enabling effective support. The authors call attention to a small number of studies that have involved the parent voice, (e.g. Havik et al. 2014, Malcolm et al,

2003; Place et al, 2000, Gregory & Purcell, 2014), however note that these rarely focus on the parent experience alone, with a larger proportion of findings instead dedicated to professional views and practices. Whilst this remains important to encourage reflection upon current ways of working (Passmore, 2009), it does not align with the need for a 'joint systems' approach or collaborative working, as advocated for by Nuttall and Woods (2013). This may explain findings from NFIS (2020), that parents of CYP experiencing EBSNA feel unsupported, blamed, and "abandoned" (pp.32).

Unpublished research from Browne (2019), however, aimed to understand the parent experience in greater depth, using a phenomenological approach. Appearing to be the first study of this nature, Browne interviewed five parents whose children had previously experienced EBSNA, all of which were now enrolled in an 'Alternative Provision', with an exploratory and emancipatory focus. Participants shared emotional experiences of their child's non-attendance, which were arranged into four prominent themes:

- (1) Life being turned upside down,
- (2) The Battle to be Heard,
- (3) Loss and Grief,
- (4) Retrospective Clarity.

The experiences of parents within this research highlighted feelings of blame from professionals, leading to a loss of trust, with most participants referring to school systems or professionals as 'they', and a separate entity. Participants also indicated a lack of professional understanding and communication, with some reporting feelings of being undermined and confused by professional input. This highlights the impact that ineffective professional support can have on parents, further indicating that this difficulty "permeates family life" (pp.74) and can result in school-parent relationships breaking down. It must be noted that this research excluded parents of CYP attending a mainstream setting, and therefore all had experienced a change in placement as a result of their attendance difficulties. Subsequently, this research may represent more 'extreme' instances of EBSNA, further evidenced by noting that all participants' children had previously received involvement from 'Child and Adolescent Mental Health Services' (CAMHS). However, the emotional accounts provided within this study indicate a need to empower and support parents rather than blame or deskill (Browne, 2019). This may further explain findings from Nuttall and Woods (2013) and NFIS (2020) around the ineffectiveness of parent prosecution in relation to EBSNA. Despite INSA (2020) arguing that EBSNA is an issue that incorporates school, parental and legal contexts, it appears that research and practice largely overlooks parental experience and opinion, despite these individuals providing key insight and influence into implementing effective support (Browne, 2019; Nuttall & Woods, 2013).

Table 3

Research produced within literature search that include parent voice and experience on EBSNA

Authors	Year	Country	Journal	Participant Group	Method	Study Aims
Place, Hulsmeier, Davis & Taylor	2000	UK	Clinical Child Psychology and Psychiatry	17 families (YP and parents)	Questionnaires and semi-structured interview	Explore functions and factors associated with school refusal
Malcolm, Wilson, Davidson & Kirk	2003	UK	Department for Education and Skills Research Report	Professionals, school staff, YP and parents	Semi-structured interviews (Professionals and YP), Questionnaire (parents)	To explore views of professionals, YP and parents on factors causing and supporting non-attendance
Passmore	2009	UK	Unpublished thesis	6 YP, parents and professionals	Semi-structured interviews (Thematic Analysis)	To explore experiences of YP and parents accessing support for EBSA
Nuttall and Woods	2013	UK	Educational Psychology in Practice	2 YP, Parents and Professionals	Case study (Semi-structured interviews) and Thematic Analysis	To retrospectively explore factors of successful reintegration
Havik, Bru & Ertsevag	2014	Norway	Emotional and Behavioural Difficulties	17 Parents	Semi-structured interviews (Thematic Analysis)	To explore parents' perspectives of the role of school factors within SRB
Gregory & Purcell	2014	UK	Educational Psychology in Practice	5 families (5 parents, 3 YP)	Semi-structured Interviews (IPA)	To explore experience of parents and YP in relation to EBSA
Browne	2019	UK	Unpublished thesis	5 Parents	Individual interviews (Interpretative Phenomenological Analysis)	To explore parental experience of their child's EBSNA

The Impact of Covid-19

In addition to the issues discussed above, further consideration must be paid to the yet unknown impact of the Covid-19 pandemic and resulting school closures. Following Ecological Systems Theory (Bronfenbrenner, 1992), the impact of the legal, social and economic changes as a consequence of the pandemic would be felt within the 'Macrosystem'; concerning wider societal and community influences on CYP. Mass school closures and increasing levels of health anxiety are likely to have altered understanding and presentation of EBSNA. Research completed during the pandemic has highlighted its role in deteriorating mental health, particularly in young people. Hawes, et al., (2021), for example,

found that university students demonstrated an increase in scores related to depression, and both generalised and social anxiety, especially in female participants, which was observed more significantly in those that had experienced greater life changes during the pandemic. Loades (2020) additionally suggested that school closures have led to increased feelings of social isolation and loneliness, indicating the indirect impact that Covid-19 may have had on children's mental health and wellbeing. This is in addition to the increase in familial 'risk factors' and strain on local services as discussed by Ford (2021). At the time of writing, no findings yet exist on the explicit relationship between EBSNA and Covid-19, highlighting a need to explore this in future research if schools are to adopt an 'ecological model of reintegration' (Nuttall & Woods, 2013). Morrisette (2021) comments that Covid-19 may have had a positive impact on CYP experiencing EBSNA, hypothesising that a "temporary lessening of distress" may have resulted from school closures. This would fit with above findings from Baker and Bishop (2015) around the pressure to return to school. However, Morrisette also warns that this improvement may be short-lived, and may call for a shift in approaches to support, indicating the need to further understand the ongoing impact of the pandemic on this population.

The EP role

To adopt an effective multi-systems approach, appropriately placed professionals will need to be involved in the assessment, planning and intervention. Dowling and Osborne (1994) emphasise the importance of developing a shared understanding between schools and parents, which they argue can be facilitated by independent professionals who remain 'meta' to the system (avoiding forming an 'alliance' with either parent or school; Dowling, 1994). The research discussed above promotes a multi-agency approach, encouraging school referrals to external professionals when supporting EBSNA (e.g. Brand & O'Connor, 2004; Epstein & Sheldon, 2002; Ingul, et al., 2019), aligning with Kearney and Graczyk's 'Response to Intervention' model (2014). However, despite this, the search on this occasion produced a dearth of literature on the views and practices of such professionals. As discussed above, multiple authors have included the experiences of school staff, such as teachers and teaching assistants, however alternative professionals appear under-represented at present, despite their role in supporting and identifying attendance difficulties. This includes LA attendance teams, specialist advisory teachers and social workers, all of whom are well-placed to liaise with schools and families. Elliott and Place (2019) acknowledge the lack of findings in this area, claiming that little guidance for practitioners supporting this need currently exists.

A few authors, however, have begun to consider the role of Educational Psychologists (EPs) in supporting EBSNA, and have subsequently studied and explored their views within the

literature (e.g. Nuttall & Woods, 2013). Lauchlan (2003) argues that EPs are well-placed to facilitate EBSNA intervention, holding a pre-existing role in supporting schools on both an individual and systemic level. His review discusses the collaboration that EPs can promote, as well as their ability to complete a 'functional analysis' and subsequently facilitate an individualised approach to support. This co-ordinates with comments from Beaver (2011) that providing this targeted and organisational support, whilst considering surrounding systems, is a key element of the EP role.

Pellegrini (2007) furthers this, discussing approaches to supporting EBSNA that EPs would be well-placed to facilitate. This includes delivery of individual therapeutic interventions, such as Cognitive Behavioural Therapy, as well as systemic support such as staff training and policy development. This suggests that there may be wide scope for EP involvement in supporting EBSNA, through activities that already align with their typical practice (Cameron, 2006; Gregory & Purcell, 2014). EP services in the UK have recognised this potential, demonstrated through the development of guidance documents aimed at supporting schools and parents experiencing EBSNA (e.g. WSCC, 2010; Derbyshire, u.d.; Manchester, 2020). The production of such guidance indicates the increase in awareness on both local and national levels around the support that EP services can provide.

Browne (2019) highlighted, however, that more needs to be done by services and schools to allow access to these professionals. From her five participants, only one had previously accessed EP support, indicating that services may be difficult to communicate with and refer to, and therefore inaccessible to large portions of this population. Browne's findings indicate that, beyond assessment and intervention, EPs additionally have a role in empowering the parent voice, however given the lack of trust parents currently report in professionals (NFIS, 2020), further work may need to take place before this can be achieved. Research into practical implications for the profession may therefore be an appropriate first step to achieving a more accessible and effective role for EPs in supporting EBSNA.

Future Research Directions

This review has highlighted the importance and need for further research to promote understanding and effective support pathways for families experiencing EBSNA. Through providing a broad consideration of various theoretical frameworks employed to understand this difficulty, this has revealed the competing narratives and discourse that has shaped modern-day understanding and practice. The literature demonstrates a shift away from 'within-child' perspectives, advocating for a multi-systems approach to identification and intervention, promoting an increasingly 'individualised' understanding of this complex need. Research, however, has yet to explore the interaction of these co-existing 'risk factors',

which is crucial for promoting early identification and support. Further consideration must therefore be given to evaluating the effectiveness of models such as the 'School-Based Framework' (Ingul, et al., 2019), to determine its impact on reducing instances of EBSNA in practice.

Research presented in this review has additionally highlighted a disparity between literature and professional practice, which may be due to the lack of parent voice, which this review has drawn attention to. Previously, parent participation in research has had a primarily clinical or diagnostic focus, with recent studies revealing the emotional and negative experiences felt by families in relation to EBSNA (adopting an 'IPA' approach). Little findings exist, however, on practical implications for intervention, which will be necessary to inform professional practice on a systemic level. Nuttall and Woods' (2013) findings demonstrate the potential of retrospective and solution-focused research on this topic, however requires further evidential support; this may present an avenue for future researchers to explore.

Another key area underlined by this review, is the need for more UK-based findings, with understanding currently being confounded by differing conceptualisations, education systems and practices, as well as overriding legislation. The variation of terminology used within the literature appears to be a product of an evolving narrative, however has led to confusion and a lack of distinction; future research will need to foster clarity and use of supportive language to bring this discourse in line with modern viewpoints. The author hopes that this will ensure that the 'true' population of CYP experiencing EBSNA can be represented, including the currently under-researched groups of non-clinical and non-psychiatric populations. Furthermore, current research focuses predominantly on the experiences of secondary-aged pupils, particularly those few which capture parent and CYP voice. With research suggesting that 40% of EBSNA difficulties emerge within primary years (NFIS, 2020), it seems crucial to seek further understanding within younger age groups, with an emphasis on early identification and intervention.

This therefore presents further directions and research questions in this field, despite the considerable progression already demonstrated within this review. Combined with the unknown impact of the Covid-19 school closures, it appears clear that more should be done in attempt to understand and support this difficulty, fostering accountability and collaboration across systems to align with the literature base, and to promote positive outcomes for every child.

Empirical Chapter

Abstract

The aim of this mixed methods study was to further understand how professionals can support 'emotionally-based school non-attendance' (EBSNA), through exploring parental experiences. EBSNA is believed to impact one-two percent of children and young people (CYP), presenting as 'severe emotional upset at the prospect of attending school' (Berg et al., 1969). Adopting a 'solution-oriented' approach, this research gathered retrospective experiences of successful EBSNA support, aiming to uncover 'what works' when supporting children and families experiencing this difficulty. Furthermore, as well as understanding the support accessed by parents, and what was useful, this study additionally hoped to explore the impact of the Covid-19 pandemic on such support and determine if opportunities to learn from practices during the school closure period may exist. Participants first completed an online questionnaire (Phase One; n=28) following which descriptive statistics were produced, and content analysis techniques were employed. During Phase Two, participants completed semi-structured interviews (n=5), and transcripts were analysed using 'Reflexive Thematic Analysis' (Braun & Clarke, 2021). The resulting findings provides insight into the different forms of support accessed by parents when experiencing their child's EBSNA, identifying areas of both success and improvement, as well as how lessons can be learnt from the Covid-19 pandemic. These have been presented as a framework for professional practice, named SPIRAL, which has implications for schools and local authorities in providing support to both CYP and parents experiencing EBSNA. Recommendations for future research are also discussed, informing developments across multiple systems, and highlighting the potential of the EP role.

Introduction

In the United Kingdom (UK), schooling is compulsory for all children aged five to sixteen (Department for Education; DfE, 2015), with parents holding responsibility for attendance (Education Act, 1996). Approximately one-two percent of children/ young people (CYP) experience severe emotional difficulties at the prospect of attending school (Elliot & Place, 2019), known as '*emotionally-based school non-attendance*' (EBSNA), with this believed to have significantly increased since the Covid-19 pandemic (Children's Commissioner, 2022). Understanding its true prevalence is complicated by the lack of official measures (Thambirajah, et al., 2008; Kawsar, et al., 2021), however EBSNA is increasingly understood as a heterogenous and multi-faceted difficulty, often arising during the primary years and reported to peak at times of transition (Pellegrini, 2007). Research has consistently linked disrupted school attendance with negative later life outcomes, including poor academic achievements (e.g. Taylor, 2012), higher unemployment rates (Attwood & Croll, 2014) and

greater psychiatric difficulty (Thambirajah, et al., 2008), highlighting the importance of early identification and intervention.

However, the subjective presentation of EBSNA may prevent early recognition and support, with researchers holding varying conceptualisations of this difficulty (Heyne, 2019). Over previous decades, EBSNA has been known by a variety of terms, including '*school phobia*', '*school refusal*', and '*emotionally-based school avoidance*' (West Sussex County Council, 2010). Time has shifted terminology towards increasingly descriptive language, instead of 'medicalised' terms, with authors commenting that this advocates for a less judgmental, and more objective stance (Pellegrini, 2007). Previous terms have been argued to place responsibility on CYP rather than the contributions of the school environment. Subsequently, 'EBSNA' has been adopted within this study to align with this view, and due to its use within recent literature (e.g. Browne, 2019; Corcoran, et al., 2022).

Berg et al., (1969) proposed a description of behaviours which have become commonly accepted criteria in recognising EBSNA (Figure 4). These will subsequently be applied within the present study. Use of these criteria allows for clear distinctions to be made between EBSNA and alternative attendance difficulties, such as 'truancy', advocated for by multiple authors (e.g. Heyne et al., 2001; Egger et al., 2003). However, in practice this distinction is less consistently acknowledged, with EBSNA and truancy often being approached with similar measures (DfE, 2020). This lack of acknowledgement leaves parents of CYP experiencing EBSNA liable to parenting orders, fines, and prosecution under the Education Act (1996; Section 444). Recent research completed by 'Not Fine in School' (NFIS; 2020) highlighted the ineffectiveness of legal measures when supporting EBSNA, as well as the impact that these difficulties can have on the wider family. Further research is therefore needed to promote effective identification and support in the absence of updated legislation at present.

Figure 4

Characteristics of 'school refusal', according to Berg, et al. (1969).

- (1) Severe difficulty attending school,
- (2) Severe emotional upset at the prospect of attending school,
- (3) Staying at home with the knowledge of parents (*later revised to 'parents make reasonable attempts to secure child's attendance'; Berg, 2002*)
- (4) Absence of anti-social behaviours.

A Multi-Systemic Approach

The literature indicates that a range of factors and systems contribute to the development and maintenance of EBSNA, including home, school, and mental health influences (Thambirajah et al., 2008; Pellegrini, 2007; Nuttall & Woods, 2013; Gregory & Purcell, 2014; Ochi et al. 2020). Subsequently, recent literature has promoted an increasingly 'systemic' framework to understanding EBSNA (e.g. Ingul & Nordhal, 2013), acknowledging the influence of multiple systems and emphasising the need for an individualised approach to intervention (Lauchlan, 2003). Drawing upon 'Ecological Systems Theory' (EST; Bronfenbrenner, 1992), this approach aligns with the concept of individual behaviour being directly related to surrounding environments, placing emphasis on interactions between these systems, as well as wider cultural contexts (Hayes & O'Toole, 2007). The newly established International Network for School Attendance (INSA, 2020) supports this, emphasising the importance of embracing interdisciplinary practice in this field, arguing that intervention should intersect parental, school, community, and legal contexts.

Working with a multi-systems approach has received research support. Nuttall and Woods (2013) proposed an 'Ecological Model of Successful Reintegration' following case studies of CYP who had recently accessed support in relation to EBSNA. Their 'solution-oriented' interviews with CYP, parents and educational psychologists (EPs) emphasised the need for CYP and families to be supported simultaneously, involving both schools and external professionals, with themes such as 'supporting psychological factors' and 'avoiding prosecution' resulting from the findings. This supports previous conclusions within this field suggesting that change is needed across multiple systems in order to be effective, with support targeted at CYP or families alone not being sufficient (e.g. Place et al., 2000; Passmore, 2009). Subsequently, authors have indicated a need for increased school accountability when supporting EBSNA, through increased communication, greater understanding and ongoing monitoring of CYP's 'risk factors' (e.g. Epstein & Sheldon; Ingul & Nordhal, 2013; Ingul et al., 2019).

A 'solution-oriented' approach was also recently adopted by Corcoran et al. (2022), studying the successful return to school of two primary-aged children following the Covid-19 school closures. Although neither child had experienced a complete halt in attendance at any point, their findings highlight the importance of a multi-agency and collaborative approach in facilitating early identification and support. Therefore, the principles of collaboration when attempting to understand and support EBSNA is promoted within the literature, adopting a multi-systemic approach in line with Bronfenbrenner's framework (1992).

Current Practice and Issues

However, it must be considered whether this is representative of current practice. Research completed by NFIS (2020); a charitable organisation designed to support parents of CYP experiencing school non-attendance, highlighted the inconsistencies in support received by parents, questioning whether a systemic approach has been truly adopted. Parents added comments around the “exhausting process” (pp.44), suggesting that obstacles to clear and effective support continue to exist.

One barrier identified by the literature includes professional conceptualisations of EBSNA, with research suggesting that parents and professionals hold differing perspectives of this difficulty. For example, Archer et al., (2003) studied professional perceptions of ‘*school refusal*’ across 60 Local Authorities (LAs), and over 200 schools in England, finding that both school staff and LA professionals cited the home environment as the ‘origin’ of most school refusal behaviours, despite acknowledging the contribution of school factors in its development. Furthermore, nearly 50% of LA professionals did not distinguish EBSNA from alternative school attendance difficulties, suggesting the lack of a common understanding, and ultimately co-ordination between theory and practice. These views were additionally captured within findings from Malcom et al., (2003), with professionals discussing the importance of ‘home factors’, including parental working hours, attitude and domestic violence. Although participants advocated for involving parents in support, this included engagement in legal processes, and through indirect work via schools (e.g. parenting workshops), suggesting the lack of a preventative and supportive approach.

Although these findings predate the new SEND Code of Practice (2015), and may therefore represent historical views, they indicate that professionals may not be adopting a ‘systemic’ approach by not routinely engaging parents in EBSNA intervention (e.g. Nelson, 2013; Ford, 2018). Nuttall and Woods (2013) therefore call for an increase in ‘practice-based evidence’, noting the small number of participants within their own research, and the limitations that exist within the current literature base when considering and exploring parent views.

To date, a small number of studies have included the ‘parent voice’, (e.g. Gregory & Purcell, 2014; Havik et al., 2014; Passmore, 2009), with Corcoran et al. (2022) noting the importance of gathering and incorporating parent views as key stakeholders (INSA, 2019). However, within the existing literature, research has rarely focused on the parent experience alone, instead often being dominated by professional views. Research conducted by Browne (2019) interviewed parents whose children has previously experienced EBSNA. An interpretative phenomenological analysis indicated that parents felt blamed and misunderstood by professionals and uncovered “the battle to be heard” (p.103), highlighting

the emotional experiences of EBSNA, and indicating the need for professionals to “support and empower” when working with this population (Browne, 2019). This may explain findings from NFIS (2020), that parents feel unsupported, blamed and “abandoned”, suggesting the lack of a ‘joint systems’ approach within both literature and practice.

With this apparent gap within the literature, the barriers to a multi-systemic approach in supporting EBSNA becomes comprehensible, with increased understanding of the parent voice and experience required to inform appropriate and collaborative intervention.

The Impact of Covid-19

Further consideration must also be paid to the yet unknown impact of Covid-19 and the resulting school closures. Research completed during the pandemic has highlighted its role in deteriorating mental health, indicating the indirect impact that Covid-19 may have had on children’s wellbeing and school experience (Hawes et al., 2021). This is simultaneous to the increase in familial ‘risk factors’ and strain on local services as discussed by Ford (2021), suggesting that the pandemic may have impacted the support accessed and available to families during this time. Research has highlighted the Covid-19 lockdowns as a learning opportunity (Corcoran, et al., 2022), exploring successful facilitators to reintegration following the school closures. However, at the time of writing, no findings yet exist on the explicit relationship between EBSNA and Covid-19, including the impact felt by parents and access to support services, highlighting a need to explore this further if an ‘ecological model of reintegration’ is to be adopted (Nuttall & Woods, 2013).

Aims and Rationale of Present Study

This study aims to gather parental views on EBSNA, through exploring retrospective experiences of support using a ‘solution-oriented’ approach, aligning with previous methodologies in this area (Nuttall & Woods, 2013; Corcoran, et al., 2022). With an aim of uncovering ‘what works’ to inform future professional practice, this study will focus on aspects of support that are or would be beneficial, from the perception of parents who have supported their own children with EBSNA. This research therefore hopes to build upon previous findings and address the need for ‘practice-based evidence’ in this field.

Additionally, through concentrating on parent voice alone, it is hoped that this research will address a crucial gap within the literature that currently prevents an informed ‘joint systems’ approach.

Furthermore, it is hoped that this data will provide important insights into the wider support currently accessed by parents in relation to EBSNA, to broaden professional understanding of the accessibility and effectiveness of services. This will ensure that parent views are better represented within the literature, as well as directly involved in developing professional

practice, updating the current landscape of EBSNA support and intervention. To achieve this, the following research questions will guide this study:

1. What forms of support did parents access in relation to their child's EBSNA?
2. What did parents find useful from the support received in relation to their child's EBSNA?
3. What could professionals supporting parents and CYP experiencing EBSNA do more of to promote positive progress?
4. How has the Covid-19 school closures impacted EBSNA and the support accessed by parents?

Methodology

Design

Epistemological Stance

This study was approached from the position of critical realism, a stance attributed to Bhaksar (1978). Developed with an aim of creating distance from deductivist approaches, a critical realist perspective posits that reality indeed exists independently from the human mind (Sayer, 2000), but is also multi-dimensional, stratified and not directly observable (de Souza, 2014). Instead, this position believes that reality is observed through societal structures and interactions, such as the presence of culture, power, and relationships over time. Consequently, critical realism has been likened to 'moderate social constructionism' (Burr, 2015), suggesting that reality can be understood through studying individual and collective experience. Freyd (1983), for example, highlights the 'shareability' of knowledge and experience, which Kelly (2017) argues can reveal a shared reality. The researcher therefore hopes to understand this 'shared reality', whilst also acknowledging context and individual experience, to consider and inform positive outcomes. Subsequently, this study adopts a pragmatic and phenomenological approach, seeking to understand reality through exploring participants' views and experiences in a solution-oriented way. This way of working is concerned with considering a 'positive future', through exploring strengths, resources, and capabilities already in existence to support its achievement. Within educational psychology practice, this approach aims to elicit change through altering the 'doing and viewing' of the 'problem' (O'Hanlon & Weiner-Davis, 2002;), to consider what is already working well to identify next steps. Within the context of this research, a solution-oriented framework therefore aims to consider how practitioners can learn from previous experiences and views

of parents, and identify a positive future, as well as actionable next steps to achieve this. This aligns with a critical realist position through acknowledging both shared and subjective features of knowledge, with an aim of promoting positive change rather than uncovering 'one truth' (Morgan, 2014; Fryer, 2020). It is hoped that by adopting a solution-oriented approach, parents' experiences, both positive and negative, will be explored and acknowledged, however interpreted in a way that presents solutions and clear implications for practice, whilst also aligning with and building upon previous findings in this area following a similar approach (e.g. Nuttall & Woods, 2013; Corcoran, et al., 2022).

The Present Study

To align with the above, a sequential explanatory mixed methods design was used across two phases. Firstly, an online questionnaire was employed to gather both quantitative and qualitative data on the support accessed by parents, as well as its effectiveness, the impact of Covid-19, and demographic information (Phase One). A questionnaire was selected on this occasion for multiple reasons, including to provide context ahead of Phase Two. This was achieved through gathering information on the type of support accessed, as well as parents' perceptions of these, to inform questions included within phase two. Additionally, use of an online questionnaire allowed for a greater audience to be reached, due to both the narrow inclusion criteria (see below), and the challenges of the pandemic at the time of data collection. Phase One findings were then used to inform questions asked within semi-structured interviews, providing in-depth qualitative data on parental views and experiences (Phase Two), extending the findings achieved from Phase One. This allowed the researcher to acquire an understanding of reality, and address the above four research questions, through collection of both quantitative and qualitative data with Phase One ultimately informing Phase Two through identifying suitable participants and providing valuable context, used to refine subsequent interview questions.

Participants

Participants were recruited across two phases and were defined as parents of children in school year eight (aged 14) or below, who had recently experienced EBSNA. All participants had children who had previously met the descriptive criteria outlined by Berg, et al., (1969; Figure 4) and made progress with their attendance within the last three years. It was understood, however, that 'progress' may be subjective, and so further guidance was produced to support effective recruitment (Appendix 1). Subsequently, the current study focused only on those who had improved their rate of school attendance. Due to the researcher's interest in retrospective experiences, parents of CYP who had made no previous progress with attendance were excluded.

Phase One (online questionnaire).

Participants were recruited with the support of schools, education professionals and local educational psychology (EP) services. Professionals were asked to forward the questionnaire link to any parents who met the criteria, following a 'purposive sampling' approach. This allowed the questionnaire to reach the desired population, avoiding families who had not observed progress with their child's attendance and were therefore not the focus of the present study. This also meant that the researcher was reliant upon professional judgement and action. A guidance document was produced and circulated alongside the study information, to support with selection of participants (Appendix 1). Parents who received this information were able to access an information sheet and give consent to participate using the questionnaire link.

A total of 43 participants responded to the questionnaire, 15 of which were excluded due to indicating a lack of progress. This was achieved by asking participants to 'rate' their child's attendance over time using Likert scales (ranging from 1-10) allowing for progress to be quantified and observed in their responses. The responses from excluded participants indicated a lack of progress by this rating remaining stable or declining over time. Twenty-eight responses were subsequently included in the analysis. From these, 64.3% (n=18) indicated sustained progress over time, with 35.7% (n=10) indicating that progress had previously been achieved but that attendance had recently worsened. Participants were asked to indicate the age at which their child's difficulties began, with responses ranging from 1-12 years old (mean= 8 years).

Phase Two (semi-structured interviews).

Participants were invited to learn more about Phase Two through sharing their contact details using a separate online form at the close of Phase One. Twelve participants left details and were invited to participate. Five parents completed and returned the consent form (Appendix 7) and subsequently completed an individual semi-structured interview. Demographic information is presented in Table 4. Parents' age, location and level of education varied. One participant disclosed that they were a practicing local authority EP, however assured the researcher that they intended to approach the interview from their position as a parent, rather than a professional.

Table 4*Demographic information on Phase Two participants and their children*

	1	2	3	4	5
Parent	Mother	Mother	Mother	Mother	Mother
Sex of Child	Male	Female	Male	Female	Female
Year Group of Child (at time of interview)	Year 7 (Summer Term)	Year 8 (Summer Term)	Year 1 (Summer Term)	Year 3 (Summer Term)	Year 8 (Autumn Term)
Diagnosis?	ASD/ Sensory Processing Difficulties	ASD	ASD	ASD	
EHCP in place?	✓	Pending	✓	✓	
Current level of attendance	Full Time	Full time	Full time	45 minutes, twice a week	Full time
Attending a mainstream setting?		✓	✓	✓	✓
Geographical location?	South East	East	South West	East	East
Date of Interview	18.07.2021	23.07.2021	30.07.2021	18.08.2021	30.07.2021

Data Collection***Phase One.***

Data was collected remotely using Microsoft Forms. After reviewing the information sheet and giving informed consent, participants were asked to respond to questions around the nature of their child's difficulties and progress. Questions were presented across three sections: experience of EBSNA (including demographic information, perceived contributing factors and rating of progress over time), support accessed by parents (including parents indicating which services had been accessed and how 'useful' these had been), and the impact of covid-19 (including parents' access to support during this time). A copy of the questionnaire is included within Appendix 2. The questionnaire was developed with the support of supervision and piloting and was guided by solution-oriented principles. Firstly, it aimed to ensure that participants met the inclusion criteria, as described above. Through

exploring the range of contributing factors experienced by families, this enabled the researcher to have confidence that participants' children had experienced 'EBSNA', rather than alternative attendance difficulties, such as truancy or medical absence, aligning with Berg et al's definition (Figure 4). Secondly, this aimed to acknowledge the range of experiences had by families, whilst also considering what was most useful during this time. Gathering this initial data allowed the researcher to understand what support was currently being accessed by parents, giving insight into the current context, as well as acknowledging negative experiences which may arise within Phase Two interviews.

Phase Two

Questions included within the semi-structured interviews aimed to gain further insight into participants' experience of EBSNA and the support received with a solution-oriented aim of uncovering 'what works'. The interview schedule was developed with these principles in mind, as well as being informed by Phase One data. Prior to Phase One, a skeleton interview schedule was developed to address the four research questions with a solution-oriented lens, considering what professionals could do 'more of', as well as discussing positive experiences of support. Following analysis of Phase One data, additional questions were added to explore subjects including: the EP role, the role of online support, and the impact of Covid-19. This was due to the mixed and inconclusive findings gathered by the questionnaire, aligning with the aim of the present study and interests of the researcher. The final interview schedule is included within Appendix 3.

Interviews were completed remotely using Microsoft Teams, due to the continued uncertainty produced by the Covid-19 pandemic, allowing participants outside of the researcher's locality to be included. Audio and video recordings of each interview were made with the participants' consent to aid later transcription. These were deleted after transcripts had been produced verbatim from the recordings. Two participants indicated that they wished to review their transcripts prior to analysis and gave consent for these to be included after doing so.

Analysis

Descriptive statistics were initially produced from quantitative questionnaire data (including demographic information, support accessed and perception of 'usefulness'). Open questions were analysed using Content Analysis, following steps outlined by Gillham (2008). This is described as the practical activity of categorising useful and/or necessary data. The steps were as follows:

1. Study each written response in turn. Highlight substantive statements containing information key to answering the current question.
2. Use these highlighted statements to form initial 'categories' including overlapping responses. These should be objective and semantic where possible.
3. Reflect upon your categories and whether they represent all responses given.
4. Note the frequency of each category cited by participants to produce a 'count' or quantitative understanding of participants' responses.

Analysis of questionnaire data was then used to inform questions presented within Phase Two as described above.

Interview transcripts were analysed using Braun and Clarke's 'Six Stage Thematic Analysis' (2012). An inductive approach was adopted to align with the researcher's epistemological position, whereby codes were informed by the data content, and then refined in line with a 'reflexive' approach (Braun & Clarke, 2021). This involves a process of critical reflection throughout data analysis, acknowledging the researcher's subjectivity and interpretation within the data. The six phases outlined by Braun and Clarke (2021) were used as guidelines, with the resulting analysis completed 'by hand', situating the researcher as active within the process (see Appendix 4). The authors note the importance of not viewing these phases as 'rules', but rather a non-linear process to support effective and 'reflexive' analysis. These phases include:

- 1) Familiarising yourself with the dataset (including the process of 'immersion' through re-reading transcripts and making initial notes)
- 2) Coding (working systematically through the dataset to produce semantic and latent labels for units of meaning).
- 3) Generating initial themes (identifying shared patterns of meaning across the dataset)
- 4) Developing and reviewing themes (including referring back to the dataset, considering the narrative portrayed by the themes and the relationship between them)
- 5) Refining, defining, and naming (considering the core concept that each theme captures)
- 6) Writing up

After a cyclical process of producing, defining, and reviewing codes, themes and sub-themes were developed that best represented the data. These were reviewed through comparing themes and codes back to original data extracts, as well as the research questions. This allowed the researcher to remain reflexive, given the subjective nature of the process. Despite the researcher's aim to remain 'solution-oriented', codes that represented both

positive and negative experiences were produced in order to maintain an inductive and phenomenological approach. This is due to participants sharing both solution-oriented and more 'problem- focused' views and experiences throughout the interviews, presenting a challenge to original 'solution-oriented' aims of the research. After initial coding, however, resulting themes were identified defined using 'solution-oriented' principles (O'Hanlon & Weiner-Davis, 2002) to best align with the research questions. As a result, each theme represents a combination of both positive and negative experiences portrayed by participants, highlighting both what 'works well' and what professionals can 'do more of'. For a summary of final codes, and how these were represented by finalised themes, please see Appendix 5.

Ensuring Rigour

Throughout the analysis and interpretation phase, considerations were made in relation to ensuring scientific rigour. This can be understood as the quality, or 'trustworthiness' of the research, as described by Guba and Lincoln (1986), and is concerned with exploring the value and credibility of the inquiry. The authors highlight four criteria to consider when evaluating rigour within qualitative, or 'naturalistic' research, including: credibility or validity, transferability, dependability, and confirmability. Through approaching the analysis as outlined above, this research conforms to such criteria, following steps that promote prolonged engagement with the data, and represent a clear process, improving the credibility and confirmability of the findings (see Appendix 5). Additionally, use of a mixed methods approach allowed for the triangulation of findings, and inclusion of quantitative data, adding to the rigour of the present study.

When considering the dependability of research, Guba and Lincoln (1986) suggest the use of external audit by an independent researcher. However, as outlined above, the researcher's subjectivity is a key element of 'Reflexive TA', the method employed within Phase Two on this occasion, which would have deemed this inappropriate. It is therefore acknowledged that the researcher's value system, education, and other contextual factors may have influenced their approach to the data, potentially impacting upon the credibility and transferability of their interpretation. To combat this, comments outlined by Braun and Clarke (2021) around conducting 'good thematic analysis' were carefully considered and followed. In particular, ensuring thorough and detailed engagement with the transcripts and resulting codes, as well as regularly checking back with the original dataset to ensure clear representation of meaning across both codes and themes proved crucial throughout the analysis phase. This allowed the research to consider 'good fit' between their resulting themes, methodology and employed frameworks, as well as the above-described epistemological position. Therefore, despite the researcher maintaining an active role

throughout the process, following a clear approach to conducting the analysis means that this is hoped to be considered a strength, rather than a limitation of the present findings, with rigour, credibility, and trustworthiness remaining key components of the research.

Ethical Considerations

This research received ethical approval from UEA's Research Ethics Committee in March 2021 (Appendix 6) and followed guidance from the British Psychological Society's Code of Human Research Ethics (2014). Due to the remote nature of this study, particular regard was given to obtaining informed consent, ensuring confidentiality, and reducing potential harm or distress. The last page of the questionnaire encouraged participants to access support through signposted channels and invited them to contact the researcher should they have any questions or concerns. Prior to completing any interviews, potential participants were sent a detailed information sheet (Appendix 7), giving them the opportunity to process and consider their involvement before agreeing to participate. Only individuals who returned a completed form to the researcher were offered an interview time. Prior to recording, participants were reminded of the researcher's purpose and aims, and additional verbal consent was gained. Consent to use the recordings was also confirmed at the time of interview, as well as participants' right to withdraw their transcripts, ask any questions and how to access findings at a later date.

Data was collected and analysed in line with the General Data Protection Regulation Act (2018) and the University of East Anglia Research Data Management Policy (2019). Participant information, including contact details, were only used with the purpose for which they were collected, and will subsequently be deleted after completion of the doctorate course. Recordings were stored on an encrypted file, and transcripts were anonymised to promote confidentiality. From the point of transcription onwards, participants were referred to by number and identifiable information was removed. Careful consideration was given to the researcher's role within the context of this study and avoiding confusion with their role as a 'Trainee Educational Psychologist' (TEP) within a local authority. It is noted that participants' perception of 'progress' differed and many felt their child's difficulties to be ongoing, therefore it was important to clearly define the purpose of the interview as a research method, rather than providing individualised support. This was clearly stated within the information sheet provided and during the interview, with participants being encouraged to seek support from local/ national organisations if they felt this to be necessary.

Findings

Phase One

This section outlines findings from the questionnaire employed during Phase One (n=28). Participants were asked a combination of open and closed questions (n=16), across three sections (Appendix 2). Aside from demographic data cited above, the findings from each section are presented in Table 5 below.

Experiences of EBSNA.

Participants were asked to share what they believed to have contributed to their child's EBSNA. This question was included to provide deeper understanding into the difficulties faced by this population, as well as confirm that the difficulties aligned with the definition of EBSNA employed within this study. Content analysis revealed a range of contributing factors (Table 5), with over 50% indicating more than one factor within their response. Seventy-five percent of participants indicated that their child's difficulties had begun in the last three years, with 25% beginning within the last twelve months.

The most commonly cited factor was 'unmet special educational needs' (SEN; 35.71%) and a lack of school-based support (35.71%). Twenty-eight percent additionally cited the presence of mental health difficulties (e.g. depression/ anxiety).

Table 5

Factors contributing to EBSNA cited by participants

Contributing factors cited by participants	% of participants cited
Adverse Childhood experiences	7.14% (n=2)
Being a 'looked after child'	3.57% (n=1)
Unmet SEN	35.71% (n=10)
Lack of school-based support	35.71% (n=10)
Needs misunderstood within school	14.28% (n=4)
Transition to secondary school	3.57% (n=1)
Bullying by peers	21.42% (n=6)
Mental health difficulties	28.57% (n=8)
Friendship difficulties	17.85% (n=5)
Separation anxiety	7.14% (n=2)
Lack of positive relationships within school	10.71% (n=3)
Sensory difficulties	14.28% (n=4)
Covid-19 school closures	3.57% (n=1)

Table 6*Categories of recognised SEN experienced by participants' children*

SEN	Percentage*
Autism Spectrum Disorder (ASD)	60.71% (n=17)
Anxiety disorder	25% (n=7)
Attention Deficit and Hyperactive Disorder	21.43% (n=6)
Specific Learning Difficulty (e.g. Dyslexia)	14.28% (n=4)
Sensory processing disorder	14.28% (n=4)
Dyspraxia/ hypermobility	14.28% (n=4)
Depression	3.57% (n=1)
Sleep disorder	3.57% (n=1)
Attachment disorder	3.57% (n=1)

*53% of participants (n=15) indicated that their child had more than one recognised SEN.

However, half of these explicitly stated that these were exacerbated by unmet SEN (n=4).

Eighty-two percent of participants reported that their child had recognised SEN, with Autism Spectrum Disorder (ASD) being the most commonly reported need (60.71%). However, a range of diagnoses were reported (Table 6). Additionally, 65% (n=15) reported that these difficulties were not identified prior to the onset of EBSNA, aligning with the above findings that unmet SEN was the most common contributing factor.

Support accessed by parents.

Participants were asked to indicate how long it took to access support after the onset of their child's difficulties. Over 35% indicated that it took 'more than a year' to access support (n=10), compared with 3.6% (n=1) that accessed support 'immediately'. Table 7 presents information on the range of responses to this question.

Table 7*Time taken to access support following onset of EBSNA*

Time taken	Percentage of participants (%)
More than a year	35.71% (n=10)
Less than one year	10.71% (n=3)
1-2 academic terms	7.14% (n=2)
Less than one academic term	14.28% (n=4)
A few weeks	21.42% (n=6)
Immediately	3.57% (n=1)

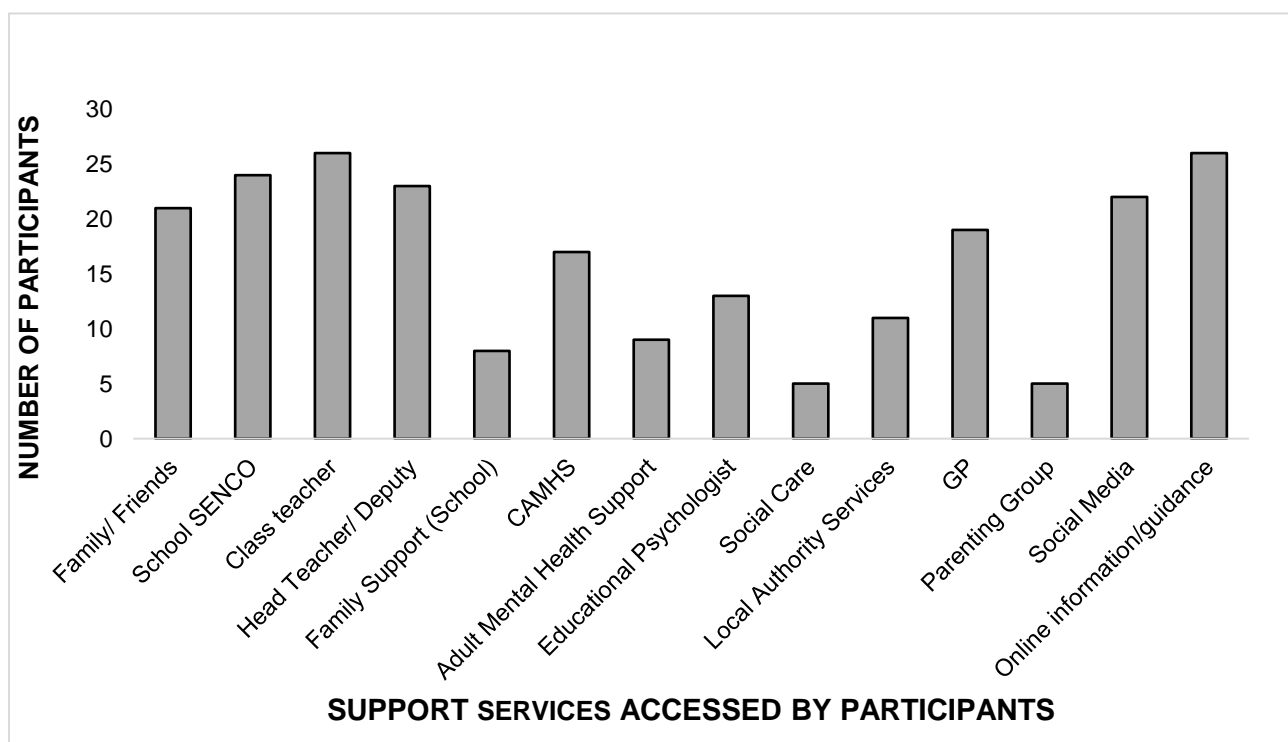
To address research question one (RQ1), participants were provided with a list of support services and asked to indicate whether they accessed this in relation to their child's EBSNA. Figure 5 provides an overview of the different services accessed by participants.

The data suggested that the most common professionals accessed in relation to EBSNA were based within schools (Special Educational Needs Co-Ordinator; SENCO (n=24), Class Teacher (n=26), and Deputy/Head Teacher (n=23)). Less than half of respondents reported that they had accessed support from an Educational Psychologist (EP) (n=13) or from 'Other LA services' (n=11).

Over 60% reported accessing health services, including General Practitioners (GP; n=19) and CAMHS (n=17). This aligns with above findings that unmet mental health difficulties were a common contributor to EBSNA within this sample and may explain the high rate of SEN being recognised after EBSNA onset; children may have received diagnoses from health services as part of the support accessed. However, a lower number of participants reported accessing adult mental health support (n=9), suggesting that when health services were involved, support was typically targeted at CYP.

Figure 5.

The number of participants who accessed each form of support in relation to their child's EBSNA.



Similarly, support targeted at the family or parents was accessed at lower levels in comparison to school-based or CYP-focused support. Eight participants reported accessing a Family Support Practitioner via their child's school, however it is noted that this may not be an available resource at every setting. Even fewer parents reported accessing social care support (n=5) or parenting groups (n=5), suggesting that these pathways are not commonly accessed at present by parents of children experiencing EBSNA. However, many participants reported accessing 'online' forms of support, including online guidance/information (n=26) and social media (n=22).

To learn which forms of support were perceived as most effective in line with RQ2 and RQ3, participants were asked to rate how 'useful' they found each support service (if accessed) from 1-5 (1='not at all useful', 5= 'extremely useful'). Figure 6 presents the number of participants that rated each service as 'not at all useful', and 'extremely useful', to understand which services were rated as most and least helpful.

Despite school-based professionals being commonly accessed, this was rated as the least helpful, with 46% and 60% respectively rating the Class Teacher (n=13) and Deputy/Head Teacher (n=17) as 'not at all useful'. Support from the SENCO was viewed more positively, with 29% rating this as 'not at all useful', and 20% conversely rating this as 'extremely useful'.

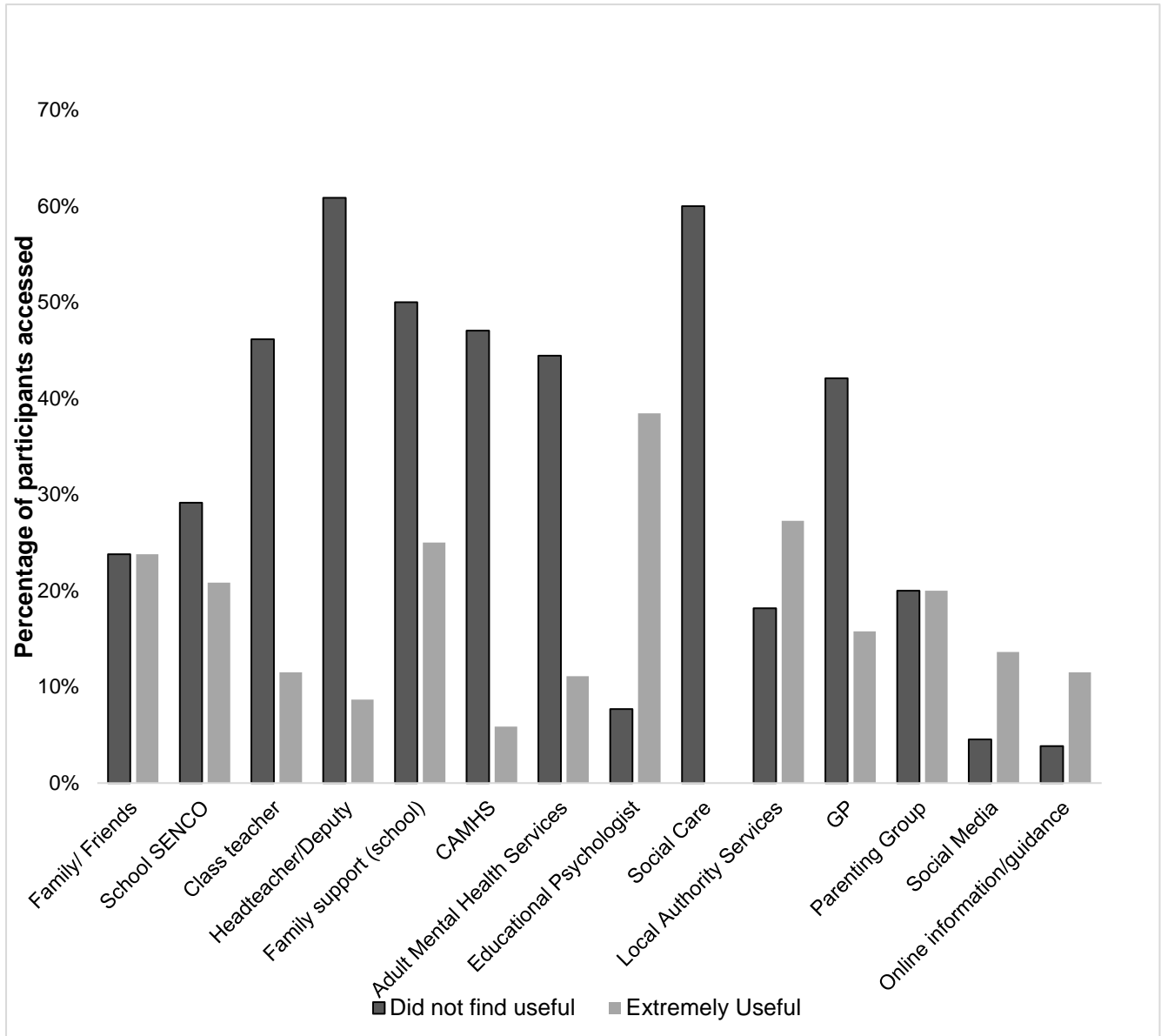
Health services were perceived as unhelpful by many, with 42% and 47% of participants respectively rating GP services and CAMHS as 'not at all useful'. Despite being accessed by over 60% of participants, only 15% rated GPs as 'extremely useful', with CAMHS receiving this rating from 5%. This indicates that, at present, mental health and diagnostic services may not be effectively providing the support required by CYP experiencing EBSNA.

This contrasts with ratings received by EPs; 7% rated support from these services as 'not at all useful', whereas 38% rated this 'extremely useful' (n=11). The data therefore indicates that those who accessed EP services perceived these to be more helpful in supporting their child's EBSNA, in comparison to school-based or health-focused support. The researcher subsequently chose to further explore access to EP services within Phase Two

Social care was rated as the least useful form of support ('not at all useful' =60%), as well as mental health support for parents (44%), suggesting that support targeted at parents alone may not be viewed as beneficial. Twenty-five percent of participants rated support from their school's 'Family Support Practitioner' as 'extremely useful', suggesting that family-based support may be viewed more positively when this is co-ordinated by the school, rather than external professionals. However, 50% additionally rated this as 'not at all useful', suggesting that participants had mixed experiences with this form of support.

Figure 6

Percentage of participants who rated support services as 'not at all useful' and 'extremely useful' from those who accessed them



The data additionally demonstrated participants' mixed experiences with online forms of support. Only 4% and 3% respectively rated 'social media' and 'online information/ guidance' as 'not at all useful', suggesting that many found benefit in accessing support online. However, these forms of support were only rated as 'extremely useful' by 13% and 11% respectively. The researcher noted that each participants' experience and use of online support is likely to vary considerably, and so a question to explore this further was added to Phase Two of the study.

The Impact of Covid-19.

To address RQ4, participants were asked how the Covid-19 school closures had impacted upon their child's EBSNA, as well as the support accessed. Twenty-one percent (n=6) reported receiving additional or different support during the pandemic. A content analysis revealed that this included additional contact from school, such as a weekly phone call (n=3), attending school with 'key worker' children to maintain routine (n=1), increased support from CAMHS (n=1) and video calls from the school nurse (n=1). Nearly 80% did not report receiving additional or different support during this time.

Content analysis additionally indicated that the school closures impacted EBSNA in a variety of ways. Ten percent of participants reported that the lockdown had a 'big impact' but did not elaborate further. Twenty-five percent indicated that Covid-19 had initiated or perpetuated their child's difficulties, with responses indicating that the lockdowns had created disruption in their child's routine (17%), difficulty accessing online learning (14%) and difficulty implementing action plans (7%).

However, participants also reported positive impacts, with 25% reporting that the lockdown reduced their child's anxiety levels due to reduced pressure and demand to attend school. One participant commented that the reduced class sizes and increased adult support available helped staff to realise the support required by her child, and to develop a plan to implement this following the re-opening. Other comments included: "it gave them space to relax and re-engage", and "the removal of fight or flight response", suggesting that both positive and negative experiences were had during this time. Due to the mixed responses received, further understanding was sought within Phase Two.

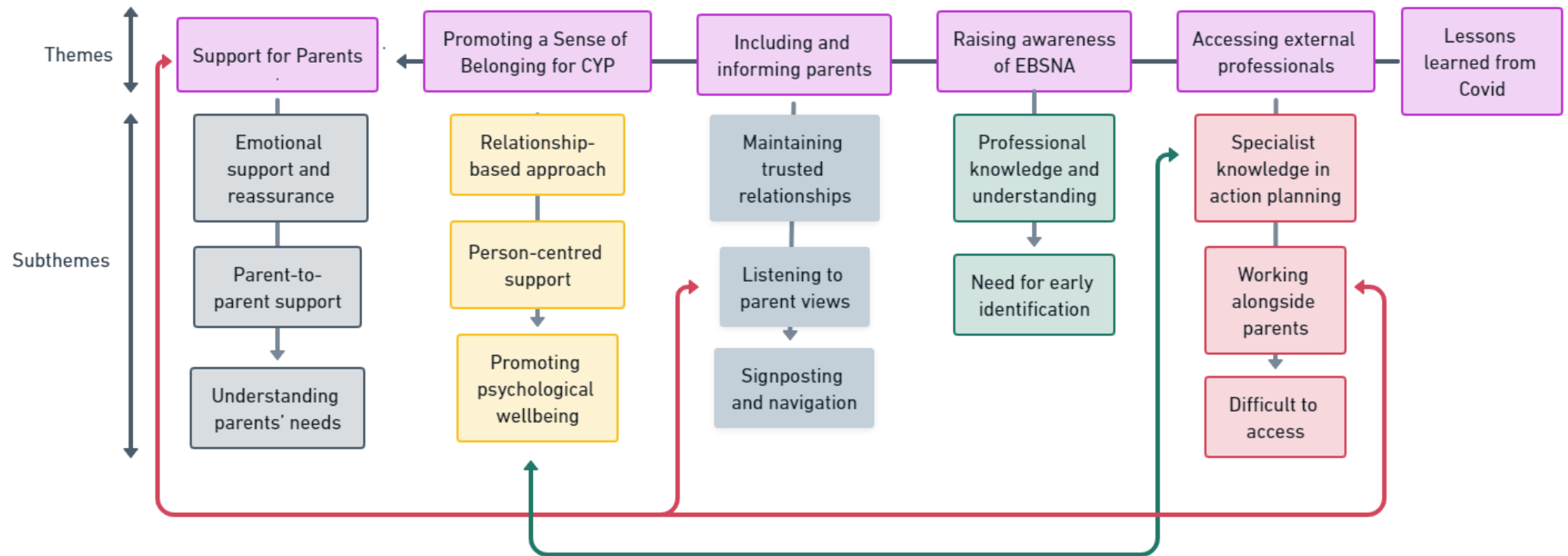
Phase Two (Semi-Structured Interviews)

The aim of Phase Two was to understand parent experiences in greater depth, exploring 'what worked' to facilitate progress with EBSNA in line with the research questions. Following analysis of the transcripts (Appendix 4), the following themes and sub-themes (forming the acronym 'SPIRAL') were developed in line with 'solution-oriented' principles (Figure 7).

Extracts from the data were selected proportionately across all interviews to best illustrate the theme and its captured ideas. For a summary of themes, including related codes, please see Appendix 5.

Figure 7.

Thematic Map detailing interconnected Themes and Subthemes derived from Phase Two.



Theme 1: Supporting Parents.

Across all interviews, participants highlighted the importance of professionals providing increased support for parents experiencing EBSNA. This theme captures the varied experiences discussed by participants, including instances where support was employed successfully, and where more was identified to be needed. Each sub-theme represents a different aspect of support discussed.

Sub theme: Providing emotional support and reassurance. Participants reflected upon the emotional impact of EBSNA, and the challenges it brings to the wider family. The need for parents to access emotional support and containment was a recurring theme, with participants discussing the current lack of support available.

P2: "it got to the point where I was so depressed that I couldn't see a way out...and X was getting harder and harder for me to deal with, and I was getting poorer and poorer..."

P3: "the levels of anxiety and stress that is caused wasn't just taking over his life, it took over the whole family's life... ..it was horrendous...and it got to a point where staff were physically picking him up and carrying him into the classroom and I just... ..I couldn't watch it anymore, screaming and the stress levels...I have an elder daughter, it was just horrendous...my stress levels, my husband's stress levels, it was just awful"

These extracts highlight the impact that supporting EBSNA can have on parental wellbeing. Participants shared feelings of responsibility and blame, as well as apprehension around the future. Additionally, CYP's physical symptoms of anxiety were discussed, with parents witnessing their child's distress contributing to further feelings of guilt and concern. This subsequently reveals the emotional experience faced by parents when supporting EBSNA, with participants conveying a sense of hopelessness when discussing support provided by 'the system'.

P4: "I asked for the email address the lady from the LEA just said well she's about to retire now so urm a new person will be starting but I don't know who they are yet, and I was just like well that really fills me with confidence that they're gonna even bother to read it or care"

The lack of hope portrayed highlights participants' feelings of isolation when liaising with professionals, communicating a feeling of being unsupported. Considering the discussed impact on parental wellbeing, this emphasises the need for parents to feel reassured and supported when accessing services, which only one participant expressed feeling.

The need for emotional support was also discussed in relation to the parent role in being their child's main source of support. Participants reflected on the need to advocate for their child, as well as provide co-regulation and be a 'secure base'.

P4: *“we found with X the only way to get her used to somewhere is for me to go with her to begin with and then gradually wean me off her”*

P5: *“she’d phone me constantly from school, she’d text me and say I’m in the toilet and I can’t manage Mum I need to come home, she has very limited coping strategies for actually coping apart from texting me”*

Two participants explicitly stated that this responsibility typically fell to one parent only, highlighting the pressure and emotion that may be placed on this individual. One participant reflected on the lack of understanding that existed within her own family, and the feelings of responsibility she experienced in being her child’s main source of support. This subsequently illustrates the need for clearer support pathways for parents, with EBSNA being highlighted as an emotional and challenging experience.

Subtheme: Parent-to-parent support.

P3: *“I can’t tell you how alone you feel on those mornings when your child is...urm...it’s horrendous, absolutely horrendous”*

Parents discussed feelings of isolation in relation to their child’s EBSNA. This sub-theme captures the benefits of ‘parent-to-parent’ support, and the importance of ‘peer support’ when managing EBSNA-related difficulties. Participants reflected on how communicating with other parents who had previously experienced EBSNA reduced feelings of isolation, providing a distinct and positive source of support. Parents discussed the range of avenues used to access parent-to-parent support, and their personal experiences of these. These included informal support from friends and colleagues and attending professional-led workshops and support groups. The benefits of face-to-face interaction were discussed, though it was noted that the recent presence of Covid-19 had prevented such groups taking place ‘in person’, ultimately changing the support available to parents during this time.

P4: *“, it’s like a charity-based support urm called (Family Charity) near where I live and they do training... before Covid they did like meet ups every month, urm so I when X was still attending a bit I would try and get to one of these, and I always found like face to face it was really helpful and you just felt more supported”*

P3: *“the urm...parent support group... it’s once a month in the evening and at the moment it’s on zoom, but it’s literally just to go into that group and just either have a cry or just say we’re having this and somebody else go yep we’ve got that, and there’s no fixing it, because like we say like I said earlier every autistic child is different every family has their different mental health issues and social situations, literally just to know that you are amongst friends”*

Common themes included the benefits of sharing stories, successes and seeking advice from other parents, and having a safe and supportive space to facilitate this. Participants discussed the advice and insight of other parents as vital in protecting their wellbeing and developing their understanding of the system, including sharing information on legal processes, and accessing professional support. Participants also discussed the role of social

media in facilitating parent-to-parent support, such as online groups or forums that allowed for discussion of topics including EBSNA, statutory assessments, or SEND more generally.

P1: “so you feel less isolated...and its more affirming that you’re doing the right things for your child...in part of those groups were people that had been through the same processes and were in the same systems”

P4: “to be honest, parents that have gone through it are the most helpful resource...because they can give you advice they can sympathise with you and give you like tips and tricks to sort of get through”

On the surface this appears a productive approach to accessing parent-to-parent support, that would be available and convenient for many families. However, some participants shared negative views of social media, indicating that parents may have mixed experiences.

P3: I actually personally don’t like Facebook groups ...it’s just full of trauma, urm it’s full of parents that are pulling their hair out and, urm there are times when it’s like, guys I got this in my EHCP, what should I do with it?, and that is great but then you do have the side where it’s like Karen from down the road has got her opinion on what should be happening...and it’s so, intricate, and I don’t feel like an online forum should be the place where parents are receiving this amount of support with it”

One parent shared her wish for peer support to be easily accessed via schools to provide a safe and ‘solution-focused’ environment, discussing her previous offer to the school SENCO to be the school’s “face of autism”. This would suggest that, whilst readily accessible, social media may not provide a consistently supportive environment, despite the identified benefits of parent-to-parent support.

Subtheme: Understanding parents’ needs. Gaining a clear understanding of parents’ needs, alongside those of the child, was discussed as a prominent factor in providing effective support to families. Participants discussed the logistical impact of EBSNA, with parents’ ability to work being affected by CYP being absent from school or attending on a part-time basis. Parents additionally discussed having to collect their child during the school day, as well as receiving text messages or phone calls, creating further distress. The role of parents in promoting school attendance was also raised in relation to this theme, with participants discussing the difficulties experienced in getting their child out of the car, or past the school gates.

P3: “because it’s actually often, and I think this is fairly true for a lot of children, it’s the getting into school... its physically getting into that premises, getting into that classroom, that’s the battle for us to get in there”

P5: “I do feel that they’re the missing part of the puzzle, because you can have the best provision in the world in school, but you’ve still got to get them there and get them over that threshold”

These comments capture the difficulties faced by families in encouraging school attendance, which may promote feelings of guilt and blame as discussed above. One parent shared her experience of the school SENCO collecting her child from home in the morning in attempt to overcome this barrier, with mixed success, indicating the individualised support that schools may need to develop for parents in response to their circumstances. This is particularly important when considering the home-based factors that may contribute or perpetuate CYP's anxiety around attending school, such as parental illness. Two participants discussed their health difficulties as a barrier to independently supporting their child's needs, highlighting the practical assistance that some families may require.

P1: *"I was really struggling with my own health and trying to deal with this at the same time...and I said to them you know I I need I need supporting here...not no I shouldn't be dealing with all of this"*

P2: *"my social worker stepped in, and she arranged for me to have a carer come everyday...and they just come in for an hour and they help me with meal preparation, and things like cleaning the house...and that just means that I'm able to sit with X when she comes home from school and...just...be what she needs...its been an absolute Godsend"*

The practical support discussed by participants appeared to be offered as part of an individualised approach. Participants cited useful support received in the form of taxis, respite, technology access and advocacy. The latter especially was raised as key to ensuring parents feel supported and confident when accessing support services.

P3: *"I have a friend who just literally shuts down, she just can't cope with it, she can't do the meetings, and then she feels so awful and guilty because she feels like she's failing her daughter"*

Participants discussed feeling as though schools took knowledge of the system "for granted", and that accessing information around SEND was a difficulty for them. This indicates a need for parents to be supported when accessing meetings or communicating with professionals, to ensure that their views are clearly represented and that they have understood any actions or information shared. Being able to offer this, however, would be dependent upon schools routinely assessing and monitoring the needs of parents, and encouraging them to access support available. Reflections shared within participant interviews suggested that this is not an easy task for all, and that parents often need to know how and where to access this support, highlighting this as an important principle to consider when supporting EBSNA.

P2: *"without the Foundation we wouldn't have got social workers because I just kept saying no I didn't need them and...obviously I did I just didn't realise how much... I was just being stubborn and I wanted to try and get back to normal and do things myself, but I was just getting deeper and deeper into a mess"*

Theme 2: Promoting CYP's 'Sense of Belonging'.

Participants discussed the importance of CYP feeling valued within school when promoting successful reintegration. This theme captures the principles deemed by participants to have been crucial for their child's progress and developing a 'sense of belonging' (SoB) in school. Fostering a child's feeling of inclusion was repeatedly raised as an important consideration, with participants indicating that a low SoB acts as a contributing factor to EBSNA and maintaining these difficulties over time.

P5: "sense of belonging is really interesting because I think she never really had that sense of being part of the school community... I think she was going to this place where she thought this has got nothing to do with me and I'm just an outsider"

Subtheme: Relationship-based approach. The theme of 'relationships' was common across all interviews. CYP developing trusted relationships with adults in school was discussed as crucial, with participants reflecting on the quality and consistency of these being important for success. Participants discussed their child's relationship with one or two key adults within school, with one also discussing the relationship between her child and a 'shared carer', accessed weekly. This highlights the benefits of developing a trusted bond with supporting adults, and how this contributes to CYP's SoB within their environment.

P1: "they spent a lot of time building that trust up and being very very patient with him... ..they've also recognised that urm there are some adults that he gets on with or...urm or trusts more readily than other adults...so they've been really flexible in trying to make those adults he trusts available"

P3: "it doesn't have to be the most qualified highly paid professional, it just needs to be somebody who cares for the child and understands and wants to get to know the child"

P4: "X has just built this fantastic relationship with her... it's the only thing that she doesn't try and negotiate to get out of, she wants to go, urm when we get there she literally tells me to go away, it's like she's so secure and enjoys it she doesn't need me"

In many instances, participants shared that this 'key adult' was a member of support staff experienced in SEN, or a form tutor. In all cases, the consistency and trust formed were important factors. Participants reflected on the confidence and independence that having a 'secure base' within school provided their child. This included the role that key adults played in supporting co-regulation of CYP's anxieties, providing a source of emotional support within school.

P5: "but I think the fact that she was there for her, to co-regulate to support to talk her through, encourage her, that was absolutely key because she suddenly had someone who she could trust in school"

This indicates that adopting a nurturing and relationship-based approach is necessary for promoting successful reintegration, due to the developing independence, coping skills and belonging that it facilitates over time. In some interviews, participants reflected on how this relationship was either continued or established remotely, using alternative methods of communication.

P5: “she had her form tutor phoning her as I said regularly which was nice so she still maintained that connection, the lady in learning support emailed her and phoned her and said if there was anything else or any support she needed... when she went back in, urm having those links already established ... it was a lot better than we, than I anticipated, it went well, but I think it was mainly because they maintained those links”.

This comment highlights the possibility of developing relationships whilst the child is not currently attending, suggesting the potential of maintaining remote connections that can be transferred back into the school setting later in time. The importance of this is further understood when considering the isolating nature of EBSNA, and how both parents and CYP can feel disconnected to the school community. Peer relationships were discussed by participants to be particularly impacted, with CYP withdrawing from friendships and social gatherings, as well as experiencing shame in relation to their difficulties.

P3: “he’s very othered... the day that he was physically restrained into class, they’ve got like big glass sliding doors, they quickly grabbed him took him in and slid the door shut, he’s in there screaming banging on the door, meanwhile on the other side of the glass is the parents trying to drop of their children, he was like a zoo animal...those children have seen that happen.... those children are going to start treating him differently, so if these children are continuously made to appear to be different how can we possibly expect them to be accepted into the classroom?”

This extract highlights the concern expressed by participants in relation to their child’s social experience, with worries that EBSNA has prevented them from forming secure and positive friendships. One participant spoke of the embarrassment that her child experienced in relation to anxiety, and their desire to hide it to avoid social judgement. Forming positive relationships therefore seems important when developing a sense of belonging and value, to allow CYP to feel part of the school community and foster motivation and comfort to attend successfully.

P2: “because at a lot of schools you’re just a number...but with them, it’s almost like a big family, they know all the children, they care about the children...urm, they know a lot of the parents as well as the children...it really makes a difference”

Subtheme: A ‘person-centred’ approach. Participants discussed the importance of a ‘child-led’ approach, through promoting their interests and enjoyment following a period of non-attendance. This included moving at the CYP’s pace, to gradually build confidence and

comfort. Introducing a part-time timetable was discussed within all interviews as a way of achieving this, however with mixed success; it seems that this approach works best when the child and parent's views are included, and the increases are gradual. Involving CYP in action-planning therefore seems beneficial to ensure that their needs, views, and interests remain at the centre.

P5: "with the support of the school, we started to say and negotiate with her and say right let's look at the lessons, which ones can you go to"

P2: "She was advised in what was happening at all times, it wasn't just sprung on her...generally I would discuss it with the school and then I'd discuss it with her, and then sort of give the school the thumbs up"

This would suggest that adopting a person-centred approach is important when developing reintegration plans, considering the child's strengths and interests alongside their needs. However, some participants noted the challenges experienced by children in effectively sharing their views, with their needs acting as a barrier.

P3: "every single day X told them that he felt happy...urm...which is just a removal of a demand, he knows exactly what he, what they what they want him to say... he'll tell you that he's invisible if he thinks you'll go away and not keep asking him questions"

P5: "she was too anxious and also just lacked confidence even to say that she didn't understand something or could they say that again ... at that time she didn't even have the confidence to say oh I'm feeling, you know to communicate how she was feeling to anybody".

Participants discussed their role in advocating for their child and "being their voice", in supporting the school to identify trusted adults, sharing their child's interests, and communicating their fears and anxieties. The importance of this approach was highlighted when participants discussed the outcome of this not happening effectively.

P3: "he likes touching things, playing with things, adventuring, as I say Bear Grylls, he likes picking up bugs and worms all that stuff...so then for him to say I'm gonna give him a book... well that's not going to spark his interest at all... he just hated it, wasn't interested ... in the end it became pointless"

This highlights the need to work collaboratively with parents to identify the child's views, so that a person-centred approach can be effectively adopted with tailored intervention and support. Participants spoke of the need for flexibility and adaptations over time to achieve success, with the use of 'trial and error', rather than a 'one size fits all' approach. This seems crucial in developing CYP's confidence, as well as promoting feelings of value, comfort, and safety within school.

P4: "I think what's working at the moment is...erm, the SENCO at the school allowing us to go at X's pace... acknowledging that maybe she's not the same as other children they've had before and that she might need a different approach"

Subtheme: Psychological wellbeing within school. Finally, participants discussed the importance of CYP feeling safe and regulated within school. This subtheme captures the impact that anxiety has on CYP's feelings of comfort within their environment, and subsequently their ability to engage and interact. Participants reflected on the distinction between attendance and engagement, and the need for children to feel regulated and valued within school to promote a SoB.

P5: "I think she'd been so stressed at school that she hadn't taken on anything that the teachers were saying, because literally it was taking everything she had just to stay in the lesson... she was there in body but not in mind really".

This extract highlights the cognitive resources used by CYP when experiencing dysregulation, leaving limited resources to access learning and social situations. This follows the suggestion that CYP engage best when feeling safe and regulated, a concept reflected upon in relation to remote-learning during the Covid-19 school closures.

P1: "it took all the pressure off him...he could join in at his pace...what he felt comfortable with...he could sit there in his pants and it didn't matter [laughs] ...he was able to meet all his sensory needs without there being him feeling like anyone's looking at him...I think that then was less of a barrier for him to then participate"

P5: "and it did allow her to engage with learning and she was up, she was online she engaged with all of the lessons, she found it easier because she could sit with her camera off you know, and she could send the homework in on time as well, I think that was helpful for her"

All participants discussed their child's reduced levels of anxiety when engaging in a form of home learning that was tailored to their needs, ability, and interests, indicating that it may be beneficial for re-engagement in learning to precede physical attendance in some instances, in attempt to boost confidence and self-esteem. Participants reflected on the importance of CYP having positive experiences in school, which was prevented by high levels of dysregulation and low confidence in learning.

P3: "his self-confidence is very low, and you just think as a six-year-old you're meant to feel like you could be a flipping astronaut, not thinking that you're terrible or naughty all the time, but because he's been consistently told that and put in situations that make him feel like that, that's how he feels"

These feelings of low self-confidence may further contribute to a low 'sense of belonging', in turn perpetuating EBSNA, highlighting the importance of promoting self-esteem within school. One participant discussed her child's dysregulation in school as "traumatic", including the way in which staff members handled this, indicating the need for all staff to understand and prioritise the wellbeing of CYP as part of successful reintegration. This is particularly important when considering that unmet SEN was raised by participants as a considerable contributing factor to EBSNA. Comments indicated the need to build successful

relationships as discussed above, as well as creating a 'safe space' within school and teaching alternative coping strategies to promote self-regulation skills. One participant spoke of how this was aided by staff understanding and supporting her child's needs, and a joint effort to promote positive experiences within school.

P5: "when she started to get the positive comments from the staff and there was that acknowledgement that they needed to work on her self-esteem and confidence, urm and understand her a little bit more, that really helped...she really enjoyed English, and she still does, and I think that's because the teacher understood her".

However, participants indicated that this isn't consistently happening in practice, with parents and school staff having different priorities when supporting EBSNA. This is particularly highlighted in the comment below:

P3: "for him to engage and learn he needs all the foundations to be happy and feel stable and safe and regulated...but they wanna go straight to the top of that triangle of being like let's sort out the learning, but it's like, he's not there yet because you haven't done this groundwork"

Participants emphasised the importance of developing CYP's self-esteem, confidence, and positive experiences, allowing them to feel comfortable to engage in the school environment. Combined with the above sub-themes acknowledging the importance of relationships and a person-centred approach, this suggests a tailored package of support is often needed for CYP to simultaneously build relationships, promote their interests, and regulate their anxiety in order to be successful.

Theme 3: Including and Informing Parents.

This theme represents the need to work alongside parents when supporting EBSNA, and how no individual 'system' can be successful alone. Holding links with Theme One, the below subthemes consider the importance of parents feeling included within action plans, and the need for a collaborative partnership.

Subtheme: Maintaining trusted relationships. Varied experiences of school-based support were discussed, with some participants portraying their child's school as more supportive than others. All participants expressed that their child's difficulties were ongoing despite the progress made to date, with some believing that a change in provision may be the answer.

P3: "I'm just hoping and praying that, you know, in the EHCP I'm fighting for a, a specialist provision, and maybe then when we hopefully get to that school and it's, and he's settled there...he'll be better"

P4: "I think unfortunately where we are, she's in the wrong setting anyway so, it's useful that I'm building her up resilience to attend a school but it's not the right school, so it feels a bit futile"

These comments indicate a lack of confidence in their child's current setting, with parents attributing their child's difficulties to the provision. Participants suggested reasons for feeling this way, including poor home-school communication, inconsistent experiences of support and a lack of trust in staff knowledge, as demonstrated in the extracts below:

P5: *"you know you get emails back saying please direct your email to so-and-so ...you know it's really difficult these communication systems and it's not straightforward, and I think, I think this is why this friend of mine who's contacted me, she's desperate because she doesn't really where else to turn"*

P3: *"the people that are interacting with my child are not professionals, you know they're not trained in any of that area... he's just with people who maybe have all good intentions but are not delivering the education, the care and the help and the advice and the support that he requires, and are actually doing something negative"*

P1: *"we'd turn up expecting one thing and something else was happening...so trust broke down very very quickly from my son's point of view...he couldn't trust what was going on...or what they were saying"*

This low confidence seems to have fostered feelings of mistrust over time, with the lack of positive parent-school relationships being a barrier to accessing effective support. One participant additionally discussed the influence that parents' own experiences of education can have on this relationship, with negative experiences leading to lower confidence when engaging with school staff.

Furthermore, some participants reported feeling unsupported and dismissed by schools. In the absence of support, participants shared that they turned to social media for guidance. On this occasion, the data indicated that those parents who regularly accessed online support conveyed greater distrust in their child's school. Comments from one participant furthers the researcher's understanding of this.

P5: *"there's a lot of parent groups ... there was some positives in terms of helping but also everybody's in the same situation and its quite a desperate situation ...you need someone to sort of guide you through finding solutions ...like if you've got someone say to me well it's an awful school and to be honest they can't do this that or whatever, I'd be like right well she's not going do you know what I mean? it makes you anxious"*

Two participants did not access online sources of support, and spoke positively about their child's setting, suggesting a range of factors that contributed to a positive home-school relationship. This included clear communication, support from consistent staff members and feeling as though professionals were committed. As well as school-based staff, these qualities also appeared to improve the trust parents placed in external professionals, highlighting their importance in developing positive and trusted links. As within Theme One, a clear understanding of the home situation was discussed as necessary, with participants reflecting on their experiences of receiving warning letters from the LA's attendance team.

P4: *“despite all the urm issues we’d had and the history that I’d shared with them, in the first two weeks when she started she was struggling with attendance and they reported me to the attendance officer and they threatened me with fines... you just feel like you’re not being believed”*

Participants indicated that threats of prosecutions were ineffective, only contributing to their distrust in school staff. Furthermore, participants discussed their role in making schools aware of CYP’s needs and anxieties, with school staff being initially largely unaware. This further lowered parental confidence, adding to feelings of blame and responsibility.

P4: *“in Year 1 her attendance kept getting worse and I sort of kept expressing the fact that she was struggling she needed more help, I wanted to apply for an EHCP but the school just said she’s fine she doesn’t need it...urm, she just needs to attend”*

Overall, this subtheme highlights the lack of trust that parents may have in school settings, and how this acts as a barrier to effective EBSNA support.

Subtheme: Listening to parent views. All participants discussed the importance of having their views heard and incorporated into agreed action plans. This was raised as a key factor to parents feeling included and understood, as well as allowing them to effectively advocate for their child’s needs.

P3: *“it doesn’t need to be expensive huge things, you just need to stop and look at the child and ask the parent...because the parent is the professional, the know-it-all, the expert on the child, and so saying how do you think your child is gonna come in?”*

This comment indicates that gathering parent views is pivotal to providing effective EBSNA support. However, participant reflections suggested that these are not routinely gathered or listened to, with parents feeling dismissed and unimportant. Instead, participants felt that more weight was placed on the views of professionals, and that they needed evidence in “black and white” (P5) to feel heard.

P1: *“To be frank what was most useful was to have another professional put things in writing that validated what I was seeing and thinking...cos as a parent you’re...you’re not...your voice is not important enough...urm really when it comes down to it...you need to have a professional writing evidence um for anybody to listen to get the support that your child needs”*

This suggests the pressure felt by parents to involve external professionals, highlighting the potential power dynamic between parents and school. Given the importance of trust discussed above, and the emotional challenges posed by EBSNA (Theme One), it seems vital that parent views are acknowledged by schools without need for professional involvement.

P5: *“When it was really bad I was thinking I need to apply for an EHCP, and I was then like what are you talking about you know you don’t need an EHCP, but there*

was no other pathway... I started to think that I need some way to communicate to the school about what her needs are because I don't feel they're listening to me"

However, the data suggests that it is not always easy for parents to share their views, and that meetings with professionals can feel intimidating or overwhelming. Participants shared their own experiences of such meetings, highlighting the difficulties felt even by those with greater knowledge of the 'system'.

P5: *"its very different when its your own daughter, because obviously the emotions around that, I mean I'm a very confident professional in meetings when I'm talking about other children, but when its your own daughter its just so close to your heart"*

P3: *"we don't want to look like we're being no no that won't work, but genuinely we know him the best, so when they say we're going to do this and you, you think can you listen to me"*

Parents may therefore need supported opportunities to share their views effectively, with lack of knowledge, confidence and professional 'jargon' all discussed as barriers to parents feeling included. In some interviews, participants discussed accessing support from independent advocates (e.g. 'SENDIASS') to represent their views, highlighting the lack of consistent advocacy currently offered by schools.

P1: *"it seems that you have to hit massive crisis point before anybody will start listening"*

Subtheme: Signposting and navigation. Participants also discussed their "battle" accessing the system. The complicated referrals process and lack of clear pathways were raised as barriers to accessing effective support, with parents feeling unsure of where to go for help. Subsequently, participants discussed their experiences of needing to educate themselves on the system to understand and navigate it.

P4: *"just trying to navigate through all the SEN legal stuff is really hard so, you have to kind of speak to charities like IPSEA and SENDIASS to help you because, urm, it's so overwhelming and I mean, I'm sort of averagely educated, I went to university urm, and I struggle with it so I just hate to think of like other Mums who maybe have their own sort of learning issues trying to navigate the system"*

P3: *"when I say fight, fight is the word that I would use for every single thing that we've had to do with accessing help"*

Almost all participants shared that they had taken the lead in accessing support for their child, despite feeling unsure of professional roles and services, indicating that there is a need for schools to signpost and support parents with this process. One participant spoke positively of her child's school in adopting this role, sharing that they had taken the lead with submitting referrals and had signposted effective family support. However, additional barriers appeared to exist, including discrepancies between guidance and practice, with parents feeling frustrated and confused by both education and health services.

P1: “and I’ve heard other parents say with urm...referral forms oh its just got rejected or sent back because you didn’t fill that bit in properly or you know just little just the little bits in between oh we tried to phone CAMHS three times but no one’s answering the phone... ..it’s like you’ve gotta go through each little mini system ... you’re trying to jump through hoops but it’s not all joining up properly”

This suggests that parents would benefit from greater support with accessing the system, with a need for clear pathways. Although geographically the services available differ, participants universally raised the role of schools in providing support to access the system, with leading and signposting support raised as beneficial.

P5: “I think parents should be told... it says if your child has special educational needs you can contact the SENCO or whatever but actually in their local offer I would expect them to say if your child is expressing anxiety about attending school you can do this this and this, come and see us, you know be a bit more, be a bit more open about it, because at the moment its like special educational needs, and its like is anxiety a special educational need?”

Comments from participants indicated that, in the absence of clear advice, parents can turn to social media for support with navigating SEND services. Participants spoke positively of online support in this way, suggesting that it provided effective reassurance.

P1: “also [social media] helped... ..it gave me sort of like the pathway to think yes this is what we need...this is who I need to contact this is what I should be asking for you know so it gave you guidance of of...things you could do that might be helping”.

Theme 4: Raising awareness of EBSNA.

This theme depicts the frustration expressed by participants around the lack of knowledge and understanding of EBSNA that they perceived professionals and schools to hold. Across all interviews parents shared experiences indicating that this is a considerable barrier to accessing early intervention and was highlighted as an area for progress.

Subtheme: Professional knowledge and understanding. Although participants discussed uncertainty and confusion in accessing support themselves, parents also raised concerns about the lack of knowledge held by professionals. Parents reported a lack of clear support pathways currently in existence, with little consistent professional understanding of how to best support CYP experiencing this difficulty.

P4: “it just seemed to me at the time it was just something...that no one else had gone through, nobody at the school new the process or how to deal with it”

Participants discussed how their child’s difficulties were not initially recognised as ‘EBSNA’, instead being described as ‘school refusal’, with some claiming that this prevented a true understanding of their child’s needs. One participant discussed her school’s hesitancy of

categorising anxiety as SEN, indicating that mental health needs, including EBSNA, may not always be viewed as such.

P5: “and she actually said to me oh do you want her to be on the SEN register? And I was like yes! I need her to be, but there was a hesitance almost like it was urm, not frowned up but ...I was like yes she does have needs so she does need adjustments and staff do need to know about her”.

This may prevent CYP from accessing effective SEN support, and therefore perpetuate difficulties with attendance by schools not meeting their underlying needs. A lack of recognition was also discussed in relation to the statutory attendance team, with parents receiving warning letters and fixed penalty notices despite making attempts to explain their child's experiences with EBSNA.

P4: “I was also quite disappointed with the attendance officer, urm because of the dramatic fashion in which she came down on me...I felt like a criminal almost, the way she was very rude urm, condescending, and, I, I had meetings called with all these different professionals and...it was quite intimidating really”

P2: “they need to be listening to parents rather than just sending you a letter saying your child's missed x amount of school you could receive a fine...They need to contact the parents and get to the cause of why”

This highlights a potential lack of understanding amongst professionals, with participants reflecting on the need for more training within schools, attendance teams and educational psychology services to improve available support. Participants noted that available information is improving, with the Covid-19 pandemic appearing to have raised the profile of EBSNA as a need. However, they noted that much of this is due to the role of online groups/organisations, and that a marked shift in terminology is needed for universal recognition.

P4: “it all goes hand in hand with like mental health awareness, all this kind of stuff it's gradually improving ... but, mental illnesses are just not on par with physical illnesses in the way they're....in the way they're dealt with”

Participants instead reflected on how EBSNA remains a somewhat 'taboo' topic and is often dismissed by professionals in the initial stages.

P5: “it's not a conversation that's had at all, because we all go to school and it's the best years of your life and everybody just has to get on with it type of thing”

This is further understood by participants sharing their child's ongoing difficulties with anxiety, despite many now attending full-time, highlighting that EBSNA is a consequence of unmet need with a long-term impact. Participants subsequently reflected on the lack of inclusivity represented by the system at present, and the need for more professional acknowledgement and support for wider SEN if EBSNA is to be effectively understood and prevented.

P3: *“this is the round hole and I don’t care if your child is a square peg, we’re just going to really try and ram him into that round hole and it’s just, you know these schools at the moment they say they’re inclusive and they’ve got SEND children that are happily integrated into their school but...I’m just yet to see any of it”.*

Subtheme: Need for early intervention. All participants discussed the need for early identification when supporting EBSNA, with a lack of professional knowledge being a barrier to this. Parents shared reflections of how their child’s difficulties built over time, with non-attendance resulting after an extended period of anxiety that was not recognised or supported within school. In all cases, participants shared that support was not implemented until after their child had experienced multiple absences, highlighting the need for earlier intervention.

P3: *“if they could come in at the stage where something starts happening then you’re not trying to cure something you’re trying to prevent it, and prevention is way easier than cure”*

Participants who worked within the education system reported that having greater knowledge and awareness of EBSNA supported them, with one parent discussing her focus on maintaining her child’s attendance despite their anxieties, to avoid a “slippery slope”. However, without early intervention from school her child continued to experience absences, which only furthered her anxieties.

P5: *“I think that is the problem because it goes on, once it becomes entrenched it’s really really hard, and the child has then missed so much school, you know I saw it with X she was missing chunks and then going back and then panicking even more because she didn’t understand... she’d missed everything, so you know I think early intervention is absolutely key”*

A recurring theme discussed centres around schools’ ‘lack of preparedness’ for identifying and supporting EBSNA, with school staff having little training in the signs of anxiety or how to manage this, preventing early recognition. Parents reflected on their experiences of a ‘wait and see’ approach, with support not being implemented until non-attendance had become entrenched. This co-ordinates with above themes suggesting that schools were unaware of CYP’s difficulties, with parents feeling responsible to advocate and manage their needs. One participant shared her experience of being told that *“a lot of school refusal doesn’t start until secondary school...they can’t really do much until they’re older”* (P4). In contrast, another participant spoke positively of the school’s response, and how communication between school staff and the parent aided early identification.

P2: *“I think the teachers sort of picked up on the problems and then they speak to the SENCO team...and then they sort of have these regular meetings where they contact the parent and they say to the parent we think this is happening, what’s maybe going on at home? ...So you then tell them how she is at home and they put the pieces together”.*

This highlights instances where early intervention has successfully taken place, with the school and parent collaboratively unpicking the CYP's difficulties. Although all participants' children eventually made progress, experiences seemed to differ considerably, suggesting that more needs to be done to employ this effectively across both schools and geographical areas.

Participants reflected that CYP masking their difficulties complicates early identification, explaining why schools may be initially unaware of their anxieties. Participants therefore discussed the need for schools to collaborate with parents, as highlighted above, in identifying and monitoring CYP vulnerable to EBSNA

P4: "it's quite difficult with X because, up until school she didn't mask her behaviours but when she started at primary school she masked... she was very mute, and, just kind of kept herself to herself in the corner, so she's, she was easily overlooked and whenever I sort of raised concerns they just said nope she's fine"

P5: "actually it is about as soon as if your child is too anxious to attend a team coming together then and supporting very early, the parents, and maybe the professionals supporting the parent and the school ... you know the first sort of red flags, even transition you know, even identifying those ones that go from Year 6 to Year 7 that might be, um a question mark over, putting the provision in then is going to be better than you know, further down the line"

This includes the need for clear information sharing amongst school staff as well as with parents, ensuring that all staff are aware of the child's needs and how to support them. One participant emphasised this point, adding that many of her daughter's teachers had been unaware of her anxieties, and that only once this information was shared, did she experience a "turning point" in her progress. Participants discussed how regular monitoring within school was beneficial, suggesting that early intervention could include identifying those 'at risk' and monitoring these accordingly.

Theme 5: Accessing External Professionals.

This theme captures the importance of involving external and appropriate professionals to form a multi-agency team when supporting EBSNA.

Subtheme: Specialist knowledge in action planning. Participants shared that they found the specialist knowledge and advice from external professionals useful, discussing how this supported schools to develop action plans and problem-solve collaboratively. Many acknowledged the pressures, stretched resources, and limited training held by school staff, and therefore involving wider services was necessary to access specialist knowledge and support.

P4: "some things like an ed psych where they're more in tune and specialised um...I, I don't blame them but the SENCOs and teachers in schools just don't have

enough training in Autism and stuff like that so, they're not going to pick up on things that an ed psych would because they've not been trained"

P3: *"so I guess that multi-disciplinary team, it tends to be once every half term that we meet up... urm I find that really helpful because you, you know you, you follow you look at the actions from last time, you check if it's had any success, but it's also having all those different heads in one meeting coming up with ideas"*

Participants discussed the role external professionals played in promoting home-school communication, representing parent views through "evidencing" the child's needs. Parents reflected on how professional reports provided validation and acknowledgement, highlighting the impact that professionals can have on the parent's experience and relationship with their child's school.

P1: *"To be frank what was most useful was to have another professional put things in writing that validated what I was seeing and thinking ...you need to have a professional writing evidence um for anybody to listen to get the support that your child needs...so that's probably the most valuable thing"*

As a result, participants shared the high expectations that were placed on professional involvement, with EPs being viewed as 'gatekeepers' to accessing support. This relates to Theme Three, and the perception that professional views carry more weight than those of parents. However, some individuals shared their experience of EPs having 'gaps' in their knowledge and experience of EBSNA, as well as other professionals adopting a 'one size fits all' approach, indicating a lack of communication and understanding between parents, professionals, and schools.

P3: *"there's no real kind of explanation as to what an educational psychologist is really going to do...we were like wow, he's going to come in and fix everything amazingly, because he's going to be a psychologist and it's the for the education, he's going to fix it all"*

One participant was an EP by profession and described how she applied her own knowledge of EBSNA when supporting her child to promote a SoB (Theme Two). Consequently, she explained that she had not accessed external professionals, due to having the tools available to support and advocate for her child independently.

P5: *"I sat with her and we did an anxiety mapping type thing together, you know not in a formalised way but just asking her and looking at the areas where she was most stressed in terms of what lessons, corridors, and I did sort of try and say that to them, and I did try and give her a voice... I could draw on that in terms of getting her views, you know the ideal school and that mapping sort of thing and yeah, so I think that helped me"*

This highlights the benefit that EP knowledge can provide, in regard to gathering and representing CYP views, and promoting psychological wellbeing within school. However, this participant also described her experience of approaching colleagues informally for emotional

support and guidance, suggesting that professionals bring more than specialist knowledge alone, but also reassurance and support for the wider family.

Participants who accessed social care professionals also shared this experience, discussing the role that other services can play in representing parents' views, supporting parent needs, and facilitating home-school communication.

P1: *"but the support worker that I got was urm helpful from the point of view that urm I think he was able to give the school a bit of a kick up the arse a little bit [coughs] and at one point stepped in because he thought the school were bullying me and I think if that person hadn't been there...urm maybe I would have felt a bit less supported so whilst he said there's not much that I can do I think just the fact that he was there I think was helpful"*

This comment suggests that an external perspective was appreciated by parents for multiple reasons, including providing a mediating role between parent and school. Across all interviews, each participants' circumstances differed, with them accessing different professionals as a result, including: Early help, social workers, family charities, mental health services, GPs, a shared carer, autism services, independent advocates and EPs. It therefore seems necessary, as discussed within Theme One, to gain an understanding of parents' needs before determining which service may be most beneficial, to promote individualised and targeted support for each family.

Subtheme: Working alongside parents. A common reflection shared centred around the concept of professionals including and collaborating with parents, and how experiences of this were inconsistent. Some participants shared negative experiences of professional involvement, that did not appear to promote or acknowledge parent views and needs. Parents instead reported feeling belittled by professionals in some instances, including by EPs and the attendance team, which they found disempowering and ultimately a barrier to success.

P3: *"we formally complained about that because it was actually really quite offensive the language he used ...it was really really rude... I enquired as to whether or not there would be any chance of provision being added for X to have for example forest schooling once a week just to reduce his stress levels...and the educational psychologist, he's a senior educational psychologist he's been doing it for twenty five years laughed in my face and said I won't be prescribing urm what was it forest schooling or swimming with dolphins as there's just no evidence for it"*

Participants viewed professional input more positively when they perceived their views to have been heard as part of a thorough assessment. Most participants accessed EPs through the statutory assessment process, with this assessment seemingly contributing to parents feeling understood, and their child's needs represented, suggesting that even brief involvement can be beneficial.

P4: *“for us the EP assessment was really good...she came to our house, she stayed for over four hours, she was really thorough, the report that she gave was really clear and lengthy um, and it helped us to um get the EHCP I think...so yes a positive experience from the Ed Psych”*

P1: *“maybe even more useful because we were able to be at home...I remember him sitting there with the cat on his lap ... he was just playing something... ..but he was listening and answering questions but fiddling at the same time and I wonder...you wonder what quality answers you’d have had if he’d been sitting at school which is a place he wasn’t safe didn’t feel safe and wasn’t comfortable”*

In these instances, participants spoke positively of the EP assessment taking place remotely, or within the family home, suggesting that professionals working alongside the parents’ individual circumstances is beneficial. Conversely, participants discussed feeling unsupported when professional involvement did not incorporate their views or was perceived as brief and/or impersonal. This suggests that parents may be receiving inconsistent experiences of support from different professionals.

P3: *“he viewed him on one setting in the classroom for fifteen minutes and then interviewed him to ascertain his educational goals and that was it...he didn’t see him at drop off, he didn’t see him interacting in the playground, he didn’t see him at lunchtime, he didn’t see him in a group setting, he didn’t see him in a one to one setting...my anger towards the fact that he is trying to tell me what my child is like in an educational setting but has spent fifteen minutes...it’s poor”*

P4: *“we lucked out and got a good educational psychologist [laughs], but unfortunately its luck of the draw who you get...I know some parents who haven’t got good ones and they’re forced to pay privately to try and get a better one...um I’ve struggled with the other assessment and they’re still in negotiation with the OT and the SLT”*

The above comment discusses the perception of ‘luck’ that professional involvement had been positive, indicating that accessing a ‘good EP’ may be down to chance. This highlights parents’ lack of trust in LA services (discussed in Theme One), which may be perpetuated by varied experiences of support. It therefore seems important to consider how professional involvement can be utilised most effectively to promote parental trust, as well as positive outcomes for CYP. One participant’s view improves understanding of this, describing the benefits of professionals facilitating home-school communication, and prioritising parents’ needs and views when signposting and advising support.

P2: *“I think we’ve managed pretty well with the help, I mean it’s really changed our lives ...having their support and them sort of steering me in the right direction, really helped me to see the light at the end of the tunnel”*

This therefore indicates that professional involvement is most useful when it includes and informs the parent, as well as promotes positive home-school relationships.

Subtheme: Difficult to access. Despite professional support being viewed positively, participants shared that accessing support was a “fight”, and that complex pathways and referral processes act as considerable barriers, consuming parent time and energy.

P4: “to be honest it’s so hard having X at home all the time and her ASD but half the battle is the services, and they’re the things that really drag you down urm, and use all of your energy and your time”

Parents reported being frequently moved between services, ultimately delaying professional involvement, and preventing early intervention. This is a difficulty that participants reflected to be shared by schools, with school staff being unable to contact services and having limited support from professionals to dedicate to CYP.

P1: “in fairness to the school um...they’re having trouble accessing CAMHS and educational psychologists ... there’s been a lot of toing and froing and I’ve heard other parents say with urm...referral forms oh its just got rejected or sent back because you didn’t fill that bit in properly or you know just little just the little bits...or urm we can’t get hold of this person”

This suggests that attention must be paid to the accessibility of services, to ensure that parents and schools can refer to professionals when needed to prevent ‘crisis’ being reached. Participants suggested that this applies to both LA and health services, with long waiting lists preventing timely support.

P3: “spend hour upon hour reading, emailing, phoning to the point where people are like oh it’s her again...just to get a diagnosis, I don’t even get any support from the diagnosis I just need the diagnosis as the next piece of jigsaw”

P4: “We’ve never been able to access CAMHS urm , personally I feel like she should be on anti-anxiety medication... but basically with the waiting list and the demand on CAMHS at the moment the only way you can sort of get into the system is if your child self-harms or if you go private”

These comments represent a sense of hopelessness amongst parents, that ultimately lead to distrust in services. This may explain participants’ reflections that having a diagnosis and/or EHCP was necessary for their child to receive effective support within school, furthering rendering professionals such as EPs, and GPs as ‘gatekeepers’.

P5: “having something to help you communicate to the school the gravity of the situation ...or you can get the school to actually acknowledge it, because if they had a child with an EHCP they would put that provision in place”

However, despite being viewed as such, EPs were additionally reported as difficult to access, with participants sharing that schools were reluctant to commit allocated EP time or budget to families. An explanation for this may lie within the stretched service capacity as

discussed by participants, with an acknowledgement that staff turnover and reduced funding limits the availability of professionals.

P4: *“you’re only gonna get an ed psych if the SENCO at your school is really pushy [laughs] or you pay privately...they’re not just going to send one out because it’s time and money that they don’t have...they have to do an ed psych assessment as part of the EHCP assessment, so that’s why they can’t get away without doing it”*

P3: *“I do understand on the flip side that there’s a lot of pressure on the educational psychologists to fulfil so many caseloads...however what’s the point of doing lots of things poorly? Surely you should do a few things well...especially when it comes down to something with such great importance as a child’s education”*

However, along with acknowledgement of these difficulties, these comments highlight parents’ frustration. This aligns with ideas captured within Theme Three, and ultimately acts as a barrier to effective collaboration and accessibility of support.

Theme 6: Lessons learnt from Covid.

A final theme raised, and connected with all other themes discussed, includes the impact of the Covid-19 school closures, and the lessons that can be learned from this unique set of circumstances when supporting EBSNA in future. Phase One responses indicated the mixed experiences had by participants during this time, including some positive reflections, which were echoed within the interviews.

P3: *“when it was closed from the March to the September in 2020, I actually had to trim his fingernails, which I know sounds like madness and a small thing ... if ever I needed confirmation that it was school that was anxiety-inducing and not home, it was that”*

P1: *“it kinda gave him time to just be at home and reset urm himself...um so and we were then able to gradually work at things at our own pace...so in the first lockdown it actually really helped him out”*

Participants spoke of Covid-19 pressing their child’s “reset button”, in terms of reducing anxiety, alleviating physical symptoms and improving wellbeing by reducing the pressure and demand to attend school.

P5: *“it was a massive relief to her, she didn’t have to go to school and she could suddenly engage in learning online, and she didn’t have to be visible, and so she sort of re-engaged with learning ... I think she’d been so stressed at school that she hadn’t taken on anything that the teachers were saying, because literally it was taking everything she had just to stay in the lesson”*

As within Theme Two, this highlights the benefits of online learning during this period, with parents of older children especially noticing their child’s increased ability to engage with learning remotely. Participants with younger children highlighted how this approach was not suited to all, requiring increased effort and differentiation for younger, and neurodiverse children.

P4: *“when we first started doing online learning, she’s about two to three academic years behind, urm the learning hadn’t been differentiated for her so... she couldn’t access it so in the end we got sent sort of twinkl worksheets home like urm a pack a week for us to work through which really helped her”*

However, comments from all participants suggested the success of remote learning when this was tailored to their child’s level and needs, with reduced anxiety rendering their child more able to engage. This presents an avenue of support that schools/ LAs could consider for CYP experiencing periods of non-attendance, allowing an opportunity to maintain relationships, connectedness, and inclusion remotely.

Participants additionally discussed the disruption to transition created by Covid-19, with standard transition activities unable to take place. Whilst some participants expressed frustration at this, others praised the alternative support offered by schools, with one parent describing her son’s remote transition during Summer 2020, and how this format aided his feelings of safety and comfort in his new setting, facilitating positive reintegration.

P1: *“when he first started in Year 7 um without transition it actually was more helpful cos he was doing the remote learning...but I think it was really useful for him cos he was able to kind of get a feel of this is what the school will be like this is what my lessons will be like this is what my teachers will be like...without having to actually be there”*

This comment suggests that general transition practice may benefit from offers of remote support for some CYP, particularly those with SEN.

Arguably the most important lesson that participants indicated can be learnt from the pandemic, is that EBSNA provision will likely change over time, and require an individualised approach.

P5: *“I didn’t think that the provision was above and beyond, at times it would be because at times things would be bad and then not so bad, you know transition and going back after holidays all of that is difficult”*

As reflected within this comment, the provision implemented by schools following the Covid-19 pandemic indicates that EBSNA-related provision doesn’t necessarily have to be ‘above and beyond’ and can be supported through implementing reasonable adjustments (SEND Code of Practice, 2015). Theme Five highlights the belief held by parents that accessing support is only possible with a diagnosis or EHCP, which Covid-19 may have highlighted not to be the case, with schools able to make small adjustments and considerations to CYP displaying anxiety-related difficulties across the school day.

P2: *“Urm the support has carried on through the Covid, urm there’s been sort of online meetings and regular phone calls...so I got a phone call every week from the school SENCO officer...we didn’t have access to the internet or anything for X to do*

her school work, so the school lent us one of their laptops...and they talked to us over the phone how to set it up and...yeah got that running”

P4: *“it’s actually a good thing that Covid happened because lots of children obviously couldn’t go to school, and I think it’s raised quite a lot of important questions about attendance and learning...A lot of children were anxious to go back that were neurotypical, urm I just think there’s a lot of discussion that needs to be made in relation to what happened and how, perhaps we can use what happened to offer different options to children with Autism that struggle to attend”*

These comments highlight the impact that reasonable adjustments had on participants’ children when promoting reintegration, but also the importance of raising awareness (Theme Four) and professionals reflecting on their practice to aid improvement in EBSNA provision. This experience may therefore have highlighted ways of working to schools that benefit CYP with anxiety and can be incorporated into wider reintegration plans for CYP with EBSNA.

P2: *“I think because of Covid schools are more aware that it does affect a child’s mental, their view of things when there’s illness or...isolation...I think the schools are more aware now that children do suffer and they do struggle, whereas before I think it was just put on the parents to get them into school...I think a lot of schools have now realised that it’s not just down to the parents but the children also need support in school as well”*

Participants discussed the role of Covid-19 in shifting perspectives on EBSNA and improving understanding across both schools and the community. Although participants reflected that their child continued to experience anxiety upon their return to school, many shared that the positive relationships, communications, and inclusion that had been promoted remotely provided a set of protective factors when reinstating attendance, highlighting principles for practice that have been discussed across all themes.

Discussion

This study aimed to address four solution-oriented research questions centred around parents’ retrospective experiences of EBSNA. This included exploring what support parents currently access in relation to their child’s EBSNA (RQ1), what they found useful (RQ2), what professionals involved in supporting EBSNA could do more of (RQ3), and how this support was impacted by the Covid-19 school closures (RQ4). Building upon previous findings, this solution-oriented research intended to provide insight into instances of successful reintegration, as well as areas for development, to inform future support for CYP and families experiencing this difficulty. This was achieved across two sequential phases, with both addressing all research questions in a symbiotic manner (Table 8). Data was analysed using a combination of descriptive statistics, content analysis and ‘Reflexive Thematic Analysis’ (Braun & Clarke, 2021), with regard to maiming transferability and scientific rigour throughout the process. This discussion aims to interpret the findings presented across both phases with respect to the research questions, as well as previous

Table 8

Mapping the Phase One Questionnaire Sections, and the Phase Two Themes onto the four research questions

	RQ1	RQ2	RQ3	RQ4
Phase One: Questionnaire				
Experiences of EBSNA (<i>inclusion criteria/ demographic information</i>)	✓	✓	✓	✓
Support Accessed by Parents	✓	✓	✓	
The Impact of Covid-19		✓		✓
Phase Two Themes (SPIRAL)				
Supporting Parents	✓	✓	✓	
Promoting CYP's Sense of Belonging		✓	✓	
Including and Informing Parents	✓	✓	✓	
Raising Awareness of EBSNA		✓	✓	✓
Accessing external professionals	✓	✓	✓	
Lessons Learnt from Covid		✓	✓	✓

literature, including 'Ecological Systems Theory' (EST; Bronfenbrenner, 1992). Given the complex nature of EBSNA, a broad and integrated consideration of findings is presented, which recognises the interrelated nature of the research questions and need for contextualisation. This discussion will subsequently highlight important implications for practice across multiple systems related to the SPIRAL framework identified within the present findings, and suggestions for future research within this field. Limitations will also be considered and further expanded upon within the Reflective Account (Chapter 3).

Supporting CYP: An Individualised Approach

The present study confirmed previous findings suggesting that EBSNA is a heterogenous and multi-faceted difficulty (Thambirajah et al., 2008; Maynard et al., 2015), requiring an individualised approach to support (Lauchlan, 2003). Participants reported a range of contributing factors and varied circumstances, ultimately impacting upon the nature of support accessed, as explored by Research Question One (RQ1).

On this occasion, mental health difficulties perpetuated by a lack of school-based support emerged as a prominent factor driving EBSNA. In relation to RQ2, the present findings highlighted the importance of supporting CYP's underlying needs as well as the attendance difficulties themselves, with participants emphasising that their child's difficulties were often ongoing beyond their return to full-time education. This outlines the long-term and complex

nature of EBSNA, and the need for ongoing support and review of CYP following successful reintegration. Additionally, Phase One indicated a relationship between SEN, notably ASD, and EBSNA, possibly mediated by mental health needs, concurring with conclusions from Ochi et al. (2020) and Nelson and Harwood (2011), that this population may be vulnerable to experiencing this difficulty. This emphasises the need for professionals involved in supporting EBSNA to understand the factors that initiate and maintain it, including a knowledge of SEN. Findings from Phase One support this, with SENCOs being rated as more useful and supportive than Head, Deputy, or Class teachers, indicating that having a professional awareness of SEN is key to providing effective and individualised EBSNA support. This includes recognising and acknowledging anxiety as SEN in line with the SEND Code of Practice (2015), which was highlighted to be currently inconsistent. These findings therefore relate to RQ2 and RQ3, both identifying 'what works' as well as how support from professionals can be improved.

Findings within Phase Two furthered this, notably Theme Two (*'Promoting CYP's Sense of Belonging'*), echoing previous findings that called for an increasingly person-centred and nurturing approach. Nuttall and Woods (2013) discussed the importance of providing psychological support to CYP experiencing EBSNA, including facilitating positive experiences, aspirations and developing feelings of safety within school. The subtheme *'Promoting Psychological Wellbeing'* mirrors this, with parents discussing the importance of CYP feeling regulated before being able to engage. This incorporates ideas from the 'Hierarchy of Needs' (Maslow, 1943), and the concept of individuals requiring physiological and psychological safety before engaging in higher-order tasks, suggesting that targets related to academic progress should be secondary to promoting social, emotional, and mental health. This therefore aligns with Nuttall and Woods' suggestion that considering factors that promote psychological safety, confidence, and relationships, as represented within Theme Two, are key when planning effective reintegration, relating to RQ2 and the exploration of 'what works'. However, parents reported feeling as though schools' priorities were misaligned with their own, and that promoting psychological wellbeing was not always the primary aim. This is also raised within Theme Two, with the need for a *'person-centred'* approach, which can be defined as placing choice and control with CYP and families, aligning with their views, strengths, and interests (Newton et al., 2016). With consideration of RQ2 and RQ3, achieving this requires effective gathering and acknowledgement of CYP and parent views, as well as clear channels of communication and collaborative action planning, all raised within this research as essential to effective and early intervention. Corcoran et al. (2022) co-ordinate with this, suggesting that gathering pupil views is central to providing individualised support. It therefore appears that these findings can be neatly situated

alongside previous literature in contributing to an evidence-based narrative, as well as conforming to the trend of 'solution-oriented' research that has recently emerged in this field.

Theme Two (*Promoting CYP's Sense of Belonging*) additionally adds weight to claims from Fillipello et al., (2019), that anxiety-related school absence can be understood in relation to 'Self Determination Theory' (Ryan & Deci, 2000). This theory posits that 'intrinsic motivation' is dependent upon the presence of three factors (autonomy, competence, and relatedness), which are represented by the three subthemes captured within Theme Two. The authors highlighted that student's perception of these can impact levels of anxiety and school attendance, emphasising the role that school staff can play in promoting perceptions of autonomy and competence. This concept is understood in relation to RQ2, highlighting the importance of establishing a 'sense of belonging' (Baumeister & Leary, 1996) within school, through promoting positive relationships, offering choice, and facilitating engagement. An avenue for further research and intervention is therefore suggested that aligns with the framework of 'Self-Determination Theory' and facilitating intrinsic motivation to attend. Future investigation of CYP views may subsequently aid development of effective support pathways built upon this theoretical basis.

Simultaneously, Theme Five '*Accessing External Professionals*', also highlighted the role external professionals play in developing effective action plans, through providing specialist knowledge that inform individualised approaches. This furthered Phase One findings related to RQ1, that parents accessed a range of different professionals depending upon their varying needs and circumstances. The concept of a multi-agency approach aligns with previous literature (e.g. Brand & O'Connor, 2004; Corcoran et al., 2022), with this study confirming the importance of professional flexibility and availability, as well as empowering and supporting CYP and their families. Key findings from Phase Two, notably Theme Five and Theme One (*Supporting Parents*; discussed further below), subsequently highlighted the need for families to receive holistic and appropriate support from professionals, which would represent an effective multi-agency response. With consideration of RQ1 and RQ2, the data therefore suggests that accessing a range of professionals and support systems is both important and beneficial for parents of children experiencing EBSNA. This supports the use of EST in planning EBSNA intervention, with the present findings and research questions relating to a range of systems influencing CYP, including parents, schools, and local authorities (LAs). Each of these systems will be considered in line with the research questions below, with the present findings and subsequent implications for each system being discussed.

Supporting Parents

The present research questions sought to explore and accentuate parent views, with a dearth of representation within existing literature. Considering the role of the family environment as a key 'microsystem' within EST, a fundamental research aim was to address this apparent gap. The following section will therefore consider the findings and implications related to RQs 1-3, exploring the support parents accessed in relation to EBSNA, and its perceived effectiveness.

Overall, this research appears to align with conclusions from Epstein and Sheldon (2002) that parental engagement, promoted by positive parent-school partnerships, is hugely beneficial, with Phase Two participants reflecting on the active role that they played in facilitating their child's progress. In relation to RQ1, Phase One findings indicated that parents accessed a range of support systems, with school and online-based support being most prevalent. However, the data additionally revealed that these were not perceived as the most useful, suggesting that the support currently available to parents may not be effective. This was further understood within Phase Two, with Themes One and Three highlighting the need to effectively support and include parents, providing insight into RQ3 and how professionals can improve the support offered to families. It appears that, at present, a consistent pathway for parents to access support, advice and information is yet to be developed, leading to increased reliance on social media and online guidance, potentially explaining this as a commonly accessed form of support cited within Phase One. Theme One, '*Supporting Parents*' provided a clear understanding, however, of the challenges faced by parents when supporting EBSNA, both on an emotional and practical level, highlighting the need for this population to be better supported in practice.

With respect to RQ2, Phase Two highlighted the importance of trust between parents, schools, and professionals, with this improving collaboration. Theme Three ('*Informing and Including Parents*') considered the role of schools in promoting parent confidence through maintaining trusted relationships, including through acknowledging their views and signposting effective support. Within the present study, all participants' children had previously experienced a period of non-attendance, which differs from the experiences studied by Corcoran et al. (2022). However, across both pieces of research, the parental role in promoting early identification of difficulties remains evident, with the subtheme '*Early Identification*' within Theme Four highlighting this. Parents described themselves as the 'expert' on their child, reaffirming comments from previous literature that their involvement in planning and monitoring intervention is crucial for success (INSA, 2020). However, as captured within Theme Three, numerous factors appeared to impact the development of parental trust, including inconsistency, lack of staff training, and access to online support.

Perceptions of blame additionally appeared to contribute, with threats of prosecution reported as particularly unhelpful, highlighting the need for professionals to work in closer collaboration with parents. This aligns with findings from Nuttall and Woods (2013) and NFIS (2020) that input from statutory attendance teams was ineffective, only contributing to mistrust rather than promoting progress. Data relating to RQ2 and RQ3 therefore present considerable overlap, with parents' suggestions of 'what works' also highlighting areas for development and improvement.

Subsequently, the current findings appear to build upon those presented by Browne (2019), which documented the emotional challenges felt by parents experiencing EBSNA. This research furthered this by promoting discussion of how parents can be better supported by professionals (RQ3), through considering the following areas highlighted within Themes One and Three:

- *Emotional support.* The subtheme '*Emotional Support and Reassurance*' indicated that parents require clear and consistent forms of support, on community, local and national levels. This should include access to information and reassurance, from both school-based and external professionals as well as structured parent-to-parent support, reported to be particularly effective within Theme One.
- *Understanding parents' needs.* Theme One also highlighted that families should receive timely and holistic assessment of need upon the onset of EBSNA, to explore which professionals and/or services may be best placed to provide practical assistance, including support to attend meetings, complete referrals and manage demands at home.
- *Listening to parent views.* The findings relating to both Themes Two and Three suggest that parent views are pivotal to developing 'person-centred' action plans. Care should therefore be taken by schools and professionals to gather and utilise these effectively, through the maintenance of clear communication, both prior to and beyond the return to full-time education.

Based upon the parent views and experiences explored throughout both phases of this research, and with respect to RQs1-3, the below sections will subsequently discuss the role of schools and LAs in implementing these findings in practice.

Implications for Schools

In relation to RQ1, Phase One indicated that school-based professionals were the most cited form of support accessed, highlighting their position to facilitate collaboration with parents. The home-school partnership, as discussed above in relation to Theme Three, appears crucial in providing effective EBSNA intervention, and highlights the impact of the 'Meso-

system' within EST, with school representing a second 'Micro-system' directly influencing CYP. This would suggest increased accountability from schools in identifying and supporting EBSNA as highlighted by Theme Four (*'Raising Awareness of EBSNA'*), acknowledging the role of school-based factors in contributing to this difficulty, and aligning with previous literature (e.g. Epstein & Sheldon, 2002; Place et al., 2000; Pellegrini, 2007). However, the findings on this occasion indicate that accountability and support is currently inconsistent, especially as participants represented a range of geographical areas, indicating an area for improvement in line with RQ3. Despite being frequently accessed, school-based professionals received the lowest ratings of effectiveness, suggesting that support provided by schools, particularly Head, Deputy, and Class teachers, is not consistently productive. Within Phase Two, participants discussed possible reasons for this, including feeling blamed by school staff, and a lack of faith in their understanding and ability to support EBSNA, captured within the subtheme *'Professional Knowledge and Understanding'*. This perceived lack of understanding and sympathy may therefore be contributing to mistrust as highlighted above. Given the need for increased parent collaboration and support indicated by these findings, it appears necessary to consider how schools can improve their capacity to provide this.

With consideration of RQ2 and identifying 'what works', however, the current study indicates the need for increased home-school communication, with Theme Three emphasising the need for schools to signpost families towards effective support within their locality. Still, this is dependent on early identification (Theme Four), and consistent gathering of parent views (Theme Three) to inform action-planning, which was highlighted by RQ3 to be an area of development at present. This may be, in part, due to the developing evidence-base around EBSNA, as well as differing conceptualisations across literature and practice (e.g. Heyne, 2019), with terms such as 'school refusal' reducing school accountability and redirecting focus to the family (Pellegrini, 2007). Subsequently, it appears that increased information and training available for school-based professionals would be beneficial, to increase understanding of EBSNA in line with Theme Four, through improving recognition of anxiety and implementing reasonable adjustments within the classroom. The themes raised within Phase Two (SPIRAL) may support schools to address this, drawing upon findings related to all RQs to provide a set of theoretically based principles for practice. These 'SPIRAL' principles may therefore be employed as a framework from which schools, and external professionals can draw when developing their EBSNA-related knowledge and practice, with the present findings clearly mapping onto recommendations for future practice (Table 9).

Ingul et al., (2019) raised the suggestion of schools establishing a dedicated attendance team, with responsibility to monitor and identify attendance difficulties, and liaise closely with

Table 9

Themes presented within the present research findings (SPIRAL) and potential actions that may result from these as part of a framework for successful EBSNA intervention.

Theme	Possible Action	By Who?
Supporting Parents (S)	Access to professional-led support groups/ information	Schools/ EPs
	Establishing parent support groups	Schools/ LAs
	Holistic assessment and monitoring of parents' needs	Schools/ LAs
Promoting CYP's Sense of Belonging (P)	Identifying and building trusted relationships in school	School
	Gathering CYP views to develop individualised action plans	School/ EPs
	Prioritising CYPs comfort before learning	School/ EPs
Including and Informing Parents (I)	Ensuring clear channels of communication between home and school	School
	Gathering parent views to develop individual action plans	School/ EPs
	Signposting to effective support pathways	School/ LAs
Raising Awareness of EBSNA (R)	EBSNA Training for school staff and LA professionals	School/ LAs/ EPs
	Monitoring of CYP 'at risk' and promoting early identification	Schools
Accessing External Professionals (A)	Referring to appropriate professionals at the earliest opportunity	Schools
	Ensuring that parents are supported by professional involvement	Schools/ LAs/ EPs
	Improving accessibility of services and professionals	LAs
Lessons Learnt from Covid (L)	Considering how the child responded to the Covid lockdown, and the possibility of remote support	Schools/ EPs

families of those CYP 'at risk'; a suggestion supported by the present findings in relation to RQ2 and RQ3. However, in relation to RQ3, Theme Four also highlights the need for all staff to have an awareness of EBSNA, so that consistent and effective support can be provided by all adults working with CYP. This will aid early recognition and intervention, which is a key

principle of Ingul et al.'s '*School-based Framework*'. It therefore follows that a further recommendation of this research is for schools to develop a policy to refer to when supporting EBSNA, as part of their graduated SEND approach (SEND Code of Practice, 2015). This may address current misconceptions around anxiety and SEN, as well as the adjustments and monitoring required to effectively support CYP in school, subsequently improving schools' capacity to provide early intervention (Theme Four) and maintain parental trust (Theme Three). At this time, aside from Ingul et al.'s proposed framework, little guidance exists on the creation of such a policy on a school-level, with further exploration needed into how individual schools can develop policy that incorporates the needs of CYP, parents, staff, and the wider community. Action research may therefore be beneficial to further explore the development of policy, gathering of parent views, and support needed from external professionals to inform a successful whole-school approach.

Implications for Local Authorities (LAs)

The present findings additionally indicate the need for a multi-agency response, highlighting the role of external professionals, notably LAs, in supporting EBSNA, representing the 'Exo-system' within EST (1992). As noted above, the role of external professionals was highlighted by findings related to RQ1, with parents accessing a range of support services. With respect to RQ2, Phase One indicated that, when accessed, EPs were rated as the most useful form of support, followed by LA services, suggesting that this is an important and effective resource for families. Corcoran et al. (2022) share this view, and highlight the potential EP role in supporting EBSNA, emphasising the need for LAs to improve accessibility to these professionals. Findings from Phase Two concur with this, with Theme Five ('*Accessing External Professionals*') presenting the EP role as beneficial beyond completing individual assessment and consultation, but also in facilitating action plans, gathering parent views and mediating home-school relationships. The present findings also indicated that, depending on the needs of the family, a range of professionals could adopt these roles, in advocating for parent and child views, further suggesting that 'what works' will likely differ between individual families and circumstances (Theme One). However, the current study aligns with previous findings that EPs are well-placed to provide support on an individual, family, and whole-school level in promoting awareness, intervention, and ongoing support for EBSNA (Nuttall & Woods, 2013). LAs therefore appear to have a responsibility to ensure that these services are available to schools and families and shift the focus onto promoting early intervention and support.

Despite these findings, however, Phase One indicated that parents accessed support from LA services, including EPs, at a relatively low rate in comparison to alternative forms of support, including health services. This was further explored with consideration to RQ3

within Phase Two, with participants highlighting the long waiting lists and complex referral procedures associated with both health and LA professionals, indicating that parents experience difficulties accessing appropriate support in relation to EBSNA. The subtheme '*Difficult to Access*' in particular, highlights parents' frustration towards the accessibility of LA teams, especially EPs. It appears that, at present, parents typically access EPs through the statutory assessment process, and experience barriers in the form of understaffing, long waiting lists and cost, preventing external professionals from providing the early intervention highlighted to be necessary within Theme Four. Given the current political and financial climate, this is understood as a universal issue, rather than disproportionately impacting one LA, subsequently increasing the pressure upon schools to provide support to CYP and families independently. This therefore highlights the need for LAs to increase their attention towards improving the accessibility and knowledge of education support services on an organisational level, to improve schools' capacity to effectively signpost and refer to professionals when needed.

Additionally, Theme Five and the subtheme '*Working alongside Parents*', highlighted the need for LA attendance teams to work more closely with education services in providing effective and sensitive support to families. As discussed in relation to RQ3 above, the present findings support previous literature in highlighting that the current system of 'warning letters' and prosecuting parents seems ineffective in cases of EBSNA, and alternative pathways should therefore be considered. Participants discussed feeling belittled by services, including attendance teams, with a lack of understanding cited as a key barrier. Although LAs are understandably bound by legislation, namely the Education Act (1996), this research has highlighted the importance of engaging with parents to identify underlying concerns and promote a multi-agency and supportive approach (Themes Three and Five). Consideration of RQ2 and RQ3 suggests that this can only be achieved with effective recognition and understanding of EBSNA within LA services, highlighting a further opportunity for increased staff training, and potential collaboration with EP services and schools.

Finally, a further recommendation highlighted by the present findings relates to Theme One, and the support identified above to be required by parents, with consideration of the support currently accessed (RQ1). Understanding of parents' needs, and gathering of views, are both areas that can be addressed and lead by school-based professionals, which RQ1 highlights are easily accessible, however LAs will likely need to provide school staff with training and tools to complete this effectively. Many LAs have produced EBSNA-related guidance with this aim, representing a shift in recent years (e.g. West Sussex County Council, 2010; Manchester County Council, 2021). However, this guidance should include

information to support school-based professionals with signposting referral pathways and appropriate parent organisations highlighted by RQ2 (Themes One, Three and Five) to be crucial for family wellbeing. Furthermore, it would also be appropriate for LAs to establish and facilitate parent support groups within their own localities, providing parents with a safe space to access 'parent-to-parent' support, and reduce reliance on social media. The present findings relating to RQ2 indicated that such support has previously been viewed as successful by parents and can provide both emotional reassurance as well as practical advice, with direct input from external professionals. This therefore appears a beneficial model for LAs to adopt when considering collaboration and support for parents in future.

Lessons Learnt from Covid

A fourth research question sought to understand the relationship between EBSNA and the Covid-19 school closures, through exploring parent views of how this impacted upon their child's difficulties. This inevitably overlaps with findings related to RQs1-3, whilst maintaining its own unique contribution to the present study. Within Phase One, participants reported both positive and negative experiences of the pandemic, highlighting that the child's needs and individual family situations will have undoubtedly influenced the impact had by the 'stay at home' measures. The negative experiences, including disruption to routine, increased anxiety, and isolation, appear to align with initial research suggesting that Covid-19 had a detrimental impact on CYP's mental health (e.g. Hawes et al., 2020). However, positive experiences were also raised, leading to further investigation during Phase Two. Participants shared that the reduced pressure to attend school lowered children's levels of anxiety, alleviating physical symptoms and reducing family distress, aligning with predictions from Morrisette (2021). This suggests that the pandemic may have positively impacted the wellbeing of CYP experiencing EBSNA, and the support available, if only temporarily.

This subsequently highlights opportunities to learn from experiences of the pandemic and suggests that EBSNA provision could be developed using the principles and adjustments observed during the school closure period. Discussed within Theme Six (*'Lessons learnt from Covid'*), the findings on this occasion highlight the potential of remote learning practices, and the improved comfort and engagement this provided some children. This overlaps with the ideas captured within Theme Two discussed above, and the need to prioritise CYP's mental health and regulation over learning and engagement. Although this may present logistical challenges to school staff, the present study highlights the impact that promoting engagement remotely, prior to encouraging physical attendance, may have on a child's 'sense of belonging' or levels of anxiety. In line with previous comments around promoting psychological safety in school, this suggests an opportunity to consider the use of

remote engagement in EBSNA assessment and intervention, as well as standard transition activities.

Covid-19 additionally highlighted the importance of an increasingly individualised approach as discussed above, with parents believing that the school closures have raised awareness of EBSNA both within schools and across the general population. Following the re-opening of schools in June 2020, and March 2021, many schools adopted adjustments to their curriculum, parent communication and pastoral provision that aimed to promote CYP's wellbeing, reduce anxiety and promote re-engagement with learning. With consideration of Theme Two, it seems apparent that similar principles should be considered when supporting EBSNA, particularly after a period of non-attendance. Given the capability demonstrated by schools to implement such provision, often on an individualised level, these adjustments would be considered 'reasonable' by the SEND Code of Practice (2015) and could be delivered within a tiered whole-school approach (e.g. Kearney & Gracyzk, 2014). The 'Lessons learnt from Covid' therefore relates to all themes discussed within the present study, highlighting actions that could be taken by school staff and external professionals when supporting EBSNA that align closely within those employed during the lockdown periods. The inquiry related to RQ4 has therefore improved understanding into the impact and opportunities presented by Covid-19 in directing EBSNA intervention, highlighting the influence of the 'Chrono-system' ('EST'; Bronfenbrenner, 1992), and the wider socio-political climate on CYP's development, behaviour, and wellbeing.

Limitations and Future Research

This section identifies several limitations of the present study, as well as research directions proposed by the findings. Firstly, the small number of participants are noted, with 28 and five participants included respectively within each phase. This reduces the transferability of the findings to the wider population of those experiencing EBSNA and suggests that the views of many within this group are not represented by the present study. Furthermore, CYP's views were not gathered on this occasion. Although the rationale for focusing primarily on parental experiences is discussed, this represents an area that should be addressed within future research, particularly when developing and evaluating evidence-based EBSNA intervention. Given the importance of adopting a 'person-centred' approach as suggested within the present findings, continued monitoring of both the parent and CYP's voice seems essential to promoting clear representation and collaboration within the literature.

It is additionally acknowledged that the decision to focus on parent experiences alone excluded the views of alternative systems discussed as important in supporting EBSNA, including school-based professionals, health services and LA teams. Arguably, these have

been disproportionately represented in previous research to date, however the implementation of the present findings will require strategic support and collaboration across services and is necessary for an effective multi-agency response. The researcher therefore proposes the need for further research into the views of professionals to consider how principles presented within the present findings can be transferred into practice. This should include school-based professionals, EPs, and health services, as well as LA attendance teams, to explore their current knowledge, capability, and skills to support families as suggested, and highlight areas for development, training, and support. Furthermore, the support offered to families by these services should seek to be carefully monitored and reviewed to understand its effectiveness and add to the 'practice-based evidence' ever-growing within this field.

Given that 'Reflexive TA' was employed to analyse data within Phase Two, it is also important to note the role of subjectivity on this occasion, and how the researcher's individual interpretation of findings may reduce their external validity. Braun and Clarke (2021) do not view this as a limitation, however other authors have commented that achieving 'rigour' within qualitative research is challenging, given the active role that the researcher plays in coding, organising, and interpreting data (Nastasi & Schensul, 2005). Reflexive TA is no exception, however, emphasises the role of critical reflection throughout the analysis process, with Braun and Clarke (2021) describing the phases of analysis as non-linear, instead encouraging prolonged engagement within the data to promote credibility. Use of a mixed methods approach on this occasion, however, adds strength to the present findings, given that findings can be triangulated across phases, and with the context provided by the questionnaire ahead of the collection, analysis, and interpretation of interview data.

The present findings additionally highlighted areas that would benefit from further exploration, not represented by the research questions on this occasion. This includes the relationship between EBSNA and SEN, as discussed above. Previous literature has suggested that those with recognised SEN (e.g. ASD) are more likely to experience EBSNA (e.g. Ochi et al., 2020), with anxiety arguably driven by SEN-related experiences (Nelson & Harwood, 2011). Although EBSNA should be understood as SEN within its own right, falling under the 'Social, Emotional and Mental Health' area of need as dictated by the SEND Code of Practice (2015), the present findings highlight a relationship between diagnosable learning difficulties and EBSNA, adding weight to previous literature. Within both phases of this study, high numbers of participants' children had a diagnosis of ASD, suggesting that this population may be particularly vulnerable to experiencing school-related anxiety. Additionally, Phase Two participants discussed feeling as though accessing a diagnosis was

necessary for support (Theme Five) which may explain findings presented within Phase One, whereby 80% of those with recognised SEN had their difficulties identified after the onset of attendance difficulties. It is beyond the scope of the present research questions to further discuss this relationship, or the perceived impact of diagnosis, however this should be a focus for future research. Key questions include how CYP with SEN can be appropriately monitored and supported within school to prevent development of EBSNA, as well as how parents, professionals and CYP perceive diagnoses as useful.

Finally, this study has shed light onto the currently under-researched role of social media in providing parent support, and the impact that this may have in promoting parent trust and confidence in schools and LAs. Phase One indicated the mixed experiences that parents have with social media and online guidance/ information, suggesting that it has a range of purposes for each individual. Phase Two furthered this, with Theme One highlighting that parents turned to social media for emotional support, guidance and to learn from other parents, uncovering its potential as a supportive tool for those experiencing EBSNA. However, the negativity that can exist in online environments was also raised, with those parents who accessed online support and advice indicating greater levels of distrust and low confidence in their child's school (Theme Three). Whilst this was not quantitatively measured on this occasion, this indicates that a relationship may indeed exist between access to social media and parental trust. This highlights an area that would benefit from further exploration, not only in relation to EBSNA, but wider SEN, impacting individuals from a range of geographical areas. Understanding the impact of social media, as well as how it can be utilised in a positive way, is crucial for schools and LAs to maintain trust, improve parent communication and provide effective support to parents and CYP experiencing difficulties in line with the present findings.

Conclusion

This research aimed to further understanding into EBSNA, including how CYP and families can be better supported by professionals, and the lessons that can be learnt from Covid-19. Through focusing on the parent voice, the current study has improved understanding into the parent experience of EBSNA, including the support currently available (RQ1) and provided representation of their views, which will inform developments in professional practice, theoretical understanding, and future research directions. The present findings additionally align with a solution-oriented framework to suggest positive facilitators to successful school reintegration, driven by RQ2, RQ3 and RQ4, indicating the need for an individualised approach to supporting CYP, as well as increased support and understanding for parents and families. From consideration of the findings across both phases, this research subsequently presents a set of principles (SPIRAL) to follow and consider when

implementing EBSNA support in practice. Therefore, this study appears to have addressed its research questions, and contributed to the evolving narrative of EBSNA, highlighting avenues of support, change and intervention that may positively impact CYP and families who experience this difficulty in future.

Reflective Account

The importance of evidence-based practice within educational psychology is ever increasing, emphasising the importance of research within the role of Educational Psychologists (EPs) (Sedgwick & Stothard, 2021). Boyle and Kelly (2017) argue that EPs are not only well-placed to carry out research, but also to evaluate and promote it in practice, highlighted by its inclusion within accredited EP training programmes within the UK (BPS, 2019). Willig (2013) describes research as an ‘adventure’, which feels apt given my relative inexperience within research contexts prior to training. I therefore viewed my thesis journey as a learning opportunity, featuring mixed emotions of apprehension, excitement, and achievement. This led me to pay particular attention to the principles of human research ethics (BPS Code of Human Research Ethics, 2021), to ensure that my study aligned with and promoted these effectively. Maintaining ‘Scientific Integrity’ (2.2) and ‘Social Responsibility’ (2.3) therefore became a goal of my thesis, as well as remaining a reflexive practitioner (Willig, 2013) and considering the utility of my research within the EP role (Beaver, 2011). This section will provide a reflective account of my research experience, including the development, design, and execution of my thesis project. As well as documenting the challenges and reflections faced, this chapter will outline my hopes and next steps for my research, including a plan for dissemination, highlighting my evolution as a researcher and my plans to continue this role within my future EP practice.

Choosing a Research Topic and Refining Research Questions

Refining my topic of ‘Emotionally-based School Non-Attendance’ (EBSNA) was a product of reflections and experiences both prior to and during my EP training. In my role as an Assistant EP, I had become interested in the topic of anxiety and ‘resiliency’ (e.g. Rutter, 1999), including the impact this had on CYP wellbeing, achievement, and school attendance. I additionally learned about approaches such as ‘The Overcoming Programme’ (Cresswell & Willetts, 2007) and ‘Emotion Coaching’ (Gottman, 1997), highlighting the impact that CYP’s families and school staff can have on managing and supporting anxiety. This interest was furthered during my Year One Trainee Educational Psychologist (TEP) placement, in supporting a child experiencing EBSNA, which proved a valuable learning experience. His parent described feeling blamed and judged despite her best efforts, which motivated me to read around the parent experience of EBSNA and available support (e.g. Thambirajah et al., 2008; Browne, 2019), as well as discuss with my Fieldwork Supervisor at the time. This led to my realisation around the range of factors that contribute to EBSNA, and its apparent lack of acknowledgement within the legislation, which both shocked and concerned me. Boyle and Kelly (2017) discuss the importance of including stakeholder voices within research, and while CYP voices showed some, albeit developing, representation within the literature (e.g.

Shivlock, 2010; Baker & Bishop, 2015), parent voices appeared under-researched, and under-represented. This became more apparent during my initial literature review, and quickly became the focus of my research, aligning with my professional values of inclusion and person-centred practice.

When completing my literature search, I initially felt overwhelmed by the volume of research available. This revealed a clearly shifting narrative of EBSNA across previous decades, with a plethora of terminology, suggested contributing factors and proposals for 'treatment', many with a psychiatric focus. To support the refining of my research questions, I referred to comments from Beaver (2011), around the EP role in looking for the 'potential to change'. This led me to consider research from Nuttall and Woods (2013), including their 'solution-focused' stance of researching 'what works'. Within my professional practice, I typically adopt a 'solution-oriented' approach, considering the principles of uncovering a 'preferred future' and the resources of the individual and/or system involved (Harker, et al., 2017). This subsequently felt an appropriate lens to apply to my research, given that the topic attracted many differing perceptions and definitions. Acknowledging the previous literature, I felt that adopting a 'solution-oriented' rather than 'solution-focused' approach would be beneficial (O'Hanlon & Weiner-David, 2003), giving participants the opportunity to tell their story and share their views honestly, as well as considering 'what works' and 'what could be better'. This, I hoped, would allow participants to feel acknowledged and validated in sharing both positive and negative experiences, so that both can be heard and learned from within the present study. This subsequently led to the development of four interrelated research questions:

- What forms of support did parents access in relation to their child's EBSNA?
- What did parents find useful from the support received in relation to their child's EBSNA?
- What could professionals supporting parents and CYP experiencing EBSNA do more of to promote positive progress?
- How has the COVID-19 school closures impacted EBSNA and the support accessed by parents?

It therefore seemed appropriate to consider both quantitative and qualitative elements to my research, given that I hoped to understand the forms of support accessed, as well as participants' experiences of these. I reflected that use of a questionnaire to first understand participants' access and the perceived effectiveness of support would help me to develop and refine an interview schedule to explore these experiences in more depth. Ultimately, I hoped that researching parent experiences of EBSNA in this way could inform EP practice through representing stakeholder views, as well as considering practical implications for

supporting CYP and families. In my view, developing my research questions from a combination of professional interest, reflections from the literature and considerations for EP practice seemed to align closely with the ‘scientist-practitioner’ role advocated for within the HCPC Standards of Proficiency (HCPC, 2015).

Epistemological Stance

This research followed a Critical Realist approach (Bhaksar, 1978), adopting the concept of a ‘shared truth’, only revealed through the perceptions, views, and experiences of others (Kelly, 2017). I felt that this aided my research question development (discussed above), with an aim being to understand participants’ views, experiences, and the impact of Covid-19 through a solution-oriented lens. Therefore, my epistemological stance on this occasion acknowledged that many parents have undergone a shared experience in the form of school non-attendance, and may have accessed similar services or pathways, but that their unique circumstances have likely impacted their experiences and views, and subsequently their ‘truth’. Although ‘solution-oriented’ approaches typically align with a ‘social constructionist’ perspective (Harker, et al., 2017; Burr, 2015), I also hoped to gain understanding of what services had been accessed, providing information around the current landscape of EBSNA support. This aligns more closely with ‘realist’ perspectives (Willig, 2013), leading me to adopt ‘Critical Realism’ as an approach situated between the two. This additionally complements the pragmatic focus that I hoped my research to have, with an emphasis on promoting positive outcomes through uncovering practical implications (e.g. Fishman, 1999; Teddlie & Tashakkori, 2003).

When designing my study, I hoped to employ methodologies that complemented this approach, gathering both quantitative and qualitative data. Subsequently, I chose a mixed methods approach, with Phase One (questionnaire) having a focus on the services accessed by parents and the effectiveness of these, and Phase Two (semi-structured interviews) exploring participant experiences in depth. The questionnaire was designed over time with support and guidance from my research supervisor. As described within my empirical chapter, it was hoped that use of a questionnaire within Phase One would ‘set the scene’ ahead of the semi-structured interviews within Phase Two. I was aware that I had the potential to be naïve as a researcher who was not part of the population being researched, and therefore wanted to ensure that my interview schedule was in line with the current context. Use of quantitative data (gathered through use of Likert scales) therefore appeared a pragmatic and effective way for me to develop an understanding of participants’ experiences before finalising my interview questions. This would allow for an understanding of ‘what works’ as well as what is currently being accessed, what needs to improve, and hopefully, how to improve it, aligning with a pragmatic approach. Please see the Appendix

for copies of both my questionnaire and interview schedule. Niaz (2008) concurs with the use of mixed methods research within social science, arguing that quantitative and qualitative methods can complement one another, and inform 'guiding assumptions' when designing research. In line with this argument, using these methods sequentially allowed for refinement of my interview schedule (discussed above) following analysis of my Phase One data. This may be why Niaz (2008) discusses the rise in popularity of mixed methods studies among 'practicing researchers', given its pragmatic framework. Holding my epistemological position in mind therefore aided development and design of my study.

An additional purpose of my questionnaire was to identify participants eligible for Phase Two. To maintain a 'solution-oriented' and ethical approach, as discussed above, I hoped to only explore experiences of participants whose children had made progress with attendance, through a retrospective lens. Through reflection and discussion with my supervisor and peers, I concluded that this would be the most effective way to gather 'solution-oriented' experiences and viewpoints, as parents who were still experiencing their child's ongoing difficulties may have lent towards 'problem-focused' or negative talk, rather than having the capacity to consider positive experiences at this time. When designing my participant criteria, I referred to previous research, noting that many had adopted the definition of EBSNA outlined by Berg et al. (1969; later revised, Berg, 2002). Shivlock (2010), for example, presented schools with these criteria, and relied upon teacher judgement to identify pupils who had previously experienced EBSNA, and whose attendance was now improving. Nuttall and Woods (2013) adopted a similar approach, relying on subjective reports of reduced anxiety and increased attendance. Whilst I noted that 'progress' is subjective, and this may therefore reduce the validity of my findings, I reflected that this additionally captured the heterogeneity of EBSNA and may represent a range of individual situations, particularly given the current lack of official measures (Thambirajah, et al., 2008). Phase One therefore aided the screening of participants, to ensure that all had made positive progress with attendance at some stage, furthering the 'solution-oriented' aims of the present study.

As described within my empirical chapter, Phase One additionally refined the focus of my research through supporting the development of the interview schedule used within Phase Two. After gathering data on the types of support accessed, and how useful these were perceived to be, I found myself curious about different support services and hoping to explore parent experiences in more depth to learn more. In particular, parents shared that EPs were one of the most helpful forms of support, yet less than 50% of parents had accessed these, suggesting that EPs may be difficult for families to access. Furthermore, parents indicated mixed experiences with online support, suggesting that this tool has both

merits and disadvantages. Considering the accessibility of such platforms, I considered that it would be valuable to learn how this support could be improved to produce greater positive experiences. I therefore added interview questions around these topics after analysis of Phase One data when finalising my interview schedule, highlighting the usefulness of the questionnaire on this occasion.

Given the interrelated nature of my research questions, and the way in which they were addressed within both sequential phases (see Empirical Chapter; Table 8), I chose to write an integrated discussion. This allowed me to consider my findings across both Phases in line with Ecological Systems Theory (Bronfenbrenner, 1992), and their subsequent implications, rather than by discussing each research question in turn. I found this a useful exercise, however, in terms of considering the practical utility of my research, as well as its alignment with theory, leading me to have a better understanding and grasp of both my findings and their implications.

With retrospect, I have considered how my research, particularly my Phase One questionnaire, could have been better utilised to provide a wider range and depth of information. For example, although I included questions around EPs and online support following analysis of questionnaire, I reflected that gathering further insight into the role of health professionals would have been equally beneficial. Given parents' negative experiences, yet high contact with these services, I wonder whether further data and understanding of how education and health could work together may have been useful at this time. Additionally, it would have been beneficial to further consider how parents are currently accessing services (e.g. via schools, self-referrals) to explore the current pathways in place when supporting EBSNA. In retrospect, there are tweaks and additions that could have improved the detail of information gathered, however I was also aware of my desire for the research to remain focused on the current questions, practical and actionable, which I risked compromising should I have widened my focus on this occasion.

Professional and Ethical Issues: Recruitment and Bias

Phase One Pilot

When originally seeking ethical approval, I proposed recruiting participants with the support of professionals and schools, aligning with methods used in previous research (e.g. Nuttall & Woods, 2013; Corcoran, et al., 2022; Shivlock, 2010). However, I also hoped to share my questionnaire with parents through using closed social media groups. This was proposed to reduce the impact of bias within my data, and increase representation, through approaching participants directly. I therefore sought permission of groups such as 'Not Fine in School' (aimed at supporting parents experiencing EBSNA) to share my research using their online channels.

Following ethical approval, I chose to pilot my questionnaire within this online group, a stage described by Marshall (2005) as essential to improving validity and reliability. During the pilot I received 11 mixed responses, highlighting some concerns with the wording and content of the questionnaire. This included ambiguity, limited response options and the need to alter some questions from 'closed' to 'open' to allow for a wider range of responses. Furthermore, it became clear that many parents who responded were experiencing ongoing difficulties with EBSNA and had not yet experienced any positive progress, which created difficulty in understanding 'retrospective' experiences. This presented two issues, including the need to include a measure of 'progress' within the questionnaire to ensure that participants met the research criteria. Secondly, I questioned whether the use of social media groups in this way was appropriate; many participants who remained part of this group may be experiencing ongoing difficulties, and may misinterpret the purpose of the questionnaire, leading to a potential lack of solution-oriented data. Rattray and Jones (2005) comment on the challenges of survey research, including the different underlying assumptions held by researcher and participant. I therefore reflected whether this has occurred in this instance, with participants from this group not being able to discuss 'positive progress' at this point in their journey.

As a result, I made the decision to focus my recruitment on professionals, schools, and EP services, to ensure that my questionnaire was reaching my target audience. I found the process of completing the pilot stage both challenging and rewarding, with this stage ultimately supporting the refinement of my study despite causing discomfort and frustration. Willig (2013) argues that piloting research in this way can inform modifications to the research plan, including qualitative elements, which I felt to be the case in this instance. As a result of the pilot phase, the following changes were made:

- Including 'ratings' of attendance over time within the questionnaire to refine inclusion and exclusion criteria.
- Refining the wording of open-questions to align more closely with a solution-oriented approach.
- Presenting the recruitment information as a visual poster rather than paragraph, to be more appealing and easier to digest.

This would consequently ensure that participants who accessed the questionnaire met the research criteria, through relying on the judgement of professionals and school staff. Although I recognise the bias this may have brought to the data, through use of purposive sampling, I also acknowledged that this approach is commonly used in qualitative research (e.g. Ames et al., 2019) and is not necessarily ineffective. Relying on the judgement and action of others did not come without its challenges however, bringing a level of discomfort

and feeling 'out of control' that I personally found difficult to manage. This was emphasised by my reliance on Phase One participants to leave details to be eligible for Phase Two. Subsequently, I felt that this provided one of the greatest learning opportunities for me throughout the process and emphasised the difficulties associated with conducting research ethically and robustly. Learning to trust my research and those around me was therefore one of the greatest challenges and reflections of the thesis process, in my view.

Excluding Participants

Despite accessing participants through professionals and schools, however, many responses (17 in total) were excluded prior to analysis due to not meeting the inclusion criteria. This was understood through their ratings of attendance over time, indicating that their child had made no progress with attendance; criteria that I felt important to uphold, despite my disappointment and frustration in excluding such a high number of responses. These individuals may have accessed the questionnaire for numerous reasons:

- Professionals and/or schools aiding with recruitment may have misunderstood the participant criteria.
- Parents may have passed the link onto friends/ family members without consideration or awareness of the participant criteria.
- Professionals and parents may have differing perceptions of 'progress', with parents feeling as though their child's difficulties have not improved, despite professional perceptions.

This subsequently highlighted the need for further investigation into the definition of 'progress' and is therefore a potential limitation to my study and its transferability. For example, perceptions of 'progress' may not only differ between cases of EBSNA, but also between perceptions of stakeholders, such as parents, professionals, and young people. Additionally, the individual's definition of progress may differ over time, as priorities and needs change. However, due to the lack of current measures and statistics in this area, understanding 'progress' continues to be a subjective and individual activity, and therefore my reliance on individual judgements was necessary at this time. Although frustrating that not all responses could be included, I also reflected that this demonstrated the importance of the piloting stage as described above. This led me to include the rating element to the questionnaire, ensuring that my data was valid in representing positive and retrospective experiences, as well as providing a level of objectivity and 'rigour' to an arguably subjective concept.

However, the high exclusion rate demonstrates the number of parents not represented by the current study, with many experiencing ongoing difficulties. This suggests that many

parents experiencing EBSNA have not observed positive progress, and that this research gathers the views of only a sub-section of this population. Upon reflection, by choosing to hold a 'solution-oriented' lens, this was always a risk, due to focusing only on those with positive experiences to share. However, I chose to adopt an approach that aligned not only with previous research, but also my own professional practice, with the hope of producing actionable findings as well as highlighting important parent experiences. On this occasion, analysis of excluded data was not completed, however it seems necessary for this to be the focus of future research. Ethically this holds many challenges, including the potential for distress (BPS, 2021). Nonetheless, both the pilot phase and exclusion rate within this study emphasises the number of parents willing to share their views and experiences despite their ongoing difficulties.

Furthermore, upon reflection on my data and discussion within research supervision, it leads to the question of whether progress can be 'quantified'. Within my Phase Two findings, parents discussed feeling as though their priorities were misaligned with those of schools and professionals, with families placing wellbeing at the forefront. I wondered if this seeming lack of progress with attendance excluded participants who may have observed progress in other forms, such as reduced anxiety. Further research to complement and add context to the present findings would therefore be beneficial to ensure that professionals, schools, and parents achieve a shared understanding.

Bias

The presence of bias is something I reflected on throughout the data collection process. As discussed above, the role of purposive sampling may have increased bias within my data and reduced the equal representation of individuals within this population. This could be due to professionals influencing the nature of participants involved by only sending the questionnaire onto those with positive and favourable experiences, or those with whom they have a positive relationship (known as 'selection bias'; Pannucci & Wilkins, 2010). However, all participants discussed both positive and negative experiences with professionals, reducing the likelihood of this being the case.

Participants may have additionally presented with social desirability or acquiescence bias, agreeing with information presented to seem socially acceptable. This may have been the case across both Phases of research, with participants being fully aware of the study's 'solution-oriented' aims, and possibly omitting negative experiences or views to be perceived as complying with these. This is particularly relevant to one participant, who shared her occupation as an EP. Although she assured me that she aimed to answer questions from her position as a parent rather than a professional, her level of training and understanding would have undoubtedly influenced her perspective and responses throughout the interview,

including her knowledge of 'solution-focused' practice. It is therefore possible that the language used by this participant during Phase Two would have aligned with the knowledge and understanding of the researcher, and may have indirectly influenced the analysis phase, by contributing to the codes and themes produced. To account for 'interviewer bias', I kept a research diary to record my thoughts and reflections during the collection and analysis phase, and discussed these in research supervision, to ensure that I was not favouring one participants' contribution over another's. This allowed me to remain focused on the data and research questions, rather than my interests and role as a TEP. However, the blurred line between EP and researcher is a characteristic shared by most other prominent studies in this field, including Nuttall and Woods (2013), and Corcoran et al. (2022), both including participants and researchers from the EP profession. Addressing bias within qualitative research, and specifically educational psychology, may therefore be a wider systemic issue that goes beyond the context of the current study. I therefore acknowledge the likely presence of bias within my research, across recruitment, collection, and analysis (Pannucci & Wilkins, 2010), but hope that my awareness and reflexivity as a researcher has counter-acted and addressed this appropriately to produce valuable and valid findings on this occasion.

Analysing the Data

As a novel researcher, the process of data analysis initially appeared daunting. Across both research phases, I hoped to select data analysis methods that aligned with my epistemological position, as well as produce clear and actionable findings. A combination of descriptive statistics and content analysis was therefore selected to analyse my questionnaire results, as described within my Empirical Chapter. On this occasion, the quantitative data gathered aimed to provide an understanding of the current landscape of support, as well as demographic information, and therefore there was no need to employ tools of statistical comparison (e.g. t-tests and/or regression), as no groups were being 'compared'. On reflection, it may have been of interest to compare participant responses with that of excluded participants, to investigate whether any significant differences appeared between these two groups. However, given the solution-oriented focus, this was beyond the scope of the present research questions, although may be an interesting avenue for future research.

When approaching content analysis, I relied upon teaching from my undergraduate studies, as well as guidance from Gillham (2008), with the steps of this process outlined within my empirical chapter. This provided a clear and practical guide from which to conduct my analysis, to ensure that I remained focused on the data. After analysis of Phase One data, my interview schedule was adapted to include questions on the participants' access and

views of online support (including social media), access to EP services and the effectiveness of these, and the impact of Covid-19, as described above. I believe that this created a depth of understanding on these topics that was not achieved by the questionnaire on this occasion, adding context evidenced within Phase Two findings. This additionally supported my confidence as a researcher, being able to enter interviews with a degree of understanding and being prepared to explore participant experiences in more depth. Phase One was therefore instrumental in designing an effective interview schedule that was sensitive to the current context of EBSNA support.

Reflexive Thematic Analysis was selected to inductively analyse interview transcripts. This approach was chosen due to its suitability to new and inexperienced researchers, as well as its potential to produce actionable findings (Braun & Clarke, 2021). The Six Stages of Thematic Analysis (TA) were followed (Braun & Clarke, 2012), with a 'reflexive' focus, employing Braun and Clarke's 'practical guide' to support and focus my analysis throughout. This provided me with greater understanding around the method of 'TA', including the identification of themes and ensuring rigour throughout my analysis. It is acknowledged that a variety of TA methods co-exist, such as 'coding reliability' (e.g. Guest et al., 2012) and 'template analysis' (e.g. Brooks et al., 2015), with no 'right or wrong' method. However, 'Reflexive TA' was employed on this occasion for various reasons. Firstly, I hoped to analyse meaning on both semantic and latent levels, requiring an element of interpretation, as well as understanding of context and/or theory. Although subjective, Braun and Clarke (2021) argue that this promotes engagement with your data, and allows for in-depth rather than superficial analysis, which can occasionally result from including multiple raters. When approaching the issue of subjectivity, I was aware that I also wanted to promote scientific rigour, and ultimately transferability. As outlined within my empirical chapter, I therefore referred to Braun and Clarke's checklist for 'good TA' (2021) when conducting my analysis. I additionally took breaks and completed my analysis over time to ensure that my approach was both rigorous and credible. This included exploring different ways of organising the data, spending time reducing and relabelling codes and themes where necessary to ensure 'best fit' and taking ideas to supervision to ensure that meaning wasn't lost throughout the process. This, I hope, has improved the credibility and, ultimately, the transferability of my findings. In future, I hope to further consider the credibility of my analysis through use of focus groups and/or gathering further parent voice. Given my recognition of potential bias described above, I hope to share the outcome of my analysis with a wider range of parents experiencing EBSNA to ensure that my approach to Reflexive TA held rigour and represented the parent perspective as I have hoped.

A second reason for electing Reflexive TA, was that I hoped to identify patterns across the dataset, emphasising the pragmatic focus of the research whilst remaining close to my critical realist stance. Interpretative Phenomenological Analysis (IPA) is an approach I initially considered that may achieve this, however its utility as a methodology rather than 'stand-alone' method meant that it was not entirely suitable to the present mixed-methods study, and that TA appeared more flexible and appropriate.

To align with the phenomenological approach I had hoped for within my research, I chose to code my data inductively, capturing all views and experiences shared by participants, whether positive or negative. Although I held a 'solution-oriented' focus, and therefore primarily hoped to explore positive experiences, my research supervisor and I discussed the importance of remaining inductive during the coding phase to promote familiarity with my data. Resulting themes were then organised in a 'solution-oriented' way, to produce findings that aligned with this approach, but also accurately represented participant views. This aligned with comments from Stainton Rogers (2009) around critical psychology, and the aim of 'explicating' rather than explaining; gaining insight and understanding through acknowledging complexity, rather than seeking to 'unfold' and ignore meaning. I later reflected that this may be a pitfall of 'solution-oriented' research, with participants often feeling empowered and validated by sharing negative experiences and viewpoints, with many additionally not having the capacity to reflect positively at the time of data collection. Given my alignment with solution-oriented and solution-focused principles within my professional practice, I reflected that this is important to consider when liaising with all parents and promoting positive change.

The data analysis process provided further opportunities for learning, improving my understanding of research methods and approaches, as well as experience in analysing and engaging with data on both a semantic and interpretative level to promote scientific rigour. For example, during the coding phase, codes were refined across three rounds. During initial coding, over 700 codes were produced across the five transcripts, creating a high volume of data based on narrow units of meaning. Over time, codes were re-defined, merged, and collapsed to create the final set, which was a time-consuming, intensive, and often uncomfortable process. Throughout, I referred to Braun and Clarke's comment about 'letting it go' and re-evaluating my attachment to some codes. Discussing this within research supervision and with my peers aided my thinking around the coding process, promoting reflexive analysis. Subsequently, I hope that my resulting themes reflect this, through capturing participant views and experiences inductively, whilst also being organised in a way that promotes useful and productive outcomes.

Contributions to the Field of Educational Psychology

According to Elliott and Place (2019), little advances have been made into the understanding and support of 'school refusal', with a lack of findings to guide professional practice, including that of Educational Psychologists (EPs). They commented that professionals' roles in supporting EBSNA required greater clarity for effective collaboration and claimed that future research needed to focus on 'treatment' rather than contributing factors alone. To some extent, I believe that the present study addresses these concerns, providing insight into how to collaborate with parents, the role that professionals can play, and guidance for multi-agency and multi-systemic practice. Therefore, the current findings arguably meet Nuttall and Woods' call for increased 'practice-based evidence' (2013), following a similar 'solution-oriented' format to their own research, and furthering the findings they presented nearly ten years ago.

Recently, the topic of EBSNA has grown in popularity within research contexts, with cases reported (anecdotally) to be rising in practice. The parent and child voice therefore appears crucial at this time to provide support attuned to the current political and social climate. Research from Corcoran et al. (2022) was published whilst I was completing my analysis phase, seemingly holding similar aims and methods to my own study, emphasising the need for research such as ours within this field. Although there are notable key differences between our studies, including participant numbers, the 'severity' of attendance difficulties and the differing focus of parent/ multi-agency views, the goals of the research remain aligned; to provide solution-focused guidance to practitioners involved in supporting this difficulty, through uncovering 'what works'. Furthermore, Corcoran's research highlights the role of EPs in implementing EBSNA support, aligning with comments from Lauchlan (2003) that these professionals are 'well placed' to do so. It is unsurprising that research attention within this field has grown, given the recent reports suggesting that cases of EBSNA are increasing (e.g. Childrens' Commissioner, March 2022), and this attracting media attention as a result. Furthermore, the recent SEND Review (HM Government, March 2022) highlights the government's focus on improving attendance, which can only be achieved with increased understanding and intervention for EBSNA. Currently, government reviews and legislation continue to overlook this need, which only increases the importance of practitioners seeking their own guidance and support when addressing this difficulty 'on the ground'.

SPIRAL Principles

Cherry (2009) argues that social psychology is primarily concerned with the psychology of 'social change', with action and research holding an important partnership. Alongside the calls from previous literature as discussed above, this ideology contributed to my rationale on this occasion, with an aim for actionable findings in line with 'solution-oriented' principles

and seeking a 'preferred future' (Harker et al., 2017). As described above, I hoped to capture this within my data, with my resulting themes being organised in line with this approach, creating principles for practice (Empirical Chapter: Table 9).

Informally, the themes from the present findings have been named the '*SPIRAL Principles*', as they demonstrate areas for professional consideration when providing EBSNA support. The findings from Phase Two build upon and extend those within Phase One, meaning that these themes capture and represent ideas from both phases of the research. The concept of 'SPIRAL' arose naturally when discussing my themes within research supervision, and during the 'labelling and defining' stage of my thematic analysis (Appendix 4). Given my hope for clear and actionable findings as discussed above, an acronym appeared a useful tool in achieving this, aiding dissemination amongst professional and research contexts. Additionally, my supervisor and I reflected on the image that is evoked by the word 'spiral', aligning with the non-linear, progressive, and upward nature of EBSNA intervention.

The 'SPIRAL' principles as identified by the present study highlight the roles that schools and external professionals have in providing effective, appropriate, and timely EBSNA intervention whilst including and incorporating parents' views and needs. It is acknowledged that the present findings align with previous literature (see Empirical Chapter), however, the present study provides a set of succinct principles and recommendations for practice in a way that previous literature has not, holding a clear pragmatic focus. Ultimately, these remain underpinned by the need for collaboration, individualised support, and early intervention, building upon previous research to improve school and professional accountability, as well as providing guidance for practitioners, deemed necessary by Elliott and Place (2019). Despite the acknowledged limitations of the present study, and the subsequent areas of further research and investigation (see below), the SPIRAL Principles may form a foundation of 'practice-based evidence' from which future research, professional training, and EP service development can evolve.

Covid-19

Additionally, the present study provides further understanding of the impact of Covid-19 on EBSNA support. When initially developing my research proposal (January 2021), the decision was taken to include a research question around the impact of the pandemic, being impossible to ignore given the circumstances at the time. Since the re-opening of schools in March 2021, little research has been conducted into the impact of the school closures, in part due to its recency and a lack of pre-pandemic data in some cases. Although, as documented within my literature review, initial evidence existed that suggested the negative impact that the lockdowns may have had on children and young people's mental health (Loades, et al. 2020). Given that my research hoped to focus on those who had successfully

returned to school following a period of absence, investigating the impact that Covid-19 had on this progress seemed appropriate. Consequently, the findings highlighted the importance of including a research question on this topic, identifying the range of benefits that CYP experienced during the Covid-19 lockdown period, and the overlap between this and successful EBSNA intervention. The present study, to the best of my knowledge, is subsequently unique to other research in this field as a result. Corcoran et al. (2022) acknowledged the impact of Covid-19 and explored the successful return of children experiencing school-based anxiety following the national re-opening, however the current study aimed to explicitly explore parents' perceptions of the relationship between Covid-19 and EBSNA and uncover any learning opportunities that may exist.

I found myself both surprised and interested by participants' experiences of Covid-19, with most reporting benefits of the 'stay at home' measures. This included the removal of pressure to attend school, and the reduced anxiety as a result, aligning with participants' comments around prioritising CYP's mental health. The present study therefore displayed opportunities to learn from practices during the Covid-19 school closures, such as remote learning and relationship-building, that may be beneficial in promoting reintegration of those experiencing EBSNA.

It must be acknowledged that Covid-19 was not the sole focus of this study, and that the small number of participants limit the transferability of such findings. This refers to the extent to which findings can be transferred to other contexts or settings. For example, participants resided in different geographical areas, attended different educational settings, and likely held different socio-economic circumstances. Therefore, their experiences of Covid-19 likely differed also. However, within the present findings, Covid-19 appeared to suggest positive opportunities for practice that may be applied to instances of EBSNA, leading to its inclusion as a resulting theme, and one of the principles for practice noted above. It may therefore be beneficial to extend this research by investigating wider experiences of the pandemic on children's anxiety and attendance levels, as well as engaging with schools and teaching staff to explore their views.

It is important to note, however, the distinction between transferability and generalisability within qualitative research. Generalisability refers to the ability to draw broad conclusions from research findings and is considered essential for 'evidence-based practice' (Polit & Beck, 2010). Authors have widely criticised qualitative research for lacking this quality, however, due to the active role that the researcher and their opinion play in the gathering and interpretation of findings (Nastasi & Schensul, 2005). The present study is no exception to this, employing both quantitative and qualitative methods, raising questions about whether the current findings hold eternal validity and therefore 'generalisability'. Although, Polit and

Beck (2010) discussed this issue, claiming that rigour can still be achieved within qualitative studies through different 'models of generalisation', as posited by Firestone (1993). This includes the role of 'transferability' as discussed above, achieved through providing clear description of the research context, and 'analytic generalisation'. In the latter, the authors argue that researchers can reach generalisable conclusions through completing rigorous inductive analysis and articulating this in a clear and descriptive manner. When reflecting upon the present study, I believe that this has been somewhat achieved, given the adherence to clear analytic process, including Content Analysis and Reflexive TA, as well as through description of findings across both phases. This, combined with the quantitative data gathered within phase one, arguably improves the rigour, transferability, and the generalisable nature of the findings on this occasion, clearly addressing the research questions at hand (Nastasi & Schensul, 2005).

Future Research Directions

Although I feel that this research has provided insights into EBSNA intervention, both aligning with and extending previous findings, it is also clear that many questions remain unanswered by the present study. Areas for future research were discussed within my empirical chapter, as well as throughout this reflective account, and have been a focus of my reflections at many stages of the research process. The limitations of the present study highlight avenues for future research to improve the validity of the current findings, including further exploration of the definition of 'progress', gathering the views of alternative stakeholders (e.g. CYP/ school staff/ health professionals) and the impact of Covid-19 as discussed above. In addition, case studies exploring geographical areas in greater depth may provide further understanding into EBSNA support, given the differing LAs experienced by participants and the need to uncover areas of 'best practice'. In relation to the proposed 'SPIRAL Principles', there is further exploration to be done in terms of how these can be utilised in practice, perhaps through the employment of focus groups or action research within schools and LAs. These could explore school staff and professionals' views on EBSNA support and working with parents, as well as inform policy development, staff training and support pathways.

In addition, the relationship between EBSNA and SEN seems important to delve into further, as discussed within my empirical chapter. Results from the present study appear to have highlighted the role of SEN in perpetuating attendance difficulties, and therefore suggest possible avenues for early intervention through monitoring 'vulnerable' pupils. This is not a novel concept, having been discussed by numerous authors, including Ingul et al., (2019) and within Kearney and Graczyk's 'Response to Intervention Model' (2014). Elliott and Place (2019), as described above, however, claim that models such as these only achieve their

goals when each professional has a clearly defined role. The present findings, as well as previous literature (e.g. Nuttall & Woods, 2013; Lauchlan, 2003), indicate that EPs may be well-placed to identify and facilitate EBSNA support, aligning with findings from Corcoran et al. (2022), as well as descriptions of the EP role across multiple levels and systems (e.g. Cameron, 2006). In relation to EBSNA, however, limited research into EP views and practices currently exists, indicating that further exploration of EP services and their role in EBSNA intervention may be warranted. Overall, as with any research, the present study highlights numerous avenues for future research to pursue, with acknowledgement that EBSNA is a topic subject to continual evolution, discussion and development within both literature and practice.

Dissemination of Findings

As well as reflecting upon the development and execution of my research, I additionally considered how the findings may best be shared and disseminated, in line with a core competency of EP practice (BPS Practice Guidelines, 2017, 9.9; HCPC 8.9). As Sedgwick and Stothard (2021) argue, effective dissemination is vital for sharing knowledge, ideas and contributing to 'practice-based evidence'. Co-ordinating with the pragmatic stance adopted within this study, and with consideration of comments from Cherry (2009) around the importance of 'social change', I hoped my research to have an impact within both research and practice contexts, ultimately influencing professional understanding and policy. Anticipating my potential hopes for publication, I included this as a possibility within my participant information sheet and consent form, to ensure that I had consent to both analyse and disseminate my findings appropriately, in line with the BPS Code of Human Research Ethics (2021). I had additionally stated within my information sheet that I would share feedback with participants, should they want it, in the form of an executive summary, to be created and shared after submission of my thesis. This same summary will also be shared with my host placement LA, as well as other EP services and professionals that aided my recruitment process. This will detail the key findings of the research and its implications, promoting both awareness and understanding of EBSNA (Sedgwick & Stothard, 2021)

However, given research indicating the difficulties associated with transferring new knowledge into action, known as the 'transfer problem' (Blume et al. 2010), I was keen to further disseminate my findings as part of the scientific process. This is especially important considering comments from Sedgwick and Stothard (2021) that EPs often lack access to published research, and therefore have difficulty implementing it within their practice. Budden and Michener (2018) describe a range of methods that can be employed to effectively disseminate research findings, considering both specialist and non-specialist audiences. The first method discussed includes publication of research, following a process

of peer review. Following discussion, and with the support of my research supervisor, this is an avenue that I hope to pursue, given the lack of current literature exploring this topic, and my aim to contribute to an evolving narrative. A proposed journal that I hope to submit my article to, among others, is '*Educational Psychology in Practice*'. This is due to its previous interest in publishing research related to EBSNA (e.g. Nuttall & Woods, 2013; Corcoran et al., 2022), but also its relevance to the findings, and accessibility to the EP profession. Publishing in such a journal may not only raise the profile of my research, but also increase awareness of EBSNA across EP services, and ultimately LAs and schools. Furthermore, within my newly qualified EP practice, I hope to design training and guidance incorporating the SPIRAL principles, aimed at EPs, schools and LA staff (including attendance teams), to promote awareness and understanding of EBSNA across multiple systems, and advocating for a joint-systems approach. As discussed above, use of the 'SPIRAL' acronym presents a succinct and memorable way to share my findings with others, that is easily referred to and employed in practice, promoting 'action' as described by Sedgwick and Stothard (2021). I feel that sharing knowledge in this way may somewhat counteract the 'transfer problem' as discussed above, incorporating principles from Chidley and Stringer's 'Implementation Framework' (2019), being situated neatly within my role as an EP.

Finally, I hope to submit my thesis for presentation at conferences such as the BPS's Division of Educational and Child Psychology's TEP Conference, where current EPs-in-training have the opportunity to learn about recent and ongoing research projects, developing their own understanding and ideas. Again, this aligns with comments from Sedgwick and Stothard (2021) around the use of pre-established routes for dissemination, and the need for a 'multi-stranded' approach, which I believe this initial plan of dissemination adopts. With consideration of future research directions discussed within this chapter, sharing these with current and future researchers seems necessary, with a hope of shaping or informing those considering research related to EBSNA, parental views and/or solution-oriented frameworks, and continue the evolving narrative on this topic.

Conclusion

This chapter has provided a reflective account of my research process, from development to dissemination. Throughout, I hope to have honestly shared my reflections to aid understanding of my research, including its implications and directions for future authors to consider, highlighting my ability to act as both a reflective and reflexive researcher. The research process, on this occasion, has presented multiple challenges and rewards, being designed and conducted during a pandemic, and alongside my EP training, requiring a degree of time-management, clear boundaries and both efficient and collaborative decision-making throughout. However, I believe that this process has furthered my interest, skill, and

passion for research, with a desire to continue my learning as I begin my fully qualified practice. In particular, I believe that I have improved my understanding and ability to design and conduct research, with adherence to ethical and epistemological considerations, as well as analyse data in a systematic fashion. Therefore, the present study appears to have both contributed to my professional and personal development, outlining my next steps as a practitioner, and improving my confidence in my ability to ask questions, reflect upon and discuss topics of importance to my practice. I hope that this account provides the reader with a clear rationale and understanding of my research, as well as its relevance and implications for EP services.

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Appendix 1: Guidance produced to support schools and professionals with participants recruitment



University of East Anglia
Norwich Research Park
Norwich NR4 7TJ
United Kingdom

Email: r.sawyer@uea.ac.uk
Tel: +44 (0) 1603 59xxxx
Web: www.uea.ac.uk

Supporting 'Emotionally-Based School Non-Attendance': Parents' views on how to facilitate successful reintegration into education.

Guidance to support participant identification and recruitment

Thank you for lending your support to this project through aiding participant identification and recruitment. This study is exploring the experiences of parents of children who have previously displayed 'Emotionally-Based School Non-Attendance' (also known commonly as 'school refusal' or 'emotionally-based school avoidance'). This research is being conducted via the University of East Anglia and is separate from the work of the local authority, and therefore your support, or choice not to, will not impact upon your relationship.

Below is a list of participant criteria for this research. If you know of any parents involved with your setting/ service that meet these criteria, please forward them this link to allow them to opt-in to our study:

<https://forms.office.com/Pages/ResponsePage.aspx?id=IYdfxj26UUOKBwhl5djwkKGvfXqLX4tEqAhPCZu8bz1UQjNTRVU5NEUwQ0FZVEIYME9QSENrvKpTRi4u>

Participant Criteria:

Participants must have a child that has experienced 'Emotionally-based School Non-Attendance' whilst at Primary school within the last 3 years. This is defined as:

- Severe difficulty in attending school (above 15-20% absences)
- Severe emotional upset at the prospect of going to school,
- A tendency to remain at home with knowledge of the parents,
- Absence of significant anti-social problems (Berg, Nichols & Pritchard, 1969)

In addition to this, the child must also have demonstrated **considerable progress** in their attendance since first experiencing these difficulties. It is understood that 'progress' will appear different to each individual, and so this has not been specifically quantified, and may include children placed on part-time timetables, children who have transferred away from the school, or who have experienced slight- significant improvements in attendance.

I understand that this criteria may be subjective, and so **if in doubt of whether a parent meets the below criteria, please proceed to send the link**, as questions around the criteria are included within the questionnaire to confirm that participants meet this.

If you have any questions, or would like further clarification, please contact the researcher using the following email address:

r.sawyer@uea.ac.uk

Kind regards,

Rachel Sawyer (Postgraduate Researcher/ Trainee Educational Psychologist).

Appendix 2: Phase One Questionnaire

Supporting 'Emotionally-Based School Non-Attendance': Parents' views on how to facilitate successful reintegration into education.

Page 1:

- ☐ By ticking this box, you confirm that you have read the attached information sheet, and therefore give informed consent to anonymously take part in this study.
- ☐ Once your responses have been submitted, it will no longer be possible to withdraw these. Please tick this box to confirm that you understand this before proceeding.

Page 2: Experiences of EBSNA

This questionnaire is about your experiences of support, and their effectiveness, whilst your child displayed 'Emotionally-based school non-attendance' (EBSNA). This refers to your child finding it difficult to attend school due to emotional, or mental health difficulties.

For the first section of the questionnaire, it would be helpful to learn more about your child and the difficulties they experienced with school attendance.

- When did your child's difficulties with 'emotionally-based school non-attendance' (EBSNA) first begin? (Within the last 6 months/12 months/2 years/ 3 years)
- *How old was your child when they first experienced difficulties with school attendance?*
- *Please can you provide some detail into the reasons you believe to have contributed to your child's difficulty with attending school.*
- *Does your child have any identified special education needs/ diagnoses? (If yes, please specify below)*
- If yes, were your child's special educational needs/ diagnoses identified prior to their difficulties with attending school? (Yes/ No, they have been identified since)
- Please rate your child's school attendance when these difficulties first arose: (1-10)
- Please rate your child's school attendance prior to the COVID-19 school closures in March 2020: (1-10)
- Please rate your child's school attendance in the Autumn term 2020: (1-10)
- Please rate your child's current school attendance: (1-10)
- *Please describe the nature of your child's school attendance prior to the first lockdown in March 2020. (e.g. full time/ part time timetable/ later starts etc.)*
- *Please briefly describe your child's progress with their attendance since first experiencing these difficulties. Please note that this includes 'small steps' or changes in your child's school attendance.*

- How long after your child first experienced difficulties with school attendance did you/your child receive support for this? (Immediately/ a few weeks/ less than one school term/ 1-2 school terms/ less than one school year/ more than one school year)

Page 3: Support received in relation to your child's EBSNA

This section will list different forms of support that you may have accessed **during the period of your child's EBSNA**. Please indicate below whether or not you accessed the below support systems during this time, and rate on the scale how 'useful' you found this in supporting your child to make progress with their school attendance.

Support from family/ friends

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Support from the school SENCO Yes I accessed this support during this time (please rate below how 'useful' this was).

- No I did not access this support during this time.

1 2 3 4 5

Support from the Senior Leadership team (e.g Headteacher/ Deputy Head):

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Support from your child's class teacher:

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Support from the school Family Support Practitioner:

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Mental health support/ therapy for your child (e.g. CAMHS)

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Mental health support/ therapy for yourself as a parent

- Yes I accessed this support during this time (please rate below how 'useful' this was).

- No I did not access this support during this time.

1 2 3 4 5

Support from an Educational Psychologist

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Support from a Social Worker or Social Care (e.g. Early Help)

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Support from another Local Authority service (e.g. Specialist advisory teacher/ tutor/ support service)

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Support from your local GP:

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Support from a parenting group or network

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Support from online networks/ social media

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Support from online information or guidance

- Yes I accessed this support during this time (please rate below how 'useful' this was).
- No I did not access this support during this time.

1 2 3 4 5

Other (please specify)

1 2 3 4 5

Finally, we are interested in learning how the support you have accessed has been impacted by the COVID-19 school closures.

- *How did the COVID-19 school closures impact upon your child's school attendance difficulties?*
- *Are you accessing any support additional or different to those mentioned on the previous page during the last year? If yes, please can you specify this below:*

Page 5: What happens next?

If you would be interested in learning more about Phase 2 of the study, which involves participating in an individual online interview to discuss your experiences in more depth, then please complete the separate online form (linked below) to provide a contact email address, or alternatively email the research directly via r.sawyer@uea.ac.uk.

<https://forms.office.com/Pages/ResponsePage.aspx?id=IYdfxj26UUOKBwhl5djwkKGvfXqLX4tEqAhPCZu8bz1URjBPUjhDOFNUT0NPN0JGNjREUEFZQkFHUy4u>

By leaving your contact details, you are consenting to the researcher contacting you to provide further information only. Your above responses will continue to remain anonymous. Please note that for Phase 2 of the research, the researcher will be primarily exploring experiences of parents within and around her host local authority. Therefore, if you live outside of this area you may not be contacted. If you have any concerns or would like to discuss this further, please contact the researcher using the details below..

Thank you for your participation, and for sharing your views and experiences as part of this research. Your time and efforts are greatly appreciated.

Although this questionnaire focused on historical experiences of EBSNA, it is understood that your participation may have raised feelings of distress, anxiety or discomfort, either in relation to past or current experiences. Should you feel in need of further support for you or your family, it is recommended that you seek this via your child's school SENCO or wellbeing co-ordinator, your Local Authority's parent support service (e.g. SENDIASS), or by contacting your local GP. If you wish to discuss this questionnaire further, learn more about the research or request a summary of the overall findings, please contact the researcher via r.sawyer@uea.ac.uk.

Appendix 3: Phase Two Semi-Structured Interview Schedule

- Can you tell me more about your child and briefly outline their difficulties with school non-attendance?
- Can you tell me more about the support you and your child received from professionals in regard to your child's EBSNA?
- Did you access support from online platforms, such as social media/online guidance when supporting your child's progress? How was this useful?
- The results from the online questionnaire indicated that those individuals who accessed support from an educational psychologist found this useful, however nearly 49% of respondents did not access this. Did you access this support? How? And what about this did you find most useful?
- From the support you accessed, what do you think was most helpful in supporting your child to make progress with their school attendance? Can you tell me more about this?
- What support do you feel was most helpful for you as a parent during this time?
- How has the COVID-19 school closures impacted upon your child's progress with EBSNA, and the support you received in relation to this?
- What do you feel professionals involved in supporting EBSNA could do more of to help children and families experiencing this?
- What do you feel needs to change to support families experiencing similar difficulties in the future?

This brings us to the end of the interview. Thank you for sharing your views and experiences with me today. Did you have any further questions for me?

Can I also confirm that you are happy for this recording to be anonymously transcribed and the information used within the study? Just to reiterate, you will not be identifiable in any findings produced. If you would like to withdraw your contributions, you are able to do so up until I have analysed the findings after March 2022.

You also indicated on the consent form that you DO/DO NOT wish to receive individual feedback- is this still the case?

Please feel free to contact me at any time should you have any further questions about the research.

3. Generating Initial Themes. This took place following refinement of codes and was achieved using post-it notes to allow for flexibility and refinement over time.



- I've often said to school the SENCO look, if you could signpost, I don't mind being like the face of autism at the primary school, if you could just say that if you're having a really bad time, here's a mum that might have an incline of what you're feeling or would happily have a cup of tea when she's available with you"

Subtheme: Understanding parents' needs

Codes:

- 101- Parents feel more confident to meet child's needs when supported
- 84- Stressful home situation as a contributing factor
- 83- Remote learning required parental commitment and effort
- 13- EBNSA impacted parents' ability to work
- 118- Parents need support to access meetings with professionals
- 4- Parental illness as a contributing factor
- 87- Professionals providing practical support to parents
- 40- Parents having difficulty getting child into school building
- 100- Supporting CYP's needs requires parental time and energy
- 92- Need to support parent and child simultaneously
- 88- Professionals understanding parents needs and situation

Key selected extracts:

P2: "I mean it's really changed our lives...it got to the point where I was so depressed that I couldn't see a way out...and X was getting harder and harder for me to deal with, and I was getting poorier and poorier, but...having their support and them sort of steering me in the right direction, really helped me to see the light at the end of the tunnel and know better how to deal with X"

P2: "I was in and out of hospital then...and it was a very difficult time for X...because I wasn't always there...and she then got separation anxiety because she kept worrying that I was ~~going~~ die or go to the hospital again ~~when~~ when...and so it just escalated until the point where she got so nervous about going to school that she was physically sick"

P2: "I was just getting so tired trying to do all the housework, the cooking and the childcare on my own....it was making me so poorly I just didn't have time for her when she came home from school....and then she was acting up more and more and it got to the point when, well I just didn't think I could cope anymore"

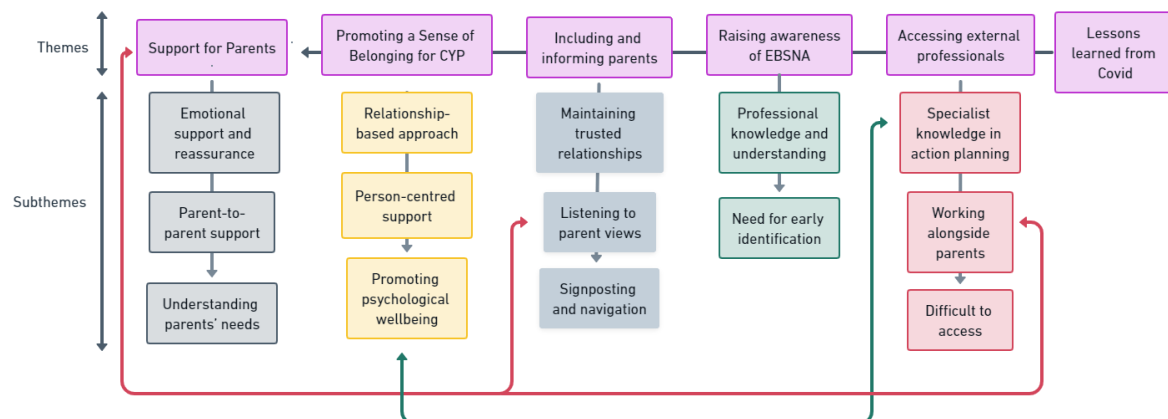
P1: 'he was doing the remote learning and they did live lessons all day long so it was like a normal school timetable but he was able to just access it at home...so that was really hard

5. Refining, defining, and naming themes.



6. Writing up.

Appendix 5: Final Themes and Subthemes



Theme One: Support for Parents

Subtheme: Emotional Support and Reassurance

- 86- EBSNA is challenging for parents
- 199- Lack of support within families as a barrier
- 99- Providing emotional support to parents is important
- 97- Parents rely on family and friends for support
- 75- Parents feeling hopeless
- 46- Blame placed onto parents
- 6- EBSNA created a stressful home environment
- 200- Responsibility often falls to one parent
- 161- Apprehension around their child's future
- 170- Parents as main source of support for CYP
- 5- Parents feel responsible and guilty
- 98- Impact of EBSNA on parental mental health and wellbeing
- 157- Parents feel like a burden
- 3- Physical impact of anxiety seen by parents
- 127- Responsibility on parents to encourage attendance
- 196- Accessing EP colleagues remotely informally provided reassurance.
- 65- Onus is on the parent to request support
- 68- Parent time and energy chasing referrals

Subtheme: Parent-to-parent support

- 26- Covid changed support available to parents
- 48- Online sources of support help parents to feel less isolated
- 159- Covid has prevented face to face support
- 158- Organised parent groups are supportive
- 72- Parent to parent support is beneficial
- 165- Social media useful for sharing success stories
- 45- EBSNA leaves parents feeling isolated
- 204- Important to remain solution-focused
- 164- Social media as a negative environment

Subtheme: Understanding parents' needs

- 101- Parents feel more confident to meet child's needs when supported

- 84- Stressful home situation as a contributing factor
- 63- Remote learning required parental commitment and effort
- 133- EBSNA impacted parents' ability to work
- 118- Parents need support to access meetings with professionals
- 4- Parental illness as a contributing factor
- 87- Professionals providing practical support to parents
- 40- Parents having difficulty getting child into school building
- 100- Supporting CYP's needs requires parental time and energy
- 92- Need to support parent and child simultaneously
- 88- Professionals understanding parents needs and situation

Theme 2: Promoting a sense of belonging for CYP in school

Subtheme 1: Relationship-based approach

- 32- Maintaining links with school staff importance for reintegration
- 23- Important for CYP to trust school staff
- 36- Being supported by consistent adults in school
- 30- methods of communicating with CYP helpful
- 27- Having trusted adults in school as a secure base
- 107- Sense of belonging in school community important
- 152- Positive morning routine important for CYP
- 121- Lack of sense of belonging as a contributing factor
- 25- Relationship-based approach is needed
- 119- Regular home-school communication during lockdown beneficial
- 151- Schools need to adopt a nurturing approach
- 134- Child appearing different from their peers
- 120- EBSNA is socially isolating for CYP
- 44- CYP wanting to avoid social judgement
- 90- Positive peer relationships in school is important
- 125- Separation anxiety as a contributing factor

Subtheme: Person-centred approach

- 41- Having a child-led approach is important
- 202- Small adjustments have biggest impact
- 149- Child needs to feel safe and secure to share views honestly
- 18- Gathering pupil views important to inform effective support
- 33- Giving CYP choice is important
- 140- Schools and professionals adopting a 'one size fits all' approach unhelpful
- 39- Taking a flexible approach to support
- 147- Support needs to be person centred to be effective
- 169- Individualised approach needed

Subtheme 3: Promoting psychological wellbeing

- 34- Building confidence over time important
- 61- Negative impact of EBSNA on child's mental health
- 130- Dysregulation in school is traumatic for CYP
- 131- Lack of positive experiences in school perpetuated EBSNA
- 89- Promoting feelings of safety and comfort within school
- 94- Co-regulation with adults in school
- 192- Anxiety using up CYP's cognitive resources
- 106- School being understanding of CYP's needs
- 35- Parents remaining in school as a secure base
- 188- Need to develop CYP's coping strategies within school
- 194- CYP having difficulties requesting support in school

- 113- School focusing on wellbeing rather than attendance
- 148- Building CYP's self esteem in school is important
- 172- Overwhelming environment as a contributing factor
- 192- All staff need to understand and support CYP's needs
- 31- School noticing what works is helpful
- 47- Unmet SEN as a contributing factor
- 190- Maintaining physical attendance important for reintegration

Theme 3: Including and Informing Parents

Subtheme: Maintaining trusted relationships

- 22- Poor communication from school as a barrier
- 37- Clear communication between parents and school
- 13- Changing provision seen as the answer
- 24- Lack of trust between parent and school as a barrier
- 21- Support from school was inconsistent
- School placing responsibility on parents
- 191- Important for parents to trust in schools and professionals
- 116- Parents feeling as though professionals care and are committed
- 81- Adopting a partnership approach
- 203- Parents experience with education impacts their trust and confidence
- 17- Parents felt unsupported by school
- 110- Parents feeling welcomed by school staff
- 146- Accessing consistent professionals over time was helpful for parents
- 164- Social media as a negative environment

Subtheme: Listening to parent views

- 56- Professional views more importance than parent voice
- 122- Parents having to make school aware of difficulties
- 38- Parents views being gathered and incorporated into support plans
- 1- Difficulties first identified by parents
- 150- Schools not gathering parent views
- 154- Parents need supported opportunities to share views effectively
- 141- Parent is the expert on the child
- 7- Parents feel dismissed by school
- 163- Parents find meetings with professionals intimidating
- 111- Parents feeling listened to is important
- 145- Parents fear that they won't be believed
- 19- Parents don't feel listened to

Subtheme: Signposting and navigation

- 10- Parent taking the lead with accessing support
- 102- Parents reliant upon schools for knowledge and next steps
- 180- Lack of accessible information for parents
- 91- School referring to external professionals
- 50- Parents not knowing what support is available
- 201- Accessing support from somebody who understands the system is beneficial
- 67- Complication system and processes as a barrier to accessing support
- 93- Professionals signposting parents to appropriate support is important
- 49- Online sources of support helped parents to navigate the system
- 162- Parents needing to educate themselves on the system in order to access it
- 117- Knowing how/where to access support is important for parents
- 9- Parents researching difficulties independently
- 181- Parent training and workshops run by professionals are useful

- 126- Discrepancies between guidance and practice

Theme 4: Raising awareness of EBSNA

Understanding of EBSNA and how to access support- knowing what it looks like- school refusal.

Subtheme: Professional knowledge and understanding

- 123- Threats of prosecution unhelpful
- 185- Lack of understanding of EBSNA within attendance team
- 78- Schools adopting a non-judgemental perspective
- 179- EBSNA as a taboo topic
- 193- Anxiety not viewed as SEN
- 205- EBSNA dismissed as school refusal
- 195- Lack of awareness/knowledge of anxiety within school
- 155- Professionals having gaps in knowledge
- 177- Online groups raising awareness of EBSNA
- 153- Difficulties ongoing beyond reintegration
- 167- Education system not inclusive

Subtheme: Need for early identification

- 108- Clear communication between school staff helpful
- 186- Parent knowledge and awareness supported early identification
- 83- Need for early identification and intervention
- 129- Lack of early intervention causes difficulties to worsen
- 171- CYP masking difficulties in school
- 206- Monitoring vulnerable CYP
- 2- Difficulties build over time
- 80- Schools need more knowledge/ training in EBSNA
- 176- Schools unprepared to support EBSNA
- 187- Transition to secondary school as contributing factor
- 168- Need for more whole-school support

Theme 5: Accessing external professionals.

Benefits of involving professionals outside of the school, including EPs, social care/ early help and MH professionals. Multi-agency approach and support.

Subtheme: Specialist knowledge in action planning

- 8- Parents appreciating external professional's perspective
- 132- Multi-agency meetings with external professionals helpful
- 58- EP viewed as most useful source of support
- 55- EP report as evidence of child's needs
- 184- Specialist knowledge of EBSNA raised as key
- 189- Need support to apply professional knowledge to parent role
- 138- High expectations placed on professional involvement
- 173- Schools have good intentions
- 128- Involving appropriate professionals is important
- 136- EP accessed through multi-agency meeting
- 183- EP as a gatekeeper
- 51- EP accessed as part of EHCP process
- 95- CYP being supported outside of school helpful
- 76- Professionals facilitating home-school communication

Subtheme: Working alongside parents

- 137- Parents feeling belittled by professionals

- 135- Professional involvement not always viewed as supportive
- 54- EP listening to parent views helpful
- 76- Professionals facilitating home/school communication
- 174- Parent as therapist model is useful
- 163- Parents find meetings with professionals intimidating
- 139- Assessment of needs should be thorough and collaborative
- 156- Brief professional involvement as a barrier
- 59- EP assessment within family home more comfortable
- 77- Parents feeling supported by professionals
- 144- Inconsistent experiences of support from professionals

Subtheme: Difficult to access

- 182- Negative experiences with LA leads to lack of parental trust
- 74- Difficulty accessing children's mental health services
- 11- Difficult accessing a diagnosis
- 69- EHCP viewed as necessary to access support
- 53- School reluctant to commit EP time
- 12- Difficulty accessing EHCP
- 142- Parents frustrated by professionals and services
- 104- Diagnosis viewed as necessary for support
- 52- Difficulty accessing EPs
- 143- Stretched service capacity impacting quality of support
- 66- Parents frequently moved between services
- 70- Accessing support is a battle
- 68- Parent time and energy spent chasing referrals

Theme 6: Lessons learnt from Covid

- 85- Covid perpetuated anxiety around attending school
- 198- EBSNA provision will change over time
- 197- EBSNA can be supported through implementing reasonable adjustments
- 178- Lessons to be learnt from covid
- 60- Covid lockdown viewed as positive by parents
- 124- Covid raising awareness of EBSNA
- 15- Progress made during Covid lockdown
- 16- Covid changed available transition support
- 29- Remote learning during lockdown allowed CYP to engage
- 62- Covid gave opportunity to reset
- 42- Covid lockdown reduced pressure to attend school
- 20- Parents and schools have different priorities
- 26- Covid changed support available to parents
- 159- Covid has prevented face to face support
- 119- Regular home-school communication during lockdown
- 166- Remote learning not beneficial for all CYP
- 57- EP assessment impacted by covid
- 43- CYP more able to engage when regulated

Appendix 6: Ethical Application
UNIVERSITY OF EAST ANGLIA
SCHOOL OF EDUCATION AND LIFELONG LEARNING RESEARCH ETHICS
COMMITTEE

APPLICATION FOR ETHICAL APPROVAL OF A RESEARCH PROJECT

This form is for all staff and students across the UEA who are planning educational research. Applicants are advised to consult the school and university guidelines before preparing their application by visiting <https://www.uea.ac.uk/research/about-uea-research-and-impact/integrity> and exploring guidance on specific types of projects <https://www.uea.ac.uk/documents/20142/130807/RIN-ethics-university-research-ethics-policy.pdf>. The Research Ethics page of the EDU website provides links to the University Research Ethics Committee, the UEA ethics policy guidelines, ethics guidelines from BERA and the ESRC, and guidance notes and templates to support your application process: <https://my.uea.ac.uk/faculties-and-schools/faculty-of-social-sciences/school-of-education-and-lifelong-learning/edu-research-ethics-committee>

APPLICANT DETAILS	
Name:	Rachel Sawyer
School:	Education and Lifelong Learning
Current Status:	EdPsyD student
UEA Email address:	r.sawyer@uea.ac.uk
If PGR, MRes, or EdD/EdPsyD student, name of primary supervisor and programme of study: Dr. Nikki Collingwood, Course Tutor on EdPsyD course.	

2. PROPOSED RESEARCH PROJECT DETAILS:	
Title:	Supporting 'Emotionally-Based School Non-Attendance': Parents' views on how to facilitate successful reintegration into education.
Start/End Dates:	January 2021- July 2022.

4. APPLICATION FORM FOR RESEARCH INVOLVING HUMAN PARTICIPANTS:

4.1 Briefly outline, using lay language, your research focus and questions or aims (no more than 300 words).

The present study aims to retrospectively explore support accessed by parents in relation to their child's Emotionally-Based School Non-Attendance (EBSNA). This refers to children and young people demonstrating school attendance difficulties due to emotional factors, resulting in increased or prolonged absences. I am interested in exploring the experiences of parents who have previously faced this difficulty, with a strengths-based focus on determining 'what worked' to promote successful reintegration into education. As a result, this study is particularly interested in the nature and effectiveness of different forms of support accessed by parents when experiencing their child's EBSNA, as well as how this can be improved or increased in the future. Furthermore, this research also aims to explore the impact of COVID-19 school closures on support accessed by families, adding to the wide existing literature base, whilst also acknowledging the current context. It is hoped that themes from these experiences can be used to inform future practice, both within educational psychology services, and wider local authority teams, through promoting principles of early intervention.

The proposed research questions are therefore as follows:

- What forms of support have parents accessed in relation to their child's EBSNA?
- What have parents found most useful from the support received in relation to their child's EBSNA?
- How has the COVID-19 school closures impacted EBSNA and the support accessed by parents?

I can confirm that, prior to the proposal of this project, I have read the university's current policy regarding research during the Covid-19 pandemic and have included appropriate measures to ensure that my research falls within the current guidance.

4.2 Briefly outline your proposed research methods, including who will be your research participants and where you will be working (no more than 300 words).

This research will employ an explanatory sequential mixed-methods design, with participants being defined as parents of children who have previously displayed EBSNA (whilst at primary school). Although Phase One hopes to identify general trends across this population in terms of support previously accessed or perceived as effective, Phase Two aims to explore in-depth experiences of these families living in and around my host local authority. This is to ensure alignment with local research priorities. As a result, these findings will only be directly applicable to the LA(s) studied, however may be of interest and beneficial to other services. This research will study retrospective experiences of parents with children who have 'overcome' or made positive progress with EBSNA prior to COVID-19 school closures in March 2020 (i.e. have significantly improved their attendance/ engagement in education). Participant inclusion criteria is listed in Appendix C.

In Phase One, participants will complete an online questionnaire created on Microsoft Forms (Appendix F) to explore the following:

- The nature and presentation of their child's EBSNA (to ensure that they meet the inclusion criteria).
- The support accessed during this time and any additional/different support accessed during the COVID-19 school closures.
- How 'useful' participants found this support (scaling questions).
- Participant contact details, should they be willing to follow up with a further interview.
- It is hoped that between 40-50 responses can be achieved for this Phase of the research.

Participants who shared details during Phase 1, and who live within the target research area, will be contacted to complete an individual, semi-structured interview (approximately 45 minutes) to

further explore their experiences in Phase Two. Please see Appendix G for sample interview questions. It is hoped that between six and ten participants will be recruited, and interviews will be conducted online via Microsoft Teams in order to comply with COVID-19 restrictions.

4.3 Briefly explain how you plan to gain access to prospective research participants. (no more than 300 words).

Participants will be recruited via local schools, and other local authority services (e.g. the attendance team). A document (Appendix C) outlining participant criteria, and guidance in identifying potential participants will be introduced to schools by their link Educational Psychologist via email (Appendix D). Care will be taken to ensure that schools and LA services understand that this project is attached to the University of East Anglia, and not affiliated with the local authority, and their decision to support this project will therefore not impact upon this relationship.

Alongside this, Phase 1 will additionally be advertised via a closed social media group for parents of children with EBSNA. The social media page is set up and managed by a national organisation designed to offer parents support on this topic, and this platform is regularly used to advertise ongoing research into this population. Permission to advertise the study via this platform has already been sought and granted. Please see Appendix E for a proposed explanation of the study and inclusion criteria that will be posted in the group along with the information sheet and questionnaire link.

In Phase 1 of the study, participants will be invited to share their contact details should they wish to be involved in Phase 2. This will be conducted via a separate Microsoft Forms questionnaire (to ensure anonymity of data), or by emailing the research directly, with the choice laying with the participant. Participants will be made aware that Phase 2 will focus on the experiences of parents living in or around the researcher's host local authority, and therefore the researcher may use their location (if provided) to select participants. As above, participants will be informed that this research is being completed by the University of East Anglia, and their involvement, or decision not to be involved, will not be communicated to, or impact their relationship with the local authority, and so will not impact any ongoing support or future access.

4.4 Please state who will have access to the data and what measures will be adopted to maintain the confidentiality or anonymity of the research subject and to comply with data protection requirements e.g. how will the data be anonymised? (No more than 300 words.)

Whilst schools and attendance teams may have knowledge of which parents the questionnaire was passed on to, they will have no knowledge of which parents chose to take part in the study, maintaining strict confidentiality. Questionnaire responses will be anonymous, meaning that the researcher will not be able to identify participants from their responses. This includes participants who accessed the questionnaire via the closed social media group. An exception to this is if the participant chooses to leave their contact details expressing interest in Phase 2 of the study. These contact details (and the participant's location, if provided) will be used only for the purpose of arranging the interview and will be stored on a locked file. No one else will have access to these details, and they will be destroyed after completion of the research.

During the interview, participants will be asked not to share personal information (e.g. names, DOB), and all information will be anonymized during the transcription process. This will include use of pseudonyms where applicable to protect identities. Participants will be identified by an arbitrary number during the analysis process and will not be identifiable in the analysis or write up of the findings. Participants will additionally be given the option to review their interview transcripts, should they wish, prior to data analysis.

Participant interviews will be recorded to aid the transcription process. These recordings will be saved on an encrypted memory stick, along with any questionnaire responses and contact information. Following data analysis, these recordings will be deleted.

4.5 Will you require access to data on participants held by a third party? In cases where participants will be identified from information held by another party (for example, a doctor or school) describe the arrangements you intend to make to gain access to this information (no more than 300 words).

Please see the response to question 4.3 for information on this, as well as guidance developed to support this process in Appendix C.

4.6 Please give details of how consent is to be obtained (no more than 300 words).

Once identified as a potential participant, parents will be sent an information sheet via email along with the link for the online questionnaire in Phase One of the study. Please see Appendix A for a copy of this. In this document, participants will be informed that by submitting their questionnaire responses they give their consent to participate in this phase of the study. This information sheet and the same advice will be given to participants who access the questionnaire via the closed social media group.

Should participants wish to learn more about Phase Two of the study, they will have the opportunity to leave their email address so they can be contacted. The researcher will then send selected participants a further information sheet and consent form around Phase Two of the study. Participants can then indicate if they want to take part by returning a completed consent form to the researcher via email.

4.7 What is the anticipated use of the data, forms of publication and dissemination of findings etc.? (No more than 300 words.)

The data from this study will primarily be used for learning and educational purposes, forming part of a professional doctoral thesis. Information will only be used for the purposes outlined in the Participant Information Statement. Data management will follow the 2018 General Data Protection Regulation Act and the University of East Anglia Research Data Management Policy (2019). Participant information will be stored securely on an encrypted memory stick, and their identity/ information will be kept strictly confidential, except as required by law. However, a summary of the findings will be shared with the participating local authority, to allow them to understand and use the key themes in their future development should they wish. Please note that only a summary will be shared with the local authority, and not the original data set. This summary will additionally be shared with the organization managing the closed social media group used to aid recruitment in Phase One of the study. Individuals involved in managing this will be asked to share the summary on the relevant page to allow anonymous participant access. Following completion of the doctorate, this thesis is likely to be available online via the University database, and the researcher and supervisor may later also pursue publication of the study in peer reviewed journals, however participants will be unidentifiable in any publications, and this is included in the Information sheet and consent form.

4.8 Findings of this research/project would usually be made available to participants. Please provide details of the form and timescale for feedback. What commitments will be made to participants regarding feedback? How will these obligations be verified? If findings are not to be provided to participants, explain why. (No more than 300 words.)

Due to Phase One of the study involving an anonymous questionnaire, individual feedback for participants of this phase will not be possible. However, an executive summary of the research findings will be produced following completion of the research and will be shared with the host local authority for their interest and potential service development. No participants will be identifiable in this document, and it will be a summary only. This summary will also be shared with the organisation used to access participants via the closed social media group. Participants in Phase 1 will also be given the option to email the researcher should they wish to have a copy of the summary shared with them following completion of the research. Participants of Phase Two of the can indicate on their consent forms whether they wish to receive individual feedback. In this instance, the summary sheet will be emailed to them directly. The researcher will use the email address originally provided by the participant do this to ensure that no further personal information is shared.

4.9 Please add here any other ethical considerations the ethics committee may need to be made aware of (no more than 300 words).

As schools, local authority teams, and closed social media groups will be involved in identifying potential participants, it will be important to reassure participants of the strict confidentiality surrounding their data. Due to initial participation involving an online anonymous questionnaire, these third parties will not have any knowledge of which parents have chosen to participate. This will be reiterated to parents throughout the research process, to ensure that their relationships with schools and the local authority do not feel impacted at any point.

As the Phase 2 interviews will be recorded for transcription purposes, all participants will needed to have given consent for audio and/or video recording prior to starting the process. As this is taking place 'virtually', a reminder of this will precede me beginning the recording of the session. Participants will also be reminded that they can turn off their camera or audio when they are not speaking should they not wish this to be recorded. Microsoft Teams has been selected as the most appropriate platform to conduct interviews, due to its secure nature, accessibility to most families (can be accessed via smartphone) and to align with current remote practices of the researcher's host LA and the university. Participants will be reminded that they can end the interview at any time should they no longer wish to take part, at which point they can choose to withdraw all responses up to that point if desired. At the point of giving consent, participants will be made aware of these circumstances, and that withdrawing themselves from the study, either before, during or after the interview will not have any negative consequences or impact their relationship with the researcher or university.

Participants will additionally be offered the opportunity to review their interview transcripts (by indicating on information/consent form), allowing a further opportunity to withdraw these should they wish.

4.10 What risks or costs to the participants are entailed in involvement in the research/project and how will you manage that risk?

It is recognised that this research is being carried out at a sensitive and challenging time for many families, and that the previously experienced difficulties at the centre of the discussion may have resurfaced in the context of the COVID-19 school closures. The researcher intends to emphasise during recruitment that the primary focus on retrospective/ historical experiences of EBSNA, however acknowledges that her questions around the impact of COVID-19 may induce feelings of anxiety, distress or discomfort. Participants will be reminded that they are not obligated to respond to any questions should they not wish to, and the researcher will signpost them to any further support or services should parents need this. In the event of this occurring, I will be supported by

my Research and Fieldwork Supervisor to ensure that this is completed appropriately. Acknowledgement of potential distress and signposting of services will additionally be included at the end of the Phase 1 questionnaire, to ensure that all participants can access support if needed. It will be important to manage participant's expectations of the researcher's role, as although practicing within the local authority as a trainee educational psychologist, her role as researcher is separate from this, and does not allow for individual or psychological support. This will be achieved through explaining this role both prior to and after the interview, and participants will be able to contact the researcher to arrange a formal debrief, or to discuss this further if they wish to. Aside from giving up their time, there is not perceived to be any further cost to participating in this study.

4.11 What is the possible benefit to the participant or society from their participation or from the project as a whole?

It is hoped that this research will amplify the parent voice to further understanding within my host LA of how to best support parents of children experiencing EBSNA, complementing current local projects, as well as identifying general trends in the nature of support accessed. This will additionally contribute to national understanding of EBSNA in the context of the COVID-19, potentially indicating effective approaches to supporting families following the pandemic. Questionnaire data will provide information into the current access and perceived effectiveness of support received by parents, both within and external to their LA. In addition, themes produced from the analysis of interview transcripts may provide further understanding into the strengths of current professional practices, as well as insights into how these can be improved or increased within the local context. This study's multi-agency and systemic perspective means that the findings may be useful to a range of LA services, including the EP team, who may be well-placed to train and guide other professionals in the implementation of this support. Ultimately, it is hoped that these parental view and experiences will inform future practice and intervention, and therefore the support available to families facing this difficulty both now and in the future.

Furthermore, it is also hoped that this research will have a beneficial impact on individual participants and their families, whereby the process of sharing their experiences can promote feelings of empowerment and reflection. This may also encourage parents to evaluate and consider support accessed and encourage them to access different forms of support if this is needed in future.

4.12 Comment on any cultural, social or gender-based characteristics of the participants which have affected the design of the project or which may affect its conduct. This may be particularly relevant if conducting research overseas or with a particular cultural group

Due to the variable nature of difficulties and experiences that may have been faced by participants and their children, the decision to hold individual semi-structured interviews was made. This would allow the researcher to explore and follow up responses by participants to provide greater detail and insight to the data set. The one-to-one context may also promote participants' feelings of safety and confidence to share honest feelings and experiences, placing their wellbeing at the center of the research design. Beyond this, no other social or cultural characteristics have influenced the design of this study.

4.13 Will your research involve investigation of or engagement with terrorist or violent extremist groups? Please provide a full explanation if the answer is 'yes'.

N/A

4.14 Please state any precautions being taken to protect your health and safety? This relates to all projects and *not just* those undertaken overseas.

As the questionnaires and interviews will be completed remotely (in line with COVID-19 restrictions) there is low risk associated with this project. However, I have taken all relevant local authority and university training regarding data management and equality and diversity and hope that this will support my work. I have also familiarised myself with the technology planned to be used and have completed all relevant computer updates.

To protect my own wellbeing during the project, I will access regular supervision from my university tutor, as well as my fieldwork supervisor on placement.

Appendix 7- Information Sheet and Consent Forms (Phase One and Phase Two)

Rachel Sawyer

Trainee Educational Psychologist
22nd January 2021

Faculty of Social Sciences
School of Education and Lifelong learning
University of East Anglia
Norwich Research Park
Norwich NR4 7TJ
United Kingdom

Supporting 'Emotionally-Based School Non-Attendance': Parents' views on how to facilitate successful reintegration into education (Phase One)

PARTICIPANT INFORMATION STATEMENT – Parents

(1) What is this study about?

You are invited to take part in a research study exploring parental experiences of 'Emotionally-Based School Non-Attendance' (also known commonly as 'school refusal'). This study aims to learn more about the support received by parents, and how this can be improved in the future through looking at what has worked well in the past. You have been invited to participate in this study because you have a child that previously experienced difficulties with attendance whilst at primary school. This Participant Information Statement tells you about the research study. Knowing what is involved will help you decide if you want to take part. Please read this sheet carefully and ask questions about anything that you don't understand or want to know more about.

Participation in this research study is voluntary. By giving consent to take part in this study you are telling us that you:

- ✓ Understand what you have read.
- ✓ Agree to take part in the research study as outlined below.
- ✓ Agree to the use of your personal information as described.
- ✓ You have received a copy of this Participant Information Statement to keep.

(2) Who is running the study?

The study is being carried out by the following researcher: Rachel Sawyer, Trainee Educational Psychologist, University of East Anglia under supervision of Dr Nikki Collingwood and Imogen Gorman, Educational and Child Psychologist, Lecturer and Tutor on the Doctorate in Educational Psychology (EdPsyD), School of Education and Lifelong Learning, University of East Anglia.

(3) What will the study involve for me?

This study will be completed across two stages, both of which are completely optional. In Phase One, you will be asked to complete an anonymous online questionnaire. This will ask you questions around the nature and timing of your child's emotionally-based school non-attendance, the types of support you received/accessed during this time, and will ask you to

rate how useful you found each form of support on a scale of 1-5. Should you wish to learn more about taking part in Phase two of the study, instructions for leaving your contact details in a secure way will be provided. If you choose to complete Phase One of the study, there is no obligation to complete Phase Two in order for your views to be represented.

(4) How much of my time will the study take?

It is estimated that the online questionnaire will take no more than 10-15 minutes to complete.

(5) Do I have to be in the study? Can I withdraw from the study once I've started?

Being in this study is completely voluntary and you do not have to take part. Your decision whether to participate will not affect your current or future relationship with the researcher, or anyone else at the University of East Anglia. Neither your child's school, or any other professionals involved in supporting you or your child will know whether you chose to take part and are not affiliated with this research project. If you decide to take part in the study and then change your mind, you are free to withdraw at any time before you have submitted the questionnaire. Once you have submitted it, your responses cannot be withdrawn because they are anonymous and therefore unidentifiable. If you decide to leave your contact details in relation to Phase two of the study, these can be withdrawn at any time by contacting the researcher via email (r.sawyer@uea.ac.uk).

(6) Are there any risks or costs associated with being in the study?

Considering and reflecting on the support accessed during your child's experience of emotionally-based school non-attendance may lead to feelings of upset, distress or anxiety. This is one of the reasons that the researcher hopes to look at retrospective experiences of these difficulties, rather than those being experienced currently. To manage these risks, the questionnaire has been designed carefully with supervision. As above, you are free to withdraw your responses at any time prior to submitting the questionnaire. You are also welcome to contact the researcher to arrange an opportunity to discuss the questionnaire or seek further forms of support should you wish. Aside from giving up your time, we do not expect that there will be any further risks or costs associated with taking part in this study.

(7) Are there any benefits associated with being in the study?

It is hoped that your responses will further professional knowledge of how to best support parents of children experiencing emotionally-based school non-attendance. Your views will therefore contribute to both local and national understanding of how to effectively support parents and families both during and following the pandemic who experience similar difficulties. Questionnaire data will provide information into the current access and perceived effectiveness of support received by parents by a range of services, meaning that the findings may be useful to a range of professionals. Ultimately, it is hoped that your experiences will inform future practice and intervention, and therefore the support available to families both now and in the future.

(8) What will happen to information about me that is collected during the study?

By providing your consent, you are agreeing to me collecting your views for the purposes of this research study. Should you choose to provide your contact details to learn more about Phase two of the study, these will only be seen by the researcher and will be stored in a secure file only accessible to them. Your information will only be used for the purposes outlined in this Participant Information Statement, unless you consent otherwise. This includes use for learning purposes as part of a professional doctorate thesis, and an executive summary of research findings to be shared with the researcher's host local authority. You will not be identifiable in either of these uses of the data. Data management

will follow the 2018 General Data Protection Regulation Act and the University of East Anglia Research Data Management Policy (2019). Your information will be stored securely, and your information will be kept strictly confidential, except as required by law.

Study findings may be published in Peer Reviewed Journals, but you will not be identifiable in these publications if you decide to participate. In this instance, data will be stored for a period of 10 years and then destroyed.

(9) What if I would like further information about the study?

When you have read this information, I (Rachel) will be available to discuss it with you further should you wish and answer any questions you may have. If you would like to know more at any stage during the study, please feel free to contact me via r.sawyer@uea.ac.uk.

(10) Will I be told the results of the study?

You have the right to receive feedback about the overall results of this study. Due to this questionnaire being completed anonymously, however, it will not be possible to provide this on an individual basis. Instead, following completion of the study, an executive summary of the findings will be produced and shared with the Educational Psychology Service with (researcher's host local authority) as well as (Closed social media group). The full written report will also be available via the University of East Anglia's database following successful completion of the project. This feedback will be produced and likely made available before September 2022. Should you wish to have this summary shared with you following completion, please email the researcher via r.sawyer@uea.ac.uk to indicate this.

(11) What if I have a complaint or any concerns about the study?

The ethical aspects of this study have been approved under the regulations of the University of East Anglia's School of Education and Lifelong Learning Research Ethics Committee.

If there is a problem please let me know. You can contact me via the University at the following address:

Rachel Sawyer

School of Education and Lifelong Learning

University of East Anglia

NORWICH NR4 7TJ

r.sawyer@uea.ac.uk

If you would like to speak to someone else you can contact my supervisor, Dr. Nikki Collingwood (same address as above), n.collingwood@uea.ac.uk

If you are concerned about the way this study is being conducted or you wish to make a complaint to someone independent from the study, please contact the Head of the School of Education and Lifelong Learning, Professor Yann Lebeau at Y.Lebeau@uea.ac.uk.

(12) OK, I want to take part – what do I do next?

If you're happy to participate simply click on the following link and complete the online questionnaire: **INSERT LINK HERE**

When you click submit, that tells us that you consent to participate in the study as I have described it to you. Please keep this sheet for your information

Phase Two

Rachel Sawyer

Trainee Educational Psychologist
22nd January 2021

Faculty of Social
Sciences

School of Education and Lifelong learning

University of East Anglia

Norwich Research Park

Supporting 'Emotionally-Based School Non-Attendance': Parents' views on how to
facilitate successful reintegration into education (Phase Two)

PARTICIPANT INFORMATION STATEMENT – Parent

1) What is this study about?

You are invited to take part in a research study exploring parental experiences of 'Emotionally-Based School Non-Attendance' (also known commonly as 'school refusal'). This study aims to learn more about the support received by parents, and how this can be improved in the future through looking at what has worked well in the past. You have been invited to participate in this study because you completed the questionnaire in Phase One of the study and gave your contact details to express your interest in Phase Two. You have also been selected because you indicated that you reside within a local authority that is of interest to this research. This Participant Information Statement tells you about the second phase of the research. Knowing what is involved will help you decide if you want to take part. Please read this sheet carefully and ask questions about anything that you don't understand or want to know more about.

Participation in this research study is voluntary. By giving consent to take part in this study you are telling us that you:

- ✓ Understand what you have read.
- ✓ Agree to take part in the research study as outlined below.
- ✓ Agree to the use of your personal information as described.
- ✓ You have received a copy of this Participant Information Statement to keep.

2) Who is running the study?

The study is being carried out by the following researcher: Rachel Sawyer, Trainee Educational Psychologist, University of East Anglia under supervision of Dr Nikki Collingwood and Imogen Gorman, Educational and Child Psychologist, Lecturer and Tutor on the Doctorate in Educational Psychology (EdPsyD), School of Education and Lifelong Learning, University of East Anglia.

3) What will the study involve for me?

You will be asked to participate in an individual interview with the researcher (Rachel), of which the date and time is yet to be agreed. Due to the ongoing circumstances requiring remote working, the interview will take place virtually, via Microsoft Teams. The interview is expected to last no more than one hour and will be recorded using both video and audio technology. The nature of the technology allows participants to switch off both their audio and video stream at any point during the session should they wish to. During the interview, I will ask broad and open questions around the support you accessed in relation to your child's

emotionally-based school non-attendance, and what was useful/ beneficial about this support. I will also explore how this support may have been impacted by COVID-19 school closures, and your views on how support can be better implemented in future.

It may therefore be useful to consider some of your previous and positives experiences of support prior to the interview. After the interview, the recording will be transcribed and anonymised by the researcher to be used in a wider analysis.

4) How much of my time will the study take?

The interview will not last longer than one hour and will take place at a time that has been mutually agreed by both you and the researcher. You may also wish to spend some time before the interview reflecting upon your experiences to prepare your contributions, however this is not obligatory and is at your discretion.

5) Do I have to be in the study? Can I withdraw from the study once I've started?

Being in this study is completely voluntary and you do not have to take part. Your decision whether to participate will not affect your current or future relationship with the researcher, or anyone else at the University of East Anglia or (host local authority) Neither your child's school, or any other professionals involved in supporting you or your child will know whether you chose to take part and are not affiliated with this research project.

If you decide to take part in the study, you can change your mind at any point before, during and after the interview. You will be free to stop the interview at any time and may also decline to answer any questions that you do not wish to. Unless you say that you want us to keep them, any recordings will be erased and the information you have provided will not be included in the study results. Following the interview, your transcript will be anonymised and therefore only identifiable by yourself and the researcher. If you decide at a later date that you would like to withdraw your information, you will be able to contact the researcher up until the point where they have analysed and published the findings. Should you wish to do this, your information will be removed from our records and will not be included in any results.

6) Are there any risks or costs associated with being in the study?

Considering and reflecting on the support accessed during your child's experience of emotionally-based school non-attendance may lead to feelings of upset, distress or anxiety. This is one of the reasons that the researcher hopes to look at retrospective experiences of these difficulties, rather than those being experienced currently. To manage these risks, the interview questions have been designed under supervision, and will focus primarily on positive experiences of support. As above, you are free to end the interview, or decline to answer a question, at any time, and will receive a debrief information sheet following your participation. You are also welcome to contact the researcher to arrange an opportunity to discuss the interview or seek further forms of support should you wish.

7) Are there any benefits associated with being in the study?

It is hoped that your responses will further understanding of how to best support parents of children experiencing emotionally-based school non-attendance. Your views will therefore contribute to both local and national understanding of how to effectively support parents and families both during and following the pandemic who experience similar difficulties. In addition, themes produced from the analysis of interview transcripts may provide further

understanding into the strengths of current professional practices, as well as insights into how these can be improved or increased. Ultimately, it is hoped that your experiences will inform future practice and intervention, and therefore the support available to families both now and in the future.

It is also hoped that giving you a chance to share your experiences will be both empowering for you and your family, as well as provide the opportunity for positive reflection on your previous experience.

8) What will happen to information about me that is collected during the study?

During the interview, an audio recording of the session will be made and later transcribed by the researcher for subsequent analysis. These recordings will be used for analysis only. During the interview, you will be asked only to discuss your experiences, and all information shared should avoid disclosing personal information of others. However, all information shared during the information will be anonymised, and therefore only identifiable to yourself and the researcher.

Recordings made during the session will be strictly confidential, accessed only by the researcher and her university supervisor and will be stored as an encrypted file. Following transcription of the recording, this file will be destroyed and will no longer be accessible. During transcription, all participant names and information will be redacted. This transcript will then be analysed to identify themes from your responses and will be included as an appendix in the written report for university purposes. If you would like the opportunity to review your interview transcript prior to data analysis, please indicate on the consent form below.

Personal data will be stored until the final report has been written, and then destroyed in line with data management guidelines. This information can be withdrawn at any time.

By providing your consent, you are agreeing to us collecting personal information about you for the purposes of this research study. This includes use for learning purposes as part of a professional doctorate thesis, and an executive summary of research findings to be shared with the researcher's host local authority. You will not be identifiable in either of these uses of the data. Your information will only be used for the purposes outlined in this Participant Information Statement, unless you consent otherwise. Data management will follow the 2018 General Data Protection Regulation Act and the University of East Anglia Research Data Management Policy (2019). Your information will be stored securely, and your identity/information will be kept strictly confidential, except as required by law. Study findings may be published, but you will not be identified in these publications if you decide to participate in this study. In this instance, data will be stored for a period of 10 years and then destroyed.

9) What if I would like further information about the study?

When you have read this information, I (Rachel) will be available to discuss it with you further should you wish and answer any questions you may have. If you would like to know more at any stage during the study, please feel free to contact me via r.sawyer@uea.ac.uk.

10) Will I be told the results of the study?

You have the right to receive feedback about the overall results of this study. You can tell us that you wish to receive feedback by ticking the relevant box on the consent form below. This feedback will be in the form of a short one-two page summary, and you will receive this after data analysis has taken place and the final report has been drafted, which is likely to have occurred before September 2022. Please note that this summary of findings will also be

shared with the Educational Psychology Service within (*host local authority*), as well as the (Closed Social Media Group) and you will not be identifiable within these. The full written report will also be available via the University of East Anglia's database following successful completion of the project.

11) What if I have a complaint or any concerns about the study?

The ethical aspects of this study have been approved under the regulations of the University of East Anglia's School of Education and Lifelong Learning Research Ethics Committee.

If there is a problem please let me know. You can contact me via the University at the following address:

Rachel Sawyer

School of Education and Lifelong Learning

University of East Anglia

NORWICH NR4 7TJ

r.sawyer@uea.ac.uk

If you would like to speak to someone else you can contact my supervisor, Dr. Nikki Collingwood (same address as above), n.collingwood@uea.ac.uk

If you are concerned about the way this study is being conducted or you wish to make a complaint to someone independent from the study, please contact the Head of the School of Education and Lifelong Learning, Professor Yann Lebeau at Y.Lebeau@uea.ac.uk.

12) OK, I want to take part – what do I do next?

You need to fill in one copy of the consent form (overleaf) and return this to Rachel Sawyer via secure email. You will then be contacted to arrange a time for the interview to take place. Please keep this information sheet and the 2nd copy of the consent form for your information.

PARTICIPANT CONSENT FORM

I, [PRINT NAME], agree to take part in this research study.

In giving my consent I state that:

- ✓ I understand the purpose of the study, what I will be asked to do, and any risks/benefits involved.
- ✓ I have read the Participant Information Statement and have been able to discuss my involvement in the study with the researchers if I wished to do so.
- ✓ The researchers have answered any questions that I had about the study and I am happy with the answers.
- ✓ I understand that being in this study is completely voluntary and I do not have to take part. My decision whether to be in the study will not affect my relationship with the researchers or anyone else at the University of East Anglia, or (*host local authority*), now or in the future.
- ✓ I understand that I can withdraw from the study at any time.
- ✓ I understand that I may stop the interview at any time if I do not wish to continue, and that unless I indicate otherwise any recordings will then be erased and the information provided will not be included in the study. I also understand that I may refuse to answer any questions I don't wish to answer.
- ✓ I understand that personal information about me that is collected over the course of this project will be stored securely and will only be used for purposes that I have agreed to. I understand that information about me will only be told to others with my permission, except as required by law.
- ✓ I understand that the results of this study may be published, and that publications will not contain my name or any identifiable information about me.

I consent to:

- **Audio-recording** YES ☐ NO ☐
- **Video-recording** YES ☐ NO ☐
- **Would you like to receive feedback about the overall results of this study?** YES ☐ NO ☐
- **Would you like to review your interview transcript once this has been completed ahead of data analysis?** YES ☐ NO ☐

If you answered **YES**, this will be provided using the original email address used to contact you about Phase Two of the study.

Signature

PRINT NAME:

Date: