Emotionally Based School Avoidance (EBSA) Guidance for Schools and Parents/ Carers

Bristol Educational Psychology Service

TRADING WITH SCHOOLS

Overview and Acknowledgements

Audience: Schools, settings, colleges, parents/carers, Bristol local authority and professionals.

Contributors: This guidance has been produced by the Bristol Educational Psychology Service (EPS) in liaison and collaboration with the Primary Mental Health Specialist (PMHS) Team, the Education Welfare Service, and the Bristol Parent Carers Forum.

We are grateful to West Sussex Local Educational Psychology Service, Somerset Educational Psychology Service and Manchester Educational Psychology Service who have allowed the use of their Emotionally Based School Avoidance Guidance Document as a template.

Overview: The aim of this document is to provide a guide for school staff and parents/carers to support children and young people with Emotionally Based School Avoidance (EBSA) and is based on the current evidence. This is a working document that will be reviewed annually.

Version 1 of this document was published in August 2024. This document will be reviewed by September 2025.

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Introduction to Emotional based School Avoidance (EBSA)

What is EBSA?

There is no perfect term to describe the needs linked to children and young people experiencing difficulties attending school due to emotional factors, however the term 'EBSA' is a commonly used term in the literature.

Emotionally Based School Avoidance (EBSA) is…	Emotionally Based School Avoidance (EBSA) is not…
A broad umbrella term used to describe children and young people who have difficulty in attending school linked to mental health and wellbeing. Many children and young people worry about school, and this is normal. However, sometimes a child's worries may lead to difficulties attending school.	A diagnosis. School refusal – this term is sometimes used in the literature. However, the term could be considered misleading as 'refuser' implies that the young person has control over the school non-attendance. This is problematic as this terminology locates the 'problem' within the young person, rather than considering factors around the child such as in the environment.

There is no single cause for EBSA and there are usually lots of contributing and interacting factors for why a child or young person may be finding it difficult to attend school. Holder (2021) describes EBSA as being a spectrum e.g. some children and young people may still attend school, some may avoid certain lessons, physical spaces or people, other children and young people may not attend school at all (see Figure 1). The onset of EBSA may be sudden or gradual.

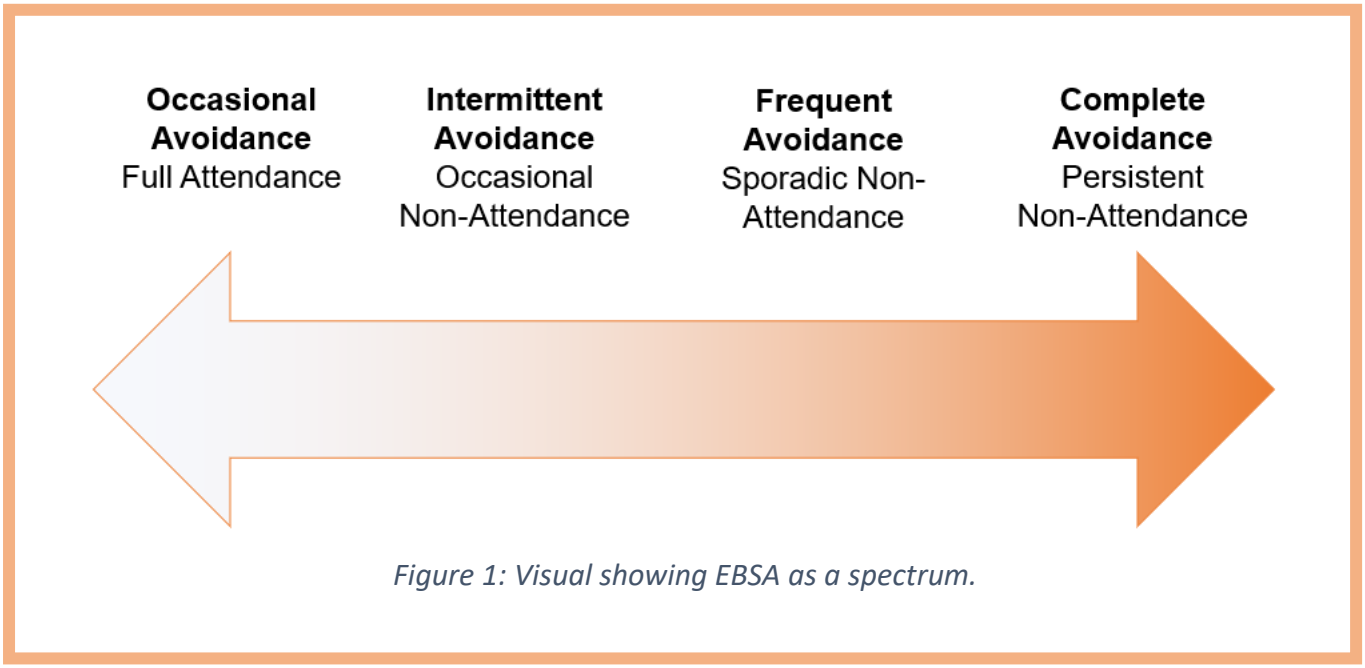


Figure 1: Visual showing EBSA as a spectrum.

Cycle of anxiety and EBSA

Although a certain level of anxiety is considered a normal and natural part of life, some young people may experience high levels of anxiety which impact on their functioning and school experiences.

Anxiety often plays a role in EBSA, and the child or young person may have worrying thoughts about attending school and being able to cope with school. They may also feel physical symptoms like feeling sick, having a fast heartbeat, shaking, or sweating. These feelings might start the night before school or even a few days before. It is important to highlight that some young people experiencing EBSA may appear to recover relatively quickly from the initial upsets of the morning and appear regulated in school, which can mean that their needs are missed. Some children and young people may also hide their feelings while in school, so it is essential that schools communicate with caregivers.

To avoid these overwhelming emotions and the fear associated with school, the young person may avoid or withdraw from the situation. They may present as not feeling able to get ready for school, go to a lesson, or even leave the house. These behaviours, and the avoidance of school, may then contribute to the cycle of EBSA over time (See Figure 2). It is important to note that this model might not be appropriate for all situations or all children and young people. It is also essential to consider factors of the school environment that may be preventing a child or young person from attending school. Relevant adaptations will need to be made. For instance, making changes to meet a child or young person's sensory needs.

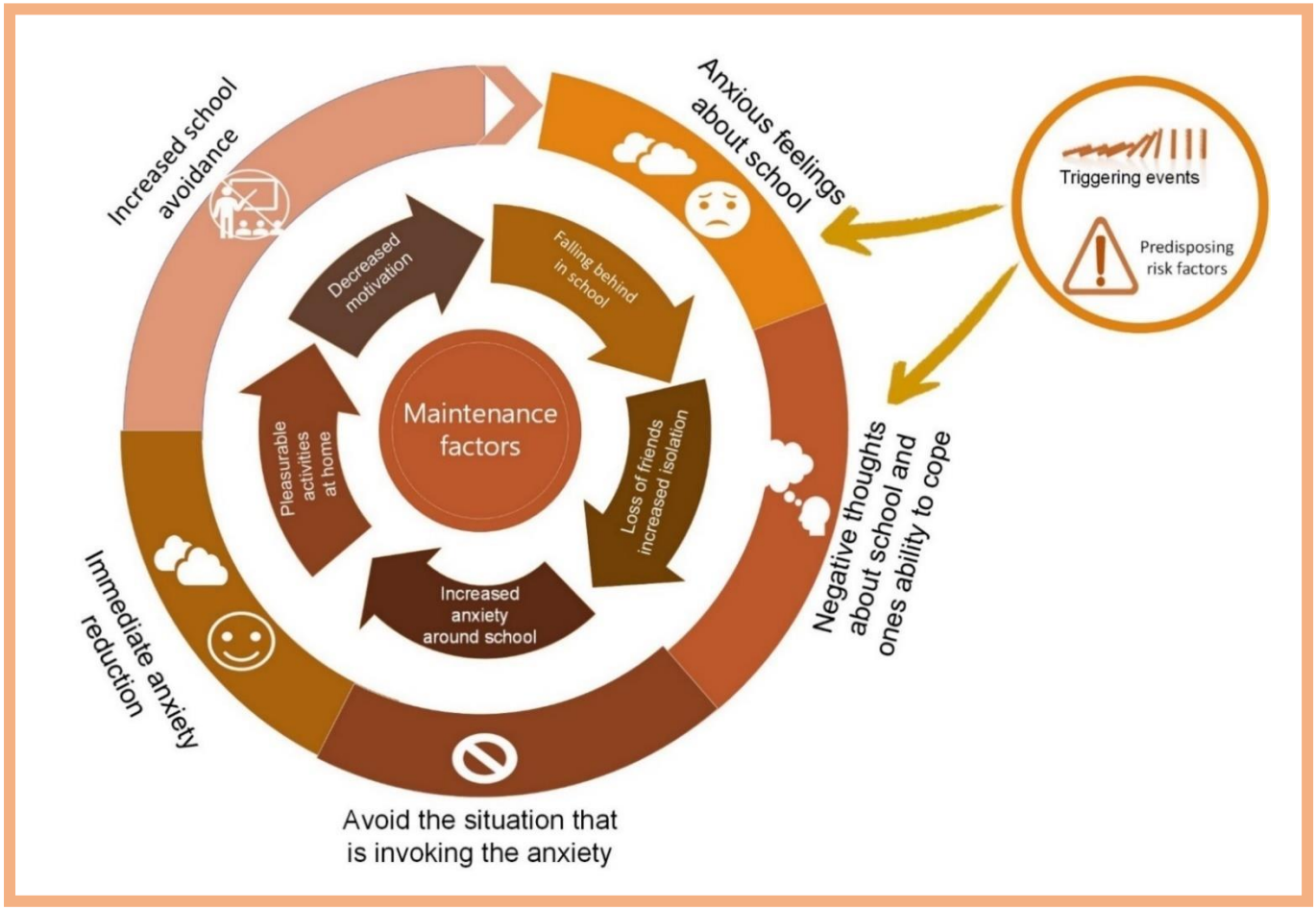


Figure 2: Diagram showing initial anxiety causing EBSA and the secondary maintenance factors (based on Holder, J. (2023) EBSA Horizons. EdPsychEd)

Risk and protective factors relating to EBSA

EBSA occurs when stress exceeds support - when risks and challenges are greater than protective factors (see figure 3).

Figure 3: Visual showing that sources of stress exceed sources of support

Risk factors associated with EBSA

There have been factors identified that place children at greater risk of EBSA. It is usually a combination of interacting factors and changes in circumstances which lead to EBSA. The exact nature of the vulnerability factors and circumstances will vary between contexts and for individual children. However, it is still possible to identify common factors and the potential triggers leading to EBSA. Being aware of these factors can enable preventative action.

Some examples of risk factors include...

Risk factors associated with EBSA			
Community factors	**School factors**	**Family factors** (some of these are known as 'Adverse Childhood Experiences')	**Child Factors**
Racism Social media Gang membership Transport/ journey to school Community safety National/international health crisis (e.g. Covid-19 pandemic)	Bullying Peer or staff relationship difficulties Difficulties in specific subjects Transition to secondary school, key stage, or change of school. Structure of school day Academic demands/high levels of pressure and performance-orientated classrooms Transport or journey to school Exam pressure Lack of reasonable adjustments for SEND	Parental separation or change in family dynamic Parental physical or mental health needs including where a child is a young carer Loss and bereavement Challenging family interactions Being the youngest child in the family High levels of family stress Family history of EBSA Family response to managing anxiety	Difficulties managing emotions Mental health concerns Fear of failure and poor self confidence Physical illness Age (5-6, 11-12 & 13-14 years) Learning, developmental needs, or autism. Experiences separation anxiety from parent/ carer. Traumatic events/ experiences. Having SEND

Promoting protective factors

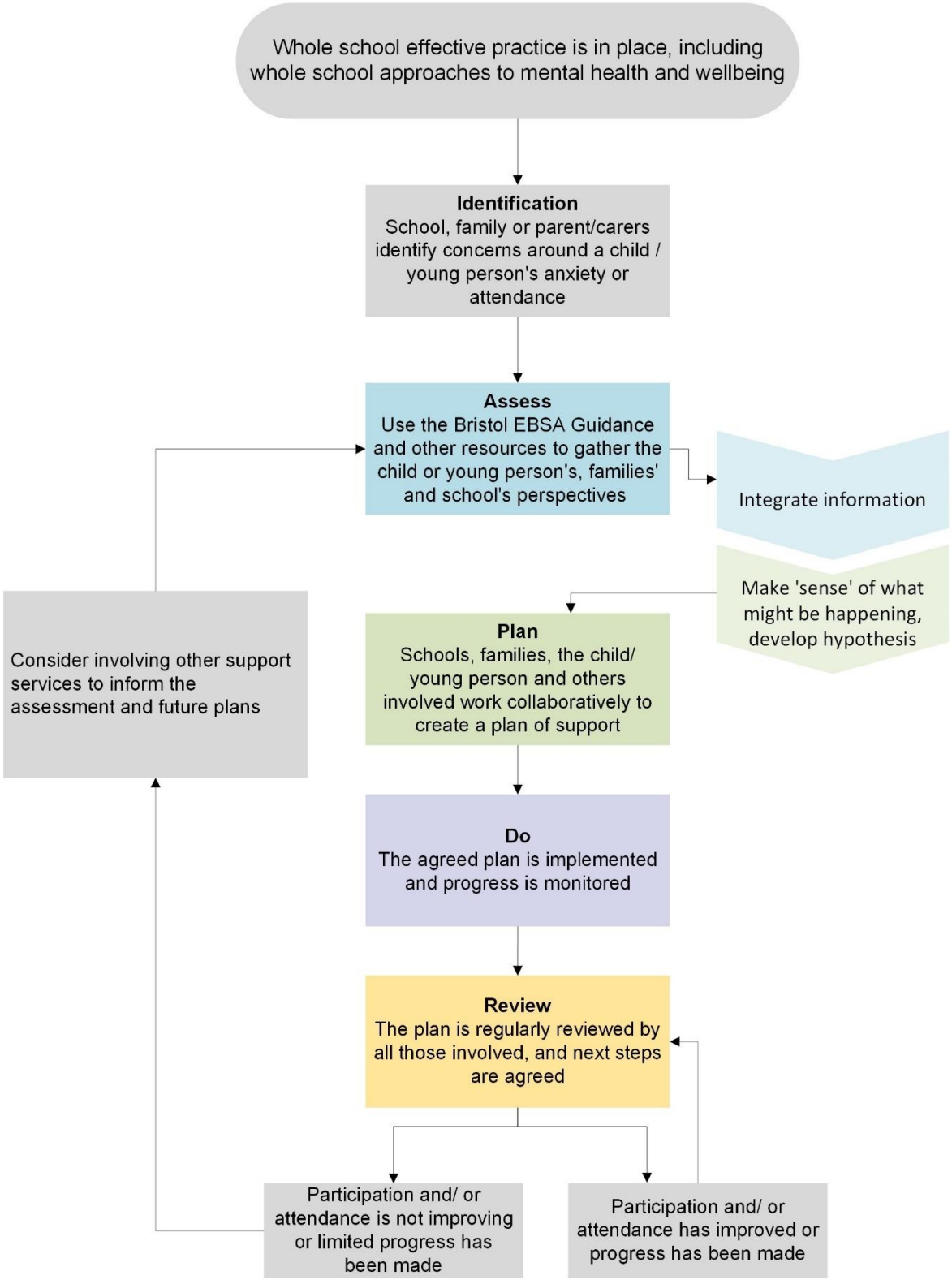
Just as there are risk factors associated with increased risk of EBSA, there are also protective factors that reduce the likelihood of EBSA. When working with individuals it is important to also identify and build areas of strength for the child, family, school or community which may help to 'protect' the child and promote school attendance.

Some examples of protective factors include...

Protective factors to reduce likelihood of EBSA			
Community factors	**School factors**	**Family factors**	**Child Factors**
Strong links with community organisations and support services. Strong transport links	Willingness to work in partnership between school, family and external professionals. Developing a deeper understanding of EBSA, anxiety, emotional wellbeing, and the child/young person Flexibility of approaches within school. Listening to and acting upon the voice of the child. A commitment to offering opportunities to promote the resiliency factors listed in "child factors". Understanding the relationship between thoughts, feelings and behaviour. Positive relationships with peers and staff	Willingness to work in partnership between school, family and external professionals. Developing a deeper understanding of EBSA, anxiety, emotional wellbeing, and the child/young person Access to support structures outside of immediate family.	Feeling listened to and understood Feelings of safety, security, and a sense of belonging A sense of ambition, aspiration, and motivation Experiencing success

What can we do?

Here is a suggested flowchart of the processes that would be followed for children and young people experiencing EBSA. Identification is the first step, followed by the assess, plan, do, review process. More information about each of these stages can be found in the sections following this.



Identification

Schools play a crucial role in the early intervention and identification of EBSA by implementing effective whole school systems as a first step (see Figure 4).

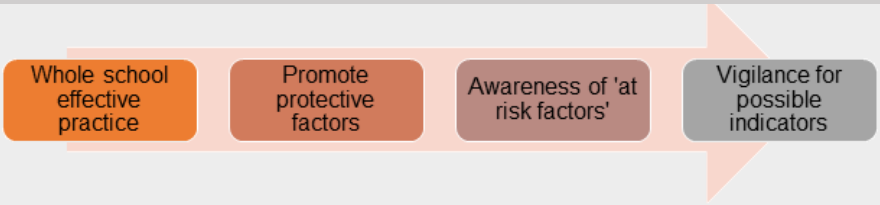


Figure 4: Factors that support early intervention and identification of EBSA

One aspect of successful identification is having effective attendance monitoring and recording processes. The DfE Working Together to Improve School Attendance statutory guidance outlines the responsibilities for schools, trusts, governing bodies and local authorities in relation to attendance. This includes a responsibility for schools to keep school attendance and admission registers and sharing this information. Additional non-statutory guidance produced by the DfE on schools responsibilities where a mental health issue is affecting attendance is also available, which states that *"Schools must record absences as authorised where pupils cannot attend due to illness (both physical and mental health related)"*.

It is important to be proactive to indications of EBSA. The longer the problems remain unaddressed, the more likely these difficulties will become harder to resolve. Below is a list of possible indicators of EBSA, which can help key adults working with children and young people they are concerned about identify areas of risk.

- Difficulty attending school.
- Reluctance to leave home.
- Reluctance to leave parents or get out of the car.
- Regular absence without being involved in unsafe behaviours in the community.
- Frequent absences for minor illnesses.
- Patterns in absences, e.g. particular days and/or subjects, after weekends and holidays.
- Reluctance to attend school trips.
- Unable to attend classes despite desiring to.
- Anxiety on separation and/ or worry about the safety of those at home.
- Evidence of under-achievement of learning potential.
- Social anxiety and isolation, including in specific situations at school.
- Notable emotional upset or changes to mood.
- Complaints of feeling ill on school days.
- Low self-esteem and lack of confidence.
- Presenting as withdrawn.
- Physical changes i.e. sweating, sickness, aching limbs, headaches, panic attacks, abdominal pain, rapid weight loss or gain.

The rest of this section focuses on the Assess, Plan, Do, Review cycle (Figure 5).

Figure 5: The assess, plan do review cycle

Assess

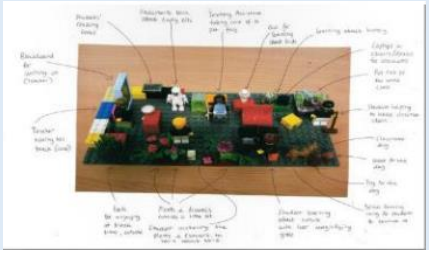
Due to the complex nature of EBSA, there is no fixed 'assessment process'. However, in all cases it is essential the views of the child/ young person, the family and key school staff are gathered and listened to. Each person may have a different perspective on the EBSA and have a different story to tell. It is essential that different people's views are respected and differences in views are acknowledged. One tool to support this could include a round robin to gather information from school staff. Information from the ATTEND Framework can also be used to support with the assess stage. Any assessment will need to take into consideration any special educational needs and potential barriers to learning. Assessment can be done through working with the child or young person, and working together with parents, carers and school staff.

Working with the child or young person

Talking about school with a young person who is experiencing EBSA is likely to raise their anxiety. A good place to start any assessment with a young person is to acknowledge it may be difficult, but you would like to know what they think and feel. It is important that the adult does not dismiss anxieties or worries the child has and empathises with the young person, without encouraging these worries. The approaches taken will depend on the child's age, level of understanding and language. Some children find it difficult to verbalise what they are thinking and feeling. Therefore, some may prefer to draw what they are feeling or have visual prompts. Some helpful activities for gaining the pupil's views around school and EBSA are included below (including hyperlinks to resources).

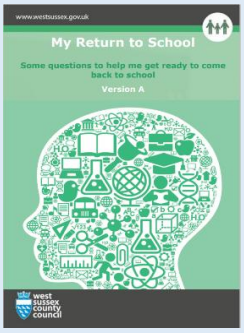
School wellbeing cards - Sorting cards to identify risk factors and resilience factors.

Ideal school and the **ideal classroom** - these tools elicit the child's views about school, thinking about their ideal school and less ideal school or classroom through drawing or Lego.

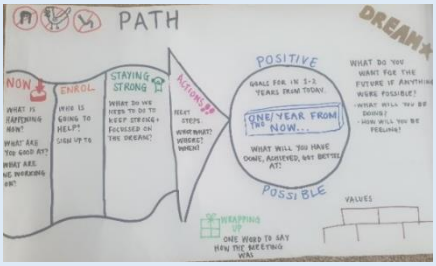


Rating activities – One helpful way of exploring how a young person feels about an activity is through using a rating system such as red, amber and green. This could include colour coding how they feel about different areas in the school, or how they feel about different situations

The Return to School Planning Tool by West Sussex Educational Psychology Service - This planning tool has been designed to help schools and relevant professionals gain a greater insight into young people's experiences of their time at home (not attending school), as well as their thoughts and feelings around preparing for a return to school.



Person-centred planning tools
Being person-centred is about listening to the young person and building support around what they tell us. Some different frameworks to support person-centred planning meetings include Planning Alternative Tomorrows with Hope (PATH) and Making Action Plans (MAP)



Working together with parents, carers, and school staff

It is important that schools, parents, and carers take time to build a relationship and work together to understand what might be happening. It is important to gather information about the background and the current situation from home and school's perspective, with the family having their views heard. It is helpful if a designated key person from school is identified to communicate with parents/carers. Additional information to support discussions between parents, carers, and schools is included in Appendix 1.

Plan

Following the gathering of information from the child, family, school, and any other professionals, it is essential that this information is considered jointly. This may include creating an overview of the whole picture, the factors involved, and key barriers for the child or young person. It may be possible to identify possible reasons or explanations for what is happening. This information should then inform a school support plan. Plans need to:

- Be ***co-produced*** by schools, parents/carers, the young person and any other appropriate people (e.g. professionals involved, other family members).
- Be ***realistic and achievable.***
- Focus on ***gradual approaches***.
- Be ***optimistic*** and take each day as a new one.
- Be ***individual and flexible***.

Do: What strategies can schools and families put into place?

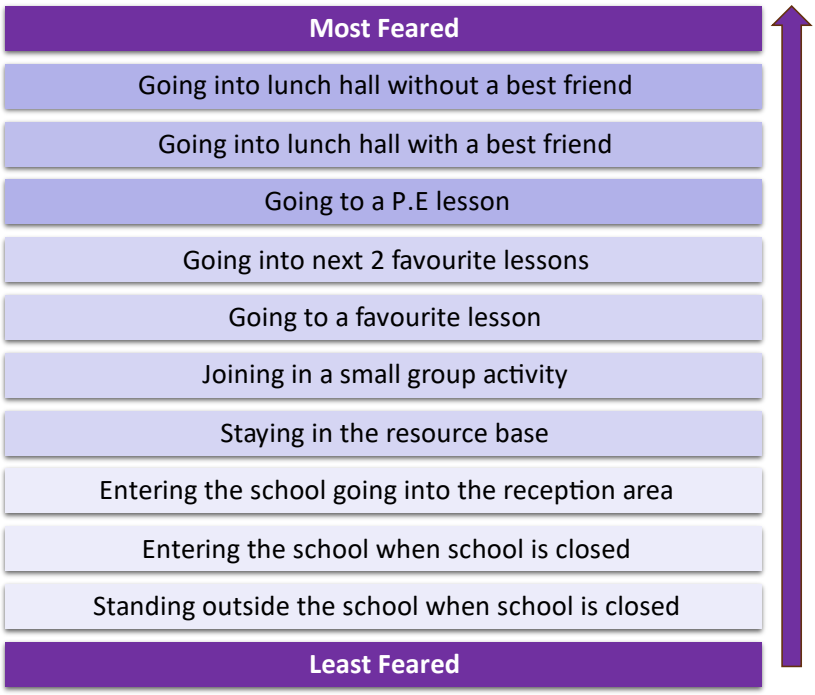
It is helpful to think about strategies and adaptations that seek to reduce the risk factors that are driving EBSA, while strengthening the protective factors. The strategies need to be person-centred and based on individual needs and circumstance (e.g. developmental age). It is essential that schools, families, and children and young people work collaboratively. Below is a summary of school-based, child-centred, and home-based strategies to consider.

School factors: How can schools support young people and their families with EBSA?

Schools can provide support for young people experiencing EBSA both at a universal level (i.e. provision that should be available to all children and young people so they can thrive in their setting), as well as at a targeted level. The plan should include adjustments and targets that are jointly agreed with the child or young person. Any plan will need to be regularly reviewed (see https://schools.westsussex.gov.uk/Pages/Download/42ce391e-54b7-4b87-8202-62c49965f6b2/PageSectionDocuments for an example template).

Examples of universal key school actions	
Check ***reasonable adjustments*** have been made through Ordinarily Available Provision.	
Using a whole school approach to mental health and well-being	Schools have an important role in supporting the mental health and wellbeing of their pupils. They can support at a whole school level by developing a culture which prioritises wellbeing, is safe and supportive and this can reduce the risk of EBSA. Some ideas to achieve this include: • Using whole school guidance documents such as: Home : Mentally Healthy Schools) ; Promoting children and young people's mental health and wellbeing (publishing.service.gov.uk) • Using relational-based approaches (e.g. building connection and belonging). Please ask your link EP or school MHST for suggestions and resources. • Normalising a range of emotions and help pupils feel safe to express these. • Exploring social needs and friendships and using anti-bullying approaches • Staff training to increase awareness and understanding of EBSA • Keeping in mind best practise for neurodivergent pupils due to the higher prevalence rate of EBSA for neurodivergent children and young people. • Considering the sensory environment and adjustments
Joined up working with families and children / young people	Listen to families and the child or young person. Show understanding of and acting upon what is said. Focus on creating a collaborative working partnership between home and school, with schools being there to support families and work towards the best interest of the child or young person.
A co-ordinated approach to transitions	Plan for transitions (e.g. for early years to primary transition and for primary to secondary transition). Consider using transitional objects, creating photobooks, making social stories, setting up meet and greets, additional visits etc.
Examples of targeted key school actions	
Promoting a sense of belonging and safety in school	• Making sure positive and trusting relationships with key adults are developed e.g. planned check-ins or meet and greets with key adults. This includes with the class teacher, form tutor or head of year. • Support the child or young person's arrival to school. For example, through buddying, the use of a quiet space to settle before school starts, a special morning routine such as engaging in a preferred activity or being given an area of responsibility. • Support social relationships and respond to bullying (e.g. lunchtime/ after school clubs, support with the repair of relationships with peers, buddying systems, considering peer groupings and seating position).

	• A key member of staff to maintain contact with caregivers and the child or young person, even during extended periods of non-attendance. • Use of identified safe spaces that can be accessed. • Support predictability in school e.g. visual timetables
Group or individual interventions to develop specific skills	• Teach about and normalise different emotions, including how they feel in the body and strategies to regulate. This could include emotional literacy interventions, and interventions based on principles from Cognitive Behavioural Therapy (CBT). Please see Appendix 2 for more information and specific resources that can be used. • Targeted work/ intervention around building social skills. • Intervention to support the child or young person to build a positive sense of self and reflect on what has/is going well (e.g. gratitude journal, focus on strengths and achievements, discuss aspirations). • Providing academic support such as targeted intervention if learning needs are contributing to EBSA
Creating individualised re-integration plans	• Ensure you have an effective support (reintegration) plan, supporting young people when they return to school, and include planning for any setbacks. Some children and young people may require schools to be flexible around timetabling and some may need home learning or virtual learning during periods of transitioning back to school. • Please see the DfE Working Together to Improve School Attendance statutory guidance page 18, for information about use of part-time timetables. • Hold regular joint meetings (school, home and child/young person) and ensure they are accurately recorded, agree actions to be carried out (i.e. by whom, when by, impact). • Using a gradual and staged return to school or a situation can be helpful. For some children and young people, this may include community-based goals. An exposure ladder/hierarchy (see Figure 7) could be created with the young person from least feared school situations to most feared (e.g. Graded Exposure - TalkPlus).



For each situation, the child or young person will need to be supported to think about:

- What **coping technique** they will use (e.g. relaxation, thinking, distraction)
- What **support** will be in place (e.g. key worker available, time out card, access to secure/quite base)

Some situations may need to be broken down into even smaller steps

Figure 6: Example of a graded exposure ladder.

Home based actions: how could families support their young person with EBSA?

- Jointly working with school or educational setting and raise any concerns early on. Working closely together is key.
- Work with the setting to focus on increasing the appeal of school (rather than decreasing appeal of home).
- Support routines and transitions for example:
  - Visual timetables for home routines
  - Prepare scripts for saying goodbye
  - Consider Sunday night and Monday morning plans. More information and resources from Dr Tina Rae: YouTube Link and Positive Young Minds Blog
  - Use transitional objects (e.g. photo of the parent in pocket, special charm on bag, note in child's lunchbox, heart drawn on hands, spritz of perfume)
- Consider phone calls to check in with your child at school, especially if a family member has been unwell. Plan to gradually decrease this over time.
- Prioritise child's mental health and wellbeing (e.g. NHS 5 ways to wellbeing model)
- Attend parent carer training sessions (e.g. Bristol Parent Carers, Bristol City Council parenting courses)
- Additional information and support for families can be found at:
  - Parents - Emotionally Based School Avoidance.pdf
  - Young Minds Parent survival guide
  - The charities: Not Fine In School and Square Peg

Other professionals

In addition to the collaborative parent /carer and school relationship, it may be that referrals to other professionals are made and they become involved in providing support. As part of this professionals may find it beneficial to work together to ensure there is a joint-up approach, e.g. through a multi-professional meeting.

Other professionals and services who **may be** involved include:

- Primary Mental Health Specialists (PMHS)
- Child and Adolescent Mental Health Services (CAMHS)
- School Health Nurses
- Health services such as Speech and Language Therapy (SALT) and Occupational Therapy (OT)
- Education Welfare Officers (EWOs)
- Mental Health Support Teams (MHSTs)
- Educational Psychologists (EPs)
- Pathways for Short Breaks team (Bristol Autism Team)
- Families in Focus & Social Care
- School staff can contact the Inclusion Hub Team (previously known as ALP Hub Team) for support and signposting.
- External Services to work directly with children and young people e.g. OTR, Kooth, YoungMinds, medical professionals such as GPs

Review

It is essential that any plan to support EBSA is regularly reviewed. There should be set dates for reviewing the plan with key people attending. It is essential that the child or young person and their caregivers are actively involved in the review, with their views and aspirations included.

The review should identify and celebrate any progress made and whether there is any further information to help inform clear next steps. These next steps can include:

- Consolidating and maintaining the current support plan.
- Setting new outcomes and or actions for the young person, school and caregivers.
- Identifying if further consultation with other agencies needs to occur.

EBSA and autism

Schools are complex social and sensory environments that autistic children and young people can find exhausting and can lead to increased anxiety. Elevated feelings of anxiety have been shown to be common in autistic individuals. The research also suggests that there is a higher prevalence rate of EBSA for autistic children and young people.

Figure 7 shows an example of some of the factors that can feel overwhelming for autistic children and young people in the school environment. These children and young people may spend considerable energy trying to manage these feelings in school and may become overloaded as a result. The factors which influence levels of anxiety in autistic children and young people are multiple and often complex. However, it is important to appreciate that anxiety is not simply a part of autism and can be supported in its own right.

Figure 7: Potential factors leading to overload for autistic individuals.

Supporting autistic children and young people experiencing EBSA

As with any child or young person experiencing EBSA, tailoring support to meet their individual needs and making adaptations to their school experience will be essential. Much of the targeted support and actions outlined above are also relevant to supporting autistic children and young people, when matched to their needs.

Anxiety levels can also be reduced by adopting good practice approaches for supporting autistic children and young people in schools, including visual supports, structure, managing change, increasing the predictability of the school day, and supporting sensory needs. Information from the Bristol Autism Team and on the Bristol's SEND local Offer page highlights support for autistic children and young people and their families.

A more detailed account of supporting autistic children and young people experiencing EBSA is available in the West Sussex Guidance.

Additional resources (signposting to other services, links to other resources)

DfE resources

- Summary of responsibilities where a mental health issue is affecting attendance (publishing.service.gov.uk)
- Support for pupils where a mental health issue is affecting attendance: effective practice examples (publishing.service.gov.uk)
- Promoting children and young people's mental health and wellbeing (publishing.service.gov.uk)
- Working together to improve school attendance (publishing.service.gov.uk)
- SEND code of practice: 0 to 25 years - GOV.UK (www.gov.uk)

EBSA guidance documents that have been drawn upon and have additional information

- West Sussex EBSA Guidance
- Somerset EBSA Guidance
- Manchester EBSA Guidance

Appendices

Appendix 1: Information gathering (possible prompt questions)

- What is the child or young person's strengths, interests, and aspirations?
- What is going well for them?
- What do they find difficult?
- How do they get on with peers?
- How do they get on with adults? (Family and school staff)
- Are they engaged and motivated with their learning? Are they making progress? If not, what are the barriers/reasons? Does the child or young person have any SEND?
- What were their early experiences at school? (e.g. start of Primary, start of Secondary)
- What are their views? Do they have any specific worries? What do they say they find difficult about school? Have they mentioned anything that is going well in school (e.g. teachers, lessons, friends)?
- Have you observed any emotional difficulties at school? What have these been about and when do they occur? Are they able to talk about how they are feeling?
- Have there been any changes or losses within the family of child or young person's life? (Drawing a family tree may be helpful for understanding who they are close to)
- What does a typical day look like when they go to school? What does a typical day look like when they don't? (Describe from the moment they wake up until they go to bed)
- How does the child or young person's non-attendance impact family members?
- What is your understanding of the attendance difficulties from the perspective of: parents/ carers, school staff, the child or young person? Why do parents/carers think the child or young person has difficulty attending school? Are there any differences of views?
- Have there been times when the child or young person found it easier to attend school? What was different about those times?
- What support does the school provide for the child or young person? How do they respond to this? What has been most helpful thing so far? What has helped in the past?
- What do you think would help the child or young person in school?

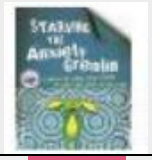
Appendix 2: Anxiety management: helpful strategies and resources

When anxiety is within expected ranges, it can be helpful to develop children and young people's understanding of their experience of anxiety and school (this is also known as 'psychoeducation'). We can explain that it is often normal to be anxious about certain aspects of school and that school can be a stressful and demanding place. It can be helpful to teach and practise using alternative models for coping with anxiety. These can include deep breathing, mindfulness, grounding activities, sensory breaks, calm boxes, etc.

Resource List for Anxiety Management

- Young Minds for support around anxiety
- Anna Freud Centre for resources to support children and young people who are worried
- Think Ninja is a mental health app designed for 10 to 18 year-olds
- Worksheets for anxiety
- The Anxious Child: A booklet for parents and carers wanting to know more about anxiety in children and young people.
- Thinking Anxiety- Learning to Face Fear, a Ted Talk by Dawn Huebner – a useful for parents and school staff

The below resources are based on principles from Cognitive Behavioural Therapy (CBT), which looks at the relationships between thoughts (cognition), feelings (emotions) and actions (behaviours).

	'Homunculi Approach to Social and Emotional Wellbeing: A Flexible CBT Programme for Young People on the Autism Spectrum or with Emotional and Behavioural Difficulties' by Anne Greig and Tommy MacKay (appropriate for age 7 plus)
	Starving the Anxiety Gremlin: A Cognitive Behavioural Therapy Workbook on Anxiety Management for Young People by Kate Collins-Donnelly (primary and secondary school aged versions available)
	Helping Your Child with Fears and Worries (2nd Edition): A self-help guide' - by Cathy Creswell and Lucy Willetts (also entitled, 'Overcoming Your Child's Fears and Worries: A Self-help Guide Using CBT' (1st Edition).
	Think Good Feel Good: A Cognitive Behavioural Therapy Workbook for Children and Young People, by Paul Stallard. (Appropriate for 7–14 year olds)
	A Clinicians Guide to Think Good, Feel Good: Using CBT with Children and Young People, by Paul Stallard.
	What to do when you worry too much: A kids guide to overcoming anxiety by Dawn Huebner (appropriate for 6-12 year olds)