

**“I think the school listened...and they were flexible enough to act on it.” Emotionally based school avoidance: an exploration of factors contributing to positive outcomes for secondary school children.**

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## Abstract

School absence affects children's social, emotional and academic development, reduces social opportunities, limits employment prospects and can result in/foreshadow poor adult mental health. Tackling this problem early is crucial for improving children's future opportunities. UK statistics indicate an incremental increase in persistent absences, exacerbated following COVID-19. The UK government has recently highlighted that working to improve attendance is 'everyone's business'. Educational Psychologists, who work with children, families and schools, are well placed to support children experiencing emotionally based school avoidance (EBSA). This study explores perceived factors that helped two secondary-age school students to reintegrate into school, following EBSA. It seeks to understand their cases within a local context, with a case study design, to build 'practice-based' evidence that can support the development of an EBSA pathway for the Local Authority, as well as contribute to a larger set of qualitative data on what is a highly relevant current topic. A qualitative methodological approach has been employed. Data was collected using semi-structured interviews, to capture the perceptions of children and young people (CYP), parents, school staff and professionals regarding the factors that contributed to CYP's reintegration into school. Reflexive Thematic Analysis indicated that trusting relationships promoted CYP's sense of safety in school, supporting their reintegration. Additional themes identified were 'the importance of a positive, supportive and inclusive school ethos' and 'the key role of a collaborative supportive network around the child'. CYP's individual qualities and intrinsic motivation were also found to contribute to their reintegration in school, while a person-centred approach promoted their sense of competence and autonomy. These results support the idea that EBSA is a complex, multi-faceted phenomenon, which can be tackled if various factors come together to support reintegration. The findings raise implications [and lessons] for schools and professionals, for policy makers and, in particular, for Educational Psychologists.

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# Introduction

## 1.1 Overview

This thesis investigates the factors supporting the reintegration of children and young people (CYP) into school after a period of non-attendance due to emotional reasons. Whilst terminology varies across published literature (see Tamlyn, 2022 for detailed discussion), the term for such absence selected for this study is emotionally based-school avoidance (EBSA), in line with the current established terminology in the UK educational psychology community (West Sussex County Council [WSCC], 2018; Rae, 2020). In this introductory chapter, I set this phenomenon in a national context, particularly in light of the COVID-19 pandemic. Issues around the conceptualisation and definition of EBSA, as well as its prevalence, are discussed. Factors at the individual, family, school and wider context that have been known to affect EBSA are explored, as they link to the factors supporting children's reintegration into school. EBSA from the stance of the educational psychologist (EP) is examined. I conclude the chapter by introducing the present research and its aims.

## 1.2 School Attendance: an international and national priority

The United Nations Convention on the Rights of the Child to education, states that countries should “take measures to encourage regular attendance at schools and the reduction of drop-out rates” (art. 28, 1989). In the UK, CYP are legally required to receive full-time education at school or through home education (Education Act, 1996). The UK government recently proposed new statutory advice on attendance, including a requirement that each school publish a ‘clear’ attendance policy (Department for Education [DfE], 2022).

Children's social, emotional, and academic development is significantly impacted both in the short and long term when they do not attend school (Kearney, 2008). School absence is



related to decreases in educational and social engagement (Gottfried, 2014), as well as reduced social opportunities, limited employment prospects and poor adult mental health (McCune & Hynes, 2005; Sobba, 2019; Taylor, 2012). Recent government attendance guidance highlights what research has already shown: regular school attendance is key to “attainment, wellbeing, and wider life chances” (DfE, 2022, p.7), particularly for the most vulnerable CYP with absence rates being the biggest predictor of progress made by pupil premium students<sup>1</sup> (Riordan, 2022). Hence, attendance is and should be at the core of educational policies and school priorities.

## **1.2 Prevalence of attendance difficulties**

Accurately identifying students who are missing from school is complicated. In the US, prevalence of EBSA estimates that it approximately affects 2% to 5% of all school-aged children (Sewell, 2008; Chitiyo & Wheeler; 2006) and up to 7% in fourth and sixth graders (Kearney, 2008). UK statistics indicate that 24.2% of pupils were persistently absent in the Autumn 2022/23 (i.e. missed 10% or more sessions, DfE, 2023). The recent Attendance Audit conducted by the Children’s Commissioner (2022) revealed that severe absenteeism (students missing at least 50% of sessions) and persistent absence (students missing at least 10% of sessions) have averages of 1.5% and 22%, respectively.

Emotional difficulties are one of the reasons for students’ persistent absenteeism. In the UK, estimates of prolonged absence from school with an element of anxiety are believed to impact between one and two percent of CYP (e.g. Gregory & Purcell, 2014) although it is difficult to ascertain the exact prevalence <sup>2</sup>( Mortimer, 2018). It has been suggested that this estimated

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<sup>1</sup> Pupil premium is a grant given by the UK government to improve educational outcomes for disadvantaged pupils in state-funded schools in England (DfE, 2023).

<sup>2</sup> This is due to differences in operational definitions, data collection techniques, as well as ways of tracking absence across different Local Authorities.

prevalence conceals a noticeably larger occurrence among older students and certain communities (Gulliford & Miller, 2015). Moreover, during COVID-19 it has been difficult to generate an accurate picture due to missing attendance data and COVID-19 related absences that may mask problematic unattendance.

### **1.3 National context and COVID-19**

Recent government figures show absentee rates remain significantly higher than pre-pandemic levels (DfE, 2023). According to a report by Children's Commissioner (2022) more than 124,000 children had not returned to school after COVID-19 related lockdowns, despite children's reported desire to be at school. Critically, this increase in persistent absence has had an unequal effect on more vulnerable children: those who have a social, emotional, and mental health (SEMH) needs<sup>3</sup> are more likely to be persistently absent<sup>4</sup>, while the rate of severe absence for children on special educational needs and disabilities (SEND) support<sup>5</sup> is almost three times greater than for children with no identified SEND (Centre for Social Justice [CSJ], 2022)<sup>6</sup>.

### **1.4 Attendance difficulties, mental health (MH), and Special Educational Needs and Disabilities (SEND)**

Children's MH is a major concern in the UK, with NHS data stating that 18% of 7- to 16-year-olds (almost 1 in 5) had a probable 'mental disorder', an increase from one in nine in

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<sup>3</sup> SEMH is one of the four broad areas of children's SEND identified by the Special Educational Needs and Disability Code of Practice 0-25 years (DfE, 2014; paragraph 5.32).

<sup>4</sup> Children with a probable mental disorder were twice as likely to have missed this much school (18.2%) as those unlikely to have a mental disorder (8.8%), (NHS digital, 2021)

<sup>5</sup> SEND support is support given by schools for children who have Special Educational Needs to help them achieve their potential. This is support that is additional to or different from the support generally made for other children, like speech therapy.

<sup>6</sup> It has been highlighted that "it is critical that we act with urgency to find the 'ghost children' of lockdown. The longer we wait, the harder it will be to get them back into the classroom." (CSJ, 2022, p.19).

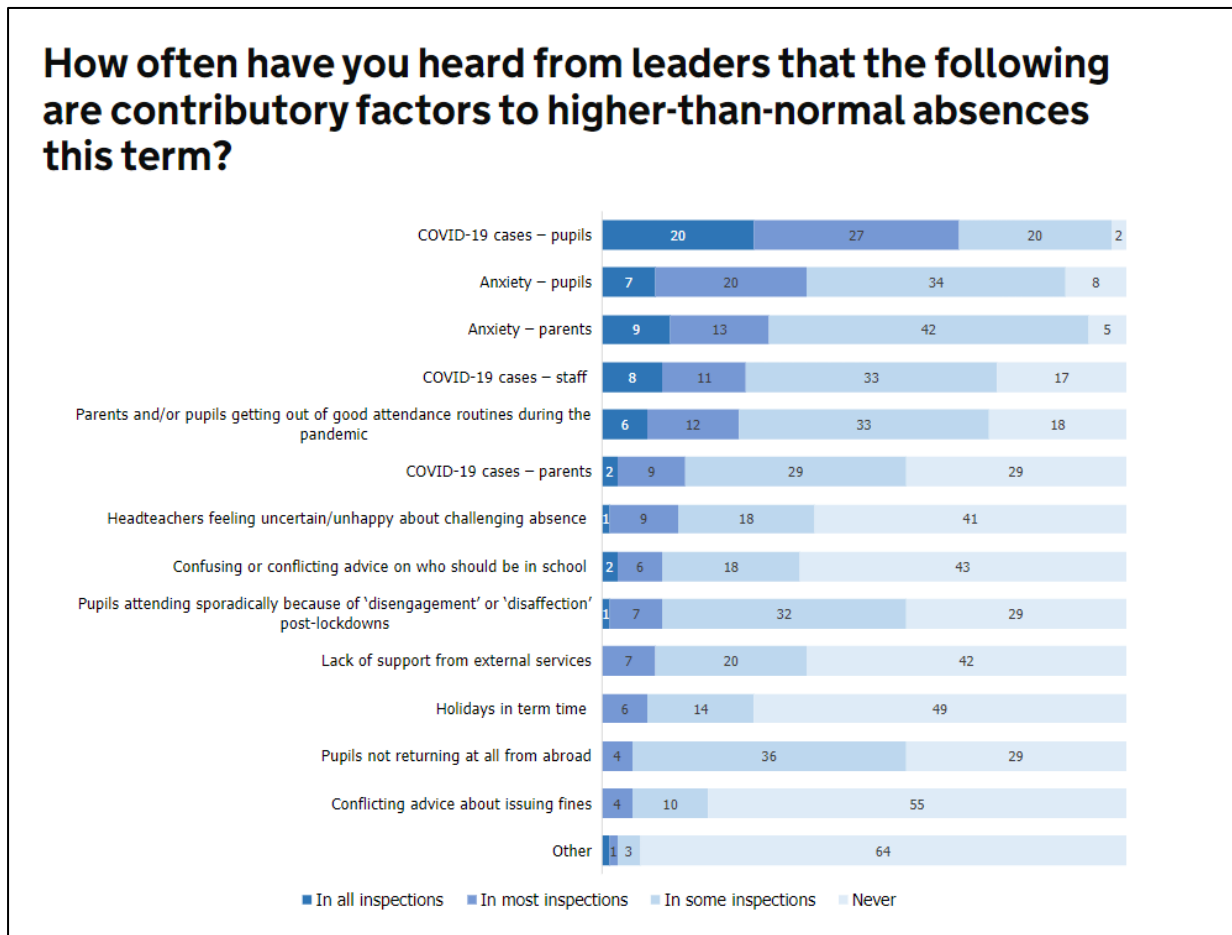
2017 (NHS digital, 2022). The same report indicated that 11- to 16-year-olds with MH difficulties were less likely to feel safe at school (61.2%) and less likely to report enjoyment of learning or have peer support, than those without MH difficulties (NHS digital 2022). Moreover, one in five children report worries about their MH and say that wellbeing is a priority for them (Children's Commissioner, 2022). Although COVID-19 has contributed, the pandemic simply marked the 'tip of the iceberg' in a situation that was already critical (UNICEF, 2021, p.8). Numerous studies suggest that poor mental health is linked to lower school attendance, with anxiety being one specific risk factor identified in the literature (Finning et al, 2019; Creswell et al., 2020) and research indicating that approximately half of CYP experiencing chronic attendance difficulties have anxiety disorders (Maynard et al., 2018). Hence mental health difficulties are likely to be driving persistent absenteeism in the UK, as data collected from OFSTED<sup>7</sup> emphasises (figure 1).

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<sup>7</sup> Ofsted is the Office for Standards in Education, Children's Services and Skills. It is a non-ministerial government organisation reporting to Parliament. They inspect services providing education and skills for learners of all ages, including schools in England. They report directly to Parliament, parents, carers and commissioners.

**Figure 1.**

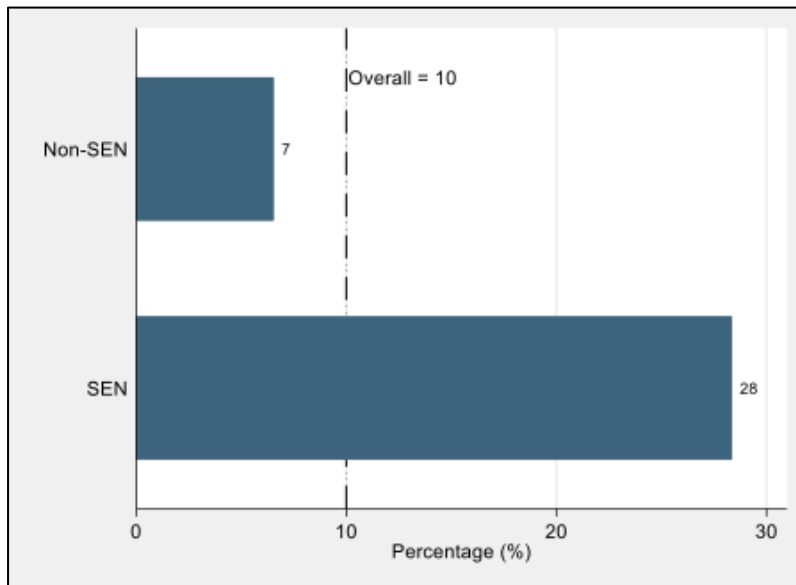
*Reasons behind children's absence according to school leaders from a HM Survey conducted in Autumn 2021.*



Research suggests that CYP with SEND are more likely to experience a higher level of anxiety than those without (Nelson & Harwood, 2011a) resulting in 'school refusal' and absenteeism (Filippello et al., 2020), particularly in CYP with autism (Ochi et al., 2020; Munkhaugen, et al., 2017). More recently, Shao et al. (2023) showed important differences in persistent absence by socio-economic status, poverty, demographics, mental health and SEND status. Pupils facing MH challenges are more likely to be absent from school, and students with SEND status are overrepresented in the persistent absentee group (Shao et al., 2023; figure 2). These findings emphasise the contribution of both MH and SEND yet

provide little understanding of the complexity of factors that contribute to school non-attendance.

**Figure 2.**  
*Percentages of persistent absentees by SEND (UK data)*



Shao et al., (2023). *Persistent absenteeism: Who is missing school since the pandemic?*

The new government guidance on mental health issues affecting pupil's attendance (DfE, 2023) has set out some principles for supporting CYP, providing a summary of responsibilities and recommendations for schools (including Local Authority<sup>8</sup> [LA] involvement) where a MH issue is affecting attendance. It highlights the importance of schools working in collaboration with parents. It also states that a child with a SEND need may be more anxious about attending school and under the Equality Act (2010), schools ought to ensure that they make reasonable adjustments to improve attendance of all children but particularly for CYP with SEND. Thus, when planning support for CYP with attendance

<sup>8</sup>Local authorities are the administrative divisions of local government in England in charge of functions like education, transportation, planning requests, and rubbish collection.

difficulties, it is key to consider whether there are underlying SEND needs and/or MH difficulties.

### **1.5 Terminology and classification of attendance problems**

Before discussing the factors which contribute to EBSA<sup>9</sup>, it is worthwhile to consider how attendance problems are defined. It has proved difficult to establish comprehensive definitions and associated classification systems for school attendance problems. There is currently no classification that is universally accepted (Heyne et al., 2020). There are many reasons why CYP do not attend school or attend with difficulty (Rae, 2020). It is beyond the scope of this thesis to review all conceptualisation and categorisations of attendance problems (for a full discussion see Heyne et al., 2019). However, an important distinction to make is between ‘truancy’ and ‘school refusal’ (SR), where the former has been associated with externalising behaviours, whereas the latter (focus of the present research) has been associated with emotional problems (Lauchlan, 2003). Thambirajah et al. (2008, p.20) suggested that parents of ‘school refusers’ are aware of the child’s absence, whereas parents of ‘truants’ are not. Another important distinction is that truancy is not associated with anxiety of attending school, whereas SR is (Lauchlan, 2003).

In a seminal book, Thambirajah and colleagues (2008) described the following five criteria to distinguish SR from other types of non-attendance, that is currently accepted in EBSA literature (see Table 1).

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<sup>9</sup> EBSA is the term I chose to use throughout the thesis, except when referring to other author’s work, where I use their terminology.

**Table 1***Thambirajah and colleagues' criteria for SR (2008)*

1	Emotional symptoms rather than behavioural ones
2	Parental awareness of the child's absence
3	The child staying at home during school hours
4	The child having no emotional distress during weekends and school holidays
5	The child displaying no significant antisocial behaviours and complying with schoolwork.

## 1.6 Factors contributing to EBSA

EBSA is a multi-faceted and complex phenomenon often resulting from a combination of individual, family and school factors that can 'pull' children away from school. Thambirajah proposes that EBSA occurs when 'pull' factors that promote non-attendance overcome the 'push' factors that encourage attendance" (2008, p.33). To successfully address and support CYP who experience EBSA, it is essential to understand these factors, which I explore in this section.

### 1.6.1 Individual factors

Cognition seems to be involved in the development and maintenance of EBSA (Maric et al., 2013). According to cognitive theories, a child's anxiety is partly caused by persistent overactivity of schemas<sup>10</sup> built around the ideas of danger and vulnerability, as well as poor coping skills, where distorted cognitive processes lead to worrying thoughts, producing unhelpful outcomes such as negative self-statements (Kendall & Treadwell, 2007).

Tambirajah and colleagues (2008) highlight the role of 'coping' mechanisms in EBSA, that

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<sup>10</sup> Core assumptions, also known as 'schemas', are fixed beliefs against which events are assessed. These schemas then activate thoughts which may be subject to error and impact affect (Dozois & Beck, 2008).

is, the “cognitive, behavioural and affective efforts used by the individual to manage particular external or internal demands” (p.90). They suggest that ‘school refusers’ might use avoidant coping strategies and have low self-efficacy<sup>11</sup>, perceiving that they cannot effect change in relation to their school situation.

Research indicates that CYP’s evaluation of their ability to handle anxiety provoking situations (such as being asked by peers about their absence) plays an important part in EBSA (Heyne, 1998; Place et al., 2002). Maric & colleagues (2013) have investigated the role of cognition in SR, particularly automatic thoughts and cognitive errors, finding that self-efficacy may mediate the effectiveness of Cognitive Behavioural Therapy (CBT). As such, they suggest that the components of CBT for SR, such as cognitive therapy, role-playing, and graduated exposure, boost CYP’s self-efficacy in dealing with the anxiety-inducing scenario of attending school (Maric et al., 2013).

As well as the role of cognition, other individual factors such as SEND and neurodevelopmental conditions are often associated with EBSA. Research suggests that autistic<sup>12</sup> students are at higher risk of EBSA (Munkhaugen et al. 2017; Preece & Howley, 2018). Students with SEND experience more emotional problems than their peers, often related to their academic difficulties at school and the stress associated with those difficulties (Nelson & Harwood, 2011b). This points to SEND as a contributing factor for EBSA (Naylor et al., 1995).

In relation to autism, a comparative study, Munkhaugen and colleagues (2017), found that the individual characteristics of students associated with SR were social and executive

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<sup>11</sup> Self-efficacy was a term coined by Bandura in the 80s to explain human agency. Although his social cognitive theory of learning does not strictly fit in a pure cognitive behavioural approach (as it includes the sociocultural experiences that affect an individual’s self-efficacy), it considers that cognitive processes affect CYP’s behaviour, while acknowledging the social environment that influences those cognitive processes and thus behaviour. Moreover, Bandura postulated that perceived self-efficacy contributes to cognitive development and functioning (Bandura, 1993).

<sup>12</sup> I chose the term ‘autistic’ throughout the thesis, as opposed to ‘with autism’, given that research indicates that this is the preferred term of the adult autistic population and their families in the UK (Kenny et al., 2015).



functioning difficulties (i.e. with initiating tasks or activities, in generating ideas, responses, or problem-solving strategies), as well as emotional problems, indicating that these factors could contribute towards EBSA. A UK study by Totsika and colleagues (2020) asked a large number of parents (N=486) of autistic students to give the reasons for their children's non-attendance and found that SR was a major factor, explaining 43% of the absences over the preceding month.

### 1.6.2 Family factors

Some theories have focused on the role of parental relationships in EBSA. Separation anxiety is the distress or anxiety a child experiences when separated from their primary carer or attachment figure<sup>13</sup>, and is strongly associated with EBSA. Eisenberg (1958) directly observed the interaction between parents and children at the time of separation and concluded that all children with 'school phobia' had separation anxiety<sup>14</sup>. Thus, separation anxiety became the "primary psychological mechanism" for the construct of 'school phobia' (SF; Kearney et al., 1995, p.76), and associated parental factors were 'overprotectiveness' and 'overinvolvement' in the child's needs (Torma & Halsti, 1975).

Locating the factors in the parent-child relationships can be problematic as it overlooks the importance of the school context, placing the blame and responsibility on the parents (Pellegrini, 2007). A critical analysis of separation anxiety theory offers an alternative conceptualisation of EBSA as a normal avoidance reaction to an adverse environment (Pilkington & Piersel, 1991). Separation anxiety results in the medicalisation of a

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<sup>13</sup> Attachment refers to an enduring bond with a person who offers security (Bowlby, 1977). The child's connection figure offers a stable foundation from which to operate. The caregiver's reassuring acts give the infant stability, and the intimacy of these interactions are the child's first forays into the outside world (Bowlby 1969). This highlights the importance of secure attachments between children and caregivers for their emotional wellbeing.

<sup>14</sup> Subsequent studies found different rates of separation anxiety in CYP identified as 'school refusers' (Waldron et al., 1975; Smith, 1970; Hersov, 1960).

phenomenon ('school phobia') that can be best understood in relation to other factors in the CYP's context, as will be explored in the following section/s.

### **1.6.3 School factors**

Filippello et al. (2019) postulated that poor teacher-student relationships and unsupportive school environments can result in lower school satisfaction, leading to SR. Their findings suggest that whilst a school environment that does not meet the CYP's needs can be a risk factor for SR, a supportive one can meet fundamental psychological needs and have a positive impact on attendance. Want's (2020) study suggests that poor relationships with teachers results in CYP's relatedness needs not being met, negatively impacting motivation to attend school. Both studies referred to Self Determination Theory (SDT) as a useful conceptual framework to understand EBSA. SDT is an evidence-based approach to human motivation and personality development (Deci & Ryan, 2002, 2012). 'Basic psychological needs' are shown to impact on competence, autonomy, and relatedness, while the interpersonal context is crucial in fulfilling those needs (Ryan & Deci, 2017, p.10). Applied to EBSA, the school environment can exert a positive or negative influence on CYP's attendance by fulfilling or frustrating the three basic needs postulated by SDT.

Allied to these findings, in their mixed methods study<sup>15</sup>, Moyse (2020) concluded that school ethos and environment can have a negative effect on autistic girls' MH. Although limited to a small sample of participants for the qualitative analyses, results indicate several factors in the school environment contribute to a decrease in attendance, such as lack of involvement in decision making, difficulties in relationships with peers and staff, and a learning environment that did not meet CYP's needs (e.g. where sensory accommodations were not made by

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<sup>15</sup> A mix of primary qualitative data was collected through interviews and analysed through thematic analysis, while a large number of quantitative secondary data (NHS case data) was analysed .

teachers). This was perceived by the CYP to be due to teachers' attitudes about the need for accommodations, as well as lack of time for them. This highlights the key role of relationships between students and school staff as well as the importance of fulfilling CYP's autonomy needs (in line with SDT theory).

#### **1.6.4 Wider systemic factors**

Poverty and homelessness have also been found to have a negative impact on attendance (Masten et al., 2015; Sullivan-Walker et al., 2017) and the cost-of-living crisis has increased attendance difficulties in the UK. Shao et al. (2023) demonstrate that 'persistent absenteeism' varies significantly by household food poverty<sup>16</sup> (para.7). Even though their report did not specifically study EBSA, it clearly indicates that poverty contributes to absenteeism, which other studies have linked to MH difficulties (Deighton et al., 2019; Boardman et al., 2015). The UK legal system's punitive approach to parents regarding school attendance positions parents as solely responsible for CYP's attendance (Sawyer, 2022). This overlooks the key role of schools and wider factors. Parents' organisations (e.g. Not Fine in School, 2022; Square Peg, 2022) argue that the DfE's focus on attendance and parental fines is not conducive to support CYP's reengagement but promote a culture of parental blame that may be unhelpful in supporting engagement in school.

#### **1.7 An Ecological Systems perspective on EBSA**

As it has been argued, EBSA is a heterogeneous and multi-causal phenomenon, where a range of factors contribute to school avoidance behaviour (Lee, 2019; Freemont, 2003).

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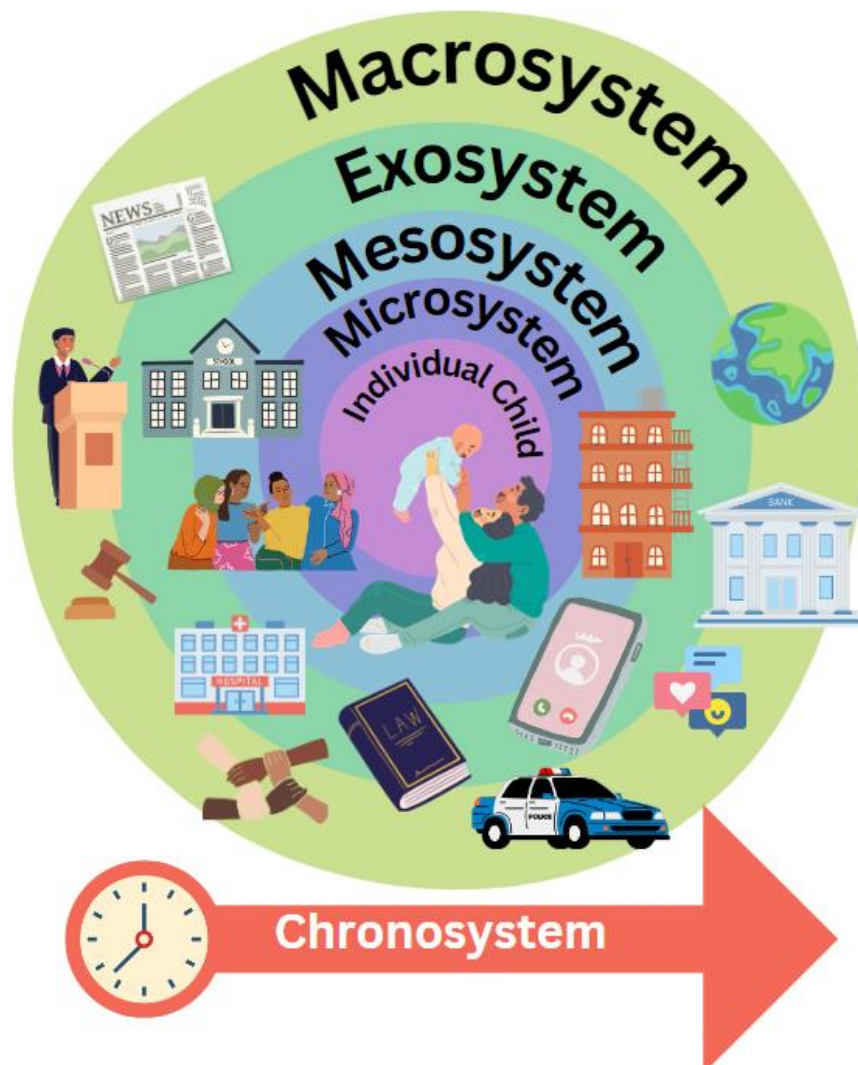
<sup>16</sup> This report indicated that students in households who have suffered from hunger were 13 percentage points more likely to persistently absent from school, compared to those living in households that did not experience hunger, while pupils from families who used a food bank were 18 percentage points more likely to be persistent absentees, compared to their peers whose families never used a food bank.

Focusing on the overlapping systems in which EBSA occurs is key from an ecological perspective (Gulliford & Miller, 2015). Kearney & Graczyk (2020) suggest that “multifaceted ecological frameworks are needed to account for these heterogeneous problems” (p.316). There is evidence to support the idea that EBSA frequently has multi-systemic causes and maintaining factors (Lyon & Cotler, 2011). Hence an ecological, multi-systemic approach is needed to understand how complex school- and community-based difficulties connect with academic, social, and behavioural factors, contribute to EBSA difficulties (Kearney & Graczyk, 2020).

Bronfenbrenner’s ecological systems theory (EST, 1977) is a theoretical framework which can support this endeavour. This theoretical perspective has been applied extensively to research in this field (e.g. Sugrue et al., 2016; Nuttall & Woods, 2013; Kearney & Graczyk, 2020). To understand CYP’s difficulties, it is necessary to look at the systems around them (e.g. home, school) as well as the interactions between those systems(see figure 3). The EST also acknowledges the political, legislative, social, and economic environment (located in the macrosystem) which can constrain or facilitate school staff and other professionals supporting CYP with EBSA, as well as the broader context of class, ethnicity, gender, etc (Bronfenbrenner & Ceci, 1994).

**Figure 3**

Bronfenbrenner's Ecological Systems Theory



*Note.* From Dr Denholm, 2023, Unpublished work. Printed with permission.

Bronfenbrenner highlighted the influence of “the patterning of environmental events and transitions over the life course” (Chronosystem) as this will affect and be affected by familial processes and in turn, the individuals within that family (Bronfenbrenner, 1986, p.723). It has been well-documented that EBSA is affected by age and stage-related transitions (Nuttall & Woods, 2015; Archer et al., 2003; Fremont, 2003). A further, recent factor in the chronosystem has been the effect of COVID-19, as previously discussed.

In sum, research evidence suggests that EBSA is a multi-faceted phenomenon for which EST can provide a helpful framework. As initially proposed by Tambirajah and colleagues (2008), EBSA is the result of “a unique combination of various factors and their interaction...when stress exceeds support, when risks are greater than resilience” (p.33). As I will explore in Chapter 5, EST provides a helpful framework to organise the complexity of EBSA support.

### **1.8 EBSA and the role of the Educational Psychologist (EP)**

Most EPs are employed by LAs’ Children’s Services (Fallon et al., 2010) and have a ‘distinctive contribution’ within multi-disciplinary teams (Ashton & Roberts, 2006, p.121). They work with CYP, families and schools alongside different professionals and are trained in developing the necessary skills for working systemically across professional boundaries (AEP, 2008). As I discuss in Chapter 5, EST provides a helpful framework to explore the complex ways in which EPs are well placed to encourage multi-agency working with schools, uniting systemic and holistic thinking, as well as strengths-based and solution-focused approaches. This is crucial given that, as has been reviewed earlier, EBSA is a multifaceted and multi-causal phenomenon which requires intervention at the different levels of the system, and between systems. LA, school and family systems, as well as the socio-legislative context, should all be considered as factors affecting EBSA.

In this section, I have demonstrated the prevalence of EBSA as well as the need to both understand and support schools, families and CYP experiencing EBSA. EP services across the UK have prioritised the need to improve support for CYP and a number of guidance documents have been produced (e.g. WSCC, 2010; Hampshire County Council, 2021). Nevertheless, this introduction has emphasised the complexity and a number of questions remain that justify the central focus of concern for the present study. This rationale is further reinforced by the local demand from the present context where I trained as a trainee

educational psychologist. Therefore, having set out the relevance of EBSA in the current national context, I will turn to how reintegration into school can be achieved.

# Literature Review

## Overview

The aim of this chapter is to explore the existing body of research into the factors that support school reintegration for students who have experienced EBSA.

### 2.1 Literature review question (LRQ)

The literature review was based on the question: “What does empirical research say about the perceived factors contributing to school reintegration for secondary school-age students after a period of school absence due to emotional reasons?”

As explored in the introduction, there are multiple factors contributing to EBSA, within a complex network of interactive systems around CYP. The factors contributing to EBSA are closely connected to the solutions and strategies to support students experiencing this issue. It would therefore be expected that a successful reintegration into school will include addressing factors at different levels of the systems around CYP . The focus of the present literature review (LR) is to understand what those supportive factors are, from the perspectives of the CYP themselves and adults in the systems around the child (including parents, school staff and professionals).

It is acknowledged that focusing only on perceived factors narrows the scope of this LR. I chose to focus on the views and perceptions of key stakeholders and the children themselves, given that exploring perceptions or views about a topic can broaden knowledge and comprehension of it, offering an alternate source of evidence to quantitative data (Hannes et al., 2013), and amplifying the voices of groups underrepresented in research (Noltemeyer et al., 2022).



## 2.2 Literature Review methodology

Literature was gathered by conducting a systematic literature search and reference harvesting which I present in this section.

### 2.2.1 Systematic literature Review

I followed Siddaway and colleagues' s key stages for conducting a systematic review (2019). In a systematic literature review (SLR), a methodical search approach is crucial. I decided on search terms based on the key aspects of the research question, including alternative terms and concepts to ensure that the search was sensitive enough (table 2). Multiple databases were searched that are relevant to education and psychology research.

#### **Method for review**

Following a scoping review to isolate key terms, a systematic literature search was undertaken on August 19<sup>th</sup> 2022<sup>17</sup>, covering three prominent psychology and education databases, (PsycINFO, Education Source and ERIC via EBSCO host). Table 2 shows the search terms below.

**Table 2**

*Search terms entered into databases*

<b>Subject mapping terms</b>	<b>Key word search terms</b>	<b>Rationale</b>
1. “Emotionally based school*”	emotion* school non-attendance OR emotion* school avoidance	As identified in the literature, there are multiple

<sup>17</sup> Between September 2022 and September 2023, I received EBSCO updates of any new published papers fulfilling my search criteria that were automatically forwarded on to my inbox. I checked these but there were no new studies that met my criteria since my initial search.

	OR attendance difficult* OR attendance problem* OR anxiety school non-attendance OR school refus* OR emotion* school absenteeism OR emotion* school absence OR school phobia OR EBSA OR EBSNA OR PSNA	interchangeable terms and a range of terminology used for attendance difficulties that are emotionally based
<b>AND</b>		
2. “Support*”	re-engage* OR recover* OR Success* OR intervention OR outcome* OR progress* OR reintegrat* OR contribut* OR return to school OR help* OR facilitat* OR solution OR manage* OR treatment OR therapy	The focus of the literature search is on understanding what helps or supports CYP’s re-engagement with education.
<b>AND</b>		
3. “Perceptions”	OR perspective* OR experience* OR attitude* OR voice OR opinion* Or view	The search focused on identifying individual views and opinions rather than reporting statistics.

Each of the three subject heading search terms were combined with equivalent key word search terms using the Boolean operator ‘OR’ by three field selections: subject, title and abstract. The three search terms were then combined with the Boolean operator ‘AND’ in

each database separately. Year (2002-2022), language (English) and type of publication (Academic Journals) limiters were applied. This method led to the following results as shown in Table 3

**Table 3**

*Results from search 1.*

Database	Search Terms	Limiters applied	Number of results
APA PsycINFO	S1 AND S2 AND S3	English Academic journals 2002-2022 (20 years ago)	58
Education Source	S1 AND S2 AND S3	English Academic journals 2002-2022	27
ERIC	S1 AND S2 AND S3	English Academic journals 2002-2022	31

After initial screening of 116 papers retrieved through the database search and removing duplicates, 86 papers were assessed for eligibility according to the inclusion/exclusion criteria (table 4). The articles that focused on EBSA (or any other equivalent term as per search terminology), CYP who were of secondary school age (11-18 years old), and studies undertaken after 2002 were all judged pertinent for inclusion in the review. Given the limited number of UK-based findings, studies from other countries were included. Articles that focused on CYP who were absent from school because of illness or exclusion by their

schools were ruled inappropriate for inclusion. The decision to focus on secondary age students relates to the higher prevalence of EBSA in this age group (Archer et al., 2003) which was reflected in the number of papers found in the literature for this age phase. Seven papers that met the inclusion criteria were considered for this review at this point (see Appendix A for excluded papers). The PRISMA flow chart details this process of paper selection (figure 4).

I created a list of inclusion and exclusion criteria based on the literature review question (table 4).

**Table 4**

*Inclusion and exclusion criteria*

	<b>Inclusion</b>	<b>Exclusion</b>	<b>Rationale</b>
<b>1. Publication date</b>	Year of publication 2002–2022.	Papers published prior to 2002.	Papers published before 2002 were considered less relevant to recent and current practice.
<b>2. Language</b>	Studies conducted in English.	Studies written in a language other than English	The author is interested in studies in English <sup>18</sup> .
<b>3. Age phase</b>	This review included secondary school-age CYP- defined as attending year 7 through to year 13 (11-18 years old), or equivalent in countries with a different grade structure. Studies	Studies reporting data on nursery or primary-age children (3-10 years old) or young people older than 18.	This is the secondary school age in the UK and the focus of the present study is on school related non-attendance.

<sup>18</sup> There is some evidence that only including English-language studies does not bias the results of a systematic review (Morrison in Siddaway et al., 2019).

	that included both primary and secondary age students are also included.		
<b>4. EBSA focus</b>	The study focuses on children who have experienced a period of reduced attendance due to emotional reasons (EBSA) <sup>19</sup> .	The study's primary focus is not EBSA therefore it is irrelevant to the literature review research question. For example, it may focus on health-related absence, teacher absence, truancy, general school attendance.	EBSA is the focus of the SLR question.
<b>5. Focus on supportive factors</b>	Studies that focus on factors perceived as facilitators of children and young people's re-engagement with education.	Studies that do not focus on the perceived factors/interventions that support children to re-engage with school.	The question the literature review aims to answer is what helps children to re-engage with education.
<b>6. Publication type</b>	Published peer-reviewed journals	Studies that have not been peer reviewed or published, e.g. unpublished thesis <sup>20</sup>	Only peer-reviewed journal publications to ensure the conclusions were supported by high quality work from outside assessors
<b>7. Empirical research</b>	Research that is empirical and derived from primary data sources	Book reviews, books, editorials, SLRs or meta-analysis	Papers based on empirical evidence

<sup>19</sup> Because there is no consensus on what constitutes EBSA, this review included only studies in which participants had both an attendance problem and anxiety or similar emotional difficulties related to stress, mood, or anxiety that affected their school attendance, following other literature review studies (Maynard et al., 2015).

<sup>20</sup> Even though reviews, theses, and unpublished articles are accepted to be part of grey literature that is pertinent to the subject, the choice was taken to only include peer-reviewed published works.

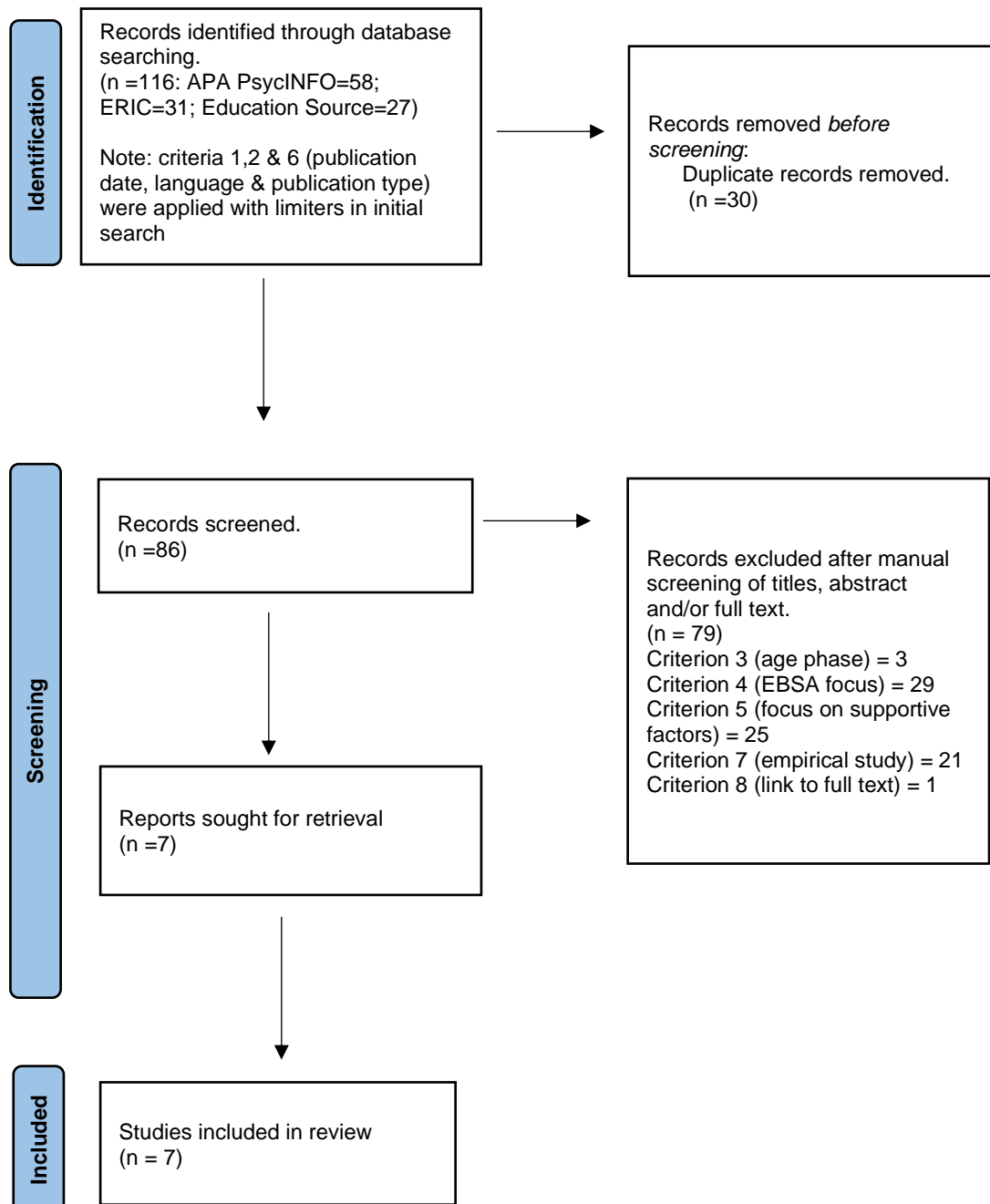
<b>8. Link to full text</b>	Research that has a link to full text	Research does not have a link to full text	To critically review the study it is necessary to read the full text
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*Note:* See Appendix A for details of papers excluded from the review

**Figure 4**

*PRISMA flow diagram illustrating the first search strategy for the systemic literature review*

*(adapted from Moher et al, 2009)*



A second search in the academic search engine 'Google Scholar' was conducted on 23.08.22 using all subject 1 key word search terms ('Emotionally based school\*'). To find the most relevant publications, the Advanced Search option was used to find only articles that use the exact term or that have any of the subject 1 key word search terms in the title. The first page result was screened systematically for each term searched and inclusion/exclusion criteria applied. After duplicates were removed, this resulted in two further papers.

### ***2.2.2 Reference harvesting***

I conducted a final harvest of the retrieved papers to find any other publications that were not found through the systematic literature search. Using the 'snowballing' technique (Hiebl, 2021), which sources pertinent references from the nine papers retrieved, a further three pertinent papers that fulfilled the inclusion criteria were retrieved.

The 12 remaining studies were critically appraised. Qualitative-only studies (n=8) were reviewed using the Critical Appraisal Skills Programme (CASP), while mixed methods studies (n=4) were appraised using Mixed Methods Appraisal Tool (MMAT, Hong et al., 2019). For an overview of these reviews, see Appendix B. All papers were read in depth (see summary table 5). Two studies (Head, 2006 & Wilkins, 2008) were then omitted from the synthesis due to the low quality of the research.

The ten remaining papers are described in the following section, along with an overview of the supportive factors that contributed to students' re-engagement with education.

### **2.3 Overview of included studies**

There is still limited published research into the factors perceived to support CYP's reintegration into school after a period of school absence for emotional reasons. The ten studies that met the inclusion criteria are summarised and critically appraised in this section.



Relevant study features, including information about study design, methodology, data collection and analysis, participants, and factors found to support CYP's re-engagement with education, are presented in table 5. Variability in the terminology and conceptualisation of school non-attendance evidenced in this review is indicative of current lack of consensus in terminology . This makes it difficult to compare results between studies (Havik & Ingul, 2021). In the papers included in the present review, the term 'school refusal' was more common among UK and international studies (seven papers). Two more recent UK studies used the term EBSA (Halligan & Cryer, 2022; O'Hagan, 2022). Hence, to be truthful to the conceptualisation of EBSA of the original studies, I use the term chosen by the researchers. Most of the studies were based in the UK (eight papers), which may reflect the terms and/or databases used in the search, although all efforts were made to include an ample range of terms representative of the wider literature. UK study results are more relevant to the literature review question (LRQ) for the UK context, given that countries have different educational systems which will affect the way they can support CYP with attendance difficulties. However, I included studies from outside the UK considering the scarcity of research . Limitations on the transferability of the findings to the UK context and educational system are considered. It is noteworthy that all studies used qualitative or mixed methodologies, and all except one (Tobias, 2015) used interviews as the method for data collection, possibly because qualitative methodologies are more pertinent to research questions about participants' views or perceptions (Willig, 2013).

A wide range of views was gathered by the different studies, including CYP, parents, teachers, health professionals, individual tuition professionals, attendance officers, family support workers and family coaches<sup>21</sup>(FC). Seven studies included more than one perspective

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<sup>21</sup> The authors state that family coaches work for the LA with families where CYP have persistently or no school attendance and there is unemployment or anti-social behaviour.

(e.g. parents and CYP), indicative that triangulation of perspectives is desirable to understand contextualised factors that support reintegration, although this will depend on the ontology and epistemology of the researcher. For example, Nuttall and Woods (2013) captured the perspectives of a variety of sources (four per case), adopting a critical realist epistemology that aimed to provide a triangulated view of the factors that promote successful involvement in a case study design. None of the other studies (except Tobias) explicitly mention the researcher's epistemological position. Of the ten papers found to be relevant to the research question, eight considered the views of CYP, in line with legislation (Children and Families Act, 2014) and government guidance (DfE, 2015) highlighting the importance of gathering CYP's perspectives.

Two out of the ten studies took place in a clinical setting (Melin et al., 2022 & Sibeoni et al., 2018), which may be less relevant to the supportive factors for successful reintegration in schools. It is noteworthy that three studies (Melin et al., 2022; O'Hagan et al., 2022; Preece & Howley, 2018) were based on the experiences or support given to CYP with autism, highlighting that this is a population at particular risk of experiencing EBSA, as highlighted in the introduction<sup>22</sup>. There were many common factors across studies that supported CYP's reintegration in school. A shortcoming of this literature review is that it was limited to European research. As such, EBSA is represented in this review as a problem experienced by western CYP in western schools, with the risk of excluding the views of participants from other parts of the world. Therefore the supportive factors that emerged from the research findings are contextually bounded to where research included in this LR took place and it is not possible to generalise these findings to different contexts.

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<sup>22</sup> Although the focus of the present LR is not specifically on CYP with autism, papers that were based on this population were included, in line with the inclusion/exclusion criteria.

**Table 5**

*Summary of studies included in the literature review.*

Authors/ location	Study type/ design	Terminology of absence	Aims/Purpose of study	Participants	Method of data collection	Method of data analysis	Results in terms of supporting factors	Relevance to present study
Archer et al. (2003); UK	Mixed methods	School Refusal (SR) & School Phobia (SP)	Multiple: <ul style="list-style-type: none"> <li>• explore perceptions of SR and SP</li> <li>• describe range of profiles of CYP</li> <li>• describe schools and LEAs approaches to support CYP</li> <li>• Identify preventative measures and good practice</li> </ul>	School staff, LEA staff, representative from outside agencies, parents/carers and CYP n=280 (questionnaires), n=16 (interviews)	Questionnaire & interviews	Descriptive statistics of questionnaire data	Gradual reintegration, close contact with student and home, promoting trust, listening, favourable adult: pupil ratio, relaxed atmosphere, flexible timetable, safe place in school	Large UK study including different type of schools in different LEAs that explore experiences of supporting CYP to reintegrate with education

Halligan & Cryer (2022); UK	Mixed methods exploratory single case study design	EBSA	To explore the elements that students value in a specialist GCSE setting for students who had previously experienced EBSA while attending mainstream school	15-16 years old n=12 (individual interviews) + n=7 (group interviews) with some overlap between the two groups	Structured individual interviews & semi-structured group interview.	Q-sort questioning task in a group situation (quantitative data) and anonymised software questionnaire in group, but away from each other (qualitative data)	Interconnectivity (being understood and valued, nurturing adults, facilitating peer relationships, being given responsibilities, promoting students' independence and autonomy) & psychological safety (smaller classes and engaging lessons, where timeout was allowed, with calmer exam times, and open-minded and inclusive ethos with no bullying)	The findings support the systemic understanding to EBSA taken by the present research in that the supportive factors are in the school structures and systems-and not just intrapersonal factors. As all students attending provision had identified mental health difficulties, it might not be representative of all students who experience EBSA.
Havik et al. (2014); Norway	Qualitative exploratory study	SR	To explore how parents of children who are	Parents (n=17) of CYP aged 10-17	Semi-structured interviews	Thematic analysis	Teacher's emotional support (knowing someone in school)	Although, the focus is not exclusively on the supportive

			experiencing or have had SR have experienced the children's situation in school				appreciated them); instructional and organisational support and adaptations/flexibility to their needs from teachers (e.g. not having to ask the teacher for permission to leave the classroom, having lessons in a small group and having a locker room to themselves); support from fellow students; communication between teachers; resources; and size of school or class	factors, but there are findings that would be relevant to the LR questions about supportive factors. Less relevant to the UK context, as study was done in Norway.
Kljakovic & Kelly (2019); UK	Mixed methods sequential (quantitative)	SR	To understand more about the young people that withdraw from	Individual Tuition (IT) professionals (n=5), CAMHS	Data collection on demographic and mental	Thematic analysis (qualitative); IBM Statistical	Gradual changes in the opportunities of young people to meet other YP in a supportive and	Study has a clinical lens and based on a specific type of educational

	e-qualitative)		education by interviewing the professionals that work with them.	professionals (n=4), LA multi-agency professionals and PRU workers (Individual tuition tutors and managers, n=5)	health presentation of participants (quantitative); semi-structured group interviews (qualitative)	Package for the Social Sciences (SPSS) (quantitative)	non-threatening way, collaboration between professionals and the family. Interventions that were "intensive and hopeful, which included gradual socialisation and were well supported; addressing parents' feelings of disempowerment; working to build parents trust in MH services.	provision in a PRU- results might be less transferable to the whole population of CYP who experience EBSA. Study did not mention EBSA but focused on CYP that 'withdraw' from education for any reasons, a broader category than the present LR question
Melin et al. (2022); Sweden	Qualitative exploratory design	School attendance problems (SAPs)	To investigate clinical practitioners' experiences of psychological treatment for autistic children and adolescents with SAPs and	12 clinicians	In-depth semi-structured interviews	Thematic analysis	Functional assessment of the school absence, behavioural activation and exposure, motivational work with YP, psychoeducation	Clinical sample. CYP had a psychiatric diagnose who attended a Child and Adolescent psychiatry centre, therefore might be less applicable

			psychiatric comorbidity				(to parents and CYP-but no mention to schools), parental support, collaboration (professionals, parents and school), supporting schools 'understanding of ASD needs, ASD assessment.	to CYP who do not have a co-current neurodevelopmental and psychiatric diagnosis, as well as SAP.
Nuttall & Woods. (2013); UK	Qualitative explanatory case study design	SR	To explore the perceptions of parents, children and young people, practitioners and school staff about factors associated with successful involvement.	2 case study (n=2; aged 13-14) interviews with the young person, parent, school staff, and other professionals including the attendance officer, a	Semi-structured interviews	Thematic analysis	An extensive number of factors are organised in 4 broad categories: <ol style="list-style-type: none"> <li>1. psychological factors.</li> <li>2. support for psychological factors.</li> <li>3. factors supporting the family.</li> <li>4. role of professional</li> </ol>	UK study with community sample (one mainstream one AP student), with a focus on factors that promoted successful re-engagement which is very relevant to LQ

				family support worker and health professionals (eight interviews per case)			s and systems. These factors are then synthesised in an Ecological model of successful reintegration	
O'Hagan et al. (2022); UK	Qualitative exploratory multiple case study design	EBSA	To explore the supportive factors that help autistic girls who experience EBSA re-engage and maintain their attendance in mainstream secondary school	3 CYP (n=3; aged 13-15), parents & members of school staff	Semi-structured interviews	Reflexive TA and also NVivo software used for coding	Relationship with key adult and wider staff team, relationship with peers and friends, belonging in the school community, individualised flexible approach, incorporating the voice of the young person into their support plan, relationships with outside agencies, parent advocacy, diagnosis supporting girls' re-engagement.	Relevant study as it focused on factors that supported school re-engagement. Participants were autistic girls, which limits the transferability of results to all CYP.



Preece & Howley (2018); UK	Mixed methods evaluative case study methodology	School refusal	To evaluate the effectiveness of a new provision for CYP who cannot attend mainstream who have autism and anxiety.	14–16 years old (n=5) + interviews with staff at the special provision where YP attended, family and 'relevant professionals'	Individual interviews, attendance data, student questionnaires	Descriptive statistical analysis (quantitative), QSR NVivo 10 software + Thematic analysis (qualitative)	An appropriate learning environment; a focus on the individual; an eclectic approach (variety of approaches tailored to individual needs); consistency; effective communication; effective collaboration.	Relevant as one of the RQs of this study aims to identify the impact indicators and practice methods supporting YP and therefore it helps to answer the LR questions about supportive factors.
Sibeoni et al. (2018), France	Qualitative exploratory study design	Anxiety Based School Refusal	To explore the experiences of parents and CYP who attend adolescent psychiatry departments for the management of Anxiety Based	20 adolescents (aged 13-18) + 21 parents	Semi-structured interviews	Thematic analysis and NVivo software	Offering opportunities to socialise in a way adapted to the child; being listened to (CYP); developing trusting relationships with hospital staff and peers; CYP's independence;	Objective of study was to explore participants' experiences their care in a psychiatric setting, rather than supportive factors for successful re-

			School Refusal, as well as the difference in parents' and children's perceptions				being given time & space; kind, patient and altruistic teachers	engagement with education. However, it also explored participants perceptions of factors that helped them which links directly with LQ.
Tobias (2019); UK	Qualitative grounded theory study	Persistent school non-attendance (PSNA)	To explore the distinctive perspective of family coaches working in one LA and better understand what perceived factors help and hinder the reintegration of CYP after a period of PSNA	19 family coaches	Four focus groups	MAXQDA software. Coding was carried out at three levels. Grounded theory was developed. An audit trail was produced	Helping CYP to feel safe, adaptations to educational provision, a special adult in school, being listened to, empowering the parents of CYP to set boundaries and take an authority position.	Overall, the study aim was to explore perceived factors that help, which is relevant to answer the LR question. However, the study does not particularly focus on EBSA but on all PSNA which also includes truancy, medical absence and young carers.

## 2.4 Critical review of the literature

The earliest, but only large-scale study identified was conducted in the UK by Archer et al., (2003), and is notable for surveying nearly 300 participants. It explored different professionals' understanding of 'school refusal' (school staff, Local Educational Authority [LEA] workers and professionals from outside agencies), as well as approaches and actions taken by LAs and schools to support CYP experiencing SR. The study used a mixed method approach. No inconsistencies between the quantitative and qualitative data are reported.

Although the study did not explicitly set out to explore the successful factors for reintegration into school, many of the results are relevant to the present LRQ.

Study results indicated that devising a specific and gradual reintegration programme was perceived as helpful, including an analysis of CYP's individual needs, a part-time timetable, a place in school where the pupil felt safe, and extra support in class. Results underscored the importance of establishing and maintaining a trusting relationship with the student by listening to their perspective (in line with most studies in this review), as well as establishing close contact with their homes. Collaborative working among all parties involved (school staff and external agencies) was highlighted. A favourable adult: pupil ratio, more relaxed atmosphere and a 'semi-family' setting were key to success. LEA staff and education welfare officers<sup>23</sup> were involved by all schools, while some also worked with external agencies (e.g. CAMHS, social services, health service).

This research was conducted 20 years ago, where the 'school refusal' model emphasised a language of choice and control, which disproportionately holds the CYP and their family accountable or responsible for the problem and solution. As such, Archer et al., found that

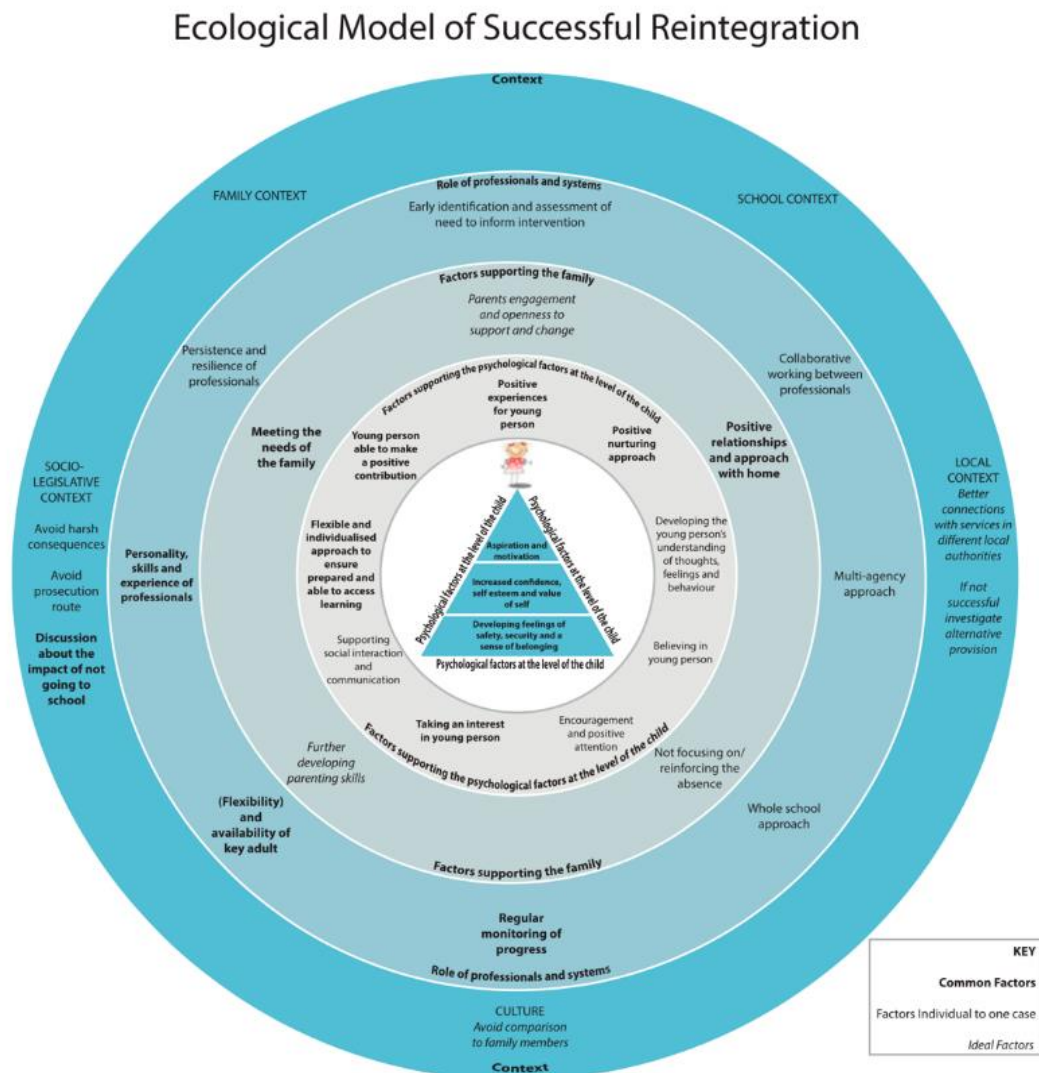
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<sup>23</sup> The authors mention that it is not possible to establish a firm definition of school refusal and school phobia because of "the individual nature of pupils' problems" (p.v). They include those who may simply not want to attend school, as well as those who may show signs of anxiety if school attendance is suggested. This included "pupils with acute anxiety about attending school, pupils who cannot face school, and pupils who persistently refuse to attend. acute anxiety about attending school, students who cannot face school" (p.v).

school and LA staff held the child and family accountable, although they recognised that school factors perpetuated the problem. A limitation is that although the study sought the views of parents and CYP, there is no mention of CYP's views in the results. This would have helped to balance and even shift the narrative, amplifying the voices of those less represented by research in this area at the time.

Nuttall and Woods (2013) sought the views of a range of professionals, school staff, parents and CYP in the UK to determine the perceived factors contributing to the successful reintegration of two young people (females) in a case study design. The authors used the findings to construct an 'Ecological Model of Successful Reintegration' (EMSR) which organises their findings according to Bronfenbrenner's Ecological Systems Theory (EST, 1979). This has been referenced by subsequent studies (O'Hagan et al., 2022; Preece & Howley, 2018) and constitutes the first attempt in the UK to define a framework for supportive factors contributing to the successful reintegration of CYP who had experienced 'SR' based on empirical evidence. Their framework highlights the importance of looking at the complexity of factors supporting CYP at different levels of the system around the child, as shown in figure 5. The dynamic model proposed highlights the importance of a multi-systems approach of support for CYP experiencing EBSA.

**Figure 5**  
Ecological Model of Successful Reintegration (Nuttall & Woods, 2013, p. 360)



School factors are not explicitly stated in the model, although they could be inferred from the ‘factors supporting the psychological factors at the level of the child’, such as a ‘flexible and individualised approach to ensure prepared and able to access learning’. In line with Archer et al., (2003), positive relationships and approach with home was highlighted, as well as a flexible and individualised approach and multi-professional involvement, while adding the importance of supporting and meeting the needs of the family.

At a similar time, Havik et al. (2014) conducted a study in Norway with a similar qualitative methodology to Nuttall and Woods’, although with an exploratory (as opposed to

explanatory) purpose. It aimed to investigate the experiences of parents of children who experience SR<sup>24</sup>. As per Nuttall and Woods, Havik et al. use the term 'school refusal'. The sample included 17 parents of an almost equal number of boys and girls, who were recruited through 'convenience sampling' by 'school staff' in special schools, a possible limitation as it may not represent the experiences of CYP in mainstream settings.

Havik et al.'s study highlighted key factors for successful student reintegration: teacher's emotional support, an organized and predictable learning environment, effective home-school communication (in line with Archer et al., 2003) and peer support. Additional factors included teacher collaboration, organisational support, predictability in the environments, available resources, and school/class size. A limitation acknowledged by the authors is that parental perceptions were not triangulated by other views and, as such, may be limited to their children's accounts of their school's perceptions.

This study highlighted a range of school-related factors, contributing to the limited research available at the time on parental experiences of their children's SR. Although in a different educational context (limiting the applicability to the UK system) results resemble many of Nuttall and Woods' findings at a similar time, highlighting the importance of systemic factors such as supportive teachers, peer support, and home-school communication for successful reintegration.

Sibeoni et al.'s study in France (2018) also sought the views of parents and children (n=20), using a similar methodology to Havik et al. and Nuttall and Woods, although in a clinical context. The aim was to explore parental and adolescent experiences of treatment at one of three psychiatric centres chosen for the research<sup>25</sup>.

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<sup>24</sup> The same term chosen by Nuttall and Woods, suggesting that this might have been the most common terminology at the time, when referring to unattendance related to emotional reasons.

<sup>25</sup> Participants were chosen through purposive sampling, in consideration of being clinically 'well enough' to be part of the study.

Children and parents perceived "Anxiety-Based School Refusal"<sup>26</sup> as an internal issue, with school seen as a secondary cause. Children used psychiatric terminology to explain their struggles, indicating a need for personal change. Parents also viewed their children's difficulties as internal distress. While some school-related issues like student pressure, stern teachers and a rigid school framework were acknowledged, the hospital was seen as a place where children could socialize and form crucial relationships. Adolescents emphasized the importance of being listened to and developing trust with hospital staff. Unexpected positive encounters with caring teachers were seen as helpful. The authors suggest that the findings support the potential of psychiatric care for severe and persistent cases of school refusal, which has been criticised in the literature as it may risk making the problem chronic and the return to school more difficult. As the results derived from a clinical population in psychiatric care in France, they may not represent the experience of CYP with less severe and persistent difficulties, limiting the applicability to the UK educational context.

Melin et al.'s 2022 study focused on clinical practitioners in Sweden, primarily psychologists, working with children and adolescents with both autism and psychiatric comorbidities who were experiencing school attendance problems (SAP<sup>27</sup>). The study identified four key themes through thematic analysis, with two of them closely related to the literature review's research question (LRQ): 'treatment interventions' and 'desired development.' These factors were deemed crucial for positive treatment outcomes. Individual-level strategies like motivational work from a cognitive-behavioural therapy (CBT) approach (in line with Nuttal and Wood's study), along with techniques such as behavioural activation and exposure, were highlighted. Systemic factors, such as parental support and collaboration, as well as schools

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<sup>26</sup> The term chosen by the authors to refer to a type of anxiety 'diagnosis' present in most cases (90%) of adolescents refusing to go to school which was operationalised based on Berg's criteria (2002).

<sup>27</sup> The terminology used by the authors (SAP) and the definition was based on that presented by Maynard et al. (2018) (p.2). This definition excludes truancy, similar to that used by other authors exploring persistent absence for emotional reasons (Kearney, Spear, & Mihalas, 2014; Lyon & Cotler, 2007).

better understanding the needs of children with autism and conducting early assessments of SAPs, were also identified as significant.

Melin et al.'s study, while valuable, may not fully represent the experiences of CYP with SAP who lack additional diagnoses or have milder-to-moderate cases typically handled by educational services. The study's limitation lies in its exclusive focus on professionals' perspectives without triangulating data with the views of stakeholders such as the children and their parents, as well as teachers. Despite this, it's intriguing that many of the factors uncovered in Melin et al.'s study align with Nuttall and Woods' Explanatory Model of School Refusal (EMSR), even though the literature review didn't specifically aim to explore these factors within the autistic population

Preece and Howley's study in the UK (2018) included a sample of autistic adolescents experiencing attendance difficulties described as 'school refusal'<sup>28</sup>. Unlike Melin et al., they sought the views of the CYP themselves, as well as parents, school staff and other professionals working with the CYP; using a mixed methods case study design which aimed to evaluate the effectiveness of a specialist provision. This study differs from others in this review in its evaluative case study methodology. Its findings contribute to the present LRQ given that in triangulating different views through different methods of data collection (interviews, questionnaires and document analysis), it captures important information about factors that contributed to positive outcomes, which the authors state "can be interpreted and explained in relation to an ecological model" (p.479).

The authors discuss how the six main themes derived from their data relate to Nuttall and Woods' four main systems in their model of reintegration (EMSR, figure 5). The first theme, *development of an appropriate learning environment*, included factors in the learning environment perceived as supportive, such as (1) small size of the building and group sizes,

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<sup>28</sup> No definition of 'school refusal' is given by the authors, a limitation of the study.



and (2) the classroom organisation, utilised flexibly according to CYP's needs. This aligns with Havik et al.'s findings in relation to the importance of the school/class size.

According to CYP, these changes in the learning environment enhanced their sense of safety, in line with Nuttall and Wood's finding that supporting CYP's psychological safety in school is key. The second theme, *a focus on the individual*, resembles Nuttall and Woods' individualised approach, and included school staff building positive relationships with each student and giving them choice and agency, in line with Archer et al.'s and Nuttall and Woods's studies. This relates to CYP's sense of autonomy and choice which supports their sense of confidence, value of self, aspiration and motivation. The third theme, *an eclectic approach*, relates to the flexibility of staff in the use of a variety of approaches tailored to individual needs. The fourth theme, *consistency of staffing*, not only provided support for the child, but also the family. Finally, *effective communication* and *collaboration* (themes five and six) relate to the role of professionals and systems, as well as factors supporting families. In sum, Preece and Howley's findings further support an ecological model of reintegration, five years after this was proposed by Nuttall and Woods. However, their findings correspond to a specific model of intervention in a specialist setting with a cohort of students which may or may not be transferable to the factors that contribute to successful reintegration within a mainstream setting, as recognised by the authors.

Tobias' qualitative grounded theory methodology also sought the views of professionals working with CYP with 'persistent school non-attendance'<sup>29</sup> (PSNA). An important distinction between this study and others in this review is that PSNA also includes truancy, medical absence and young carers, and not only absence for anxiety reasons. Results therefore represent a wider range of difficulties. Nevertheless, they set out to better understand what factors family coaches perceived to help and hinder the reintegration of CYP

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<sup>29</sup> This is the term chosen by the authors to avoid placing the difficulties within the young person.

in school after a period of PSNA. Similarly to Preece and Howley, who explored successful factors within a specific provision, this study investigates a specific intervention, namely ‘the integrated team for families (ITF)’, a multisystemic approach to supporting CYP with PSNA. Tobias’ grounded theory methodology aimed to develop a theoretical model from the perspectives of FC. Consistent with a social constructionist epistemology, Tobias used focus groups as a data collection method. The sample consisted of 19 FC that volunteered in one LA who participated in four focus groups where theory was developed between groups and brought back to them, highlighting the active role of participants in theory development. An audit trail was produced to document how the theory that emerged from the data was developed.

The theory generated was organised into five interacting themes, which highlighted the role of the CYP’s context, with factors situated in the family system, as well as more distal factors such as socio-cultural political systems. Conflict between divergent systems was perceived as a barrier to the FC’s intervention and therefore a key to success was cooperation between the relevant systems around the child, in line with Nuttal and Woods’ EMSR. Other factors that support reintegration which relate to the LRQ was that change needed to be facilitated at the level of both school and family systems. A key factor was the ‘fundamental need to feel safe’ (in accordance with Nuttal and Woods’ study), however the emphasis of the causal factors for PSNA were situated in the ‘insecure home base’ pointing to family factors, in line with Archer et al.’s study. At the school level, factors that supported CYP’s reintegration were addressing environmental stressors, having the focused attention of a trusted adult (highlighting the role of relationships in line with previous studies), as well as small but effective adaptations to the environment, in line with Preece and Howley’s findings. At the individual level of the CYP, increasing their feelings of safety by listening to and caring for

them supported the psychological needs at the level of the child, in line with Nuttal and Woods 'study.

This study only sought the views of FC working with families. Triangulating their views with parents, school staff and CYP could add robustness to the theory generated and added validity to it, which is acknowledged by the authors. Furthermore, given that the criteria for the FC's involvement was families where there is unemployment or anti-social behaviour, as well as attendance difficulties, the results may not represent the majority of the experiences of CYP experiencing EBSA.

Kljakovic & Kelly's (2019) mixed methods study sought the views of a range of professionals (individual tuition, CAMHS, managers at the LA & PRU) working with CYP that withdrew from education. The quantitative part of the study<sup>30</sup> does not contribute to answer the present LRQ and there was not a clear integration of both aspects of the study (quantitative and qualitative) in the results. The qualitative part of the study consisted of group interviews: one for the senior management group and another one for the other professionals. The fact that team managers invited other participants to attend the group interviews raises concerns about consent, and how the power dynamics might have made it more difficult for participants to decide freely whether to take part in this research.

The thematic analysis of the entire interview data resulted in 15 themes that were reviewed by both researchers, who selected three themes for further analysis<sup>31</sup> (no reasons are given for that decision). The third theme, 'holding onto hope', points to three main areas that positively

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<sup>30</sup> The quantitative analysis included descriptive analysis of data of the 47 CYP attending the Individual Tuition programme at the PRU which revealed that several of the CYP had more than one diagnosis and were open to CAMHS, indicating that the participant sample was in the vast majority a clinical sample of 'school refusing' young people. This group was then compared with a random clinical sample from CAMHS. Statistical tests to determine significant differences between the two groups did not reveal any significant differences in terms of major diagnosis (only in age). This may indicate that the scale used to measure differences (Revised Children's Anxiety and Depression Scale, RCADS) did not capture what was different about the 'school refusal' group - a limitation acknowledged by the authors.

<sup>31</sup> (1) The varied and complex nature of the problem, (2) barriers to helping these young people and (3) the need to hold onto hope (Kljakovic and Kelly, 2019, p.926).

supported change for CYP and their families, namely (1) the importance of receiving an intensive intervention and building a strong relationship with the CYP and family, (2) gradual implementation of changes, with opportunities for the CYP to socialise in a ‘supportive and non-threatening environment’, and (3) a ‘collective’ approach, where professionals and families worked together and ‘shared the workload’.

In line with other studies such as Nuttall and Woods (2013), this study concluded that factors associated with SR lie within the different systems around the CYP and the relationships between them (e.g. the relationship between family and MH professionals). Besides a supportive non-threatening environment, no other factors in the school system are mentioned, although five ‘Individual Tuition’ workers at the PRU were interviewed. It remains unanswered how successfully CYP might transition back into mainstream secondary school and what support they would need. The fact that multiple professional perspectives were sought added trustworthiness to this study, although member checking and triangulating these with the views of parents and CYP could have added credibility to the results. Like other studies in this review (Melin et al., 2022; Sibeoni et al., 2018), this study was mainly based on a clinical sample (most of the CYP were open to CAMHS) and, as such, may not represent the experiences of CYP that are not supported by clinicians.

Halligan & Cryer (2022) also employed a mixed methods methodology to explore the elements that students value about their specialist setting in the UK (having previously experienced EBSA in a mainstream setting) and that support them to attend, which is highly relevant to the present LRQ. Using a Q methodology<sup>32</sup>, Halligan & Cryer asked the participants to rank and sort a series of statements (quantitative aspect) and then a questionnaire with open-ended questions to collect qualitative data.

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<sup>32</sup> “Q methodology is a research approach that is neither fully qualitative nor fully quantitative. .The goal of Q methodology is to uncover different patterns of thoughts, perceptions, opinions, attitudes and beliefs using a systematic and rigorous quantitative procedure.” (Stone & Turale, 2015, p.183)

For the quantitative part, 12 students took part in structured ‘individual interviews’, while seven participants took part in a semi-structured group interview. This is somewhat confusing as it suggests the individuals were working as part of a group, which was not the case.

Nevertheless, the data collection methods seem a novel and an original way to capture data, possibly less daunting and more engaging for neurodivergent CYP than an oral interview.

The results from both quantitative and qualitative parts of the study are well integrated through thematic analysis with an inductive approach (although it is acknowledged that previous knowledge might have influenced the analysis).

Findings are organised in two interconnected overarching themes: *Interconnectivity* and *Psychological Safety*. Results suggest that protective factors valued by CYP are nurturing adults in an environment that supports feelings of (1) psychological safety (particularly related to the anti-bullying ethos of the setting and the calmer, smaller environment), (2) connectedness (facilitating peer relationships), (3) self-esteem (being understood and valued, at the same time as supporting autonomy and independence) and (4) value of the self (academically by allowing them to learn and be emotionally understood by others); all related to psychological factors at the level of the child in Nuttal and Woods’ EMSR. The key role of positive relationships and a safe environment are in line with Preece and Howley’s study. CYP’s views were not triangulated with those of parents and/or school staff, as others in this review have done (Archer et al., 2003; Nuttall & Woods, 2013; Preece & Howley, 2018; Sibeoni et al.; 2018) which would have added credibility to the findings (an important aspect of trustworthiness). Nevertheless, there was triangulation in the two innovative methods used by Halligan and Cryer, contributing to trustworthiness.

Finally, O’Hagan et al.’s (2022) qualitative multiple case study<sup>33</sup> in the UK, set out to explore the supportive factors that helped autistic girls who experience EBSA to reengage with

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<sup>33</sup> The schools were based in England and Wales.

school. Parents, members of staff and the CYP themselves (n=3) were interviewed to explore the factors that helped three autistic girls to engage and maintain their attendance in a mainstream secondary school. One of the participants was linked to CAMHS, similarly to other studies in this review (Kljakovic & Kelly, 2018; Melin et al., 2022), which may point to a significant number of clinical professionals' involvement in EBSA cases. This is the third study focusing on the experiences of autistic CYP experiencing EBSA, suggesting a relationship between EBSA and autism, as I explored in the introduction. However, in contrast to the other two studies<sup>34</sup>, the participants were supported in a mainstream setting, although one had a phased return from a hospital school before transitioning back into mainstream. Semi-structured interview data was analysed through reflexive TA and the use of NVivo software for coding.

Findings suggested that relationships with school staff and peers were key for CYP, in line with previous studies reviewed (Halligan & Cryer, 2022; O'Hagan et al. 2022; Nuttal & Woods, 2013), as well as a sense of belonging in the school community, in line with Halligan and Cryer's theme of interconnectivity. The study found that during the first phase of reengagement into school, developing a trusting student-key adult relationship, was crucial to their engagement with mental health interventions.

## 2.5 Summary

This literature review identified several factors that support CYP's reintegration into school after a period of absence or reduced attendance due to emotional reasons. It was challenging to contrast the findings of different studies, due to differences in context (e.g. clinical versus educational settings) and in the conceptualisation of non-attendance. Moreover, the severity

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<sup>34</sup> The other two studies that solely included autistic participants experiencing attendance difficulties for emotional reasons were Preece and Howley's (where CYP were supported in a specialist educational setting); and Melin et al.'s study (where participants were in a clinical setting).

and persistence of absence varied, underlining that EBSA is a complex and heterogeneous concept (Knage, 2021). As such, the support needed will vary with the characteristics of each case, pointing to a need for an individualised approach to intervention (Lauchlan, 2007), making it difficult to generate universal supporting factors. Nevertheless, there were some unifying themes across the studies reviewed, which I outline next.

Overall, the methodological rigour of the studies was high and there was an alignment between the research questions, the type of study and the methods of data collection and analysis. However, only a few considered the epistemological and ontological position of the researcher (Tobias, 2019; Nuttall & Woods, 2019). All studies included in this review had a prominent qualitative methodology generating situated knowledge (Harraway, 1988; Malterud, 2016) where notions of EBSA were gathered in a specific context and from varying perspectives (e.g. CYP, parents, school staff, other professionals). These were mainly gathered in interviews and analysed through thematic analysis. This suggests that researchers interested in this topic have found these methods appropriate to answer questions regarding perceptions of supportive factors for reintegration into school.

In relation to the LRQ which aimed to determine the supportive factors that facilitate CYP's reintegration into school, there were several key common perceived factors in the literature which are shown in table 6 and illustrated by figure 6.

**Table 6.**

*Perceived factors highlighted by studies reviewed and studies' authors*

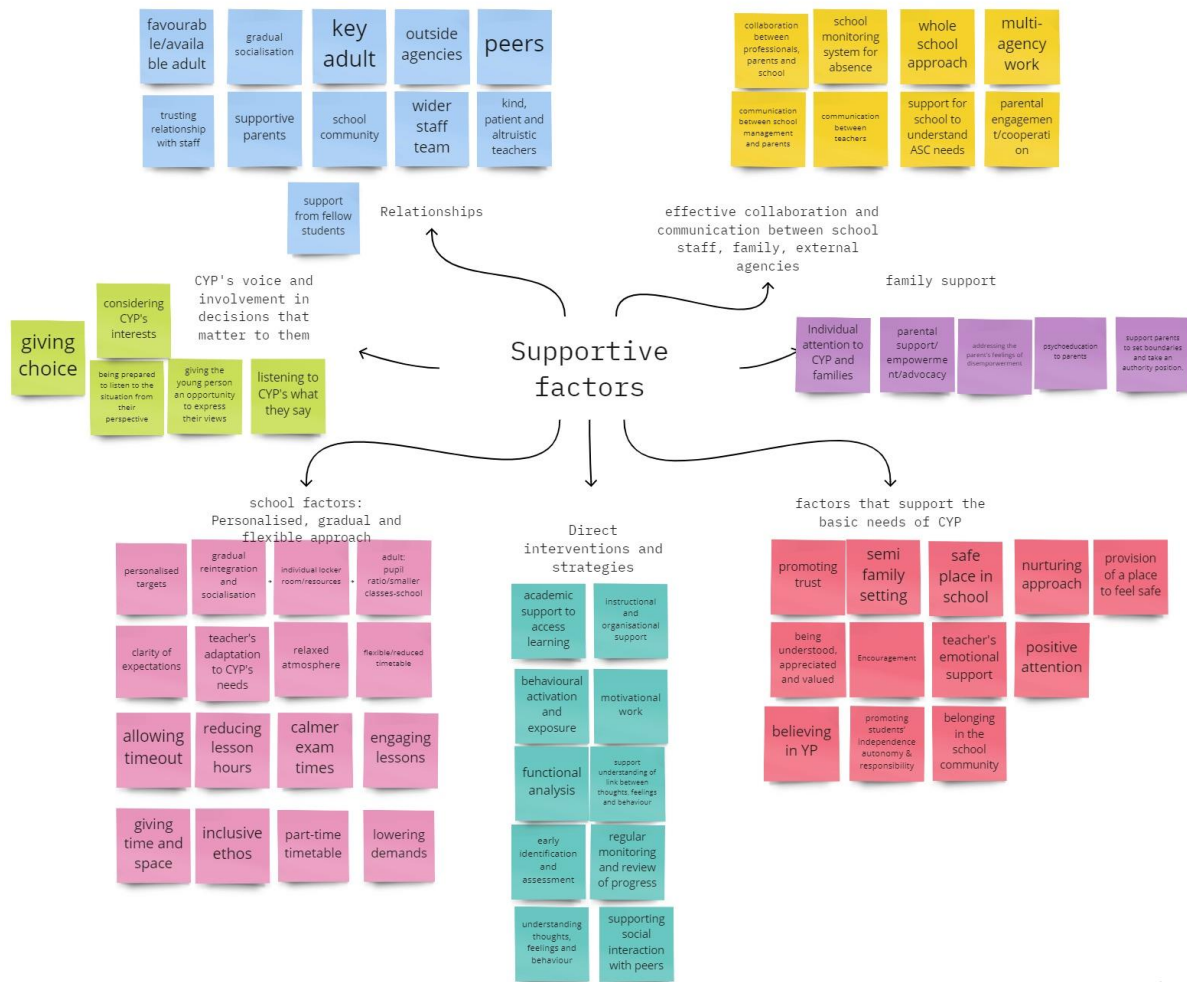
<b>Perceived Factor</b>	<b>Studies' authors</b>
<b>Trusting relationships with adults and peers</b>	Archer et al., 2003; Halligan & Cryer, Havik et al., 2014 2022; Kljakovic & Kelly, 2019; Nuttall & Woods, 2013; O'Hagan, 2022; Sibeoni et al., 2018; Tobias, 2019

<b>Supporting CYP's basic needs of safety, belonging and esteem</b>	Archer et al., 2003; Halligan & Cryer, 2022; Havik et al., 2014; Nuttall & Woods, 2013; O'Hagan et al., 2022; ; Sibeoni, 2018; Tobias, 2019
<b>Effective collaboration and communication between school staff, the family and external agencies</b>	Archer et al., 2003; Havik et al., 2014; Howley, 2018 Kljakovic & Kelly, 2019; Melin et al. 2022; Nuttall & Woods, 2013; O'Hagan et al., 2022; Preece & Howley, 2018
<b>School factors, including a personalised, gradual and flexible approach</b>	Archer et al., 2003; 2014; Halligan & Cryer, 2022; Havik et al., 2014; O'Hagan et al., 2022; Preece & Howley, 2018
<b>Listening to the CYP's voice and involving them in decisions that matter to them</b>	Archer et al., 2003; Halligan & Cryer, 2022; Havik et al., 2014; Nuttall & Woods, 2013; O'Hagan et al., 2022; Preece & Howley ; Sibeoni, 2018; Tobias, 2019
<b>Family support, including supporting and empowering parents</b>	Kljakovic & Kelly, 2019; Melin et al., 2022; Nuttall & Woods, 2013; O'Hagan et al., 2022; Preece & Howley, 2018; Tobias, 2019
<b>Direct interventions and strategies, such as academic support, motivational work, CBT, behavioural activation, and exposure</b>	Havik et al., 2014; Melin et al., 2022; Nuttall & Woods, 2013



**Figure 6**

*Summary of perceived factors that support CYP' reintegration into school from selected studies.*



## **2.6 Future research and rationale for present study**

The literature review highlighted several perceived factors that support CYP's reintegration into school. It seems to be agreed that incorporating the views of parents and school staff provides a richer picture of such factors (Halligan & Cryer, 2022) and that future research should look at other sources of information such as professionals working directly with CYP (Havik, et al., 2014), while others acknowledged that hearing from all those perspectives but not from the children was limiting (Kljakovich et al; 2019). Thematic analyses were common throughout the reviewed research, which provided a rich picture from the perspectives of different people in the CYP's system (including themselves), with some limited reference to theoretical frameworks. Nuttall and Woods' EMSR organised the factors that were found to be effective in supporting CYP to reintegrate in education.

Nuttall and Woods called for further evidence to consolidate the generalisability of their proposed model, given that it was based on just two case studies, ten years ago, in the UK.

The literature review highlighted that there is limited research about how CYP can be supported to engage with education when experiencing EBSA (Halligan & Cryer, 2022). The UK context has experienced significant changes in the macrosystem (the introduction of the Families and Children's Act in 2014) and the chronosystem (the COVID-19 pandemic).

Recently, there have been reports of more children not in school and more mental health difficulties in CYP (as presented in the introduction), both pointing to an increase in EBSA cases, suggesting that the multi-systemic collaborative approach proposed by the EMSR might not be widely used in practice to support CYP experiencing EBSA. Therefore, situated and contextualised research set in different parts of the UK could contribute ecologically valid evidence (practice-based evidence) which can be disseminated in the local community in which the researcher works and contribute towards an EBSA pathway for the LA. It can

help provide further evidence towards Nuttall and Woods' EMSR, as well as contributing to the existing body of knowledge around supportive factors for CYP experiencing EBSA.

The rationale for the present research also stems from a need to focus on what works and supports CYP to reintegrate into school after a period of EBSA, particularly after COVID-19, as there has been an increase in EBSA cases as highlighted in the introduction. The focus on 'what works' stems from positive psychology, which studies different topics and "asks slightly different questions, such as 'what works?' rather than 'what doesn't'" (Boniwell, 2012, p.5). Terjsen et al., discusses the usefulness of positive psychology approaches in educational psychology, suggesting that delineating the factors perceived to support CYP and those around them to attend school can help to promote attendance. Hence the present study aimed to explore the factors that supported the school reintegration of two CYP in secondary schools in one LA in London where there was a perceived need for understanding what works in the local context, as I will explain in the next section.

## **2.7 The local context of the present research**

In the borough where the study took place, there has been a drop in attendance across all schools, in line with national trends. While acknowledging the effect of Covid on attendance, the borough is committed to addressing persistent absences. The Educational Psychology Service (EPS) has identified EBSA as a service priority and is developing an offer for schools and wider services. As part of that offer, it aims to help partners understand and recognise the underlying factors in EBSA and develop ways of supporting CYP to reduce long-term school absence. EPs often become involved too late, when attendance problems are already entrenched, making it harder to effect change.

The aim of this research is thus to explore the factors that support CYP's attendance after a period of EBSA from the perspective of CYP, parents, school staff and external professionals

in mainstream secondary schools in London. As far as is known, this study is the first of this nature to consider the complex factors of individual, family, school and wider systems that contribute to a successful reintegration into mainstream secondary education in a London borough after Covid-19, with implications for EP practice.

My aim was to understand the factors that contributed to the CYP's reintegration in school (RQ1), including what could have helped them more, or to a quicker reintegration (RQ2). I set out to answer those questions with a case study design, in line with Nuttal and Woods (2013), collecting qualitative data via interviews, and analysing them through reflexive thematic analysis. In the next chapter, I describe in detail the methodology of my study.

## **Methodology**

### **3.1 Chapter Overview**

This chapter provides an overview of the research methodology. First, I describe the aims and research question, followed by a discussion of my ontological and epistemological position. Next, I outline the research design, followed by a description of the process of data collection and analysis. Finally, I discuss criteria for trustworthiness, with reference to the role of self-reflexivity and ethical considerations.

### **3.2 Research Aims**

This research aimed to explore the perceived factors that supported secondary-age school students to re-integrate into mainstream education, after experiencing EBSA. In line with previous studies that have explored different views on EBSA through a solution-focused approach (Nuttall & Woods, 2013; Corcoran et al., 2022; Sawyer, 2022), I aimed to explore ‘what works’ from the perspective of key stakeholders, with a solution-focused approach. While previous research has explored the successful factors for reintegration in other parts of the UK, this study focuses on a single local authority through a case study design. The assumption of a contextualised reality<sup>35</sup> implies that it is valuable to find out what works at a certain time in a certain place, social and cultural environment. As such, the aim of the research is closely connected to my professional practice, as an integral part of its purpose is to inform the LA’s EBSA pathway and contribute to improved support for CYP in secondary schools experiencing EBSA, as well as informing schools on early detection to prevent attendance problems from becoming chronic and persistent. My position is that of ‘researcher

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<sup>35</sup> The idea that “humans cannot be separated out from, and meaningfully be studied in isolation from, the contexts they live in and that give meaning to their lives” (Braun & Clarke, 2022, p.178).

practitioner' (Fox, Martin and Green, 2008), because the research findings and research skills developed through conducting the research aim to be incorporated into practice.

### **3.3 Research Purpose**

This section will briefly outline the purpose of the research (including the research question [RQ]) and a rationale for choosing a qualitative methodology to answer the RQ.

#### **3.3.1. Exploratory research**

The present research aimed to explore the factors that supported CYP to reengage with education after a period of experiencing EBSA by employing a multiple case study design, which aimed to answer the following research questions:

1. What are the perceived factors that supported two secondary age students who had experienced EBSA to reintegrate into school according to them, their parents, school staff and external professionals (e.g. educational psychologists) in one LA?
2. What do CYP, their parents, school staff, and external professionals perceive to be the factors which may have contributed to a faster/more successful reintegration into school for those children experiencing EBSA?

Therefore, it is important to triangulate perceptions with different agents in that social reality around the CYP. The study aim was exploratory, and this also influenced the research questions. Exploratory research requires research questions to be open ended, as this enables the researcher to explore a broader range of potential discussions about participants' experiences. As explored in the introduction and throughout the literature review, EBSA experiences are complex multidimensional and multifactorial situations, which are context related and require a tailored approach. In consideration of the small sample size of the current study (akin to qualitative research which is not concerned with generalising findings),

any attempt at explanation is highly unlikely to be helpful when applied to a different case. Although research aimed at exploring and describing has sometimes been portrayed as ‘inferior’ to explanatory aims, Robson and McCartan (2016) highlight that “for much real-world research are in relatively uncharted waters and the most useful thing to concentrate on is to explore” (p.39). It is therefore intended that the findings of the present research will lead to new insights and a better understanding of the nature of supportive factors for EBSA.

### **3.3.2. Qualitative research**

A practitioner researcher needs to find the best method to answer their research question (Fox et al., 2008). As EBSA is a complex phenomenon and context dependent, as discussed in the literature review, qualitative methods are best suited to understand complex social phenomena. Moreover, as I set out to investigate the perceived supportive factors for reintegration with a retrospective stance from the viewpoints of the parents, professionals and school staff, qualitative research was best suited to this aim. As reviewed in the literature, most studies that aim to explore supportive factors for EBSA have used a qualitative methodology (or at least, mixed method approach, which include a qualitative element). Therefore, they are a tool of choice for focusing on the views of stakeholders about ‘what works’ in EBSA cases and provide some rich and detailed data that allows for ‘transferability’ (see 3.7.2).

### **3.4 Ontological and epistemological position**

Ensuring that the epistemological and ontological position of the researcher is properly specified is an essential component of research. It has been recognised that methodological questions cannot be separated from the ontological and epistemological position of the researcher (Moore, 2005). Ontology is concerned with questions about the nature of being

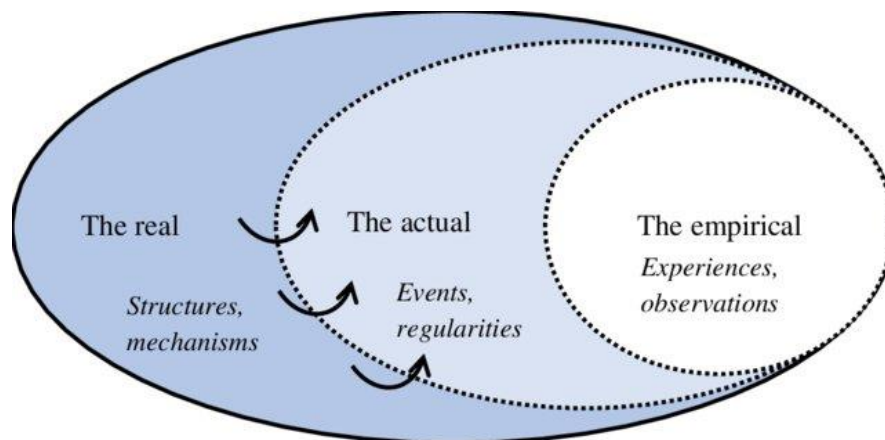
and the form of reality (Guba & Lincoln, 1994), “our beliefs about the kind and nature of reality and the social world” (Al-Saadi, 2014, p.1). On the other hand, epistemology refers to the nature and forms of knowledge within that reality (Cohen et al., 2007; Kivunja et al., 2017). Therefore, the epistemological position of the researcher will shape how s/he/they come to know something and how this knowledge is communicated (Scotland, 2012). Hence, the epistemological and ontological positions of the researcher influence the research process and are inseparable from its methodology, as they influence the assumptions made on how the world can be known and knowledge acquired.

This research adhered to a CR ontology and epistemology. Critical realism was popularised in the 1970s by Roy Bhaskar, who developed a philosophy of social sciences (Robson, 2002). It holds that, although there is an external reality that is apart from a person's thoughts, we will never be able to know it with any degree of confidence. Moving away from positivism and relativism, critical realism offers a third way, where there is a recognition of a reality that research should investigate, but can only be partially grasped, while recognising the context and uniqueness of human reality and the importance of individual perspectives (Fox et al., 2007; Robson, 2002). Critical realism recognises 3 aspects of reality: the Empirical, the Actual and the Real (see figure 7). The *Empirical* contains the events that are experienced or observed; the *Actual* contains all the events that occur (whether humans experience them or not); while the *Real* contains the causal mechanisms (the structures causing the events), as well as the events that they generate and related experiences (Mingers et al., 2013).



**Figure 7**

Overview of the three domains of reality in critical realist ontology



*Note.* From *Navigating Sustainability Transformations: Backcasting, transdisciplinarity and social learning*, by J. Holmen, 2020, p.15. Reprinted with author's permission.

The notion that there are three domains in the world offers a new perspective on the flaws in constructivism and positivism. Positivism looks for causes in the domain of the actual, instead of the domain of the real (Fryer, 2020). It claims that it is possible to be objective and directly access social reality through fixed designs to control out the effects of context (Robson, 2002) and create parsimonious theories and laws by testing hypotheses through the facts obtained from direct observation, following the scientific model, which is 'value free' (Scotland, 2012). Relativism acknowledges that causes do not belong in the domain of the actual, but it rejects the existence of the domain of the real, because we are not able to directly access that domain and produce knowledge about it (Fryer, 2020). Bhaskar (1975, 1978) refers to both these positions as the 'epistemic fallacy', that is the reduction of ontology to epistemology. Positivism reduces 'reality' to what can be empirically known (Fletcher, 2017), while in relativism, reality is misinterpreted as our knowledge of it, equating ontology with epistemology where "statements about being can be reduced to or analysed in terms of statements about knowledge" (Bhaskar, 2013, p.5). In sum, both positivism and

constructivism reduce reality to human knowledge (Fletcher, 2017), whereas critical realism ascertains that ontology cannot be reduced to epistemology. Instead, a critical realist approach recognises that knowledge is fallible, and is theory-dependent but not theory-determined (Fryer, 2020). As such, it aims to build on that limited knowledge by being critical of our limited perceptions, and generate contextual truths (Braun & Clarke, 2022). Bhaskar distinguishes between the physical and social realms, labelling them as 'intransitive reality' (independent of human influence) and 'transitive reality' (influenced by human practice). The physical world holds an 'ontological status,' being distinct from transitive reality yet interconnected with the social world. It is tangible, observable, and measurable, defining the boundaries of reality (Braun & Clarke, 2022).

Conversely, social structures and mechanisms are only evident through human experience and actions. Bhaskar asserts that social structures are real and intrinsic aspects of the world, existing in relation to individual agency, which they influence. In return, individuals can either transform or perpetuate these social structures through their actions. Both dimensions are essential in research, as they are inseparable facets of the world.

Critical realism emphasises the need to identify underlying mechanisms within social structures that both shape and are shaped by individuals. Rather than endorsing multiple realities (as in relativism), it proposes that various perspectives, viewpoints, and perceptions exist within a single reality. Consequently, reality is context-dependent, with human experiences mediated by culture and language. Researchers cannot stand outside the social reality they observe (Braun & Clarke, 2022).

Critical realism acknowledges that social perceptions and actions can have causal effects on the world but doesn't conform to the causal laws of the physical realm. Therefore, it is impossible to establish general causal laws (Fletcher, 2017). The social world is considered a complex 'open system,' permitting interaction between internal elements and the

environment, leading to diverse events and responses. Social reality is situated, and researchers can only seek 'tendencies' or 'ways of acting' (Bhaskar, 1978), recognizing that knowledge is always rooted in specific historical and social contexts (Mingers et al., 2013). The research questions are consistent with this epistemological position and the premise that reality is contextualised and there are different perspectives or views of these 'situated realities' (Braun & Clarke, 2022)<sup>36</sup>.

As such, from my social reality (including language and culture), I can observe that a young person is not going to school, or their attendance is dropping (domain of the empirical). However, I cannot observe the mechanisms underneath that explains the behaviour. As proposed by critical realism, I only have mediated access to the dimension of the *Real* and therefore can only partially grasp it through people's perceptions. By focusing on the lived experiences of the participants (their perspectives of what helped), I acknowledge that the experience of what might have been perceived as supportive is different for different people in different contexts, while recognising that the social context structures and limits that support (Braun & Clarke, 2022). Hence, I recognise that there are differences in how people understand and perceive the real world, but by triangulating different perceptions, I aimed to explore the mechanisms that supported CYP to reintegrate into school. In sum, by taking a critical realist position, I aimed to tap into the dimension of the real, that is, those causal mechanisms that might have facilitated the CYP's reintegration with education.

A CR stance might usually involve an explanatory purpose. However, critical realism also acknowledges that knowledge is "partial, provisional and historically located" (Charmaz et al., 2018, p.726) and based on empirical evidence (in the *transitive* dimension, Bhaskar, 1979), which is consistent with methods of the present research. Since the purpose of this

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<sup>36</sup> Braun and Clarke refer to 'situated realities' instead of 'situated reality', to acknowledge the CR position that the experience of reality is different for different people in different contexts.

study was to explore the factors that supported CYP to reintegrate into school after a period of EBSA, the research focuses on the perception of what helped/supported CYP. By looking at the factors that supported reengagement with education, instead of aiming to explain, this research aims to understand ‘what works’ in the empirical realm and in doing so, contribute to the knowledge of EBSA’s supportive factors, which Bhaskar (2010) recognised as the work of humans in the transitive reality. In doing so, this research tapped into those underlying causal mechanisms (acknowledging that there is a world independent of knowledge), without aiming to generate causal explanations and an EBSA theory. Some researchers have argued that a CR grounded theory has the power to generate theoretical explanation of social phenomenon (Kempster & Parry, 2015). However, as already explained above, the aim of this study was exploratory rather than explanatory, due to the limitations of its context, sample size and methods of data collection.

### **3.5 Research design**

The following section outlines how the research was conducted, including rationale for a case study design, sampling, participant recruitment and inclusion criteria.

#### **3.5.1. Case study**

To get a deeper understanding of the subject of the investigation, I chose a case-study design. A case study design enables researchers to understand complex social phenomena within its real-life context (Yin, 2018). “A case study is a strategy for doing research which involves an empirical investigation of a particular contemporary phenomenon within its real-life context using multiple sources of evidence” (Robson, 2002, p.178).

I used a multiple case-study technique for this study since it allowed for a thorough examination of a complex issue in its real-life context (Crowe et al; 2011). Single and

multiple-case study designs are “two variations of case study designs” (Yin, 2018, p.17). I chose a multiple-case study design as data from multiple cases is more comprehensive and robust, allowing for wider insights and greater transferability of results, as well as comparisons between cases (Herriot and Firestone (1983) as quoted in Yin (2018)). Willig (2013) states that a multiple-case study approach gives the researcher a chance to generate new theories, where based on a comparative investigation of a few cases, theoretical formulations are built and improved with each case. Although theory generation was not the aim of the present research, analytical comparisons between cases, in consideration of their contexts, was helpful to better understand how embedded and context dependent supportive factors for reintegration are, in line with a CR view of situated realities.

A case study cannot be distinguished by its methods of data analysis<sup>37</sup> (which can be quantitative and/ or qualitative), but rather by its emphasis on a unit of analysis which is the case. The cases can be “individuals”, “organisations”, “processes”, “programmes”, “neighbourhoods”, “institutions” and even “events” (Yin, 2018, p.14). In the current study, the case is the ‘individual’: the CYP who had experienced EBSA (see figure 8). A case study design is compatible with qualitative methodologies, in particular; when an inductive perspective on the issue under study is taken, while considering the numerous context-related factors. Via semi-structured one-on-one interviews with parents, professionals, and school staff, the current study gathered qualitative information with the aim to “engage with the data to gain new insights” in the way that CYP, parents, school staff and other professionals perceived the support provided to CYPs to reengage with school. Thus, it engages with what

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<sup>37</sup> “Case study is not a methodological choice but a choice of what is to be studied” (Stake, 2000, p. 435). Stake, R. E. (2000). Case studies. In N. K. Denzin & Y. S. Lincoln (Eds.), *The SAGE handbook of qualitative research* (2nd ed., pp. 435–454). Thousand Oaks, CA: Sage.

Willig (2013) calls the 'big Q': a bottom-up qualitative research methodology which does not start with an a priori hypothesis against which to check the data collected.

Case study design is compatible with different epistemological positions, from realist to relativist (Yin, 2018). From a critical realist position, the empirical cases at the micro (individual), meso (household, institution, urban neighbourhood), and macro (nation-state) levels can be understood as complex systems (Schawandt & Gates, 2017). The two key aspects of case studies within a critical realist ontology and epistemology is that (1) it recognises that it is not possible to create general laws, in other words, it is not a nomothetic approach, (2) it is compatible with systems theory where the unit of analysis is considered a complex open system, made up of numerous interconnected components that are connected by numerous (often reciprocal, causal) interconnections in nonlinear and adaptive ways, which can only be understood by looking at how these components interact. (Schawandt & Gates, 2017p.616).

Nuttall & Woods (2013) suggest that exploratory case studies help to construct possible solutions to problems such as EBSA that require an ecological approach where common factors that contribute to overcome EBSA must be interpreted in the context of each case. As such, the aim of the present multiple case study was to develop practice-based evidence for school staff and other professionals, including educational psychologists, around supportive factors for EBSA, which has been highlighted as key by other EBSA researchers (Nuttall & Woods, 2013). Thus, a case study design is coherent with the ecological systems theoretical orientation of the present study.

### **3.5.2 Sampling**

The nature of qualitative research means that the sample size does not aim to be representative of the general population, also known as generalisability (Willig, 2013). In line

with that, convenience<sup>38</sup> and snowball sampling was used to recruit participants through contacts in the local authority's EPS where I was on placement as part of doctoral training in educational psychology (see Appendix C for full recruitment strategy).

I applied a criterion sampling strategy: a method of participant selection based on a pre-determined criterion (Patton, 2015). The sampling criteria was based on Berg's EBSA criteria (Berg et al., 1996, Berg, 2002) which many other studies in the field have used as selection criteria (Havik et al., 2014; Heyne et al., 2011; Nuttall & Woods, 2013; Sibeoni, et al, 2017; Elliot & Place, 2018). Schools were invited to participate in the study through the link EPs<sup>39</sup> in the EPS (see recruitment process).

### 3.5.3 Participant Inclusion Criteria

#### Table 7

Inclusion criteria for participants

1. A CYP (aged 11-18)<sup>40</sup> who (1) had experienced persistent difficulties in attending school<sup>41</sup> in the past while attending secondary school; (2) there were identified emotional difficulties, with an element of anxiety or fear relating to home/school (e.g., anxious of leaving home as they are concerned for a parent's health or anxious about a social situation in school), (3) CYP were at home with their parents' knowledge when they should be in school (to differentiate from truancy<sup>42</sup>);

<sup>38</sup> This refers to a kind of nonprobability sampling where participants are chosen based on their availability, such as geographical proximity or known contacts (Frey, 2018).

<sup>39</sup> Link EPs are educational psychologist who are assigned to work with a specific school within an LA. The school 'buys in' a number of EP days from the EPS, and the EPS assigns the work to the 'link EP'.

<sup>40</sup> According to research, EBSA is most prevalent in secondary-aged children, frequently following the transfer from primary school (Kearney, 2008).

<sup>41</sup> Initially an attendance dropping below 70% was set out in the criteria. However, on reviewing the literature, it became evident that EBSA is a heterogeneous concept better understood as a continuum that includes a wide range of attendance difficulties, where a broader conceptualisation of EBSA has been proposed more recently (Kearney, 2016).

<sup>42</sup> This distinction was important to ensure participants are clear about what was and was not under investigation.

<p>(4) absence of anti-social behaviours such as stealing (points 1 to 4 are based on Berg et al. 1969, Berg 2002, in Elliot &amp; Place, 2019).</p>
<p>2. The CYP went back to school, and their attendance improved for at least a term, alongside a perceived improvement in their wellbeing. This was to ensure that an exploration of factors that supported reintegration were relevant to the case.</p>
<p>3. There was some involvement from other professionals in the case, e.g., EPs, family support workers and/or CAMHS practitioners. This allows to get a broader and more in-depth picture of the successful factors that facilitated the CYP's progress, key for a case study design to triangulate data.</p>
<p>4. There were no other known current significant stressful or traumatic event for the family (e.g., bereavement, divorce). This was to ensure that no pressure was put on the family of the CYP at a difficult time and minimise risk of psychological harm, discomfort, or stress, in line with ethical principles for conducting research (BPS, 2021).</p>

*Note:* As per recruitment strategy, I was not recruiting CYP themselves, but initially parents and professionals involved in supporting CYP with school reintegration (see below for details).



### 3.5.3 Recruitment Process

The recruitment process extended from September 2022 to March 2023. In September 2022, a recruitment poster was shared with EPs in my EPS placement who distributed the information to Special Education Needs Coordinators (SENCOs) and key staff members<sup>43</sup> within their 'link' secondary schools. Schools were asked to identify cases which met the inclusion criteria shown in the table below. Once SENCOs or other relevant school staff members identified a CYP who met the inclusion criteria (table 7), they would forward the information about the research to parents, asking whether they would be interested in taking part, as well as for their consent to be contacted by the researcher. Hence, I was initially recruiting parents of children who met the inclusion criteria. Once parents had agreed to be contacted, I sent them the participants' information sheet (Appendix D), offering them an informal conversation to explain the research aims and procedures, to ensure informed consent was obtained before parents agreed to take part. Only three parents responded. Once they had given consent, I asked parents to name two key professionals (one from school and one from an outside agency) who, in their view, were the key professionals involved in supporting their children's school reintegration, inside and outside of school. The number of participants per case was important for triangulating views in line with a case study methodology (Willig, 2013). The decision to involve at least two key professionals was based on similar EBSA case study research (Nuttal & Woods, 2013).

Once I had parental consent and contact details for external and school professionals, I invited them to participate in the research. Interview dates were then arranged with parents, school staff and external professionals. All participants were asked to sign a consent form

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<sup>43</sup> This included SENCOs, pastoral support staff or school nurses—depending on who was perceived by the school to be the most relevant member of staff that often dealt with EBSA cases.

(Appendix E). In one case the contact was not made through school, but through an already known EBSA case by an EP who directly asked the parents.

In line with the RQs, I initially proposed to gather the views of parents, school staff and any other professionals who may have been involved in supporting the CYP. However, as the research progressed, it became clear that the voice of the CYP was missing. As one participant remarked, “why don’t you ask her?” (CYP). According to Willig (2013), a qualitative research plan may need to be updated because of insights gained during the preliminary stages of the study. As such, I sought and obtained further ethical approval to invite the CYP themselves to take part in the research project in January 2023. CYP of the three cases already recruited were then contacted in January 2023. Only one responded to say that they wanted to be interviewed.

The number of cases was decided in consideration of the limited amount of time and resources. Moreover, the aim of case studies is to gain an in-depth understanding of the phenomena from a small group of participants and build what Yin (2013) calls ‘analytic generalisation’, such as to illuminate a theoretical concept or advance practice.

#### **3.5.4. Participants**

In line with a case study methodology, I collected data from a range of sources, which is known as triangulation (Willig, 2013). I decided on a total number of three cases based on similar EBSA research that has used a multi-case study design (Corcoran et al., 2022; Nuttal & Woods, 2013), and to ensure the data could be handled within the time and resource constraints, as multiple case studies can be time consuming for a single student to manage (Yin, 2018).

To ensure data triangulation as per case study design, for case 1, I initially recruited Emma’s (pseudonym) mother, who provided the contact details of the main person who had supported

her daughter in school (SEN teacher) and external professional (EP). They were subsequently contacted and consented to the interview. After I obtained ethical approval for including CYP in my research, I also contacted Emma, who consented to take part, resulting in a total of four interviews (figure 8).

For case 2, I initially contacted Sophie's (pseudonym) mother, who consented to participate, and who identified the school nurse and her mentor as professionals in and out of school who were pivotal to Sophie's reintegration in school. I contacted them, and both also consented to the interview. Sophie did not want to be interviewed, resulting in a total of three interviews (figure 8). For case 3, it was only possible to speak with the CYP's mother. Both teacher and external professional had already left their working place and it was not possible to find contact details for them. The CYP did not want to be interviewed. Therefore, I only had a total of two cases for data analysis, as per case study design and the need to triangulate data. Figure 8 shows the cases and number of participants interviewed per case.

According to her mother, Emma found it difficult to engage with school from the beginning of year 7, when she transitioned to an all-girls school where she struggled to make friends. She had been through primary school with her twin brother, and this was the first time they had been apart at school. Emma's pattern of attendance difficulties began by her being late for school most days, even though she was a rule follower (according to her mother). Her school reportedly did not offer support for her attendance issues, even though Emma had a diagnosis of Developmental Coordination Disorder. Although there was CAMHS involvement at that point, it was perceived by Emma's mother as unhelpful as Emma's mental health difficulties were put down to her having two older brothers with special needs and a twin brother with autism. In year 8 Emma's lateness worsened, as did her difficulty engaging with school, so her mother decided to enrol her in her brother's large

comprehensive school towards the end of year 9. Here she initially thrived: she finally seemed to be happy and making friends. She was engaged academically and was even playing in the orchestra. However in year 10 things worsened again in terms of attendance and wellbeing: Emma started to be late and to fall asleep before and during school. Her mental health began to deteriorate again, and she experienced panic attacks. After an incident where Emma lost consciousness in school and was rushed into hospital, her attendance stopped completely (during the autumn term of year 10). Emma's mother managed to get an appointment with a neurologist who recognised all that Emma had been through and sped up the medical investigations for her sleep problems (for which no physiological cause was found). Emma was later referred for an ASD diagnosis and diagnosed with autism. Her unidentified needs were perceived as a major factor in her emotional difficulties (as she had to mask her difficulties at school) and a contributing factor for non-attendance. Academic pressure was also a contributing factor: GCSEs and mocks were coming up, and the transition to a new school at the critical time of choosing GCSEs had been more difficult than Emma and her mother had initially realised. After two months of complete non-attendance, Emma's mother was contacted by an attendance officer from the school. They started a reintegration plan with school and things began to improve slowly.

Sophie's attendance difficulties started before COVID, when she reportedly would avoid an occasional PE lesson. However, her attendance difficulties became much worse after the COVID-19 related lockdowns when Sophie was in year 9. After she had been learning from home (due to lockdowns), her mother reported that Sophie never went back to school full time until her GCSEs<sup>44</sup>. She felt physically sick if she had to go to school due to high levels

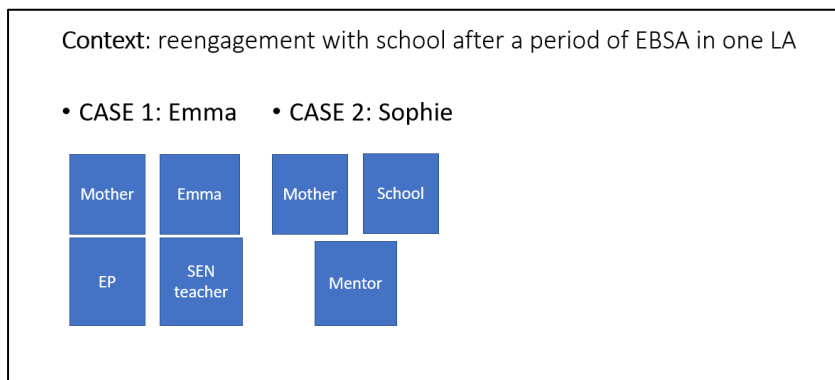
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<sup>44</sup> GCSEs, or General Certificate of Secondary Education, are a set of examinations taken by students in the United Kingdom. These exams are typically taken at the end of compulsory secondary education, usually around the age of 16.

of anxiety. After an incident where Sophie called her mother crying from the bathroom at school due to anxiety due to being surrounded by so many people, Sophie's mother let her stay at home. Her social anxiety was therefore a contributing factor which, compounded by online learning during COVID-19 lockdowns, made Sophie very anxious about being at school, to the point of feeling physically ill. School suggested a referral to CAMHS, but the appointment was not perceived as helpful; on the contrary, it made Sophie feel more anxious. There were some subsequent attempts from school to support her, however the lack of coordination between school staff made things worse as Sophie would be told one thing by one person, only to find out that she was made to stay for the whole day which only increased her anxiety levels. School strictness and lack of flexibility in adapting rules to support Sophie, was perceived by Sophie's mother as a contributing factor to her continued attendance difficulties which persisted throughout year 10 and into her GCSE year (year 11). During that period, Sophie would go into school some days, but would stay in the library. Sophie's mother reported that it was only before her GCSE exams that things began to improve significantly, as Sophie would go to school to study. After finishing her exams, she got into the sixth form college of the same school (where she wanted to be), and her attendance has been very good since then.

## Figure 8

### *Participants involved in the case study*



## Table 8

### *Demographic information of participants that ensures anonymity*

<b>Pseudonym</b>	<b>Age<sup>45</sup></b>	<b>Year group</b>	<b>Gender</b>	<b>Ethnicity</b>
Emma	18	University (first year)	Female	White British
Sophie	16	Year 12	Female	Mixed White and Black Caribbean

<sup>45</sup> Age at the time of the interview.

**Table 9**

*Additional information relating to participants' attendance and school history*

<b>Reason for non-attendance</b>	<b>Onset of attendance difficulties</b>	<b>School history</b>
Anxiety	Year 7	<p>Attending all girls mainstream school for years 7&amp;8, where there were reported issues with school engagement and lateness.</p> <p>Emma then moved to a mainstream mixed gender school halfway through year 8.</p> <p>Good attendance during year 9.</p> <p>Onset of attendance difficulties in the new school towards the end of year 9 which extended throughout year 10.</p> <p>Full attendance from year 11 and no reported non-attendance related to anxiety difficulties since then.</p> <p>Currently completing her first year of university.</p>
Anxiety	Year 9	<p>Previously attending mainstream secondary school.</p> <p>Onset of difficulties after COVID-19 lockdown in year 9, as Sophie found it difficult to go back to school after remote learning.</p> <p>Attendance difficulties extended throughout years 10-11.</p>

		Currently attending mainstream sixth form education provision full-time, with no reported attendance difficulties.
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### 3.6 Procedures

This study used qualitative methods to collect and analyse data. Qualitative data was captured through semi-structured interviews. In this section I explain the process of data collection, including interview transcriptions, while in the next section I explain in detail the process of data analysis.

#### 3.6.1. Data collection

The method of data collection was semi-structured interviews which took place online (3) and in person (4) according to participants' preference. Interviews were better suited than methods such as participant observation, focus group or document review (i.e. EPs' reports) because they capture more in-depth, rich data about the views of the participants (Braun & Clarke, 2013). A further advantage of conducting interviews was that I could ask follow-up questions, enabling me to better capture the participant's views.

I chose semi-structured interviews (Flick, 2009; Robson, 2002) because they use open-ended questions, allowing me enough flexibility to respond to the participants' flow of conversation. By using an interview schedule, I made sure that the questions connected to the research question. A further key advantage of interviews is that they allow the researcher to take account of non-verbal cues (in line with social systems theory of communication, Guddemi, 2020) so I could better understand the meaning of what was being communicated (Robson, 2002). This was more challenging during the interviews conducted online, although the video



link application also allowed me to capture non-verbal data (although not as well as face to face).

The interview schedule was based on other similar studies, particularly Nuttall and Woods (2013), informed by a solution focused approach which originated from Solution Focussed Brief Therapy in the 1980s, but now has been applied to different contexts including research endeavours, with a focus on 'what works' (De Shazer, 1997). Hence the interview schedule had a solution-focused approach, in line with the research aim.

### **3.6.2 Interviews**

The interviews lasted between .75 and 1.25 hours, guided by the participants' pace and the interview schedule (see Appendix F). I offered participants the option for the interview to be conducted in person or online (through video link software Zoom). For case 1, I only interviewed Emma's mother in person. For case 2, I interviewed Sophie's mother and the school nurse in person, and her mentor via Zoom. There were different interview schedules for each participant (i.e. CYP, parents and professionals). In the parents' interviews (the first interviews I conducted for both cases), there were questions at the beginning that aimed to understand the social and learning context that had led to Emma and Sophie's attendance difficulties. However, in line with a solution-focused approach and ethical considerations (see below), the main focus of the interviews was on the reintegration process and, in particular, the factors perceived by participants to have supported CYP's reengagement with school and subsequent increase in attendance (related to RQ1). For example, 'Can you tell me about the support she received to help her return to school?' 'What did you find helpful?' 'Why?' Towards the end of the interview, I asked participants questions in relation to RQ2, i.e. what could have facilitated, in their view, more success, or a quicker recovery for the CYP. I adapted the interview schedule for the CYP, to include initial questions to make the CYP feel

at ease, as well as considering adaptations where open-ended questions might not have worked for them and offering them breaks. I reminded participants that they did not have to answer all the questions, and that they could skip any questions they wanted, only answering what they felt comfortable with. At the end of the interview, I offered participants a debrief .

### **3.6.2. Interview Recording and Transcription**

Before the interview, I obtained permission to audio-record the sessions. I also checked with participants on the day that they were comfortable with being recorded. I recorded the interviews with a voice recording software called MyRecorder, on a password protected mobile encrypted device (my work phone). I stopped the recording immediately after all the interview questions had been covered (the debrief was not recorded).

I transcribed the interviews verbatim within a week of conducting them onto a secure laptop, to ensure I remembered the details of the interview process, anonymising any sensitive data<sup>46</sup>, such as names and any identifying information about CYP (e.g. school). I saved the anonymised transcribed interviews in my password-protected laptop. I kept the audio recordings on my password-protected work mobile device, up to the ‘familiarisation with the data’ stage of the data analysis (see 3.6.2.3.1), at which point I deleted the audio recordings. I recorded the online interviews on the video link software Zoom , offering the option to turn the camera off. Once the interviews had finished, the files were automatically downloaded onto my password protected laptop. I only saved the audio recording (deleting the video file) for transcription, and followed the same procedure explained above.

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<sup>46</sup> This included the name of participants and any other name mentioned during the interviews, as well as the name of places. I gave each CYP a pseudonym, while I replaced the other names with two initials (i.e. XX) which were unrelated to their real name.

### 3.6.2. Data analysis

I analysed the interviews using Reflexive Thematic Analysis (RTA; Clarke & Braun, 2021). This method is compatible with the critical realist position, since RTA “provides access to situated, interpreted realities, not simple decontextualised truths” (Braun & Clarke, 2022, p.171). Through considerable analytic and interpretative work, RTA allowed me to organise the data into ‘thematic statements’ for each participant, and then within each case. The data analysis was conducted over a period of four months after the completion of all the interviews (between April and August 2023).

Although RTA is not the only data analysis method that would fit the research question, epistemology, and methodology, it was the best suited. Thematic analysis (TA) is a way of generating patterns of meaning (themes) from qualitative data to answer a research question where the researcher looks for relationships across data items (Braun & Clarke, 2021). Braun and Clarke (2022) have clearly stated that TA is not a methodology but a method for data analysis. The difference being that a methodology is a ‘theoretically informed framework for research’ with clear theories, analytic methods, and design (Braun & Clarke, 2021), whereas methods leave a wide range of design decisions to be made by the researcher (Braun & Clarke, 2022). As stated by Braun and Clarke (2021a) there is not just one method of generating patterns of meaning that can be suitable for a single study. However, it is crucial to state how the proposed method aligns with the research aims and questions, as well as ontological and epistemological assumptions of the researchers (Willig, 2013).

TA is better conceptualised as a spectrum than a single method, in “a continuum from coding reliability to reflexive approaches” (Braun & Clarke, 2021a, p.39). TA can take three forms: (1) Coding Reliability approaches, (2) Reflexive approaches, and (3) Codebook approaches (Braun & Clarke, 2021a). This distinction is important as Clark & Braun have encouraged

TA researchers to “clearly demarcate which TA approach they are using” (2021b, p.335).

Hence it is important to clarify which type of TA I chose for this research and why.

The present research aligns with the ‘Big Q’ methodology (reflexive approaches). I used RTA because it is consistent with a critical realist epistemological position, that “themes are generated by the researcher through data engagement mediated by all that they bring to this process (e.g. their research values, skills, experience and training)” (Braun & Clarke, 2021a, p.39). As such, knowledge is generated in the process of data analysis, where supportive factors for CYP who had experienced EBSA are created through active engagement with the data in an inductive process. Inductive coding entails searching for codes in the data. When little is known about a phenomenon, this method is often utilised for exploratory purposes. This is in line with a CR approach since “critical realism seems to be the most popular big-theory position for reflexive TA” (Braun & Clarke, 2022, p.169).

CR is aligned with RTA (Braun & Clarke, 2022), due to its epistemological relativism where knowledge is interpretative and only partial. Moreover, as the aim of the research is focused on the supportive factors across the data set, RTA can provide a useful tool for generating themes, while also highlighting any important differences between the cases which would point out that reality is context-dependent, in line with a CR ontology. Moreover, RTA serves exploratory and descriptive research purposes, whereas grounded theory would be more suitable for explanatory research. RTA also provides much in the way of practical guidance (Braun & Clarke, 2021a), adding trustworthiness to the research process.

Interpretative Phenomenological Analysis (IPA) could also provide rich, qualitative information, focusing on how the participants perceive and make sense of their experiences of EBSA or supporting CYP, which can be used to analyse individual cases or to generate themes across a small group of participants (Smith & Osborn, 2015). However, the focus of this research was less on the idiographic approach characteristic of IPA (i.e. focus on the

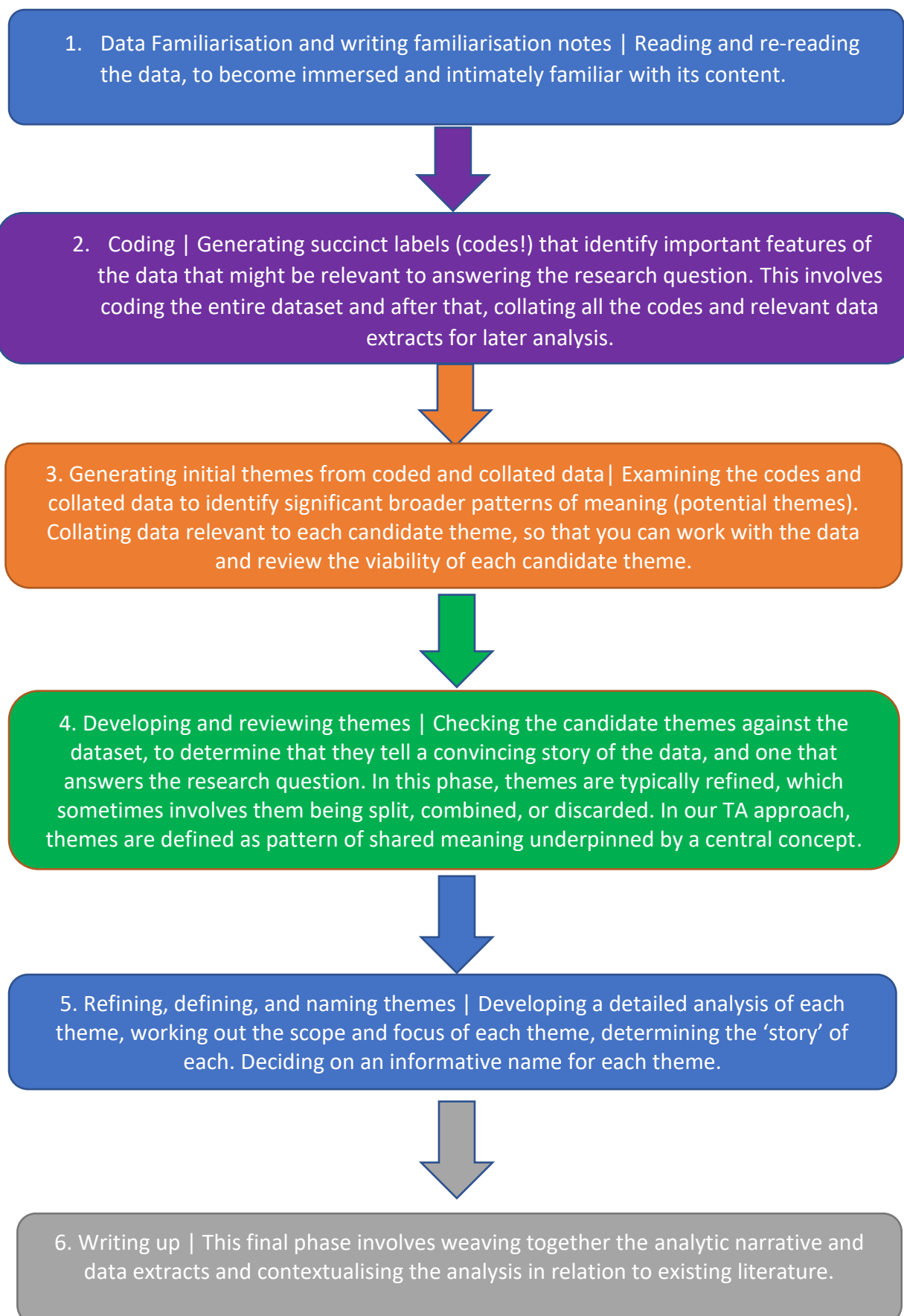
unique details of each case) and more on the thematic focus across participants (Braun & Clarke, 2021a). Discourse analysis (DA), on the other hand, studies ways in which social reality is produced within a particular setting through language, from a social constructionist epistemology (Gee, 2011). Applied to the current research, beginning with an apriorist definition of EBSA would not be aligned with this position. Rather than looking for factors that supported CYP to reengage with education, DA may study the way people come to ideas about a problem and a solution. The aim of the present research is not on how parents, professionals and school staff have socially constructed supportive factors, which would be an aim akin to a discursive analysis and social constructionist epistemology.

### ***3.6.2.3 Data analysis process***

I used Braun and Clarke's revised six stages as a framework for the analysis (figure 9), considering "tools for a process, rather than the purpose of analysis" (Braun & Clarke, 2021b, p.2). In doing so, I ensured not falling in proceduralism (King & Brooks, 2017), understanding that following the steps below does not guarantee good RTA (Braun & Clarke, 2021b). I aimed to do quality RTA by following the values around qualitative research and engaging in reflexive, theoretically sensitive analysis (Braun & Clarke, 2021b). I acknowledge that TA has evolved since Braun & Clarke's initial publication. I used their latest 'practical guide' throughout the process to guide my analysis, acknowledging that the phase approach is not intended to be followed rigidly, but rather as a non-linear recursive process to support reflexive analysis (Braun & Clarke, 2022). Data was analysed per case as per study design. Themes were therefore developed per case separately.

**Figure 9**

*Phases of reflexive thematic analysis (Braun & Clarke, 2022)*



### **3.6.2.3.1 Familiarisation with the data**

According to Braun and Clarke (2022), familiarisation with the data is crucial to developing a thorough understanding of the dataset. I actively interacted with the data by writing initial reflections and interpretations in a reflexive journal. During the transcription process, I repeatedly listened to the recordings and critically interacted with the material. After completing this process, I read and reread the data, highlighting, and making comments in Microsoft Word of important text; as well as noting any thoughts, interpretations, or emotional reactions in my reflexive journal. Through this process, I immersed myself in the data, developing a better understanding of each participant's narrative. I ensured I had regular breaks away from the data, as suggested by Braun and Clarke, to enhance insight. Additionally, I wrote a timeline of attendance difficulties and support received for each case.

### **3.6.2.3.2 Generating codes**

According to Braun & Clarke, coding is “a process of exploring the diversity and patterning of meaning from the dataset. Developing codes and applying code labels to specific code segments of each data item” (2022, p.53). For this process I used MAXQDA VERBI Software 2022, a programme specifically designed to assist coding and analysis, to maximise the flexibility to work with the data in an iterative process throughout the six phases, while being transparent about what I did, allowing me to be flexible, while still adhering to the principles of RTA.

I systematically went through each dataset item, identifying segments that were relevant to the research questions, applying ‘code labels’, which are descriptions of the segment with an ‘analytic take’ (Braun & Clarke, 2022, p.35). Extracts were coded into as many appropriate codes as possible; certain extracts were only ever coded once. To ensure that data was coded

for as many potential patterns as possible, codes were recorded if they offered useful information, regardless of how frequently they occurred.

Once I coded an entire dataset (i.e. one interview), I went back to review my codes, shifting and changing them where appropriate, and refining them in multiple rounds. As I got more involved in the process, I started noticing and capturing closely related codes, or as Braun and Clarke point out, 'patterns of meaning' (2021a, p.38). When two codes had the same meaning, they were compared and merged. For example, code 'increase CYP's sense of safety at school' was merged with 'the importance of safety'. This happened iteratively and incrementally as I was organising and re-organising the codes, playing with different MAXQDA tools to assess the initial fit of the data at each code. To check for code consistency, I used MAXQDA, where I could simultaneously see all the coded segments for one code label using the 'smart coding' tool. To add different levels of analytic meaning, I used different systems to code/label and make comments on data by using MAXQDA diverse tools (memos, paraphrasing and codes). I kept adding those tools as I was reviewing, recoding and collating codes, in an iterative process of data analysis. I also kept a 'Reflexivity check' code, making notes and comments of data extracts that had struck me the most.

Braun and Clarke (2022) point out that there are different variations to RTA in terms of dimensions in coding and theme development, namely inductive versus deductive, and latent versus semantic, which are determined by the research purpose. When research is focused on participants' experiences, perspectives, and meanings, they recommend a more inductive approach. Given that the current research is concerned with participants' perspectives of what works in terms of factors for reintegration for CYP experiencing EBSA, I took a more inductive approach to coding.



### 3.6.2.3.3 Generating initial themes

According to Braun & Clarke (2022), “themes are the core analytic concept and focus in reflexive TA” (p.87). Themes ‘share meaning’ or ‘conceptual patterns’, united by a ‘central organising concept’. Initial theme development means working with codes, compiling clusters of codes, reviewing and collating data sets to explore possible clusters of meaning and generating tentative themes.

As this was a case study design, I started this phase once I had completed coding for all the dataset items in each case (i.e. four interviews for case 1, three for case 2). Hence, the theme generation process was done separately for each case (themes were not collated across cases<sup>47</sup>). I used different MAXQDA tools to (1) identify shared patterned meanings across the dataset, (2) compile clusters of codes, and (3) collate all coded data relevant to each candidate’s themes. Coding the data in relation to the two RQs allowed me to begin to cluster some codes and formulate initial themes (Appendix J), in relation to whether the codes referred to a concept or idea that had supported the CYP to reintegrate in school, or something that could have been done differently to support a better or quicker reintegration. During this process of initial theme development, I reflected on the difference between topic summaries and themes. Braun and Clarke (2022) warn about the risk of staying in the descriptive, superficial coding and the importance of this being a conceptual process. I noticed that some of my initial themes fell into the topic summary category. During supervision and peer discussion, I discussed with others my initial themes, a space for reflection and collaboration on this initial theme development process, ensuring my initial themes shared a central organising concept that captured the patterning of meaning across the dataset, instead of just summarising a topic.

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<sup>47</sup> In line with previous EBSA case study research (Nuttal & Woods, 2013), I developed a cross case synthesis at the end of the results chapter, while I discuss ‘overarching themes’, across cases in relation to previous EBSA literature and psychological theory, in the discussion chapter.

#### **3.6.2.3.4 Developing and reviewing themes**

I developed themes in a sequential manner (starting with case 1, followed by 2). To minimise the influence of case 1 themes when developing themes for case 2, I stayed close with case 2 raw data. However, as with previous research, it is impossible to be completely inductive, and theme development was influenced by my prior EBSA knowledge, previous experience working with CYP with EBSA and the crossover between cases. To minimise this, I discussed themes for each case separately with fellow doctoral students, ensuring that the themes were coherent, well developed, had an analytic take, and were backed up by data. In this process I frequently referred to the raw data, aware of my preconceived ideas of what works in EBSA cases. Having organised the data in initial themes, I reviewed the data, verifying which segments related to those themes, checking that they captured the initial theme and represented the whole dataset, and not just the view of one participant, in line with the case study methodology.

MAXQDA tool 'frequency table' also assisted this process, although I was conscious to not get overly fixated on frequencies, which is not the purpose of qualitative analysis, since a key central idea might still be represented by a few codes (Braun & Clarke, 2022). I noticed overlaps between themes, leading to the merging, collapsing, or discarding of ideas that failed to address the research questions. For example, 'school SEN strategies' initial theme, which supported staff knowledge on how to best support Emma and 'school recognition and sensitive to CYP's needs', were collapsed under a new theme which I renamed 'inclusive culture'. I used mind maps to visualise initial themes, rearranging and collapsing codes within themes using MAXQDA 'creative tools', to help me see the relationships between codes and themes, checking for relevance and consistency. I also used 'word combinations' and 'word trees' MAXQDA tools, which helped me to illustrate the participants' narrative,

without losing touch with raw data. I drafted a theme map which I discussed with my supervisor.

Braun and Clarke (2022) emphasise that TA and particularly this phase is a ‘recursive process’. Therefore, it is important to avoid that (1) the theme doesn’t tell a compelling story that answers the research question, (2) the researcher moves too far away from the data. I used MAXQDA smart tool in codes, checking back to data extracts to ensure that I had not moved too far away from it, due to a desire to make a theme work or because I got too attached to a story I wanted to tell, while recognising that my own subjectivity was part of the theme development process.

### **3.6.2.3.5 Defining and naming themes**

Themes should not be thought of as domain summaries that label all the components of a single topic (Braun and Clarke, 2022). This phase consisted of refining, defining, and naming themes, letting some themes go, writing a brief synopsis for each, and deciding on ‘concise, punchy and informative’ names for each theme. For example, ‘supportive network system around CYP’ was too descriptive as it tried to capture the range of support Emma received (family, peer group, school, LA), without an analytic take, therefore I decided to let it go. I gave each theme and subtheme (where applicable) a name that reflected my interpretation of the data, such as ‘the power of a diagnosis’ or ‘a sense-making narrative’ instead of ‘autism diagnosis’, to indicate my analytic take on the role that the autism diagnosis had played for Emma, according to participants. Another example was to change my initial theme ‘transition to college supportive factors’ for ‘a recipe for success’, as the latter reflected my analytic take that Sophie’s transition to college had played a key role in her successful reintegration.

Where possible, I tried to use participant’s words when naming themes. By writing an ‘abstract’ of each theme (as suggested by Braun & Clarke, 2022) I made sure to capture the

main points of the dataset, checking the theme conveyed the intended meaning, as well as using their suggested checklist criteria to ensure the themes were robust enough.<sup>48</sup>

### 3.6.2.3.6 Writing up

To make sure the final themes and subthemes addressed the study question and offered a coherent and compelling narrative, the final phase considered the entire dataset and a review of the other phases. I selected quotes that best reflected the central idea of each theme and a range of participant voices. I considered how themes weaved together and the best order to present them. There were many overlaps between cases 1 and 2. I pondered about writing the themes together, however I wanted to retain the uniqueness of each, consistent with a case study design and based on Nuttal and Woods' EBSA multiple case study (2013). In the discussion I present four 'overarching themes', themes that were relevant to both cases in relation to research questions.

Aware of how my professional experiences, values, and social graces (Burnham, 2012<sup>49</sup>) would inevitably shape the development of themes, which is part of doing RTA, I kept a diary throughout the process of data analysis (Appendix N). The final themes are the product of numerous interpretations that I made from the raw data, acknowledging that my beliefs and experiences influenced the results. This is why, according to Braun and Clarke, reflexivity is so important, which I will explain next.

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<sup>48</sup> 1. Is this a pattern viable theme—a pattern that has an identifiable central organising concept, as well as different manifestation of that idea?

If theme meets criterion 1, then check:

2. Can I identify boundaries of this theme? Am I clear about what it includes and excludes?
3. Are there enough (meaningful) data to evidence this theme? Does the theme feel rich?
4. Are the data contained within each theme too diverse and wide-ranging? Does the theme lack coherence?
5. Does the theme convey important information? This is not about the prevalence of the theme but the importance and relevance.

<sup>49</sup> The social graces framework was developed by Burnham (2012) and refers to both visible and invisible differences among people, such as those based on gender, ethnicity, age, and level of education.

### 3.6.2.2 Reflexivity

Reflexivity, which is understood to be a crucial factor in qualitative research, refers to the researcher's knowledge of their involvement within the research process (Korstjens & Moser, 2018; Willig, 2013). Reflexivity involves “the practice of critical reflection in your role as researcher, and your research practice and process” (Braun & Clarke, 2022, p.5). Reflexivity is aligned with the ‘Big Q’ approach and acknowledges that data analysis is “always underpinned by theoretical assumptions” (Braun & Clarke, 2022, p.8) which are reflected on. As such, themes do not ‘emerge’ but are the result of an active systematic researcher engagement with the data, and all that the researcher brings to the process. A systematic approach is therefore still at the core of RTA, where the process of data analysis follows the six stages outlined by Braun and Clarke in 2022 (see figure 9). However, no codebooks, coding frames or multiple independent coders were used because they contradict RTA whereby themes are not thought to be ‘discovered’ or ‘emerge’ from the data but are ‘analytic outputs’ created through my active engagement in the reflexive process of coding the data (Braun & Clarke, 2019). Braun and Clarke (2022) point out that the process of data analysis is NOT the method, but *applies* the method, alongside the Big Q values and assumptions, with reflexivity in the meaning making process of data analysis.

Finally, Braun and Clarke highlight that there is not just one way of doing RTA. Instead, it can be used to produce descriptive accounts, to more complex and theoretically embedded ones. The position of the present research is ‘experiential’ in terms of its qualitative framework (Braun & Clarke, 2022) since it aims to explore people’s own perceptions and understandings of what had supported CYP experiencing EBSA. The overall approach I took is more prominently concerned with a description of patterns of meaning in the data collected with regards to their perceptions, and less on my interpretation, while acknowledging that active engagement with the data is always a process of interpretation influenced by the

researcher's theoretical position. Congruent with RTA, I aimed to adopt a reflexive stance during the process of data analysis. By admitting my personal biases, and keeping a reflexive journal to record my responses, underlying assumptions, and emotions throughout the research analysis, I hoped to demonstrate my reflexivity.

### **3.7 Trustworthiness**

Concepts such as validity and reliability are underpinned by a realist/positivist ontology/epistemology and are therefore not adequate for the present research. According to Lincoln and Guba (1985), the appropriate criteria<sup>50</sup> for judging the quality of a qualitative enquiry lies in the following criteria for trustworthiness: credibility (paralleling internal validity), transferability (paralleling external validity), dependability (paralleling reliability), and confirmability (paralleling objectivity). I have endeavoured to ensure that the quality markers for qualitative research were achieved in terms of the above criteria for trustworthiness, as set out below.

#### **3.7.1 Credibility**

Credibility refers to the 'fit' between the participants' views and the researcher's description of those views and whether the description is 'credible' (Tobin & Begley, 2004). According to Guba and Lincoln (1985), this is achieved through strategies such as data collection triangulation, peer debriefing, audit trails and member checking<sup>51</sup>. However, Braun and

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<sup>50</sup> Lincoln and Guba (1985) techniques for establishing trustworthiness are only one way to ensure the quality of qualitative research and that their recommended strategies are not applicable to all qualitative research (e.g. member checking). It has been recognised that quality checklists are problematic, and they need to be applied critically within qualitative inquiry (Morse, 2018). There have been more recent expansive and flexible markers of qualitative research (Tracy, 2010, Yardley, 2015). While acknowledging that, I chose to use the original, widely used, and recognisable criteria introduced by Lincoln and Guba to demonstrate credibility in this study, in line with other researchers that have used RTA (Nowell et al, 2017).

<sup>51</sup> The practice of asking participants to read and comment on the analysis. As Morse (2018) points out, "It is a verification strategy ensuring the fidelity of the data and the analysis, rather than a validation strategy (p. 1398), but is sometimes used inappropriately such as checking to confirm the study results with participants.

Clarke highlight that these practices are not universal quality markers of good research, but instead, the researcher should ensure that the ontological and epistemological assumptions of their research align with these practices, while Morse (2018) highlights that “the inappropriate use of these strategies may backfire and invalidate inquiry.” (p.1393). Instead, strategies such as ‘member reflections’ (Tracy, 2010) or ‘participant feedback’ (King & Brookes, 2018) can enrich the analysis and be added as a measure of credibility when the analysis focuses on the semantic level. Braun and Clarke (2022, p.278) warn that this needs to be given space and time early in the research design so that it could be included to enrich the analysis. Due to the time and space limitations of the present research, it was not possible to add participant feedback or member reflections about the analysis. Instead, credibility was ensured by following a systematic approach to coding and creating themes, being active, critical, analytical, and reflexive throughout the analysis (Braun & Clarke, 2022). In this process, I critically engaged with the data following Braun and Clarke’s six-phase process (figure 9) with each data item, reflecting on the process of making sense of the data. Spaces/tools for reflection were the research diary and supervision.

### **3.7.2 Transferability**

According to Braun and Clarke (2022), some qualitative researchers have stated that any form of generalisability is not relevant to qualitative research. Instead, transferability is proposed as a more qualitatively situated criterion which is in line with the critical realist idea of situated realities. As such, it may be possible to make some theoretical inferences beyond the dataset in qualitative studies, while considering the effect of context and individual differences. This is in line with Braun & Clarke’s idea that when doing reflexive TA, the purpose is to explore a phenomenon which can then be connected to something broader.

The aim of this study was to explore the participants' perceptions of what supported CYP experiencing EBSA which are likely to differ and be context dependent. As such, the findings of such a small qualitative study cannot be generalised to all CYP experiencing EBSA. Instead of generalisability of the results, the aim was to achieve 'theoretical' generalisations (Yardley, 2015), that is, that the insights from studying EBSA in this context (one LA in London) could be useful in other similar contexts. To achieve this, Yardley (2015) proposes that the researcher needs to demonstrate 'sensitivity to context' by "showing awareness of the participants' perspectives and setting, the socio-cultural and linguistic context of the research, and how these may influence both what participants say and how this is interpreted by the researcher" (page 2). As such, by describing the context, participants, settings, and circumstances of the present research in detail, I aim to allow the reader to evaluate how applicable this would be to a different context, adding transferability to the research. Moreover, the multiple perspectives and the triangulation of data by asking the different people involved in the case, enhanced the robustness of the data and the possibility of generating some level of theoretical generalisation that might be helpful to other EBSA cases.

### **3.7.3 Dependability**

Dependability (sometimes referred to as reliability) relates to making sure the research is logical, traceable, and well-documented (Tobin & Begley, 2004). To ensure dependability, I kept an electronic trail of the analysis, recording a self-critical account of the research process, including my internal and external dialogue to refer to, and allow others to review the record of data, techniques, decisions, and results (Tobin & Begley, 2004). As such, I saved the data at each stage of analysis, so that I could retrace the stages of data analysis to understand the process of coding and theme generation and discuss this process in supervision. For this, I used the computer program MAXQDA to assist the data analysis



process and ensure that a track record of each stage was obtained, with the view that “QDAs make for better or at least more thorough or rigorous coding and analysis” (Braun & Clarke, 2022, p.66). However, in line with RTA, my view is that active engagement is a pre-requisite of the reflexive process and practice of data analysis and not that the technology is there to do the analysis for me (Braun & Clarke, 2022). As such, the electronic trail was a way to ‘map analytic development’ (Braun and Clarke, 2022, p.245), contributing towards dependability, while staying true to reflexive TA as a reflexivity tool.

### **3.7.4 Confirmability**

Equivalent to objectivity and neutrality in positivist research, confirmability refers to ensuring that interpretations of the findings are based on participants’ responses and not the researcher’s ‘imagination’ (Tobin & Begley, 2004), preconceptions and biases. Braun and Clarke are emphatic that the avoidance of bias is incoherent with the paradigm of RTA since the researcher’s subjectivity is the source of knowledge to be utilised “which inevitably sculpts the knowledge produced, rather than a must-be-contained threat to credibility” (Braun & Clarke, 2021b, p.334). RTA is consistent with a critical realist epistemology (Braun & Clarke 2020) that recognises that our knowledge about the world is subjective. Therefore, instead of trying to eliminate my influence in this process, recognising that it is impossible not to bring those to the data analysis process, but instead it is desirable to be “engaging actively with the participants in the study... allowing the participants to shape the topic and data” (Yardley, 2008, para.6). Thus, I acknowledged my biases, rather than looking to avoid or mitigate them. Reflexivity is a tool that has enabled me to be aware of my own biases.

To clarify the decisions I made in the data analysis process and to increase the transparency of it<sup>52</sup>, I used MAXQDA, keeping a record of my coding at each stage, and exporting ‘maps’ of initial themes to show how I worked from individual codes to themes (see Appendices K&L), including examples of the coding process (Appendix J) which can be easily exported from the software. Moreover, I sought a second opinion on the process of data analysis from my supervisor, to check whether coding was ‘reasonable’ (but not to gain inter-coder agreement). Furthermore, I kept a reflexive journal (Appendix N), acknowledging that reflexivity is central to the analysis and that “it is one of the most important practices you’ll undertake in your research journey” (Braun & Clarke, 2022, p.19). In sum, instead of looking for an objective reality by controlling subjectivity, I adhered to a CR epistemology and Braun and Clarke's (2019) assertion that theme analysis is a process of reflexive meaning interpretation rather than searching for an exact truth.

### **3.8 Ethical considerations**

Ethical approval for the research was granted by the Tavistock and Portman Trust Research Ethics Committee (TREC, see Appendix G) and the research was carried out within the ethical guidelines of the British Psychological Society Code of Human Research Ethics (BPS, 2021) and the Health and Care Professions Council ethical guidelines (2018).

#### **3.8.1 Participant safety and risk**

As the present research focused on the success factors that contributed to the CYP’s progress, it was less likely that the themes covered in the interview would upset participants. However, as EBSA can be an emotive issue, there was the possibility that interviews, particularly with

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<sup>52</sup> Transparency means that the reader should be able to see clearly how the interpretation was derived from the data (Yardley, 2015).

parents, may trigger some painful memories, when their children were having difficulties at school. Therefore, I took some precautionary measures to minimise participants' risk and ensure their safety (table 10).

**Table 10**

*Precautionary measures and ethical considerations to keep participants safe and minimise risk*

1. Participants were well informed of the purpose of the research and what it involved, so that they could give fully informed consent before taking part, as well as informing them of their right to withdraw at any point, including not answering questions on topics they did not want to discuss.
2. I offered the option for a chaperone at the interview (for parents). This considered potential issues of power imbalance between me and parent participants.
3. Sensitive and ethical negotiation of rapport between researcher and participant during the interviews, with an interview agenda as a guide, making sure that I did not lose sight of the original RQ. The nature of the open-ended questions during the interviews allowed the participants to flexibly share as much or little as they want.
4. I monitored the emotional state of participants and adopted an encouraging and non-judgmental stance, checking regularly with participants if they were ok to continue with the interview and offering breaks when necessary.
5. I offered a debrief at the end of the interview, to provide the participants with an opportunity to feedback (if they wish) about their experience of taking part in the research, how they felt during the interview and if they had any further questions for the researcher.
6. I had a list of services/charities where I could signpost participants in case they were upset after the interview, although this was not necessary as all participants reported to be fine during the debrief.
7. Careful consideration of my own social identities or 'social graces' (Burnham & Nolte, 2019; e.g. gender, class, race) and their possible effects on the interviewee (Willig, 2013). To better understand this, I brought these issues to supervision, and I kept a reflexive research diary.
8. Deception was not used at any stage of the research.

### 3.8.2 Valid consent and withdrawal

I followed GDPR regulations to conduct the research, avoiding approaching individuals directly. I sought informed consent from participants, who participated freely and voluntarily.

I gave an information sheet prior to their involvement, containing all relevant information about the research and what their involvement would entail (see information sheet, Appendix D). I also offered them the opportunity to ask any questions. I informed participants of their right to withdraw at any point (before data analysis) from the study.

### **3.8.3 Confidentiality and anonymity**

In line with BPS (2021) and subject to the requirements of the Data Protection Act (2018), the information obtained from participants during the present research has been kept confidential (including consideration of locations). I stored the data securely, including records of consent and audio recordings. Participants were informed of the limits of confidentiality (in case of risk to the safety of the participants or others). I informed participants in advance that a transcript of the interview was going to be kept (anonymised) for the purpose of supporting the analysis phase of the research, and that anonymised data will be kept for five years and stored and used in compliance with the UK Data Protection Act (2018) and the Tavistock and Portman Trust Data Protection Policy.

## Findings

### 4.1 Overview

The following chapter offers a narrative of my reflexive thematic analysis of the data and aims to answer my two research questions:

1. What are the perceived factors that supported two secondary age students who had experienced EBSA to reintegrate into school according to them, their parents, school staff and external professionals (e.g. educational psychologists) in one LA?
2. What do CYP, their parents, school staff, and external professionals perceive to be the factors which may have contributed to a faster/more successful reintegration into school for those children experiencing EBSA?

In this chapter, I present themes for cases 1 and 2 separately, as per study design. I developed six themes for case 1 related to RQ1, and one theme related to RQ2. For case 2, I developed four themes in relation to RQ1, and two for RQ2. Figures 10 & 11 illustrate the themes for cases 1 and 2 respectively related to RQ1. The labels for the main codes that fed into them can be found in the coding system (Appendix K). It is noteworthy that case 1 had richer data, as it included four longer interviews, resulting in over 600 coded segments, whereas for case 2 there were only 166.

While each theme has a distinctive central concept, they inevitably link to each other. I chose to present the themes in a certain order to facilitate what Braun & Clarke call the “weaving together different strands to develop a singular whole” (2022, p.179). For example, theme 1 (case 1) ‘a flexible, young person-centred, coordinated approach’, highlights a central dominant theme across the datasets, which then waves into the next theme ‘building trust and safety in school: a relational approach’, given that paramount to the coordinated approach

that school, family and professionals took to support Emma, were the key relationships that made her feel safe and trust the system. Similarly, theme 5 'CYP making sense of her experience', is closely related to theme 6 'Emma's protective factors' given that Emma's personality traits and protective factors, enabled her to make sense of her experience, with professional support. This is in line with previous research and theoretical frameworks that point out to the interactive nature of supportive factors which will be discussed further in the next chapter.

To best illustrate the central concept of each theme, I used excerpts from the interviews. I used italics for all direct quotes from transcripts. People's everyday speech can occasionally be unclear and repetitive, thus I used a '....' to denote the removal of something from a direct quote to make it easier to read. At the end, I compare cases 1 and 2 in terms of similarities and differences related to each research question.

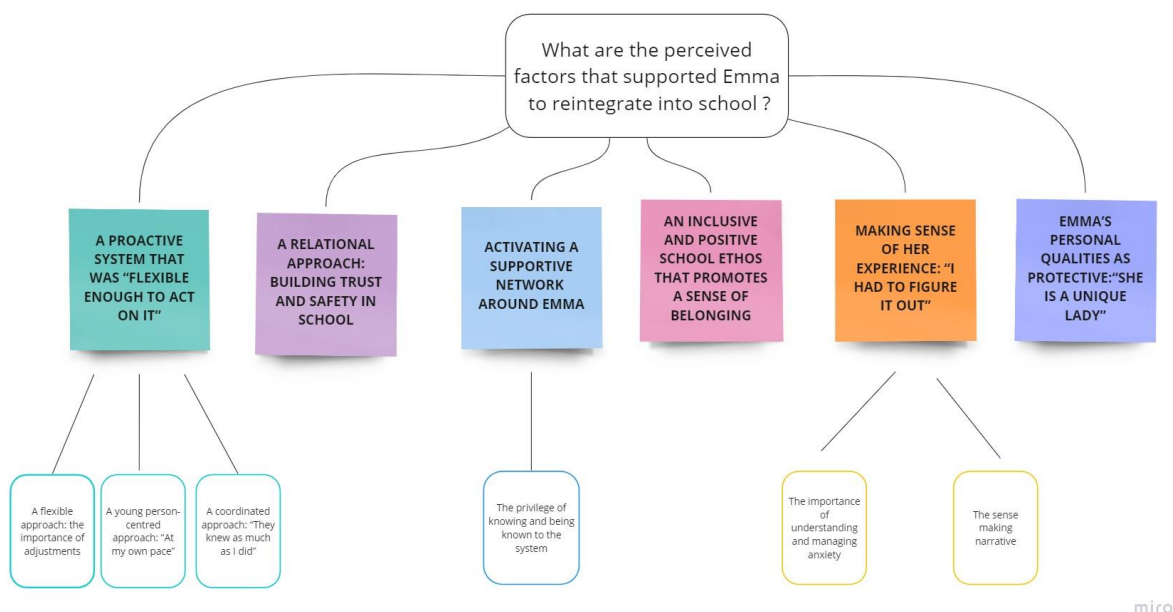
## **4.2 Case 1**

### **4.2.1 Themes related to RQ1.**

This section describes six themes I developed for case 1, in relation to RQ1, that is, the factors that supported Emma to reintegrate into school. Figure 10 illustrates the themes that I will describe next.

**Figure 10**

*Thematic map illustrating themes related to RQ1 from Case 1*



#### **4.2.1.1 THEME 1. A PROACTIVE SYSTEM THAT WAS “FLEXIBLE ENOUGH TO ACT ON IT”**

Throughout the participant's accounts, this theme was particularly dominant. It refers to the proactivity of the school system that offered a flexible, personalised and coordinated approach, but also of the professionals such as the EP's “gradual reintroduction and desensitisation”, embracing this “trial and error” approach, which empowered Emma, supported her reintegration, and promoted her wellbeing. The uniqueness and distinctiveness of this theme are the quality of the support she received from school and professionals, which reflect a proactive system.

I identified three key aspects to Emma's support, which were central to her reintegration namely (1) flexibility, (2) person-centred, and (3) coordinated. Next, I will discuss these three aspects in more detail.

#### **4.2.1.1.1 A flexible approach: the importance of adjustments**

School being 'flexible enough to act on it', as Emma's mother said, was a key aspect of Emma's reintegration plan. The school's flexibility is illustrated in several interview extracts by Emma's mother, who talked extensively about the adjustments, which included but went beyond a reduced timetable, to show how much the school cared and believed in giving Emma what she needed at that time:

*"It was kind of a bit hybrid at first, so sometimes she was in SEN and sometimes she was in the classroom.... She continued to go, but some days she wouldn't go in the lesson. She just said: 'No, not today' .... So then they came back and said, okay, so basically these things are all taken out of her timetable, and she doesn't go to registration. She doesn't go to assembly. She doesn't do PE. All that's gone. And she leaves each class five minutes earlier.... So, she was never in the corridor. And she ate her lunch in learning support. And she could use some special toilet which meant she didn't have to go in the girls' toilets...The flexibility was amazing"* [Emma's mother]

Emma herself talked about the kind of 'allowances' she was given that enabled her to be in school:

*"They were already making a lot of allowances in regard to me...they said I didn't have to do the work, or I didn't have to do all the work. But you try and do some of it when I could...It was kind of accepted that I wasn't going to, I wasn't going to really talk...or that I might not*



*actually do any work...I was allowed to go to lunch or bring mine and eat in SEN...I never got in trouble for not doing homework after that.” [Emma]*

The impact of all these adjustments, were creating a sense of psychological safety for Emma, without rushing her, without having to give explanations which would have caused her anxiety, allowing her to have the energy needed to ‘get through the lessons’ and stay in school for progressively longer periods:

*“The reassurance I think the biggest thing for her. It was like she could go, yeah, and the very fact that she could leave, made her feel much better. She didn't have to ask for anything. She could just go...So they managed somehow, by taking out so many of the scary things, they managed to leave her enough kind of concentration and energy and willpower to get herself through the lessons.” [Emma’s mother]*

School’s flexibility and ability to adapt to Emma’s needs, is also shown by their willingness to act on professional advice, as the following two quotes illustrate:

*“School was very happy to try the things we put in place” [EP]*

*“The school really used that advice that they were given by professionals.... I think that was the key thing, that the school really listened”. [Emma’s mother].*

#### **4.2.1.1.2 A young person-centred approach: “At my own pace”**

This alludes to the importance of a young person-centred approach, that is, the ability of the school and professionals involved, to listen to CYP’s views and act on them. This involves person-centred planning: co-constructing strategies with the CYP and a personalised plan,

checking with Emma at every step, and changing the plan when things were not working, as the following extract shows:

*“We changed the plan, we said this isn't working going on to this one subject. How about if she comes in and sees a few people and has lunch...”* [Emma’s mother]

This person-centred approach also relates to giving Emma time and space to reintegrate, a sense of no rush, of her doing it at her own pace. Emma’s SEN teacher exemplifies this progressive person-centred approach as taking “baby steps” which is exemplified in the following extract:

*“I think that from there we recognised that actually telling her to come in and getting her straight to a lesson was not going to happen, we needed... almost like baby steps. So, we had her in school brilliant, so now school needed to get her into SEN, so that she would be familiar with that. And then from there, we will be able to go outside to be with friends and from there we'll be able to get her into lessons. So it was really it was it was a bit trial and error. And it certainly did evolve over time.”* [SEN teacher].

For Emma, this person-centred approach, which allowed her to do it at her own pace, was critical:

*“I think just being able to do it at my own pace, I guess. Because the expectation was that I try and get back in school, and how I did that, at my own pace, was helpful... the fact that I was allowed to go slowly was reassuring because I didn't think I could go any faster.”*

[Emma]

Emma's EP, also noticed the school's personalised gentle approach:

*"There was no expectation that she should return to school immediately. There was no expectation that she'd be in there, participating in everything at once, it was at her pace, that she was comfortable."* [EP]

Then there were also the multiple adjustments that school did, that exemplify the person-centred approach, taking Emma's lead on what she felt ready and safe to do. This approach is exemplified in the following extracts:

*"So that meant that we could sit in silence for 45 minutes. Or we would go for a walk around the building. When there was clearly nobody going to be around ... Or we would go and take a stroll outside in the playground areas and you know, look at trees or squirrels or anything like that... That flexibility that understanding, you know... that if she wanted to do hardcore equation, she could for sure. But if she wanted to sit and meditate, she could have that option as well".* [SEN teacher]

This person-centred approach also refers to the collaboration between CYP and school staff, sometime mediated by the EP, listening to her views and empowering Emma to make decisions and communicate her needs and wishes, as the following extracts show:

*"And then I talked to her, or they talked to her. So it was all very collaborative. It was really working with her and empowering her really to see what she could do... So there's always her*

*being allowed to say the bits that really, she couldn't do. I can sit in the class - if nobody talks to me; I can sit in the class- if I can leave.” [Emma’s mother]*

*“It was all of these small, you know, it was choices for her, do you want to go outside? you do not want to go outside, so you want to sit here? So I will sit here. And that obviously helped her as well. Because it's, I think it started to empower her to make her own decisions.” [SEN teacher]*

*“I hoped to kind of provide opportunities for Emma to take ownership to feed back to school around what was helping what was impactful, what she'd learned. To be confident in owning that knowledge, be confident and kind of saying, this is me, this is what's helpful”. [EP]*

The triangulation between the three participants as illustrated by the quotes above, reinforces the impact that a person-centred approach that empowered Emma had on her successful reintegration into school.

#### **4.2.1.1.3 A coordinated approach: “They knew as much as I did”**

Lastly, the importance of coordinating Emma’s support, where all adults in school were aware of her needs and how to best support them, was central to her successful reintegration. Emma’s SEN teacher coordinated her support and ensured that all teacher and LSAs, with Emma’s consent, knew how to best support her:

*“Miss NN was the head of SEN. She was also my geography teacher. So she was the one that talked to my mum and me about the arrangements that would be made with me and the other*

*SEN stuff. And she kind of, because she was also my teacher, it was kind of... she helped with the other teachers understanding.*" [Emma]

This coordination extended to the strategies that the EP and Emma co-constructed. The school took on board EP advice, which facilitated to foster Emma's ability to communicate with school, as she could see they were listening to his suggestions:

*"They (school) wanted to be involved as I said, we'd always check in if there are activities, or strategies that are particularly useful... And throughout we'd have meetings with school staff to kind of feedback and things"* [EP]

Emma mentioned how all the LSAs, knew about a communication system she and the EP devised (traffic light system), where Emma communicated using different highlighter colours, which helped to lower her anxiety:

*"That was given to all the people, even when they had the different members of staff working with me, they will see that (the traffic light system) with my permission, so I didn't feel like I was scaring them by how bad it could get... They knew as much as I did, okay kind of thing."*  
[Emma]

*"School made it very clear that, they kind of made everyone aware of some of the particular areas of difficulty for Emma such as if she was freezing, writing down what that looked like, what that meant for her and how she could be supported in a kind of competent and non-'look at her'- sort of way."* [EP]

In sum, a flexible young person-centred coordinated approach, as I have explored in this theme, was key to empowering Emma, allowing her to reintegrate into school at her own pace. The next theme explores the role of relationships, the school ethos and school resources, which contributed to Emma's sense of trust, safety and belonging to the school community.

#### ***4.2.1.2 THEME 2. A RELATIONAL APPROACH: BUILDING TRUST AND SAFETY IN SCHOOL***

This theme refers to the concept of trust, that is, the feeling of confidence and security in school, which is key for a CYP experiencing anxiety to reintegrate into school. There are many examples in case 1 dataset that convey this critical concept of safety which is inexorably related to building and maintaining trusting relationships with key adults and peers in school, discussed by all participants. However, none of this could have happened without Emma having a trusting relationship with her mother, which created that security net in her family and what participants described as the 'stability' of the family unit.

*"I think that getting her to the school gate was all down to her mum and the relationship that she had with the mum."* [SEN teacher]

Once Emma was in school, developing those trusting relationships with key adults allowed her to feel safe in school. There were some already established relationships, for example, with her geography (and SEN) teacher. Developing further and forging this trusting relationship with her, enabled Emma to stay in school for increasingly longer periods of time. According to Emma's mother, this key relationship was a major factor as it provided a source

of emotional support when things got difficult, but also a person who was there, who knew her, her family, her brother and whom she could trust:

*“You know, talk about the teacher that changes somebody’s life...So like for a week she was like, always with NN (Emma’s teacher), not always directly with NN but at times when NN wasn’t teaching so NN was in the Learning Support room...So she didn’t go to any lessons first. She just went with NN.”* [Emma’s mother]

In Emma’s teacher’s words *“her and I went on a journey together”*, highlighting the importance of that trusting relationship. Emma’s teacher devised her reintegration plan which included many other adults with whom Emma consequently developed relationships and began to trust as well. As Emma’s teacher described it, it was like a ‘snowball’ effect where, once she felt safe in the environment, supported by those trusting relationships, she could relax:

*“That relaxing environment then obviously, you know, created some sort of snowball effect which allowed her to feel comfortable to be able to go back into lessons...So I think that the biggest overall arching factor was trust... trust that she knew she was in a safe place. Trust that she knew that she had an adult that would perhaps listen to her... she had confidence in the people that she was working with...”* [SEN teacher]

Emma’s mother also talks about those relationships with different LSAs: *“So there was one that she liked the best. And you could see that this woman was very gentle, and she said: ‘hello Emma. How are you doing today?’. And she would just take her by the hand and leave her off. And then there was a man who was quite good at reading her.”* [Emma’s mother]

Another key relationship for Emma that supported her trust and sense of safety, was the EP, which is highlighted next:

*“I think it falls back to that trust aspect. He created this trust (EP), perhaps a trust that she had not really managed to achieve with a professional before...I recognise that I'm, you know, a strange person coming into school. For some YP it's really important to have someone unfamiliar, that they can share with others, it's important that they can build trust,”*  
[SEN teacher]

*“I think for me one of the things that working with Emma really highlighted was the importance of you know, taking time to build those relationships.”* [EP].

Finally, relationships with peers were also key for Emma. As Emma's SEN teacher said, sometimes she did not know what to do, and it was her peers that helped her.

*“That sort of camaraderie, sort of like, you know, relationship that she had with everybody”*  
... *“So, there's one particular occasion where she had frozen in the playground and couldn't do anything. Actually, it wasn't me who got her to where she needed to be. It was one of her friends.”* [SEN teacher].

These relationships with friends who Emma trusted, became one of the reasons she wanted to come to school and catch up, so that she could stay with her year group:



*“I don't really talk to people outside of my family or outside of school, so the only friends I had were at school, and my main way of communicating with them was seeing them at school. So I kind of wanted to go to school just to see them...And that was also the reason I didn't want to repeat the year, because I didn't want to lose the people in my year that I had actually managed to make friends with” [Emma]*

The triangulation of views illustrated above highlight the key role of those trusting relationships with her mother, teachers and support staff, educational psychologist and peers, in supporting Emma's reintegration into school.

#### **4.2.3 THEME 3. ACTIVATING A SUPPORTIVE NETWORK AROUND EMMA**

Across all interviews, participants highlighted the importance of having an active supportive network for Emma that communicated about supporting her reintegration into school. This theme is closely related to relationships, but I wanted to highlight the systemic aspect of network support, while the ‘the relational approach’ alludes to the quality of key relationships in building Emma's sense of safety in school. Supportive network also relates to the school's positive and inclusive ethos, which mediated school's activation of resources and making reasonable adjustments, such as allowing her to have lunch and spend breaks at SEN with friends. However, the central idea of this theme is the broad and extensive support that was available for Emma, which was central to meet her needs and her successful reintegration in school.

In reference to the activation of this support network, Emma's mother said:

*“I think what helped me the most was when they took it seriously and helped her” [Emma's mother]*

Being taken seriously involves activating a whole network of support. This support was broad and mentioned by all participants in all 4 interviews.

A central supportive network for Emma was her family, in particular, her mother, as the following quotes reflect:

*“I also think actually, her home life, the stability and the support that she got from her parents, her brothers...in particular mum and obviously, that support, I think, you know, helped her with transition...not another family would be able to do”* [SEN teacher]

*“My mum was the main person that was there.”* [Emma]

*“Mum was very supportive”* [EP]

The second key supportive network for Emma was school. The emphasis in this theme is on the supportive role of the school as a system, the fact they acted quickly, implemented a support plan, and the vast amount of support that Emma had, firstly from her SEN teacher but also, the education welfare officer at school, head of year, peer group, LSAs and so on.

*“And they (school) tried to help me go into classrooms because I had really bad panic attacks about going into classrooms.... So it was kind of really, really helpful that they knew where to start.”* [Emma]

*“We had where we could the right people in, in in you know, the right person in the role as the head TA”.* [SEN teacher]

*“Actually, it wasn't me who got her to where she needed to be. It was one of her friends.”*

[SEN teacher]

*“The one to ones generally had some expertise in the subject, partly because they had to help her do the work if she wasn't in the classroom” [Emma's mother]*

As well as school's support, there was extensive professional support and funding from the LA to support Emma and her family, which also allowed school to bring in an EP:

*“Interim funding immediately, without even having sort of like even a sniff of the EHCP application, and they gave us interim funding, which supported us being able to ensure that she could have the right support at the right time... the school I think applied for something like one term worth of money for like, full time one to one” [Emma's mother]*

*“And with that you sort of slot in the educational psychologist, so she had CBT with LL and then obviously she had CBT with someone from XX (council), as well as having an EP input from XX (council) in for her educational health care plan” [SEN teacher]*

Among professional support network, the extensive EP intervention in the form of CBT was central to Emma's reintegration:

*“So I think CBT was useful here because it wasn't a one-off meeting, it wasn't like 'fill in this questionnaire and I will come back in time.' It was a delicate therapeutic intervention that offered Emma the time and kind of the listening support to really help her and understand herself and bring about positive change. I think had I gone in with consultation, it may not have had the same effect.” [EP]*

As the quotes above illustrate, all participants underscored the importance of the extensive support network around Emma, as a key factor in her successful reintegration into school.

The school and professional's broad and extensive support was mediated by other factors, such as the fact that the family knew and was known to the school, which is the central idea of the next subtheme.

#### 4.2.3.1 THE PRIVILEGE OF KNOWING AND BEING KNOWN TO THE SYSTEM

This subtheme explores a core idea expressed in various ways throughout the dataset, that Emma's case, in her teacher's words, might be sort of 'unique'. When going deeper into the latent meaning of what this 'uniqueness' means, I reflected about privilege, about being known to the school, and knowing the system, which enabled Emma's mother to get the right support for her daughter, activating support networks.

Being known and knowing the system was a mediating factor in getting the support from the network, that was key to her reintegration into school. Emma's SEN teacher expressed that the family was already known to the school and SEN, as Emma's brother had SEN. The idea of being a 'conventional' family, already known to the school system as supportive, meant they were trusted and possibly that Emma got the support that she needed.

*"The fact that she already had an established relationship. So she already had- you know, her brother was already coming to the school... And I think I have to be honest; I think because there was this relationship with the family in particular, I think that that did mean that there was probably perhaps maybe more flexibility."* [SEN teacher]

*"The SENCo was always involved a bit because the SENCo had been really good when she first arrived and had put her in this club and the SENCo was her geography teacher as well as being the SENCo and she also knew the twin really well. So knew me"* [Emma's mother]

That familiarity mentioned in the quote above became pivotal in developing Emma's sense of trust in school. And from that existing relationship between Emma's mother and school, there

is the trust that school had on the parental abilities and believing not only in Emma (“*they kind of believed me*”-Emma), but also that her family was trying everything possible to get her in school, and if she was not in, it was because something was going on and school needed to be more involved:

*“I supposed they had some faith in me as a parent because they knew her twin, and her twin was there every day, so it wasn't like I was a completely irresponsible mother.”* [Emma’s mother]

*“We knew that, you know, if her mum could get her into school, she would be in school... And I think, again, there was that trust, and understanding that if she couldn't do it, or wouldn't do it, it was not because she didn't want to do it, but because she couldn't do it, because something was stopping her from doing it.”* [SEN teacher].

This plan then fed back into a positive loop of trust, where because the school trusted the family and Emma, they did everything possible to support her, which in turn, made Emma trust school. That existing trusting relationship was key because, that trust or ‘faith’ (as Emma’s mother said) meant that the school did everything they could to support her. This trust came from school already knowing the family and their perception of this ‘conventional family’ who could be trusted, who held a privileged position, which Emma’s mother clearly expressed in the following interview extract:

*“Emma was clever and possibly white and possibly because she you know came from a kind of conventional family background, I felt that we got more attention than she might have done if she (pause), her background had been different. And I don't want to say that, and I don't*

*even blame the school for that. Really. I think that's the whole system. But it makes me sad"*

[Emma's mother]

This incredibly honest and insightful comment, highlights the power of holding privileges (including white privilege), which meant that Emma got more attention, was better 'known' to the system, and received the support that she needed to reengage with school.

As well as being better known to the system, with privileges comes knowledge of the system and how to navigate it. This was represented throughout the dataset, where Emma's mother reported-on several occasions- having to negotiate a complex health and educational systems that "do not talk to each other". However, because of her knowledge of it, having been through it with Emma's brothers, she knew how to navigate them. This knowledge of the system, and position within it that empowered Emma's mother to get the support that she needed, was also pivotal to Emma's recovery and reengagement with school.

*"So I went back to my GP and said, can you refer her to neurology (pause) which is always a bit of a sideways move, but because her brothers have autism they were under this neurologist. So I said: could you just refer her there? And the GP said yeah, so we went to see the child neurologist".* [Emma's mother]

*"In the end, I dealt with the EP directly partly because I knew (the LA) quite well...And so then I suppose she was lucky because I already had three children with EHCPs. So I kind of knew the system really well."* [Emma's mother]

#### **4.2.4 THEME 4. AN INCLUSIVE AND POSITIVE SCHOOL ETHOS THAT PROMOTES A SENSE OF BELONGING**

This theme alludes to patterns of meaning across the dataset that indicated that the school's nurturing and positive ethos and resources served Emma's emotional needs. This made Emma feel valued and supported her sense of belonging to the school community, contributing to her reintegration and wellbeing. Emma's school had a large SEN department, which meant that she was able to come into school and reintegrate in a way that felt safe for her, accessible and in that sense, inclusive. Those spaces that the school made available for Emma and for the EP to work with her, as well as their allocation of resources to support CYP with SEN, including physical, human, and strategic, were indicative of the school's inclusive positive ethos that enabled her to reintegrate, as the EP illustrates:

*“So starting in a safe space and gradually exposing her to kind of more safe discomfort? So doing those explorations of the school were really, really important... Everyone around her wanted, you know, what was best for her. And so that was that was very clear... There was understanding, there was recognition, there was space. And that led to a number of changes.” [EP]*

As well as the physical space, the inclusive ethos transpires in the strategies and procedures in place to support young people struggling with attendance:

*“We certainly had strategies to be able to support her...whilst all strategies don't fit all, you know, obviously, we had our own strategies that we knew worked really well with young people.” [SEN teacher]*

*“There was a procedure ...They would phone up if she was late. And they would have parents’ meetings and individual teachers would phone sometimes and say “what's happened? ...And there was more contact with teachers and staff (than in her previous school).” [Emma’s mother]*

The school also had access to external professionals that were key to Emma’s reintegration, such as the EP who did CBT, as the following extract exemplifies:

*“Emma’s school was unusual in that it had three link EPs. Emma was brought to the planning meeting due to concerns around anxiety, situational mutism, that freezing and emotional based school nonattendance.” [EP]*

Participants also highlighted that school had ways to join in activities, highlighting the school’s inclusive ethos:

*“They had a girl’s club at lunchtimes, where she went...so she felt she was included”*  
[Emma’s mother]

*“She came to have lunch with me, when I went back into school, so that was nice. Two of my other friends that I saw during break sometimes. One of them was also autistic so that was nice.” [Emma]*

*“People are very accepting of differences here. And I think that this helped her a lot as well.”*  
[SEN teacher]



As well as this, the school showed a positive culture by celebrating success in an inclusive manner:

*“The teachers were really positive about her ‘I’m so proud of her. She’s done this’ ...They were always really good at praising her in that school, praising everybody, really...They still celebrated her in assembly without her there. And in that school, it was a really big thing to get your name on the board in assembly. And so sometimes that would be her. And even though she wasn’t there, the other kids would come: “you know you were on the board...she was included in quite a nice way.” [Emma’s mother]*

As well as a culture of celebrating success and being inclusive, the school was nurturing in their approach, showing that they care:

*“They did seem to care... always emails and if I did email and say if I was worried about this, they always answered I mean, just phenomenal.” [Emma’s mother]*

This shows the consistency across participants around the inclusive and positive ethos of Emma’s school, which supported her sense of belonging and, in turn, her reengagement with school.

#### **4.2.5 THEME 5 MAKING SENSE OF HER EXPERIENCE: “I HAD TO FIGURE IT OUT”**

This theme explores a core idea expressed by all participants: understanding herself better and being able to make sense of her experience supported Emma’s reengagement with education and improvement of her wellbeing. One aspect of this idea was understanding anxiety, how it expresses in the body and affected her thoughts. This relates to Emma’s capacity for insight and other personal strengths, but as well the support from school and

professionals, particularly the EP with psychoeducational work around anxiety. The EP's acceptance of her feelings and thoughts, normalising her experience and Emma's ability to learn from experience and develop and build her self-awareness, were pivotal. This slightly overlaps with 'CYP's protective factors' (next theme), but it has a separate place, given that it includes the relational aspect, the interaction between her personal qualities (e.g. being reflexive) with the support that enabled Emma to make sense of her experience. This theme has two subthemes: (1) The importance of understanding and managing anxiety, and (2) the sense making narrative.

#### **4.2.5.1 The importance of understanding and managing anxiety**

Being supported to understand her anxiety and making sense of her 'freeze' responses or panic attacks, were a key part of this, as the following extracts show:

*"So it was kind of key [to] explain that my body's reactions, some of the more extreme things that I was feeling had a reason... it's build-up, it's not like a big reason now, it's just build-up..... So having explained that it did have an emotional root, and that if I started to feel more comfortable that it would get better, then it was kind of more comforting than having some kind of mystery sickness....And it was kind of only when I was forced to examine how I was thinking and feeling before, during and after the panic attacks, that I realised that there were some negative thoughts associated with school and it was okay if they were irrational. I could still feel negatively about them."* [Emma]

This extract reflects the importance of Emma understanding and making sense of anxiety, including normalising her feelings. The EP also referred to the psychoeducational work with Emma:

*“And then we'd go through it again, reiterating why all these feelings were happening.” [EP]*

Emma recognised that, although the support received helped her to make sense of her experience, she had to do the work. It was in a way, down to her, to the emotional work she did to make sense of her experience, which helped her to get better:

*“And in regard to things like the therapy and people at school, and then my family talking to me about those things, I think it was kind of just trial and error at the beginning, but once I figured out what worked for me and how best to explain it, I was able to apply that to other people...And the one that could really help me with the emotional side was myself and that was kind of... I had to figure out how to verbalise that so that other people could understand enough for me what help they could [give] in that regard.” [Emma]*

#### **4.2.5.1 The sense making narrative.**

This subtheme refers to Emma making sense of her autism (following her diagnosis in year 10) and how it related to the difficulties she was experiencing. Throughout the dataset there is this idea that Emma’s autism diagnosis was a turning point which helped her to make sense of her experience, as well as trust the system. According to Molloy and Vasil (2004), autism develops into a narrative that helps autistic children and their families make sense of their experiences.

*“And I think actually that was a huge, huge relief to her...So then kind of suddenly it was like, oh, this is why! I don't know if she had been frightened of what was wrong with her. She*

*hadn't said that...but then suddenly when she had this diagnosis like oh, okay, that makes sense. So the day of the diagnosis was like, everything changed. Really.” [Emma’s mother]*

Emma’s SEN teacher also talks about the turning point of the diagnosis:

*“I think that with that diagnosis came some understanding that okay, well actually, I understand this because, you know, I'm familiar with this. It's in my family...she obviously recognised that, you know, she had a need and now it had been recognised and it wasn't going to kill her” [SEN teacher]*

#### **4.2.6 THEME 6. EMMA’S PERSONAL QUALITIES AS PROTECTIVE: “SHE IS A UNIQUE LADY”**

This theme relates to Emma’s individual traits and qualities that enabled her to engage with the support offered promoting her wellbeing, as well as motivated her to reintegrate back to school. All the personal qualities described below, enabled her, with the support of school and professionals, to be resilient and ‘bounce back’, which is at the core of this theme. That is why I have called it protective factors.

Key to Emma’s recovery was her motivation, persistence, and engagement with the reintegration process. It was conveyed by all participants how much Emma tried and continued trying, even though it was difficult for her:

*“I needed to try and get... make this a bit better, even though I don't really believe or know how to make it better...I needed to start, and it was better to do something bad than to do nothing, and it wasn't going to get any better if I didn't try and trying really, really really*

*hard for as long as I could ... Just try and do some other stuff. And maybe you'll be able to do that thing. The next day. Or the day after.*” [Emma]

*“Someone with kind of high levels of anxiety but turned up every week. Even at the beginning, when anxiety was kind of its highest around the sessions. She always engaged... There were times when you know she would, she would find things uncomfortable. She would find things challenging. But then she'd always reflect afterwards on why that was. And she kind of developed different strategies throughout the time”* [EP]

Another personal trait that supported Emma was beautifully described by her teacher as her ‘uniqueness’, her ability to be herself, which also relates to her resilience and ability to give things a go without fear of being different, which is described next:

*“she's a unique young lady, so she, to me, never really seemed to be worried about the fact that she might seem or act differently... if I was to sort of picture her circumstances and put them to onto students...they would not want to be deemed to be seen to be different. Whereas actually she, it wasn't that she didn't mind, I am sure she did mind, it just didn't seem to bother her. She always tried to give it a go.”* [SEN teacher]

Emma’s ability to engage with her reintegration plan was compounded by the fact that she felt safe, had strategies, understood her needs and was able to make sense of her experience, which relates to previous themes. However, there was something about herself, the ‘uniqueness’ mentioned by her teacher, which enabled her to ‘be brave’, which is illustrated next:

*“When she was in a better place where I think she'd had enough CBT for her to be able to understand her needs. She'd have enough strategies... she had confidence in the people that she was working with. I think she was, that made her really brave...how I would characterise her, which I think she probably would hate was, I would say that she was very brave. She was brave enough to go outside and literally just stand on the peripheries. And I think another young person wouldn't want to do that.” [SEN teacher]*

Another very salient characteristic that was present throughout the dataset was Emma's academic abilities which enabled her to stay motivated with her reintegration plan:

*“I've kind of always thought that I was going to be going on to higher education because I wasn't particularly artistic or athletic or good social-wise, but I was generally good at academics.... My mum and my teachers said that the fact that I was able to kind of get back into it once I started reintegrating back into school was probably because I was good academics-wise.”*

#### **4.2.2 Theme related to RQ2**

This section describes the theme I developed for case 1 in relation to RQ2, that is, the perceived factors that could have facilitated an earlier progress for Emma. This theme has two subthemes related to the timing of EBSA support.

##### ***4.2.2.1 THE TIMING OF EBSA SUPPORT***

This theme contributes to answer RQ2. It relates to patterns of meaning that refer to what could have helped Emma even more or to recover more quickly. The central concept underlying this theme is the importance of the timing of the support. When looking at the datasets, it appeared that there were two seemingly contradictory views, both telling a

compelling story about the importance of the timing of EBSA support. Therefore, I have divided it into two distinct subthemes that share the centrality of the timing.

#### **4.2.2.1.1 A SYSTEM THAT PROVIDES EARLY EBSA SUPPORT**

This subtheme represents the importance of having preventative and early support for CYP experiencing EBSA, including earlier involvement from external agencies, to identify CYP's needs and recommendations, as well as the importance of the communication between the health and education systems. As part of it, participants highlighted the importance of early EP involvement, both for therapeutic support, but also for early identification of needs.

*"I do wonder whether if she had access to somebody like you know to LL for CBT or trusted adults sooner, then maybe we would have been able to integrate her back into school much quicker."* [SEN teacher]

Emma's mother reflected on the importance of bringing an EP earlier who could have identified her social communication needs:

*"Getting the diagnosis should have been quicker with both schools if they brought in an EP quicker... that would have helped. Somehow it would be better that for non-attendance, schools should bring an EP."* [Emma's mother]

Also, the SEN teacher talked about having an "emergency input for school", for cases like Emma, so that schools can provide earlier support. This suggests that, having the resources to support Emma earlier in the process, might have made a positive difference to Emma's reintegration into school.

#### **4.2.2.1.2 THE PROCESS CANNOT BE RUSHED**

Alongside ideas of early intervention, there is also a perception that possibly the EP involvement happened at the right time, and that Emma needed to be ready and have time to process her experience. This contrasts somehow with the view expressed in the previous theme. According to the EP and Emma herself, she needed time to make sense of the autism diagnosis and anxiety, which links

to the previous theme about the importance of making sense of her experience. Therefore this subtheme has been named 'The process cannot be rushed'.

*"I don't really imagine anything helping more or speeding up the process or anything like that... I had to figure out how to verbalise that so that other people could understand enough for me what help they could [give] in that regard."* [Emma]

*"I don't want to say whether, you know, had I been involved at a different point, it'd be more successful or less successful. I think at the time when I was involved, it was a good time to be involved. Emma was at a point where she could engage...Had it been earlier. Would that have been the case? Had it been later, would that have been the case?".* [EP]

In sum, this theme suggests that there are differences in the perception between participants around the timing of the support that Emma received. On the one hand, Emma's mother and SEN teacher wondered whether earlier access to EP involvement and autism diagnosis could have made a positive difference to Emma's reintegration into school. On the other hand, Emma and the EP think that the support she received was at the right time given that, in their view, the reintegration process could not be rushed.



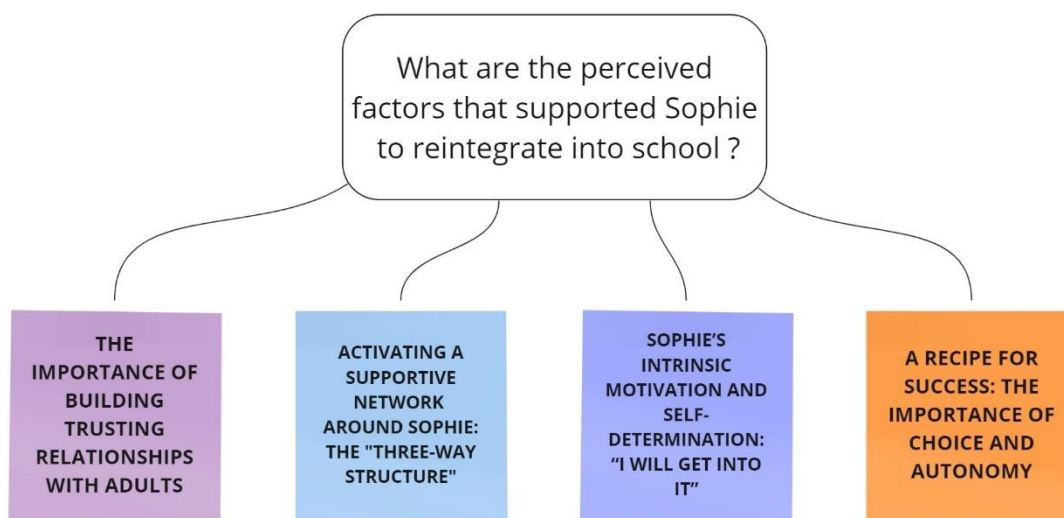
## 4.3 Case 2

### 4.3.1 Themes related to RQ1

This section describes the themes I developed for case 2, in relation to RQ1, that is, the factors that supported Sophie to reintegrate into school. Figure 11 illustrates the codes related to the themes that I will describe next.

**Figure 11.**

*Thematic map illustrating themes related to RQ1 from Case 2*



#### ***4.3.1.1 THEME 1. THE IMPORTANCE OF BUILDING TRUSTING RELATIONSHIPS WITH ADULTS***

This theme refers to the key role of supporting and trusting relationships with adults for Sophie's sense of safety, in particular her relationships with the school nurse, her mentor, and her mother, which enabled her reintegration in school. Firstly, in her family, as Sophie's mentor said, "familial relationships were very important for her". Sophie's relationship with

her mother, in whom Sophie confided, who empathised and supported her throughout two difficult school years, was key:

*“Yeah, I would say her relationship with mum is a very important one for her.”* [school nurse]

Following a person-centred approach tailored to her needs, Sophie’s mentor gained her trust.

*“I think with the mentor, they would go for coffee, and I did see a change in Sophie with the mentor”* [Sophie’s mother]

*“Seeing her kind of closed off to start with and kind of not sure, and then seeing her just blossom throughout. I think it was so lovely.”* [mentor]

The school nurse had a different role for Sophie: she was the adult in school who she trusted and was what Sophie’s mother described as this “go-to” person, which increased her sense of safety at school.

*“So it was the school nurse, she was beautiful. She said: look even just if she can come for like, even if she misses the first lesson, comes in for a couple of hours and goes home so she doesn't feel like a prisoner. She doesn't feel restricted.”* [Sophie’s mother]

The school nurse's ability to offer a safe space for Sophie, who let Sophie know that she understood and was available for her, although there was no pressure to talk, but just to be, is exemplified in the following extract:

*“There was one day when she didn't want to go into her lesson. And I had a sort of an admin job to do, just sorting out a lot of paperwork, putting things into envelopes to send home for parents for immunisations. And she just did it, she did the whole thing for me ...That meant that she was in school, but she didn't have to go to her lesson. It was just time spent with me in my room. We weren't really having a conversation, but she was just able to distract herself by doing a task for me.”* [school nurse]

In sum, different participants conveyed the idea that, like case 1, building trusting relationships with adults was key to Sophie's reintegration into school which relates to RQ1.

#### **4.3.1.2 THEME 2. ACTIVATING A SUPPORTIVE NETWORK AROUND SOPHIE: THE “THREE-WAY STRUCTURE”**

This theme highlights a central idea throughout the dataset that activating a supportive network around Sophie, communicating, and sharing the responsibility for supporting her to reengage with school, was key to improving her wellbeing and improving her attendance.

This supportive network included a family support service in the local authority, who made a referral to her mentor that was key in Sophie's reengagement as it gave her a space “to speak it all out”, as well as school support in terms of referrals and some adjustments made once they became aware of Sophie's difficulties.

The importance of a supportive network around Sophie has two dimensions: the network communicating in relation to Sophie's support, as well as school activating the support network when they first became aware of Sophie's difficulties. The key role of communication was highlighted throughout the dataset, when referring to adults in the network discussing Sophie's support:

*"I did build up a relationship with mum for support, and you know, not just me, but also her head of year... And mum, you know, we were definitely on the phone a lot with mum"* [school nurse].

As well as Sophie's mother communicating with school, there was good communication between her and her teacher, as her mentor pointed out:

*"I got a great sense that the teacher had a good relationship [with Sophie], and from how much the teacher could talk to me about Sophie, I knew that the teacher understood Sophie and was looking out for Sophie"* [mentor]

Sophie's mentor referred to the "three-way structure" as the communication between herself, Sophie's teacher and initially the LA practitioner, but later on with her mother too. This meant that adults were looking out for Sophie in different settings (home, school, and the community), which created a sense of trust from the CYP which enabled her to feel secure. Although this is closely linked to forming those key trusting relationships mentioned in theme 1, it points to the role of the supportive network and its communication.

*"...hearing her teacher saying what I think about it and how we can work on it, I think maybe gives her more of a security around it. You know, people are looking out for me,*

*people are going to help me to know what's best, people are going to guide me. And I think it takes the pressure off that young person, if they feel guided and supported.”* [mentor]

As well as school referrals for the LA’s attendance team involvement (which then prompted the mentor’s referral), and Sophie’s mother’s engagement with school, school’s support included “being easier on Sophie” as explained by her mum and making some adjustments such as allowing Sophie to stay in an alternative place where she felt safe (such as the library or nurse’s room), as well as sitting exams in a separate room.

#### ***4.3.1.3 THEME 3. SOPHIE’S INTRINSIC MOTIVATION AND SELF-DETERMINATION: “I WILL GET INTO IT”***

This theme covers two key aspects to Sophie’s successful reengagement with school: her academic abilities and drive, that steered her towards working hard to achieve good GCSE results so that she could stay in the school’s sixth form; and her self-discovery journey, supported by her mentor, that further fostered her self-determination and empowered Sophie. This theme highlights the importance of intrinsic motivation, that is, which comes from the young person.

*“that's what made her go into school, because she knew she needed to get into that sixth form”* [Sophie’s mother]

Sophie was described by her mother as ‘strong headed’, which relates to her determination to do well at school and her determination to progress towards sixth form:

*“She was, ‘no, I will get into it. I’m going to make sure I get into it”* [Sophie’s mother]

*“I need to go to this sixth form or no other sixth form”* [mentor]

The following extract suggests that her mentor was key in enhancing Sophie’s self-determination:

*“I had to really engage her with the GCSEs element and keep her focused on what it is that she wants in order to get to where she wants to go.....so (that) she was engaging in school”*  
[mentor]

Intrinsic motivation, the central concept of this theme, is closely related to Sophie’s sense of autonomy, which motivated her in turn on a self-discovery journey with her mentor and empowered her to take control of her future. In the space her mentor provided, Sophie could “speak all out” (Sophie’s mentor) and have a thinking space to make sense of her experience, which fostered her self-determination. This process was enabled through a person-centred approach from her mentor, which was “guided by Sophie”, empowering her to make decisions, communicate her feelings and learn about herself: what she wanted and needed at the time. The main aspects of this learning journey with her mentor included learning about relationships and her role in them, taking ownerships for her decisions and learning to make sense and cope with anxiety, including some ‘breathing spaces’ in her day to unload.

Sophie felt empowered by her mentor. However, the process had to be owned by her.

As highlighted by Sophie’s mother, her realisation that it was up to her was key, as she told her mother one day:

*“Mum, I just learned .... if you don't get on with it, you're left behind”* [Sophie’s mother]

This theme explored the idea that intrinsic motivation was a key factor in Sophie’s reintegration into school, which was emphasised by all participants, in particular, in relation to her drive to get into the school’s college.

#### ***4.3.1.4. THEME 4. A RECIPE FOR SUCCESS: THE IMPORTANCE OF CHOICE AND AUTONOMY***

Lastly, in terms of what supported Sophie’s attendance, all three participants referred to the transition to college, as it enabled her to feel settled, happy and maintain her attendance in year 12. This related to the smaller setting, regular adult check-ins in a more personalised environment, and most importantly, being given more autonomy and choice.

*“Since she has been in the sixth form, I think she's taken off one or two days. She has been absolutely amazing. She's even got student of the week for her attendance since she's been back ...she's been getting top marks in her essays and her art and everything, she's doing so well. I'm constantly getting house points. She's doing amazingly.”* [Sophie’s mother]

The perceived factors that have supported Sophie’s attendance in college are the smaller classes, studying the subjects that she likes, having breaks from the classroom environment for ‘study time’, knowing her teachers better and them knowing Sophie and her needs, which means that teachers regularly check-in on her, which prevents from anxiety building. There is also an aspect of being more ‘mature’ and being in an adult-like setting (e.g. wearing her own clothes), where she has more independence and control over what she studies, which is

perceived to have helped Sophie settle in college and significantly improve her attendance, as the next quote shows:

*“Well, the change seems to have come having finished her GCSEs and starting her A levels, you know, that's where the flip change has come...she's now in the sixth form. She's not studying 10 subjects anymore. She's just concentrating on three and she's doing subjects that she likes. She's not in a school uniform anymore. She's in a more of a sort of, you know, a college environment where you wear your own clothes. And she's a little bit older.”* [school nurse]

This theme explored the transition to college as a ‘recipe for success’ in Sophie’s reintegration, thus, a key factor that supported Sophie to improve her attendance and sense of wellbeing in school.

#### **4.3.2 Themes related to RQ2**

Having discussed the themes related to factors that supported Sophie’s reintegration in school (related to RQ1), the next two themes relate to RQ2. Throughout the data, participants discussed barriers they encountered that prevented Sophie from reengaging with school earlier and getting the support she needed. This contributes to answer RQ2 in terms of factors that could have helped more or contributed to a quicker reengagement with school, which I will discuss next.

##### **4.3.2.1 THEME1. CLEAR PROCESSES AND RESOURCES AROUND EBSA SUPPORT**

A first theme related to RQ2, refers to school processes and resources to support CYP experiencing EBSA, particularly after COVID-19, when numbers of CYP experiencing



EBSA increased. This theme includes the need for early support for CYP experiencing EBSA, with clear policies and guidance in place in schools to support CYP's reintegration, as well as available adults with training on MH difficulties to support them, who could lead on CYP's reintegration plans (as Emma's SEN teacher did in case 1), making sure that interventions are put in place earlier.

*"Yeah, I think, some intervention just after COVID, when she wasn't going [to school] over that period of time after COVID. I think not just Sophie but a lot of young people after COVID found it very difficult to reengage back into school."* [mentor]

*"I think the kids need someone from the get-go to talk to be able to be open with."* [Sophie's mother]

*"There wasn't really a template of how to go about supporting somebody like Sophie it was just well okay, I think this is the right thing to do, so let's try this...I think we're going to see more of it, and I think we do need to have a, you know, a plan in place going forward so that the support happens quicker. You know, there's a flowchart or something to follow. Okay, well, this is this is what we do. And this is where we can refer."* [school nurse]

#### **4.3.2.2 THEME 2. SCHOOL ETHOS THAT PROMOTES CYP'S BELONGING**

The patterns of meaning conveyed from case 2 datasets related to RQ2 indicated the absence of a person-centred flexible coordinated school approach (unlike case 1). Participants also highlighted the need for Sophie's school to promote her sense of belonging, being more like her experience of primary school as the following extract suggests:

*“So in her primary school, the teachers loved her you know, when you go from primary you go to high school, and it's completely different... she was always short so the teachers would be lifting her up in the air and they were like, it was literally like a big family in primary. And then you go to high school, and everybody is much colder.”* [Sophie’s mother]

Even though there were some aspects of the school network which supported Sophie’s reintegration (theme 2), Sophie’s school was perceived as very strict on attendance and discipline, not flexible enough to make necessary adjustments, like a reduced timetable, which could have facilitated an earlier reengagement.

*“And, you know, the school has quite strict rules about what it will and what it won't allow, like, you know, they don't like to consider giving pupils a reduced timetable or part time timetable to help them ease back into school. It's either they're here or they're not here. There's no in-between”* [school nurse]

School support, according to participants, should therefore include initially sending work home, and a reduced timetable to help CYP reintegrate progressively into school. It transpired that the school nurse initially offered the option of gradual reintegration to Sophie, but this was then overruled by other members of staff, which made her feel unsafe and confused, alluding to the need for a coordinated approach at the beginning, which could have made Sophie’s reintegration process quicker and /or more successful.

*“You're not allowed to leave the property. You've got, you literally can't leave the premises...When you've been told that you can come in for a few hours. And with the nurse she did, it was just out of her hands. There was nothing she could do”* [Sophie’s mother]

This theme highlighted the importance of the school ethos in promoting a sense of belonging, as well as the need for secondary schools to have a flexible and person-centred approach, as highlighted in case 1. This, according to participants in case 2, could have facilitated an earlier progress for Sophie in terms of reintegration into school, which relates to RQ2.

#### 4.4 Cross case theme analysis

In this section, I compare the themes developed in Case 1 (Emma) and Case 2 (Sophie) in terms of the similarities and differences according to my research questions, stated at the beginning of the chapter. Table 11 shows the themes I developed for cases 1 and 2, in relation to RQ1 and RQ2.

**Table 11**

*Themes for cases 1 and 2*

Theme name	Case number	Research question
A PROACTIVE SYSTEM THAT WAS “FLEXIBLE ENOUGH TO ACT ON IT”	1	1
A RELATIONAL APPROACH: BUILDING TRUST AND SAFETY IN SCHOOL	1	1
ACTIVATING A SUPPORTIVE NETWORK AROUND EMMA	1	1
AN INCLUSIVE AND POSITIVE SCHOOL ETHOS THAT PROMOTES A SENSE OF BELONGING	1	1

MAKING SENSE OF HER EXPERIENCE: “I HAD TO FIGURE IT OUT”	1	1
EMMA’S PERSONAL QUALITIES AS PROTECTIVE: “SHE IS A UNIQUE LADY”	1	1
THE TIMING OF EBSA SUPPORT	1	2
THE IMPORTANCE OF BUILDING TRUSTING RELATIONSHIPS WITH ADULTS	2	1
ACTIVATING A SUPPORTIVE NETWORK AROUND SOPHIE: THE “THREE-WAY STRUCTURE”	2	1
SOPHIE’S INTRINSIC MOTIVATION AND SELF-DETERMINATION: “I WILL GET INTO IT”	2	1
A RECIPE FOR SUCCESS: THE IMPORTANCE OF CHOICE AND AUTONOMY	2	1
CLEAR PROCESSES AND RESOURCES AROUND EBSA SUPPORT	2	2
SCHOOL ETHOS THAT PROMOTES CYP’S BELONGING	2	2

As I started data analysis for case 2, it soon became clear that case 1 had richer data in relation to RQ1. This was due to having an extra interview (case 2 is missing Sophie’s interview - an important limitation), as well as the fact that the type of support and

reintegration process in case 1 was more proactive, better planned, coordinated, flexible and person-centred than in case 2. For example, when describing Emma's support, her mother said:

*"It was like she could go, yeah, and the very fact that she could leave, made her feel much better."*

This contrasts with Sophie's mother account when Sophie was not allowed to leave the school (having been told that she was only going for a few hours), which caused her a lot of anxiety:

*"So once Sophie was in school, and she wanted to go home, the teacher was saying: 'no, you can't leave'. So then it's worse because now you're trapped. I've gone inside and now you won't let me leave. And obviously it's gated. So you can't, you're not allowed to leave the property. You've got you literally you can't leave the premises."* [Sophie's mother]

This highlights differences between the cases, with a sense of a better coordinated approach that made Emma feel safe in school, highlighting the importance of theme 1: 'a proactive system that was flexible enough to act on it'. Nevertheless, there were some commonalities across cases which I will briefly describe next.

There are two main themes where there is a clear crossover between cases. 'Activating a supportive network around CYP' was key for both, Emma and Sophie. In both cases there was not only support from school and home, but also external agency involvement, including the LA family support service.

Secondly, there is an evident parallel between themes ‘a relational approach: building trust and safety in school’ (case 1) & ‘the importance of building trusting relationships with adults’ (case 2). This alludes to the key role of trusting relationships for creating CYP’s sense of safety and security in school. In both cases, it transpired that CYP need a space to feel safe with a trusted adult, taking away all pressures, and just allowing them to be in their chosen safe space. This is beautifully illustrated by both, Emma’s SEN teacher when describing the walks they used to take in the school, and by the school nurse, when describing that moment where Sophie helped her to sort out those parents’ letters, something that really resonated with me. It made me think of Winnicott’s ‘transitional phenomena’ (1951), in this case, a ‘transitional space’, where they could feel safe and contained.

Thirdly, in relation to school ethos as a factor in school reintegration, the theme ‘an inclusive and positive school ethos that promotes a sense of belonging’ in case 1 highlights that school ethos was an important factor in supporting Emma’s reintegration. However, the individual differences in experience between cases 1 & 2 meant that ‘the importance of a school ethos that promotes belonging’ was developed in relation to different RQs. That is, participants in case 2 discussed the importance of a positive and nurturing school ethos (school being like ‘a big family’) as something that could have contributed to better outcomes for Sophie.

Finally, some parallels can also be made between ‘Emma’s personal qualities as protective’ and ‘Sophie’s intrinsic motivation and self-determination’ as they both allude to individual in context factors<sup>53</sup>, such as personality traits, self-determination, and academic abilities, which

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<sup>53</sup> I chose the words ‘individual in context’ factors instead of just ‘individual’ factors, to acknowledge that, any factors still depend on whether the social environment promotes or obstructs CYP’s needs for competence and self-determination.

motivated them to reengage with school. This is also in line with previous EBSA research pointing to a combination of individual and systemic factors that support CYP's reintegration in school.

In relation to RQ2, different themes were developed for each case, highlighting the differences in experiences between cases. Regarding external professional involvement and what could have been better, there was a common denominator where both mothers referred to perceived difficulties getting the right/desired support from CAMHS. Emma's mother referred to difficulties getting a report from CAMHS that, in her view, would have speeded up the process of referral to a psychologist. Moreover, she disagreed with CAMHS reported formulation that Emma's anxiety was rooted in her family situation, without consideration of possible neurodiversity:

*"But all the time CAMHS were saying, oh, it's because your big brother's disabled and all this stuff that was not true. And they weren't even considering that she was autistic. I am still quite angry... I felt like they held her up and you know."* [Emma's mother]

Sophie's mother, on the other hand, describes going to an initial appointment at CAMHS where Sophie only stayed for a few minutes and said that she never wanted to come back:

*"I think the CAMHS for one, they have to work on the CAMHS, I don't know what they have to do going forward, but they do have to find some kind of softness in themselves... They need somebody who, who can take everything on, but as well has that niceness in them."* [Sophie's mother]

The quotes above suggests some common barriers between cases in relation to accessing the professional support desired from CAMHS services for early assessment and intervention, which relates to RQ2, that is, factors that could have contributed to a better reintegration process. I will discuss this further in the next chapter.



## **Discussion**

### **5.1 Overview**

In this chapter the study aim is addressed, and the findings are critically examined in the context of prior literature and psychological theories. First, a summary of the overarching themes developed across cases is presented, comparing commonalities and difference between cases, before exploring each overarching theme in turn, considering earlier studies and relevant psychological theory. I connect the findings with Bronfenbrenner's ecological framework (1979). I discuss the strengths and limitations of the study, while considering the role of researcher reflexivity and what bearings these have on the findings, proposing areas for future EBSA research. The implications of the present findings for schools and other professionals working with CYP experiencing EBSA are discussed, with particular attention to EP practice given that my research aimed to contribute to the LA's EBSA pathway. Final conclusions are then presented.

### **5.2 Review of aims and research questions**

The present research aimed to ascertain the factors supporting a successful reintegration for two CYP in secondary schools in one LA in London, as perceived by them, their parents, school staff, and external professionals. As stated at the outset, the aim of the study was to extend the current understanding of what works in relation to CYP experiencing EBSA and inform local initiatives, so that CYP get the right support for a successful school reintegration and improved wellbeing. I considered this area of research particularly relevant to the current UK context, in which 28% of national mainstream secondary students were classed as persistently absent over the past school year (2022-2023), compared to 13.7% pre-pandemic (2018-19; DfE, 2023).

I was interested in understanding stakeholders' perceptions of what helped, and what could have helped more. I took a solution-focused approach to extend existing understanding of what supported those two CYP. From a critical realist ontological and epistemological position, I chose a case study methodology, in line with previous research in this area, to generate situated knowledge, that is, knowledge that is true in its context and from the perspectives of key stakeholders.

### **5.3 Overarching themes**

I developed five overarching themes to address my two research questions in relation to perceived factors that supported CYP's reintegration into school (table 12). Using a multiple case study methodology, I interviewed parents, school staff and external professionals, as well as one CYP, to find out: (1) factors that participants perceived to have helped two CYP to reintegrate into school (RQ1), and (2) what could have contributed to a faster/more successful reintegration (RQ2). Through RTA, I developed different themes for each case in relation to each RQ. There are more themes for RQ1, as it was the main focus of the interviews, in line with the solution-focused approach I took.

Themes across cases were consistent, with many commonalities, highlighting the importance of (1) trusting relationships with CYP in and outside of school, (2) a collaborative network of support for the CYP which was more marked for Emma, and (3) individual personal qualities in the CYP such as their academic abilities and intrinsic motivation to do well in their studies. All those themes (1, 3 & 5 in table 12) relate to factors that contributed to CYP's successful reintegration into school. In Emma's case, however, there was greater perceived support from the school, with a more consistent, personalised and flexible approach highlighted by participants, compared to Sophie's. A positive, supportive, and inclusive school ethos was found to be a factor that helped Emma. Factors perceived to have contributed to a faster/more

successful reintegration were early identification and intervention, as well as clear processes and resources for timely EBSA support.

**Table 12.**

*Overarching themes that address RQs 1 & 2*

<p><b>RQ1. What are the perceived factors that supported secondary age students who had experienced EBSA to reintegrate into school according to them, their parents, school staff and external professionals (e.g. educational psychologists) in one LA?</b></p>	<ol style="list-style-type: none"> <li>1. Psychological safety: building trusting relationships with CYP</li> <li>2. A positive, supportive, and inclusive school ethos</li> <li>3. CYP's individual qualities and intrinsic motivation</li> <li>4. A person-centred approach that promotes competence and autonomy</li> <li>5. A collaborative supportive network</li> </ol>
<p><b>RQ2. What do CYP, their parents, school staff, and external professionals perceive to be the factors which may have contributed to a faster/more successful reintegration into school for those children experiencing EBSA?</b></p>	<ol style="list-style-type: none"> <li>1. Early identification and intervention</li> <li>2. Clear processes and resources for timely EBSA support</li> </ol>

### **5.3.1 Psychological safety: building trusting relationships with CYP**

A strong theme in the datasets was the role of supportive relationships for Emma and Sophie. This included relationships in school, particularly with a key adult that provided a sense of safety, as well as their relationships at home with their mothers. These key relationships with adults, and with peers (in Emma's case), were central to their successful reintegration and improved sense of wellbeing, as they fulfilled a basic psychological need for safety.

Both Emma and Sophie's mothers were central to their reintegration into school and wellbeing, being unconditionally supportive and accompanying their daughters throughout a long and difficult process of almost two years in both cases. Emma's SEN teacher made herself almost fully available to her, and Sophie's school nurse provided a safe space in which she did not have to do or say anything but in which she felt safe.

For Emma and Sophie, a therapeutic relationship, in which to explore their thoughts and feelings, was a key factor in their reintegration process. Other key emotionally available adults highlighted in this research included Emma's EP. Emma's therapeutic relationship with her EP enabled her to make sense of her anxiety, its triggers and how to manage it. Likewise for Sophie, whose relationships with her mentor provided a space in which to explore and better understand how to deal with relationships that were causing her anxiety, as well as to learn coping mechanisms to prevent anxiety from building. This suggests that, by working on understanding and making sense of anxiety and its connection to thoughts, body reactions, and behaviour (such as a CBT approach), particularly when combined with behavioural activation and exposure, as in Emma's case, CYP can feel more in control and better able to manage anxiety-provoking situations.

The importance of nurturing relationships to reduce CYP's anxiety and increase their sense of safety at school, is consistent with attachment theory. Bowlby points out (1977) that attachment behaviours continue throughout life and are made more evident when a person experiences distress. Hence, the availability of emotionally available adults becomes key, mirroring early caregiver-infant relationships, for CYP experiencing anxiety.

As well as relationships with adults, Emma's case highlighted the importance of peer relationships. There was a clear sense of belonging to the school community and participants highlighted the important role played by her friends. The SEN hub, where she could have

lunch with her friends and develop a sense of relatedness to others, was key. In line with this finding, a study by Miles et al., (2019) into social perception and sense of belonging in females with autism in mainstream school found that their sense of belonging can be improved through key friendships.

This overarching theme also links to EBSA research (Archer et al., 2003; Halligan & Cryer, 2022; Havik et al., 2014; Kljakovic & Kelly, 2019; Nuttall & Woods, 2013; O'Hagan, 2022; Sibeoni et al., 2018; Tobias, 2019), that highlighted the key role of developing trusting relationships with adults, providing a sense of feeling valued, understood, and supported that was consistently associated with successful school reintegration. For instance, Sibeoni and colleagues (2018) concluded that “the therapeutic value of experiencing unexpected care-linked relationships” (p.47) was key to CYP’s recovery. However, Sibeoni and colleagues, as reviewed in chapter 2, looked at a clinical sample of CYP experiencing ‘Anxiety Based School Refusal’. Hence the current study extends these findings to a school context, which has more ecological validity, as it is not always possible or desirable to undertake interventions for CYP experiencing EBSA in a clinical setting.

Peer relationships, on the other hand, which have been a prominent factor in other studies (Halligan & Cryer, 2022; O'Hagan et al. 2022; Nuttall & Woods, 2013), were perceived as key only for Emma. This could be since the Sophie’s voice was not present in case 2, which might have elucidated the importance of peer relationships. Nevertheless, this was found as an important perceived factor by participants in Emma’s case, who highlighted how her friends in SEN, with whom she spent all lunchtimes and break times, supported her reintegration into school.

The key role of relationships was highlighted by Nuttall and Woods (2013) as factors that support the psychological needs of CYP, given that those key adults, as already discussed here, provide that secure base, and can fulfil CYP’s need for safety. Even though

psychological safety is closely linked with trusting relationships, it also relates to the school environment. Halligan & Cryer (2022) highlighted (for example), the importance of achieving psychological safety via anti-bullying measures, a calm and supportive school atmosphere, and spaces where students feel safe. This is in line with the present findings as for both Emma and Sophie, having a safe space was key to their psychological safety. In sum, the finding that trusting relationships are key in supporting CYP's safety in school and consequently, a key factor that supports school reintegration, is in line with various studies in the EBSA literature.

In sum, the study suggests that Emma's SEN teacher, who made herself almost fully available to her, and the school nurse, who provided a safe space in school for Sophie without placing demands on her, supported CYP's psychological safety which in turn, supported their reintegration into school.

### **5.3.2 A positive, supportive, and inclusive school ethos**

A positive school climate that celebrated her progress in inclusive ways was key for Emma's reintegration into school. The deployment of a wide range of resources for supporting Emma, and the many adjustments that they made, reflect this inclusive school ethos that was so important for her reintegration. On many occasions, her mother described how teachers spoke positively about her: there was a clear sense throughout the case 1 datasets of a supportive and welcoming environment, which embraced diversity and promoted the CYP's sense of belonging to a community in which she felt valued and respected, which supported her reintegration into school. In slight contrast, in Sophie's case, a positive school ethos aligned with RQ2, in that it would have promoted a more successful school reintegration for her. For Sophie, participants conveyed that her school needed to be more like 'a big family': positive,

supportive, and welcoming, addressing CYP's needs for belonging, which would have contributed to a more successful reintegration into school.

The importance of school ethos in promoting CYP's sense of belonging is consistent with previous EBSA studies, as highlighted by Halligan & Cryer (2022), although this referred to an anti-bullying ethos that contributed to CYP's sense of safety more than belonging. In line with the present findings, Nuttall, and Woods' 'Positive nurturing school ethos' basic theme highlights the importance of a positive, caring, and nurturing school ethos as essential for school reintegration. O'Hagan et al. (2022) underscore the importance of belonging in the school community for a successful school reintegration. A recent study by Higgins (2022) with autistic CYP experiencing EBSA in secondary schools highlighted the need for a shift in school ethos towards a more flexible and personalised environment, lowering demands on CYP and promoting strong positive relationships with CYP.

In sum, the present research suggests that a positive, supportive, and inclusive school ethos is an important factor in supporting CYP's reintegration into school, in line with previous EBSA research. This is particularly relevant in the current context post-Covid-19, where there has been an increase in EBSA cases as explored in the introduction. Hence this study adds to the existing literature by highlighting the importance of schools promoting CYP's sense of belonging after Covid-19.

### **5.3.3 CYP's individual qualities and intrinsic motivation**

The findings suggest that individual traits such as motivation, persistence, and academic abilities acted as protective factors in CYP's reintegration into school. Both cases highlighted the importance of these factors, as well as psychological support that focused on enhancing these strengths, in particular intrinsic motivation (Ryan & Deci, 2000, p.70). Sophie and Emma showed intrinsic motivation and self-determination to succeed academically.

Participants highlighted how important it was for Emma to progress with her year group and for Sophie to do well in her GCSEs, so that she could get into the sixth form. This was a perceived factor that supported their school reintegration, given that it gave them the motivation to get back into school to achieve their goals.

This theme is in line with previous EBSA findings. Nuttal and Woods' 'aspiration and motivation' theme, derived from the CYP developing an interest in good grades and achieving at school, resonates with Emma and Sophie's high aspirations. Both Emma and Sophie's desire to excel in their studies and their willingness to take control of their future supported their reintegration into school. Wilson's qualitative study also suggests that long-term aspirations were key in improving CYP's attendance (2012). Both studies (the only ones that, to my knowledge, explored this factor) point out that CYP need to be supported to increase their confidence to pursue their dreams and achieve their potential. This relates to the current theme, given that human motivation is not purely individual, but interacts with a supportive environment, in line with SDT introduced in chapter 1. Intrinsic motivation is at the core of this theory, defined as "the inherent tendency to seek out novelty and challenges, to extend and exercise one's capacities, to explore, and to learn." (Ryan & Deci, 2000, p.70). Ryan and Deci propose that the social environment can strengthen or diminish individuals' intrinsic motivation, competence and self-determination. Therefore these factors are not purely individual, but interact with a supportive context which, in both cases, helped their reintegration into school. For example, Sophie's mentor explained how she supported her determination to get into college, which in turn helped her reintegration into school.

In sum, across cases, individual factors, such as CYP's self-determination and aspirations regarding their future in school (e.g. achieving GCSEs), enhanced by supportive adults, was a factor in Emma and Sophie's reintegration into school. The relevance of this finding is that by supporting CYP's aspirations and motivations, adults can contribute to a successful school



reintegration, in line with SDT. To my knowledge, there is only one published work that links school reintegration with SDT theory (Filippello et al., 2019). It is a useful theoretical model that underscores the role of significant adults (parents and teachers) in fulfilling CYP's psychological needs of competence, autonomy and relatedness (Ryan & Deci, 2000), which can support school reintegration.

Next, I will discuss how the social context supported Emma and Sophie's reintegration into school, by promoting their psychological need for competence and autonomy.

#### **5.3.4 A person-centred approach that promotes competence and autonomy**

Empowering CYP, by fostering their competence and autonomy in decisions that matter to them, was key to Sophie and Emma's reintegration into school. In Emma's case, school and her mother put her at the centre of the decision-making process, while the EP empowered her to communicate her preferences to school, instead of speaking on her behalf. In Sophie's case, her mentor supported her through a person-centred approach, which contributed to her school reintegration. Then her transition to college, which afforded her more choice and autonomy than secondary school, was key to Sophie's successful reintegration into school. Therefore, both cases highlighted that autonomy and choice was a key factor for CYP's school reintegration.

Supporting CYP's autonomy and choice, by listening to CYP's opinions and involving them in decision making, is a theme emphasised by EBSA research and legislation (DfE, 2014; Archer et al., 2003; Halligan & Cryer, 2022; Havik et al., 2014; Nuttall & Woods, 2013; O'Hagan et al., 2022; Preece & Howley; Sibeoni, 2018; Tobias, 2019). Preece & Howley's study in the UK (2018) found that promoting CYP's sense of autonomy and choice, such as in choosing curriculum subjects, was key to their successful reintegration in school.

However, their study was based on reintegration in a specialist provision in the UK<sup>54</sup> and therefore has limited transferability to mainstream education. Hence the present findings extend those of Preece and Howley into a mainstream setting.

In the current study, a person-centred approach that fostered choice and autonomy was found to also develop CYP's sense of self. In both cases, there was what was described by some participants as a 'journey' of self-development, where CYP were able to safely explore their feelings, particularly anxiety, thereby learning to manage it better. This was particularly noticeable for Emma in developing that 'sense making narrative', but also present in Sophie's relationship with her mentor, with the limitation that I only got her mentor's view on this. Sophie's mentor took a person-centred approach, listening to her views and following her lead, which further enhanced her sense of competence and self-esteem.

This is in line with previous EBSA research that highlights the importance of a person-centred approach to reintegration support and of including CYP's views. O'Hagan et al. (2022) underscored the role of an individualised flexible approach and of incorporating the voice of the young person into their support plan. Similarly, being "listened to" was critical in Tobias's research (2019).

This overarching theme is also in accord with SDT. Deci and Ryan's SDT emphasise the role of autonomy and choice in motivating individuals. The present study results suggest that embedding choice in the CYP's day through a person-centred approach supported their sense of autonomy and competence, motivating them to reengage with school. Research suggests a relationship between student engagement and person-centred approaches (Moreira et al., 2019), with a positive effect on their social-emotional wellbeing, school attendance and educational achievement (Corrigan, 2014). This has implications for EPs, who use person-

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<sup>54</sup> The specialist provision consisted of a class with seven students with ASD and high anxiety of secondary school age who attended for one year. They were supported by a senior 'colleague' (no role description given by authors') and by specialist subject teachers.

centre approaches in their work, in line with government guidance (DfE, 2015), and can support schools in embedding choice and autonomy in CYP's school day.

### **5.3.4 A collaborative supportive network**

Across all interviews, participants highlighted the importance of a collaborative supportive network for Emma and Sophie. This was clearly illustrated by Emma's mother and SEN teacher, who described how they collaborated in planning and implementing a tailored approach between home and school that enabled strategies to be flexibly adjusted by communicating about progress and adjusting accordingly, in what participants called a process of 'trial and error'. In case two, this overarching theme was clearly illustrated by Sophie's mentor's metaphor of the 'three-way structure', which highlights the importance of collaboration between school, home and herself. Without this supportive network, none of that trusting, relationship-building, inclusion, belonging and sense-making could have taken place for Emma and Sophie. This is consistent with the notion that addressing EBSA effectively requires a comprehensive strategy including numerous stakeholders working together to provide timely EBSA support.

Multi-agency working, within this network of support, ensures that assessment is holistic, as each professional can bring a unique perspective. This was highlighted by Sophie's mentor who described how important it was to have an initial meeting with school and the social worker, which allowed her to plan based on Sophie's identified strengths and needs by different professionals.

The significance of high levels of collaboration between adults involved in supporting CYP experiencing EBSA, including cooperation between school staff, CYP's family and external agencies, is in line with several studies (Melin et al., 2022, Preece and Howley, 2018; Sibeoni et al. 2018; Kljakovic & Kelly, 2019; Nuttal & Woods, 2013). The new evidence added by

this research is the potential role of family support workers in supporting CYP's reintegration into school. Both Emma and Sophie had assigned family support practitioners who worked with parents, supporting with LA applications and making referrals to external professionals, such as Sophie's mentor. They can serve as liaison between parents and school, supporting collaborative multi-agency working. This body of research highlighted the importance of multi-agency working, communication between school management and parents, as well as communication within the members of school staff to ensure that there is consistency in the approaches of support, reducing confusion and anxiety for the CYP.

As mentioned in the literature review, Nuttal and Woods (2013) developed a model of support based on Bronfenbrenner's ecological framework, which underscores the importance of the supportive network, as well as the communication and collaboration among the microsystems supporting the CYP experiencing EBSA. The availability of this supportive network was mediated, in Emma's case, by what was called 'knowing and being known to the system', highlighting that supportive networks are not equally available to all, but are dependent on many of the CYP's characteristics, such as race and family structure, thus raising equity issues with implications for EPs, which I will discuss later.

The following two overarching themes relate to RQ2, as per table 12.

### **5.3.5 Early identification and intervention**

This overarching theme indicates that early intervention and assessment of needs could have resulted in better school outcomes in relation to reintegration for both CYP (related to RQ2). In Emma's case, it was highlighted that CAMHS could have identified Emma's social communication needs earlier, preventing the problem from becoming entrenched, when Emma stopped going to school completely. Participants also expressed that earlier EP involvement may have facilitated an earlier identification of needs and a quicker reintegration

process. For Sophie, the need for earlier support was conveyed by her mentor, who was involved quite late in the process. According to Sophie's mentor, if Sophie had been offered support straight after Covid-19 lockdowns (before her attendance started to drop dramatically), her reintegration into school might have been quicker. Therefore early identification and support was a factor that could have supported a more successful or earlier reintegration into school, which relates to RQ2.

The timing of EBSA support seems crucial given that attendance difficulties can be solved if picked up and dealt with quickly (Cole, 2009). Early identification of need and intervention was highlighted by Nuttal (2012) as a factor that can help CYP to a more successful/earlier reintegration into school. Nuttal stated that "if children and young people's needs are supported at the first sign of school refusal behaviour this might limit the number of children whose behaviours could be classified as 'chronic'" (2012, p.173). Nuttal also mentions the importance of earlier CAMHS involvement in the identification of needs, in line with Emma's case findings. Emma's autism diagnosis is in accord with evidence in the literature indicating that CYP with autism are at higher risk of experiencing EBSA because of their needs being unmet by the school environment (Higgins, 2022; Munkhaugen, et al., 2017; Ochi et al., 2020). Hence if the needs of autistic CYP are identified early and their needs are met by the school environment (provided the school promotes a positive, supportive and inclusive ethos as highlighted by overarching theme 2), the risk of experiencing EBSA may be reduced.

Archer and colleagues (2003) found that provision for SR should include addressing CYP's needs once they are identified, and applying preventative measures, including early action on attendance difficulties. Sawyer's study (2022) also suggested that early identification is pivotal when supporting EBSA, with a lack of professional knowledge being a barrier.

Although this study only gathered parental views, it points to the need for early identification

in accordance with the present findings, which could be enhanced with EBSA professional training. The present findings, that included the views of school staff, other professionals and CYP, also point to the importance of early identification and intervention for a more successful reintegration into school.

Barriers to early and effective support are hampered by current difficulties faced by the UK National Health Service (NHS), particularly after COVID-19 (Sparasci et al., 2022). As well as this, the present findings highlighted a lack of communication between the health and education systems which in Emma's mother's view "do not talk to each other". This was perceived as a barrier for early identification/intervention. Although the SEND Code of Practice (DfE, 2015) marked a shift towards uniting the health, care and education systems, this could indicate that there is room for improvement in multiagency collaboration between CAMHS and schools. A pathway between CAMHS and Education to ensure that children who have mental health needs receive early intervention, was highlighted as a facilitator for earlier intervention and a more successful reintegration into school for one CYP in a case study (Nuttall, 2012), in line with the present findings. Through early intervention and collaboration, a robust and united support system can prevent the problem from escalating and becoming entrenched. The perceived difficulties that Emma and Sophie encountered in accessing the desired support from CAMHS may also indicate a more entrenched problem with the availability of mental health services for CYP . This suggests a role for EPs working with schools using the traded model<sup>55</sup> in supporting CYP's mental health, as it was highlighted by Emma's case. In sum, the data suggests that earlier identification of needs and support for CYP experiencing EBSA, as well as better coordination between the health and

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<sup>55</sup> The Localism Act (Department for Communities and Local Government, 2011) has meant that many Educational Psychology services are working as a traded model, in which schools buy in EPs time (Lee & Woods, 2017).

education systems in relation to EBSA support, may prevent attendance difficulties from becoming entrenched and support earlier and a more successful reintegration into school.

### **5.2.6 Clear processes and resources for timely EBSA support**

This overarching theme encompasses the need for clear processes and resources to support earlier reintegration into school for CYP experiencing EBSA. It relates to RQ2. Emma's SEN teacher mentioned that possibly having some "emergency input for schools" for EBSA cases could have helped more with Emma's reintegration into school, pointing to the need for more support for schools in EBSA cases. In Sophie's case, there was a perceived need for clarity in the processes and resources around EBSA support, expressed by both her mother and the school nurse.

Sibeoni and colleagues' qualitative exploratory study in France (2018) highlighted similar communication difficulties where lack of 'established guidelines' for supporting CYP experiencing EBSA can delay the much-needed timely support. In line with this, the present study findings underscore the necessity of clear policies, guidelines, and training in schools to support students like Sophie effectively, to ensure that CYP's attendance difficulties are identified at an early stage, and that school staff and professionals are clear on the procedures, including well-defined intervention strategies. I am not aware of studies that have explored or evaluated the effect of having such policies/guidance at a school, or at LA level, which could be an area for future research.

In this section, I have discussed overarching themes in response to my RQs, and I discussed them in relation to relevant EBSA literature and psychological theory. Next, I connect these factors by mapping them into Bronfenbrenner's ecological model (1979). As stated at the outset, one of my aims was to contribute to existing knowledge around the supportive factors which can contribute to the EBSA pathway of the LA where the study took place, as well as

further evidence towards an ecological model of successful reintegration (Nuttal & Woods, 2013). Thus, by integrating the factors in a framework, my aim is to highlight their interconnectedness, as well as to facilitate the creation of an EBSA pathway.

### **5.3 Analysis of the findings from an ecological systems perspective**

As highlighted by previous EBSA research (Nuttall and Woods, 2013; O'Hagan et al., 2022; Preece & Howley, 2018), Bronfenbrenner's Ecological Systems Theory provides a valuable framework for understanding the findings of the present study. An ecological framework is helpful to organise and conceptualise the support needed for CYP's successful reintegration into school, highlighting interactions between multiple systems, including the individual, family, school and external agencies. Table 13 maps my research findings to the various nested systems of Bronfenbrenner's ecological framework, including the individual child, microsystem, mesosystem, exosystem, macrosystem, and chronosystem.

**Table 13**

*Factors that supported Emma and Sophie's reintegration from Bronfenbrenner's ecological systems framework*

<b>LEVEL</b>	<b>SUPPORTIVE FACTORS FOR EMMA AND SOPHIE</b>
<b>INDIVIDUAL/PSYCHOLOGICAL FACTORS AT THE LEVEL OF THE CYP</b>	Intrinsic motivation Self-determination Academic abilities Persistence



**MICROSYSTEM: FACTORS THAT  
DIRECTLY SUPPORTED CYP'S  
PSYCHOLOGICAL NEEDS**

A person-centred flexible approach  
Building trusting relationships with CYP  
A safe place in school  
Being given choice and autonomy

**MESOSYSTEM**

Parent-school collaboration towards agreed goals and strategies.  
Collaboration between professionals and school, such as the EP and mentor.  
Knowing and being known to the system  
The 'three-way structure': collaboration between mentor, parent, and teacher

**EXOSYSTEM**

Family support service  
School's attendance team  
Educational Psychology Service  
Schools' policies and resources  
Positive and nurturing school ethos

**MACROSYSTEM**

Inclusive values  
Clear national and local policies and resources to support CYP experiencing EBSA (desirable)

**CHRONOSYSTEM**

Trial and error  
Transition to college  
Maturational factors  
Giving CYP time

From an ecological systems theory perspective, the overall findings suggest several supportive factors at the individual level of the child, such as supporting CYP's basic needs of safety, belonging, relatedness, autonomy and competence, which were prominent in the study findings. Those needs are supported by relationships between the child and the microsystems around them, such as the school, family, and peer group, in line with Nuttall and Woods' model (2013). The overarching theme 'psychological safety: building trusting relationships with CYP', highlights the importance of having trusting relationships in different microsystems around the child, in line with Nuttall and Woods (2013). This is the immediate environment where Sophie and Emma directly interact with individuals. These relationships were crucial in supporting their psychological safety. Another theme that fits in with the role of the microsystem in supporting CYP is 'a person-centred approach that promotes competence and autonomy'. A person-centred approach supports psychological needs at the level of the child, promoting their sense of independence, competence and self-value by giving choice and autonomy, for a successful reintegration into school. 'CYP's individual qualities and intrinsic motivation' are not just within-child factors but, as explored earlier, need a supportive microsystem around the child that promotes and support CYP's abilities and motivations.

The mesosystem contains the relationships between the microsystems, which was exemplified by the theme 'a collaborative supportive network'. This includes cooperation between home and school, working together to support Emma and Sophie's wellbeing and school reintegration. This collaboration was further supported by external agencies situated at the exosystem level (such as social services, CAMHS and LAs), which were highlighted by the present findings, sometimes as a supportive factor, but also as factors that could have helped more, related to RQ2.

The exosystem includes systems that indirectly affected Emma and Sophie. The theme ‘a positive, supportive, and inclusive school ethos’, which refers to the whole school approach situated in the exosystem (in line with Nuttal and Woods, 2013) was an important factor that contributed to Emma’s reintegration into school. Thus, teachers were flexible, adjusting to Emma’s needs, given that the ethos of the school regarding SEND and inclusion allowed for those adaptations. Moreover, Emma’s school links with the LA educational psychology services, which are also situated in the exosystem, but regularly interact with multiple layers of the ecological model, enabled referrals to the EP who supported her reintegration into school, while the LA family support service, liaised with Emma’s mother. In Sophie’s case, the exosystem was represented by family support service, which facilitated the referral to Sophie’s mentor, who was key in her reintegration into school.

The macrosystem represents the broader cultural and societal context, including cultural values, attitudes and norms that shape the expectation of individuals and organisations. This reflects the influence of macro-level values promoting the wellbeing and inclusion of all students. The emphasis on person-centred planning, flexibility and collaboration in Emma’s support aligns with the broader societal shift toward inclusive education. This reflects the influence of macro-level values of inclusion present in national educational guidance (Schuelka, 2018) and law (Equality Act 2010).

However, the broader societal and cultural context can also shape expectations in unequal ways, resulting in some CYP receiving more support than others. Thus, broader cultural stories can facilitate, but also constrain, people’s lives (Syed & McLean, 2022). As such, CYP’s *social graces* (Burnham, 2012) can enable or disable students in different contexts. For example, a system of white privilege<sup>56</sup> (McIntosh, 1990) can favour white individuals

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<sup>56</sup> \*White privilege refers to the benefits which may be unconsciously enjoyed and/ or consciously perpetuated from being or being perceived as white. By this, I am not, in any way, suggesting that this supports CYP

over ethnic minority (global majority) groups. As discussed earlier, some of the findings seem to indicate that EBSA support may have been influenced by Emma's characteristics (e.g. race) and circumstances (e.g. conventional family background), which was highlighted by her mother. This is in accordance with Nuttal's (2012) findings that cultural differences may have influenced the attendance officer's values and interpretations of one of the CYP's behaviour who was from a traveller background. Although there is not enough evidence here to provide universal claims about inequality of EBSA support, it does raise questions about it, in line with previous non-EBSA research suggesting that there are significant inequalities in the UK educational system (Gillborn, 2021; Hutchinson, 2017; Roman-Urrestarazu, 2021; Tereshchenko et al., 2020).

The issue of privilege, including factors in the macrosystem (such as socio-economic status and race) highlight equity issues in disparities in how EBSA cases may be prioritised and acted on by schools, with important implications for schools and professionals working with CYP (see section 5.5.3. for implications). For example, families with a higher economic status, who often have greater access to educational resources, professionals and high-quality schools, may receive better support from school for a successful reintegration. There were also some seemingly 'within-child' factors underscored by the present results, such as academic abilities, interest and motivation to study, that are also influenced by macrosystemic factors, such as socio-economic status. The gap between students allocated pupil premium funds and their peers is increasing each year (as mentioned in the introduction) with school absence rate being "the strongest predictive factor of the progress made by its pupil premium students" (Riordan et al., 2021, p.7). The mechanisms that maintain these inequalities are complex, pointing to the "school context, staff culture and

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experiencing EBSA. On the contrary, society inequalities are pervasive to CYP's development. The point I want to make is that for Emma, it was perceived as possibly a factor may have influenced the support she received.

school organisation” as factors key to reducing this gap (Riordan et al., 2021, p. 12).

Addressing these issues requires a comprehensive and systemic approach, including equitable funding models, anti-bias training for school staff, curriculum reforms, and policies aimed at reducing disparities and promoting inclusivity.

Finally, the chronosystem refers to changes over time and constancy in a CYP’s life, and how this can affect their development. In my findings, there were four factors associated with changes over time that supported CYP’s reintegration into school. In Emma’s case, participants highlighted that the evolution of the support provided, in what the EP referred to as ‘trial and error’, including regular monitoring of progress, was an important factor in her reintegration process. Research findings also suggest that Emma needed time, to make sense of her experience and learn to manage her anxiety. In Sophie’s case, the importance of ‘maturational factors’ mentioned by the school nurse, as well as her transition to college, was a major perceived factor that supported her attendance.

In sum, the findings of the present study are consistent with an ecological systems theory perspective, given that the factors that supported Emma and Sophie’s reintegration into school are at different levels of the systems around them, and in the relationships between those systems. What can be added to the existing EBSA literature is the need for further collaboration and coordination between the health and education systems, in particular after Covid-19, where there has been an increased pressure for these systems to meet CYP’s needs. Hence, reintegration in schools must consider the various settings in which CYP and systems are embedded, working collaboratively to support CYP experiencing EBSA.

#### **5.4 Strengths and Limitations**

EBSA support is a complex multi-faceted phenomenon and as such, the qualitative data in the present study aimed to capture the complexity of CYP's experiences. I developed themes based on a two-case study in one local authority in London, and findings reflect the responses of participants in their interviews, and my interpretation of qualitative data. It is noted that not all researchers would identify the same themes, and that my personal knowledge, experiences, and worldview will have influenced the theme's development, through a reflexive process, in line with RTA. In line with a critical realist stance, the findings from this research are influenced by context, reflecting a situated reality from one point in time for two CYP in two different schools, from the perspective of key stakeholders, about what worked for those CYP. There are some key overarching themes, offering valuable insights into what works for CYP experiencing EBSA, that have been discussed in this section, which are in line with previous EBSA research. This has added to previous knowledge of what works for CYP's reintegration into schools, which is particularly valuable after Covid-19, at a time when there has been an increase in EBSA.

In line with the critical realist epistemology and qualitative methodology, researcher subjectivity is a primary tool for RTA (Braun & Clarke, 2022). As the premise of the present research is that knowledge generation is situated and subjective, subjectivity is not considered a limitation, but a strength, when paired with a researcher's reflexivity. To ensure trustworthiness (as defined in the methodology section), I followed Braun and Clarke's guidelines in terms of the process of RTA, with a structured and systematic approach to developing themes, consulting with colleagues to enhance my understanding of the data. By acknowledging how my professional experience as well as my social identities have influenced the research process, I aimed to develop themes that were deep, insightful, and told a compelling story, including all participants' voices, with quotes that reflected their

experiences and perspectives, and ensure authenticity and credibility. As such, I acknowledge that my personal experiences in supporting CYP experiencing EBSA as a TEP; my ontological and epistemological stance and personal assumptions and values, as well as my research design choices, have all shaped and delimited the nature of the knowledge presented here, as well as the way I chose to present it (e.g. in the first person to acknowledge the subjective nature of the knowledge produced).

As explained at the outset, generalisability of results was not the aim of this study. I make no claims of universal truth about factors enabling CYP experiencing EBSA to reintegrate into school. The sample size was intentionally small, in line with a case study methodology and the limited resources and time available to conduct the research. Participant recruitment was hard, given that there are few cases of successful reintegration which reflects the current phenomenon, and this was a limitation. I had hoped to include three cases, which were initially recruited, but one could not be included for reasons stated in the methodology. A further limitation, regarding the use of interview data, is social desirability bias, that is, participants reporting what they believe the researcher expects to hear or what is socially accepted. However, perceptions were enriched by the viewpoints of different participants on each case, allowing me to develop in-depth insights about their perceptions, linking to the study aim of understanding what supported CYP to reintegrate into school. Case 2 had fewer participants, which is a limitation, as demonstrated by case 1. CYP's perception is key and may have given a more diverse perspective and a deeper exploration of the research questions.

A limitation of the present research is the umbrella term I chose to study what helps CYP experiencing attendance difficulties due to emotional reasons. As explored in the introduction, it was difficult to establish comprehensive definitions and associated classification systems for school attendance problems and there is currently no classification

that is universally accepted (Heyne et al., 2020), while there are many reasons why CYP do not attend school or attend with difficulty (Rae, 2020). Moreover, these difficulties may manifest in different ways from being late to lessons, missing lessons, leaving early or complete absence. The distinction between the different types of school absence is not straightforward as there are heterogeneous behavioural presentations of persistent attendance problems, which often present with internalising and externalising behaviours. Although the label EBSA was appropriate for the phenomenon under study here as it describes CYP who are persistent non-attenders due to emotional reasons, it emphasises a group of children who express their anxiety through internalising behaviours (avoidant behaviours). Thus EBSA might fail to capture other pupils who also experience difficulties attending school. For example, pupils who experience emotional difficulties may express their distress through externalising behaviours, resulting in internal or external exclusion from school. Thus, I acknowledge that the phenomenon under study and terminology chosen is limited, as it might miss the difficulties of other pupils in attending school.

### **5.5 Implications for practice**

This research, which included the voices of CYP, parents, school staff and professionals working with CYP, has implications for these stakeholders, but also for those involved with educational policy development and those responsible for improving CYP's attendance and MH. One of the aims of the present research was to contribute to an EBSA pathway for the LA, in line with the perceived need for more guidance for schools. The research findings, which are based on context-related knowledge, aim to support the LA's initiative of creating an EBSA pathway and of disseminating this guidance to local schools. This research highlighted the key role that schools, parents and external professionals such as EPs can have in supporting CYP's experiencing EBSA, contributing to the limited but growing body of



EBSA literature. This is in line with recent government guidance that underscores that attendance is ‘everyone’s responsibility’ (DfE, 2022). In this section, I present implications that I have drawn from the research findings for schools, other professionals supporting CYP experiencing EBSA, and policy makers.

### **5.5.1 Implications for schools**

The findings highlighted the importance of schools providing flexible individualised support, tailored to CYPs’ individual needs and making reasonable adjustments to enable them to return to school in a gradual process of reintegration. ‘A person-centred approach that promotes competence and autonomy’ highlighted the importance of school’s adjustments to support CYP’s reintegration, including the CYP’s timetable, the learning environment, the social environment, as well as transitions during the school day, at a pace that meet the CYP’s needs, promoting their sense of wellbeing. ‘Psychological safety: building trusting relationships with CYP’ highlighted that supportive relationships with adults, such as parents, mentors, and school staff, should be central to the support plan, as they enhance CYP’s psychological safety.

Person-centred planning, which puts the wishes of CYPs at the centre, is key to a successful reintegration. As well as listening to CYP’s views, adults should aim to empower them to voice their opinions, as highlighted by the EP involvement in supporting Emma to communicate her views and feelings. As remarked by Emma’s EP who supported her to communicate her feelings in alternative ways (i.e. the use of highlighters and the ‘squiggle’ game), finding alternative ways for CYP experiencing anxiety to communicate their feelings can be an integral part of feeling safe in school. Coordination and cooperation between school staff is also key, so that there is consistency in the support provided, increasing CYPs’ psychological safety.

As well as communication between school staff, it is crucial that there is cooperation between school, parents/carers and external agencies, which links to Bronfenbrenner's mesosystem that underscores the importance of communication between microsystems. A key person should be named at school as responsible for coordinating CYP support (like the SEN teacher in Emma's case). However, the reintegration plan must be a concerted effort and not the sole responsibility of one staff member. Families, in particular parents and carers, should be actively involved in the reintegration process. Schools and professionals should aim to be supportive of parents, without blaming. This should include schools actively involving parents in the assess-plan-do-review (ADPR) cycle (DfE, 2015<sup>57</sup>), monitoring progress regularly and seeking feedback from parents and professionals working with the CYP, so that they can make adjustments in the social and learning context according to the CYP's progress, and in consideration of the CYP's views.

Collaboration between adults supporting CYP is key at all stages of the graduated approach set out in the 'Assess-Plan-Do-Review' cycle: a good way for schools to plan support for children with SEN (DfE, 2015). A coordinated approach is not only important when implementing strategies, but also for a comprehensive assessment. Collaboration ensures communication and coordination between staff members, but also with families and other professionals, ensuring a shared understanding of the problem, and a consistent approach to supporting CYP. The final piece of the ADPR cycle is reviewing progress. 'A collaborative supportive network' indicates that regular monitoring of CYP's progress, in collaboration between home, school and professionals, is key to ensuring that the interventions have the desired effect, and that progress is sustained, allowing for necessary adjustments to strategies and interventions when these are not meeting CYP's needs. This should also include a system for monitoring absence.

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<sup>57</sup> - Section 6.44, Code of Practice, DfE (2015)

Working out ‘CYP’s individual qualities and intrinsic motivation’, by understanding which aspects of school life motivate CYP to attend, is crucial. A strengths-based approach, which focuses on the CYP’s protective factors and motivators, will support their autonomy and competence. Person-centred planning tools can be useful visual resources to co-produce a plan with the CYP, giving them control over their social and learning environment, by offering them choices and autonomy in decision making. Opportunities, such as in Sophie’s case, to pursue subjects that CYP are passionate about and support their intrinsic motivation, as well as taking away or modifying other subjects that are anxiety provoking, such as the adjustments that were made for Emma to do PE in the school gym, are central to a successful reintegration into school.

‘Early identification and intervention’ were highlighted by participants as something that could have helped more with the school reintegration process, preventing attendance problems from becoming entrenched. As part of this, schools should pay close attention to transitions, from primary to secondary school: a moment when attendance difficulties often commence. Offering smaller and more personalised environments, like college for Sophie, with breaks from noisy classrooms, halls, and playground settings (as in Emma’s case), as well as introducing choices in their day, can contribute to successfully settling into secondary education, preventing EBSA. Increasing school staff awareness of EBSA through staff training and psychoeducation (e.g. on fight/flight/freeze anxiety responses) is crucial for early intervention.

Lastly, schools should critically examine and review their policies to ensure that they are promoting ‘a positive, supportive, and inclusive school’ for all CYP, particularly those with SEN and MH difficulties, given that they are at higher risk of experiencing EBSA, as highlighted in the introduction. School policies should allow flexibility (including with attendance) to accommodate students who are experiencing EBSA. Moreover, schools can

improve attendance and students' wellbeing by promoting a positive, supportive and inclusive school culture fostering a sense of belonging for CYP through relational and attachment aware approaches, implementing restorative approaches to behaviour support aimed at restoring relationships and empowering students to actively participate in the resolution process. In addition, schools should aim to develop positive and collaborative relationships with parents/carers and their families, through establishing regular and open channels of communication between teachers and parents, which are essential for creating a supportive and effective learning environment for students. EPs can also support schools at this systemic level, as I will explore next.

### **5.5.2 Implications for other professionals, including EPs.**

Implications for professionals working with children and their families, are similar to those already mentioned for school. This should include (1) a thorough assessment of CYP's needs, (2) working in collaboration and consultation with CYP, parents and schools, (3) gathering CYP's views and acting on them, advocating for CYP's wellbeing, (4) empowering CYP by giving them choices and supporting them to voice their opinions in school, (5) facilitating CYP's communication with schools and parents, (6) sharing resources with schools and families to support CYP (e.g. for person-centred planning) and ideas on how to make reasonable adjustments to their social and learning environment, (7) being up to date with research and EBSA training, as well as continuous professional development on evidence-based approaches, such as CBT, that can support CYP with anxiety difficulties, (8) delivering training in schools to raise awareness of EBSA, and (9) promoting an inclusive, nurturing and positive ethos in schools, with a relational approach to supporting CYP's wellbeing.

EPs are well positioned to support schools with CYP who experience EBSA. Firstly, EPs can assist schools by bringing their knowledge of education, psychology and CYP development,

engaging adults in a structured conversation to explore solutions to concerns. Secondly, EPs are trained in supporting CYP's mental health through evidence-based approaches such as CBT (as in Emma's case), as well as obtaining CYP's views and person-centred planning. This can help with school reintegration, as seen in Emma's case. Thirdly, EPs have experience in working together in collaboration with teachers and parents to explore concerns about children's learning and wellbeing in consultation. By bringing together all parties involved in consultation, embedding the principles of collaboration and cooperation, EPs can support schools in making changes in the CYP's social and learning environment, to positively influence CYP's wellbeing and reintegration into school. EPs also have expertise in assessing CYP's needs, which can help to better understand some of the barriers to students' attendance. The literature suggests that CYP with SEN, particularly autism (Higgins, 2022; O'Hagan et al., 2022; Melin et al., 2022; Preece & Howley, 2018) are more likely to experience EBSA than neurotypical CYP. EPs work with CYP with SEN, identifying strengths and needs to support schools to adjust the environment to support CYP's needs and maximise their strengths. As Emma's mother said, if an EP had been involved earlier, Emma's social communication needs may have been identified, preventing things from escalating to full non-attendance. However, this reflects Emma's mother's hopes and perceptions about the difference an EP can make, based on her positive past experiences. EPs can only work within a supportive system. As the EP highlighted, one of the reasons his work was effective, was because Emma's school was very supportive and willing to take on board any suggestions, as well as facilitating a space and time for the EP to work in the school. Hence, EPs cannot provide 'magic' solutions, but work collaboratively within a supportive system. As it has been highlighted, EBSA is a complex, multi-faceted phenomenon that requires targeted support at different levels, within a supportive and collaborative network.

As EPs work at the individual, group, and organisational level, they can support school with individual CYPs experiencing EBSA, but also support groups of parents, teachers (including teacher training). At a school policy level, EPs can support schools in promoting a positive, supportive and inclusive school ethos fostering a sense of belonging for CYP. Sophie's mother's call for school to be a warmer place, "like a family", indicates the importance of school ethos, describing how anxiety-provoking it was for Sophie to hear teachers shouting. Helping schools develop relational approaches to behaviour support, in line with the finding that relationships are key to school reintegration and wellbeing, could prevent CYP experiencing EBSA.

Lastly, most EPs who work for LAs would already have some form of guidance and training on supporting CYP, families and school with CYP experiencing EBSA. Moreover, being positioned in a LA ensures more fluid communication with other professionals, such as family support workers, who can liaise with EPs in supporting CYP and their families. However, in my professional practice, the extent to which this happens is variable. A learning point from this research is that there should be established communication systems to ensure a coordinated approach between school, parents, and different professionals in the LA (as well as outside, e.g. CAMHS practitioners and mentors) for EBSA support

In sum, EPs can support schools with the ADPR cycle, in the assessment, planning, implementation and review of the CYP's individualised support plan for school reintegration, working in collaboration with the CYP's parents, school staff and other professionals. EPs can work in collaboration with teachers and parents to develop individualised support plans tailored to CYPs' strengths and needs. This personalised approach increases the chances of success. This is not to say that EP support is essential for a successful school reintegration. As in Sophie's case, a mentor or other professional with training in supporting CYP's MH through a person-centred approach, can help CYP' reintegration process and coordinate

support. The crucial point is that all professionals coordinate the support with schools and parents for a successful reintegration.

This is in line with research showing some promise in supporting CYP experiencing EBSA with CBT (Maric et al., 2013; Heyne et al., 2011; Walter et al., 2010; -Maldonado et al., 2009). However, CBT on its own might not be sufficient for more challenging cases.

Gutierrez-Maldonado et al. (2009) therefore underscores the importance of flexibility and creativity to ensure the cooperation and engagement with treatment. This was clear in Emma's case, where the EP highlighted the need to be flexible and creative, working with her to devise a communication system of her anxiety levels in class using highlighters and a 'squiggle' game to reduce her anxiety. This is just one example of how CBT, alongside an individualised flexible approach, was a key factor in Emma's reintegration. By giving her choice and autonomy, he promoted her sense of competence and self-value.

EBSA research highlights CBT approaches combined with behavioural activation and exposure for motivational work in school reintegration. Melin and colleagues (2022) suggest that CYP with an ASD diagnosis should receive individualised and personalised CBT interventions such as psychoeducation, parental support, behavioural activation, and exposure, in addition to coordination between school and other professionals. Nuttal and Woods (2013) found that in one of their two cases, a CBT approach had been supportive in "developing her understanding of thoughts, feelings, and behaviour" (p.356) and confronting and re-framing negative thoughts, thus reducing anxiety. However, the present findings in line with the EBSA literature, suggest that CBT interventions cannot be effective on their own, pointing to an interaction of factors, in line with the EMSR framework (Nuttal & Woods, 2013), as explored in chapter 2.

The study findings also raised some parental concerns regarding CAMHS involvement in EBSA cases. Emma's mother's comment about the need for health and education to talk to

each other, and Sophie's mother's perception that CAMHS staff should be more welcoming towards young people, highlighted some challenges in CYP's access to the right support from CAMHS services. Parental/carer involvement, in collaboration with education professionals, can be enhanced by community CAMHS involvement, for example, via the Mental Health Support Teams (MHSTs; Department of Health & DfE, 2017), who are trained in supporting CYP to manage anxiety, supervised by NHS staff, and could collaborate with the CYP's personalised reintegration plan.

### **5.5.2 Implication for LAs**

The theme of 'clear processes and resources for timely EBSA support' highlighted an important factor that could have supported a better school reintegration for both Emma and Sophie. Both cases in the present study involved at least one LA professional, part of non-statutory support services (family support workers) that were able to triage support for CYP, making important referrals (such as Sophie's mentor), as well as supporting parents. However, there was still a perceived lack of clarity for schools in terms of the processes and resources available for EBSA support.

LAs can support schools with EBSA guidance/pathways, that clearly set out the processes and responsibilities for each stakeholder, including teachers, SENCOs or MH leads, parents and CYPs. This guidance should have clear steps, with resources at each stage, stating when and how external professional involvement can be sought, and how school resources (including staff) will be allocated to support the reintegration plan. Arrangements for school staff home visits (where attendance has stopped completely) should also be considered in this guidance.

Importantly, the guidance should set out how to involve parents in the reintegration process and whose responsibility (in school) it is to coordinate CYPs' support plans. The emphasis



should be on early assessment and intervention, to prevent attendance problems from becoming entrenched and anxiety building to the point where the CYP cannot be in school at all, which was the case for both CYP in this study. Long-term monitoring should also be considered beyond the early reintegration phases, as mentioned in Sophie's case, ensuring that support systems are in place (e.g. regular check-ins) to prevent a setback. Finally, recommendations for staff professional development and training, as well as organisational support for schools towards an inclusive, nurturing, and positive ethos, could be included. However, long-term monitoring is limited for EPs due to the traded<sup>58</sup> and statutory psychological assessment demands<sup>59</sup> of the EP service which can sometimes make it difficult to robustly follow long term monitoring and early intervention. This is something that LAs will need to consider in the future, to ensure that EPs have protected time for EBSA to make a real difference.

### **5.5.3 Equity and social justice issues**

Cultural aspects and social justice advocacy on behalf of children and families are intertwined with an ecological approach and should therefore be at the centre of a reintegration process. As Emma's mother said, the fact that her daughter was white and from a conventional family background, helped her to get the support that she needed. However, "people who don't know the system... if you don't speak English, she (her daughter) would still be out of school". The implication is that professionals working with CYP and their families should advocate for more support for children and families who are not in a

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<sup>58</sup> In a traded model of service delivery, the role of the EP in supporting schools in EBSA cases has to be explored and negotiated with schools, to ensure that schools involve EPs early in EBSA cases.

<sup>59</sup> The growing demand for EPs' statutory assessment, as outlined in the SEND CoP (2015), leaves little time for EPs to be involved in other type of work (Capper & Soan, 2022). Moreover, since Covid-19, demand for statutory assessment has increased even more which has put extra pressure on LAs, leaving little time to prioritise other types of work.

privileged position, ensuring that the children who are referred to the service and supported by EPs or other professionals, are those who most need the support.

While considering equity and social justice, I acknowledge the cultural biases in relation to view on attendance issues. This thesis and research have been constructed through a western lens of school avoidance and my views about it are driven by one cultural perspective which will have bearings on the research process. However, it is important to consider different cultural views about school attendance and the extent to which different families value/agree with the attendance expectations of the UK system.

#### **5.5.4 Implication for government policy makers**

The study highlighted the need for a personalised and flexible approach to reintegration into school, in the context of a supportive and collaborative partnership between parents, school and external professionals. This is in accord with the government's most recent guidance (DfE, 2023), where schools are encouraged to involve parents/carers at an early stage, developing trusting relationships with them. It is also suggested that the school nurse (as it was in Sophie's case) could work in collaboration with families, school, and others. A whole school approach to pupil MH is also advised. However it seems that in practice, schools are still very focused on numbers, and there is a long way to go in terms of implementing the principles of the new guidance.

By advocating for more flexible and inclusive school policies, with an emphasis on relational approaches and students' wellbeing, and less on numbers (as Sophie's mother suggested), policy makers can help schools to become positive and nurturing environments that promote inclusive belonging for all CYP. While I value the government's emphasis on attendance (DfE, 2022) given that attendance has implications for CYPs' short- and long-term educational outcomes and wellbeing, an overemphasis on numbers can lead to a punitive

culture, where schools may rely on fines to get children back into school, without differentiating for CYP with SEN or MH needs. Moreover, in relation to the point made on cultural differences, and considering that the UK is a culturally diverse society, it will be important that the government's position, include the views of different cultures on attendance issues.

## **5.6 Future research**

As discussed above, a limitation of the present study is that it was small-scale. Small case qualitative research can be complemented by larger-scale research, for example, by sending questionnaires to all local schools in one LA to gauge perceptions about what works in schools to support CYP's school reintegration. This study did not follow the cases over time to see whether attendance and improvement in wellbeing had persisted, given that views were gathered retrospectively. Longitudinal studies could explore long-term effects of a successful reintegration and which factors support maintaining CYP's wellbeing and attendance in schools.

An implication from the present research was the crucial role that teachers and other school staff can have on supporting CYP's reintegration into schools. Therefore, psychoeducational work with teachers to increase their understanding of the physiological, cognitive, and behavioural manifestations of anxiety, as well as the importance of relationships and creating safety to support students experiencing EBSA, is key. Future studies could explore the impact of teachers' EBSA training or of professional development programmes on teachers' ability to support CYP experiencing EBSA. Another implication was the role EPs could have in supporting CYP experiencing EBSA. Future studies could evaluate the impact of EP work on schools supporting EBSA cases, as well as the impact of other key professionals, such as family support workers and mentors. Finally, linked to the issue of equity of access to support

in EBSA cases, future research could collect and analyse data around demographic characteristics (such as socio-economic status, ethnicity and race, and household composition) in terms of support received from school for a successful reintegration.

### **5.7 Dissemination**

Firstly, I will inform all participants of the study's conclusions through a written summary. I will also inform the LA's EBSA working discussion group of the findings, which is attended by professionals from different disciplines including CAMHS practitioners and family support workers. This will inform the LA EBSA pathway. In terms of further dissemination, there are different groups that may find this study's findings of value, including CYP, parents/carers, mental health professionals and educators. I am unaware of one single outlet that serves all these stakeholders. Therefore I will identify different avenues for disseminating to different audiences. For example, there are social enterprises such as *Not Fine in School* and *Square Peg*, that support parents and CYP experiencing EBSA.

I will also communicate my findings to the EPS where I work and discuss with other EPs the best ways the findings can be disseminated to our local schools. As explored here, EPs can have a crucial role in supporting schools at the different phases of reintegration, as well as doing prevention EBSA work, by supporting a positive and inclusive school ethos and training school staff. I therefore plan to share my findings with my secondary schools in the LA, particularly the senior leadership team and MH leads. Finally, at a wider level, I plan to publish the thesis in an online database such as ETHOS. I also intend to write up the research for publication in a relevant academic journal, and a relevant publication or online space for teachers. I also intend to disseminate to the wider EP community online such as via the YouTube channel 'Educational Psychology Reach-out'.

## 5.8 Conclusion

This research aimed to explore the factors that supported the school reintegration of two CYP in one LA in London. The themes I developed through reflexive thematic analysis point to a complex interaction of factors key to addressing EBSA, with important implications for schools, professionals supporting CYP and their families, LAs and policy makers

Firstly, the importance of supportive relationships with trusted adults cannot be overstated.

Sophie's supportive relationships with her mother, the school nurse and her mentor were key to her reintegration into school. For Emma, her relationship with her mother, SEN teacher and EP, as well as her peer group, was pivotal to her successful reintegration.

Adopting a person-centred approach, as exemplified by Emma's SEN teacher and EP, and by Sophie's mentor, empowered them and promoted their sense of competence and autonomy, which positively influenced their reintegration into school. Tailoring support to CYP's individual needs, including them in decision-making and providing a safe space for self-development (as provided by the EP and mentor) are crucial for school reintegration.

Effective collaboration and communication between school, parents and external professionals was key. The mesosystem, where adults supporting Emma and Sophie worked together, was crucial part of a successful reintegration into school. Having a trained professional leading school reintegration and coordinating the person-centred plan will ensure collaboration between stakeholders.

Intrinsic motivation and CYP's individual qualities, supported by an environment that promotes autonomy and choice, was key. Schools should encourage CYP to pursue their aspirations and motivations, in order to promote their attendance and engagement with school.

Clear processes, resources and early EBSA support could have prevented problems from becoming entrenched. By establishing EBSA policies, guidance and involving trained school

staff to lead the reintegration process, in collaboration with parents, can help prevent persistent non-attendance.

Finally and most importantly, this research suggested that not all children may have equal access to EBSA support. Emma and Sophie's experiences were varied, with different levels of support, but they both ultimately managed to reintegrate into school, due to the various factors highlighted by the present research. However, there are many other CYP who have not managed to reintegrate back to school after experiencing EBSA. As highlighted in the introduction, children who are most vulnerable<sup>60</sup> often do not have access to the right support and are at higher risk of experiencing attendance difficulties. It has been highlighted by the Centre for Social Justice (CSJ, 2023) that some of the most vulnerable children may not have returned to education after COVID-19. This should be a priority for schools, professionals working with CYP and families, as well as policy makers.

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<sup>60</sup> This relates to various factors, including poverty, but also children SEN and MH needs that were not supported effectively over the lockdown periods (CSJ, 2023).

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## Appendices

### 7.1 Appendix A – Papers excluded from literature review

Excluded article	Reason for exclusion	Exclusion criteria	Criteria number
1. Academic engagement behaviours and attitudes among Canadian students reporting sexual violence.	Topic unrelated to EBSA	No EBSA focus	4
2. Catatonic symptoms successfully treated with olanzapine in an adolescent with schizophrenia.	Topic unrelated to EBSA	No EBSA focus	4
3. Is Bullying Associated with Emerging School Refusal in Autistic Boys?	The study did not aim to find factors that support children's re-engagement with school	No focus on supportive factors	5
4. Variables affecting the school adaptation of secondary-school students who do not seek help: Attachment, coping style, positivity, and prospects.	The study aim was not to explore factors that support CYP experiencing EBSA but the potential protective role of several factors on the mental health of adolescent non-help-seekers	No EBSA focus	4
5. Types and correlates of school non-attendance in students with autism spectrum disorders.	The study aim was not to explore factors that support CYP experiencing EBSA but to provide a comprehensive description of school non-attendance in students with autism spectrum disorders.	No focus on supportive factors	5
6. A Multidimensional, Multi-tiered System of Supports Model to Promote School	Article of great value but not based on empirical research	Non empirical research	7

Attendance and Address School Absenteeism	(included in introduction)		
7. A qualitative study of misconceptions among school personnel about absenteeism of children from immigrant families.	The study aim was to explore the experiences and opinions of school personnel related to 'school refusal' among immigrant students, with a focus on transcultural factors that affect their understanding and ability to support students	No focus on supportive factors	5
8. Migrant parents of adolescents with school refusal: A qualitative study of parental distress and cultural barriers in access to care.	The study aim was to explore the experience of school refusal among minority youth	No focus on supportive factors	5
9. Reconciling Contemporary Approaches to School Attendance and School Absenteeism: Toward Promotion and Nimble Response, Global Policy Review and Implementation, and Future Adaptability (Part 1)	Article of great value but not based on empirical research (included in introduction)	Non empirical paper	7
10. Latent class analysis of school refusal behavior and its relationship with cyberbullying during adolescence.	Study explored the relationship between cyberbullying and school refusal behaviour.	No focus on supportive factors	5
11. Association of school engagement, academic difficulties and school avoidance with psychological difficulties among adolescents admitted to a psychiatric inpatient unit.	Study aimed to explore the associations of academic difficulties, school avoidance and school engagement to total psychological difficulties and emotional problems for inpatients-not the	No focus on supportive factors	5

	factors that support re-engagement.		
12. Comedic experience with two robots aided a child with autism spectrum disorder to realize the importance of nonverbal communication.	Unrelated topic	No EBSA focus	4
13. Current advances on school refusal and other attendance problems: An international perspective. Introduction to the Special Issue.	Article based on six investigations framed in the context of Spain, France, the United States, Japan, Malaysia and the Netherlands.	Compilation non-empirical paper	7
14. The association of adolescent Facebook behaviours with symptoms of social anxiety, generalized anxiety, and depression.	No EBSA focus	No EBSA focus	4
15. Predicting risk of school refusal: Examining the incremental role of trait EI beyond personality and emotion regulation	Study focus is on risk, not supportive factors	No focus on supportive factors	5
16. School anxiety in children and adolescents with chronic pain.	Topic is different to EBSA	No EBSA focus	4
17. Associations between mothers' active engagement with infants at 6 months and children's adjustment to school life at ages 5.5 and 11 years.	Topic is different to EBSA	No EBSA focus	4
18. The developmental trajectory of borderline personality disorder and peer victimisation: Australian family carers' perspectives.	Topic is different to EBSA	No EBSA focus	4



19. Out of school: A phenomenological exploration of extended non-attendance.	Study did not focus on supportive or successful factors for school re-engagement	No focus on supportive factors	5
20. School factors associated with school refusal- and truancy-related reasons for school non-attendance.	Study looked at reasons for truancy and school 'refusal'- not at successful factors for school re-engagement.	No focus on supportive factors	5
21. The role of ADHD in academic adversity: Disentangling ADHD effects from other personal and contextual factors.	Topic is different to EBSA	No EBSA focus	4
22. School refusal and the parent-child relationship: A psychodynamic perspective.	Focus is not supportive factors for school re-engagement	No focus on supportive factors	5
23. Factors associated with childhood depression in Saskatoon students: A multilevel analysis.	Topic unrelated to EBSA	No EBSA focus	4
24. School-based intensive exposure therapy for school refusal behavior.	Evaluative study of a specific intervention, not based on perceived factors of what helps school reintegration.	No focus on supportive factors	5
25. 'Emergence of psychotic symptoms during Internet withdrawal'	Topic unrelated to EBSA	No EBSA focus	4
26. The non-sense of raising school attendance	Non-empirical paper on school attendance	Non empirical paper	7
27. Review of Keys to parenting your anxious child.	Review paper not based on empirical research	Non empirical paper	7
28. Psychosocial interventions for school refusal behavior in children and adolescents.	Secondary data research	Not based on primary data	7
29. Leisure boredom and high school dropout in	Topic different to EBSA	No EBSA focus	4

Cape Town, South Africa.			
30. Interviews with selectively mute children.	Topic different to EBSA	No EBSA focus	4
31. Risperidone-induced priapism in a 12-year-old boy with schizophrenia.	Topic different to EBSA	No EBSA focus	4
32. Tele-hypnosis in the Treatment of Adolescent School Refusal.	Evaluative study of a specific intervention, not based on perceived factors of what helps school reintegration.	No focus on supportive factors	5
33. Review of School Refusal in Adolescence (No. 18 in the PACTS Series).	Book review	Non empirical paper	7
34. Review of School Phobia, Panic Attacks and Anxiety in Children.	Book review	Non empirical paper	7
35. Addressing School Refusal Behavior: Suggestions for Frontline Professionals.	Non-empirical paper	Non-empirical paper	7
36. Is Bullying Associated with Emerging School Refusal in Autistic Boys?	Study examined associations between being bullied and 'school refusal' only among autistic youth bullied at school	No focus on supportive factors	5
37. School Refusal and Psychiatric Disorders: A Community Study	Study aim was to examine the association between anxious school refusal and truancy and psychiatric disorders in a community sample of children and adolescents	No focus on supportive factors	5
38. Treatment for School Refusal Among Children and Adolescents: A Systematic Review and Meta-Analysis	systematic review and meta-analysis based on RCT and quasi-experimental design studies, not focused	SLR and meta-analysis	7

	on perceived factors for re-integration.		
39. Using a Preventive Social Work Program for Reducing School Refusal.	Experimental between groups study design based on a specific intervention, not on perceived factors of what helps school reintegration.	No focus on supportive factors	5
40. Frequent Fliers, School Phobias, and the Sick Student: School Health Personnel's Perceptions of Students Who Refuse School.	No link to full text	No link to full text accessible by author	x
41. Anxiety-based school refusal: Helping parents cope.	Case example (not empirical research)	Non-empirical research	7
42. Psychological Factors Behind Truancy, School Phobia, and School Refusal: A Literature Study	Non-empirical research	Non-empirical research	7
43. School psychologists and the secret illness: Perceived knowledge, role preferences, and training needs regarding the prevention and treatment of internalizing disorders.	Focus different to EBSA	No EBSA focus	4
44. Children of incarcerated parents: The invisible students in our schools -- What can our schools do to help them?	Focus different to EBSA	No EBSA focus	4
45. Starting School: Welcoming Young Children and Families into Early School Experiences.	Focus different to EBSA	No EBSA focus	4
46. School Refusal and Psychiatric Disorders: A Community Study	Correlational study which analysed secondary data to	Secondary data analysis and no	5

	examine the association between anxious school refusal and truancy and psychiatric disorders	focus on supportive factors	
47. Psychometric properties of School Refusal Assessment Scale—Revised: Parent version in Iranian population.	Study aimed at evaluating the factor validity of a School Refusal Assessment Scale	No focus on supportive factors	5
48. Disabilities exhibited by children and adolescents that refuse to go to school.	Retrospective study did not focus on supportive factors.	No focus on supportive factors	5
49. Characterizing social and academic aspects of school anxiety in paediatric chronic pain.	Main focus of research is not EBSA but chronic pain.	No EBSA focus	4
50. Differentiation Between School Attendance Problems: Why and How?	Non empirical paper	Non empirical paper	7
51. Reengagement With Education: A Multidisciplinary Home-School-Clinic Approach Developed in Australia for School-Refusing Youth	Pilot study aimed to evaluate the feasibility and effectiveness of a multidisciplinary programme to support CYP with 'school refusal'	Focus is on evaluation of the programme rather than the factors associated to successful re-integration	5
52. Social and academic functioning in adolescents with anxiety disorders: A systematic review.	Non-empirical paper and main focus is not EBSA	No EBSA focus	4
53. Incidents of cyberbullying among library and information science (LIS) students at Delta State University, Abraka, Nigeria.	Study focus is not EBSA	No EBSA focus	4
54. Pupil absenteeism and the educational psychologist.	Non empirical paper	Non empirical paper	7
55. Parental issues contributing to school refusal: A case report.	Case report.	Non empirical paper and focus is not on supportive factors	7

56. Factors associated with childhood depression in Saskatoon students: A multilevel analysis.	No EBSA focus	No EBSA focus	4
57. Badder than 'just a bunch of SPEDs': Alternative schooling and student resistance to special education rhetoric.	No EBSA focus	No EBSA focus	4
58. Disaster-related trauma and children: A proposed parent training program.	No EBSA focus	No EBSA focus	4
59. Separation anxiety disorder in youth: Phenomenology, assessment, and treatment.	Literature review on separation anxiety	No EBSA focus/non-empirical paper	4
60. An Investigation of Personality Traits in Relation to Adolescent School Absenteeism.	Study focuses on personality traits of school absenteeism'- not on factors supporting re-engagement	No focus on supportive factors	5
61. The Effect of an Anxiety-Coping Program for Children Based on Cognitive Behavioral Therapy on 4th Graders' Anxiety Levels	Evaluative research with non EBSA focus	No focus on supportive factors and different age phase	5
62. Elective Home Schooling in England: A Policy in Need of Reform?	Non empirical research with non EBSA focus	Non empirical research with non EBSA focus	4
63. School Camp Refusal and Reluctance: The Role of The School Psychologist	Non empirical research with focus on school camp refusal, not general EBSA	Non empirical research with non EBSA focus	4
64. Psychometric Properties of the German School Refusal Assessment Scale--Revised	Review of a scale	No focus on supportive factors	5
65. Academic Self-Attributions for Success and Failure in	Correlational quantitative study with no focus on supportive	No focus on supportive factors	5

Mathematics and School Refusal	factors for re-engagement with school.		
66. The Psychological Impact of English Language Immersion on Elementary Age English Language Learners	Focus other than EBSA	No EBSA focus	4
67. Intensive (Daily) Behavior Therapy for School Refusal: A Multiple Baseline Case Series	Case study design evaluative study	Focus is on evaluation of the programme rather than the factors associated to successful re-integration	5
68. Family-Centered Practice with Non-Attending Students in Hong Kong	Review	Non empirical research	7
69. School Refusal Behavior Associated with Separation Anxiety Disorder: A Cognitive-Behavioral Approach to Treatment	Overview of literature	Non empirical research	7
70. In Praise of Wasting Time in Education: Some Lessons from the "Romantics"	Non-EBSA focus	No EBSA focus	4
71. Recent Perspectives Concerning School Refusal Behavior	Non-empirical research	Non-empirical paper	7
72. Find Your Voice: Eliminate Classroom Phobias	Programme review	Non empirical paper	7
73. Forms and Functions of School Refusal Behavior in Youth: An Empirical Analysis of Absenteeism Severity	Quantitative research on the functions of EBSA and its relationship to the degree of it, not on factors that support youth re-integration.	No focus on supportive factors	5
74. Implementation Challenges to TADS Cognitive-Behavioral Therapy	Study with a focus other than EBSA	No EBSA focus	4

75. Moving from Assessment to Treatment of School Refusal Behavior in Youth	Non-empirical paper	Non empirical paper	7
76. Responding to Chronic Non-Attendance: A Review of Intervention Approaches	Non-empirical paper	Non empirical paper	7
77. School staffs' experiences of supporting children with school attendance difficulties in primary school: a qualitative study	Study focuses on primary age school children	Age phase	3
78. Emotionally based school non-attendance: two successful returns to school following lockdown.	Study focuses on primary age school children	Age phase	3
79. The Ecological Context of Chronic School Absenteeism in the Elementary Grades	Study focuses on primary age school children	Age phase	3

## 7.2 Appendix B – Critical Appraisal Review

### Critical Appraisal of a Survey (CEBM) Archer et al., 2003

Appraisal question	Yes	Can't tell	No
1. Did the study address a clearly focused question / issue?	X		
2. Is the research method (study design) appropriate for answering the research question?	X		
3. Is the method of selection of the subjects (employees, teams, divisions, organizations) clearly described?	X		
4. Could the way the sample was obtained introduce (selection) bias? <i>It was random and representative of a large sample of different schools which minimises the possibility of selection bias. However, only 8% of the total sample responded in full to the questionnaire and could be included in the results. There is a possibility that the schools and the LEAs that responded were already more aware of the problem and had a procedure in place, which is a way might have biased the sample.</i>			X
5. Was the sample of subjects representative with regard to the population to which the findings will be referred?	X		
6. Was the sample size based on pre-study considerations of statistical power?		X	
7. Was a satisfactory response rate achieved? <i>For schools, the total response rate was almost 50% (280 out of 600) which seems good, although only 8% responded to the full questionnaire which is acknowledged by the authors as a small response and as a result in itself, maybe indicating that the problematic under study (school refusal and school phobia) was not be top of the agenda in schools at the time, or might not have been labelled or recognised as such, using that terminology (which is interesting in itself). The questionnaire sent to LEAs had a 40% response which seems satisfactory.</i>	X (LEA)		X (schools)
8. Are the measurements (questionnaires) likely to be valid and reliable? <i>No information about how the questionnaires were designed and validated for the data that they are capturing, so it is not possible to ascertain whether is validly measuring what it is intended to measure.</i>		X	
9. Was the statistical significance assessed?			X
10. Are confidence intervals given for the main results?			X
11. Could there be confounding factors that haven't been accounted for?		X	
12. Can the results be applied to your organization?	X		



## Critical Appraisal Skills Programmes (CASP)

Havik et al., 2014

Appraisal question	Yes	Can't tell	No	Comments
<b>Section A: Are the results valid?</b>				
<i>1. Was there a clear statement of the aims of the research?</i>	Yes			To explore how parents of children who are experiencing or have had SR have experienced the children's situation in school To explore how parents of children who are experiencing or have had SR have experienced the children's situation in school
<i>2. Is a qualitative method appropriate?</i>	X			
<i>3. Was the research design appropriate to address the aims of the research?</i>	X			
<i>4. Was the recruitment strategy appropriate to the aims of the research?</i>	X			Convenience sampling recruited by staff in the educational and psychological counselling services, from special schools and from an organization for parents of students who are refusing school.
<i>5. Was the data collected in a way that addressed the research issues?</i>	X			
<i>6. Has the relationship between researcher and participants been adequately considered?</i>		X		Not explicitly stated by author
<b>Section B: What are the results?</b>				
<i>7. Have ethical issues been taken into consideration?</i>			X	No mention of ethical issues in paper
<i>8. Was the data analysis sufficiently rigorous?</i>	X			QSR NVivo9 and members check to increase trustworthiness

<i>9. Is there clear statements of findings?</i>	X			
<b>Section C: Will the results help locally?</b>				
<i>10. How valuable is the research?</i>	Valuable as it gathered parental perspectives although less relevant to the UK context, as study was done in Norway.			

**Critical Appraisal Skills Programmes (CASP)  
Head, 2006,**

<b>Appraisal question</b>	<b>Yes</b>	<b>Can't tell</b>	<b>No</b>	<b>Comments</b>
<b>Section A: Are the results valid?</b>				
<i>1. Was there a clear statement of the aims of the research?</i>	X			Research aims are stated in a narrative style. It would have been more helpful to the reader to have bullet pointed them or stated clearly in a separate section with a heading such as 'study aims.
<i>2. Is a qualitative method appropriate?</i>	X			
<i>3. Was the research design appropriate to address the aims of the research?</i>	X		X	Research seems to have a double purpose: descriptive and explanatory. Interviews can be used to gather insights from participants about their experiences in a descriptive and explanatory study. However, it remains unclear how the analysis of the protocol would contribute to address the aims of the research.
<i>4. Was the recruitment strategy appropriate to the aims of the research?</i>		X		No recruitment strategy specified
<i>5. Was the data collected in a way that addressed the research issues?</i>				The interviews are appropriate to answer the research question with regards to the nature and effectiveness of the support from the perspectives of CYP, teacher and parents.

				However, it is unclear how the analysis of the protocol was conducted (it just seems to be a description of the protocol) and how this contributed to answer the RQ. All that is mentioned is that "Analysis of the protocol established the psychological, philosophical and pedagogical principles that underpin the approach."
<i>6. Has the relationship between researcher and participants been adequately considered?</i>			X	
<b>Section B: What are the results?</b>				
<i>7. Have ethical issues been taken into consideration?</i>			X	
<i>8. Was the data analysis sufficiently rigorous?</i>			X	
<i>9. Is there clear statements of findings?</i>			X	No signposting of 'findings' or 'results' is given. Analysis and discussion are all one section which is confusing.
<b>Section C: Will the results help locally?</b>				
<i>10. How valuable is the research?</i>	It is positive that views of how and why things worked were triangulated (parents, students, and teachers). However, as the factors relate to a specific intervention (the 'Protocol') it is unclear how transferable this would be to other contexts. The author has the aim to find out why so it can be transferred to other context, but it is unclear if this was achieved due to the lack of transparency and rigour of how the data was analysed.			

**Critical Appraisal Skills Programmes (CASP)**  
Melin et al., 2022

Appraisal question	Yes	Can't tell	No	Comments
<b>Section A: Are the results valid?</b>				
<i>1. Was there a clear statement of the aims of the research?</i>	X			

<b>2. Is a qualitative method appropriate?</b>	X			
<b>3. Was the research design appropriate to address the aims of the research?</b>	X			
<b>4. Was the recruitment strategy appropriate to the aims of the research?</b>	X			Clinical sample. Recruitment strategy clearly stated.
<b>5. Was the data collected in a way that addressed the research issues?</b>	X			
<b>6. Has the relationship between researcher and participants been adequately considered?</b>		X		
<b>Section B: What are the results?</b>				
<b>7. Have ethical issues been taken into consideration?</b>	X			Clear statement in procedures of consent form and how participants were contacted
<b>8. Was the data analysis sufficiently rigorous?</b>	X			Thematic analysis with NVivo software and independent trial coding of first interview. The authors clearly explained how the themes were derived from the data and how the three authors contributed to this process, making it more robust and adding credibility to the findings
<b>9. Is there clear statements of findings?</b>	X			
<b>Section C: Will the results help locally?</b>				
<b>10. How valuable is the research?</b>	Clinical sample: CYP had a psychiatric diagnose who attended a Child and Adolescent psychiatry centre in Sweden, so less applicable to UK. Also might be less applicable to CYP who do not have a co-current neurodevelopmental and psychiatric diagnosis, as well as SAP, and to a non-clinical population of EBSNA students.			

**Critical Appraisal Skills Programmes (CASP)  
Nuttal and Woods 2013**

Appraisal question	Yes	Can't tell	No	Comments
<b>Section A: Are the results valid?</b>				
<i>1. Was there a clear statement of the aims of the research?</i>	X			
<i>2. Is a qualitative method appropriate?</i>	X			
<i>3. Was the research design appropriate to address the aims of the research?</i>	X			
<i>4. Was the recruitment strategy appropriate to the aims of the research?</i>		X		Participant recruitment criteria is stated but not strategy
<i>5. Was the data collected in a way that addressed the research issues?</i>	X			
<i>6. Has the relationship between researcher and participants been adequately considered?</i>		X		
<b>Section B: What are the results?</b>				
<i>7. Have ethical issues been taken into consideration?</i>	X			There is a separate section on ethical considerations
<i>8. Was the data analysis sufficiently rigorous?</i>	X			There is a clear explanation of the data analysis process (stages of thematic analysis) including its limitations. High Inter-coder agreement was reached on transcript segments coded (50% of two interview transcripts)
<i>9. Is there clear statements of findings?</i>	X			
<b>Section C: Will the results help locally?</b>				
<i>10. How valuable is the research?</i>	Very valuable and relevant to the EP context as it was the first one and the only of the included papers in this review to propose as theoretical framework to EBSNA, very useful for practitioners and schools supporting CYP.			

**Critical Appraisal Skills Programmes (CASP)**  
**O'Hagan et al., 2022**

Appraisal question	Yes	Can't tell	No	Comments
<b>Section A: Are the results valid?</b>				
<i>1. Was there a clear statement of the aims of the research?</i>	X			
<i>2. Is a qualitative method appropriate?</i>	X			
<i>3. Was the research design appropriate to address the aims of the research?</i>	X			
<i>4. Was the recruitment strategy appropriate to the aims of the research?</i>	X			Convenience sampling through contact which is clearly explained.
<i>5. Was the data collected in a way that addressed the research issues?</i>	X			
<i>6. Has the relationship between researcher and participants been adequately considered?</i>	X			For example, the method was adapted for a young person who did not feel comfortable doing an interview with the researcher.
<b>Section B: What are the results?</b>				
<i>7. Have ethical issues been taken into consideration?</i>	X			Plenty of information on ethical approval and reference of how member checking of interview transcription was done in line with ethical approval.
<i>8. Was the data analysis sufficiently rigorous?</i>	X			Yes, Braun and Clarke's method of analysis was followed, with mentioned to the 15-point checklist of criteria for good thematic analysis and the six-phase

			guidelines for conducting thematic analysis
<b>9. Is there clear statements of findings?</b>	X		8 main themes are explained in detail and there is a figure to illustrate the finding too
<b>Section C: Will the results help locally?</b>			
<b>10. How valuable is the research?</b>	Very valuable as it aims to inform and support practitioners working with autistic young people		

**Critical Appraisal Skills Programmes (CASP)  
Sibeoni, 2018**

Appraisal question	Yes	Can't tell	No	Comments
<b>Section A: Are the results valid?</b>				
<b>1. Was there a clear statement of the aims of the research?</b>	X			
<b>2. Is a qualitative method appropriate?</b>	X			
<b>3. Was the research design appropriate to address the aims of the research?</b>	X			
<b>4. Was the recruitment strategy appropriate to the aims of the research?</b>	X			Purposive sampling through contact which is clearly explained.
<b>5. Was the data collected in a way that addressed the research issues?</b>	X			
<b>6. Has the relationship between researcher and participants been adequately considered?</b>	X			The authors explicitly explain the position of the researcher as non-expert who would remain open and attentive to any topic raised, as participants were the experts on their experience, indicative of a constructivist epistemology, although this is not explicitly stated.
<b>Section B: What are the results?</b>				
<b>7. Have ethical issues been taken into consideration?</b>	X			Information on ethical approval stated.

<i>8. Was the data analysis sufficiently rigorous?</i>	X			Braun and Clarke's method of analysis was followed, with description of the six-phase guidelines for conducting thematic analysis. Rigorous analysis supported by a software (Nvivo 11 software) and 3 independent researchers conducting the analysis and debating frequently until agreement was reached adding trustworthiness to the interpretation of the data.
<i>9. Is there clear statements of findings?</i>	X			
<b>Section C: Will the results help locally?</b>				
<i>10. How valuable is the research?</i>				Valuable as a first one to explore the experiences of YP with EBSA in psychiatric care, as well as comparing those experiences (parents/s children), highlighting the importance of service user reported outcomes, which is highlighted by researchers.

**Critical Appraisal Skills Programmes (CASP)  
Tobias, 2015**

Appraisal question	Yes	Can't tell	No	Comments
<b>Section A: Are the results valid?</b>				
<i>1. Was there a clear statement of the aims of the research?</i>	X			Clear aim and research questions stated separately
<i>2. Is a qualitative method appropriate?</i>	X			
<i>3. Was the research design appropriate to address the aims of the research?</i>	X			Rationale for the ground theory method is provided.
<i>4. Was the recruitment strategy appropriate to the aims of the research?</i>	X			Purposive sampling although not explicitly stated. As the study is context bound to family coaches within 1 LA,



				these are the ones selected for the study. It is stated that the family coaches who volunteered to participate did, but not how this was sought (their voluntary participation)
<i>5. Was the data collected in a way that addressed the research issues?</i>	X			
<i>6. Has the relationship between researcher and participants been adequately considered?</i>		X		Social constructionist epistemology stated and the relationship between participants and how knowledge is generated in their interaction is stated, but not about the relationship between researcher and participants.
<b>Section B: What are the results?</b>				
<i>7. Have ethical issues been taken into consideration?</i>	X			Information on ethical approval stated.
<i>8. Was the data analysis sufficiently rigorous?</i>	X			software, MAXQDA was used for analysis which produced an audit trail which allows outside scrutiny of how the theory was generated. A clear explanation of the coding process is stated, until analysis reached saturation. Moreover, member checking was also sought in the initial stages of generating theory from the data, adding credibility and trustworthiness.
<i>9. Is there clear statements of findings?</i>	X			Yes, but findings could have mapped out with the research questions for further clarity, i.e. how the five interacting elements of the theory that emerged from the analysis help to answer the research questions.
<b>Section C: Will the results help locally?</b>				

<b>10. How valuable is the research?</b>	Valuable as gives a unique perspective from family coaches in one LA and generated a theory with implication for practice which can help support other CYP. A limitation is that integrated team for families is an intervention not available everywhere therefore the results gathered from family coaches might have less applicability in contexts where there is no such an intervention and might be less representative of supportive factors that all CYP experiencing EBSA can access.
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**Critical Appraisal Skills Programmes (CASP)  
Wilkins 2008**

Appraisal question	Yes	Can't tell	No	Comments
<b>Section A: Are the results valid?</b>				
<b>1. Was there a clear statement of the aims of the research?</b>			X	Clear aim should have been stated separately. Unclear if the purpose is to evaluate the success of the School Avoidance Programme at the school where the research took place or just gather the views of the CYP. Aims seems to be more related to the latter in consideration of the data collection method.
<b>2. Is a qualitative method appropriate?</b>		X		Can't tell as aim is not clearly stated. Three sources of data are stated by the author.
<b>3. Was the research design appropriate to address the aims of the research?</b>		X		Can't tell as aim is not clearly stated. Seems to be a case study design but not clearly stated by researcher.
<b>4. Was the recruitment strategy appropriate to the aims of the research?</b>	X			Purposive sampling although not explicitly stated. Researcher worked in the school for 6 years was stated as one of the reasons and also because it was the only school in the district to receive children with 'school avoidance'. Rationale for

				selecting the students for the interview is provided.
<b>5. Was the data collected in a way that addressed the research issues?</b>		X		3 methods of data collection are explained by researcher with some rationale provided (triangulation). Also, justification on why doing 4 interviews per child. However, as the research aim is unclear from the beginning, it is difficult to evaluate if data collection addressed the research aims. Some justification is provided for the different methods (interviews, attendance data and observations), stating that the attendance data was gathered to corroborate the interview data. Unclear purpose of the observational data which seem not systematic.
<b>6. Has the relationship between researcher and participants been adequately considered?</b>			X	Acknowledgment from the researcher that he was part of the school system but not discussion as to how this may have affected his findings and his relationships with students.
<b>Section B: What are the results?</b>				
<b>7. Have ethical issues been taken into consideration?</b>	X			No information on ethical approval stated. However, members checking after transcribing interviews and consent is stated in paper.
<b>8. Was the data analysis sufficiently rigorous?</b>	X			Member checking added trustworthiness to data analysis. No mention of data analysis methods at all, for any of data collections methods stated, therefore results lack transparency as it is not clear if there was a systematic process (e.g.

				coding to create themes) that lead to the results.
<b>9. Is there clear statements of findings?</b>	X			There is no analysis or descriptive table on attendance data and no mention to the 'observational data' results that was mentioned in the data collection section. The 'quantitative data' (attendance data) is reported in findings in a narrative way; therefore it is unclear whether this is a mixed methods study.
<b>Section C: Will the results help locally?</b>				
<b>10. How valuable is the research?</b>				Valuable as an account of the unique experiences of YP in a specialist setting and what supported them to re-engage with education-from their perspectives. Less applicability t other contexts such as mainstream where it might not be possible to provide the same type/level of support.

## 7.3 Appendix C – Recruitment strategy

### Recruitment strategy via YP's school

1. Contact SENCOs of secondary schools via EP link by e-mail to describe the research. In cases which meet the sample criteria where there has already been EP involvement, letters will be sent directly to parents (see recruitment strategy via EP)
2. Meet with the SENCO in person to describe the research (if requested).
3. An information sheet (see appendix 1a) will be forwarded to parents via a member of staff in school e.g., the SENCO or Head of Year.
4. Parents will be asked to contact me directly if they agree to take part. Parents who agree will be e-mailed a consent form prior to the organisation of interviews. This will include consent to interview school staff and practitioners involved in the case.
5. Young people over the age of 16 will be given a copy of the information sheet directly via a member of staff at their school / setting and will be asked to contact me if they have any questions about the research. Consent will be sought from any YP over 16 before I start any interviews.
6. Contact will be made with practitioners. At this point, it may be necessary to ask for approval from the director of the practitioner's services (e.g., Family Support Service, CAMHS Service - where appropriate) for me to conduct the research and complete (if required) a separate ethics form from that service.
7. All participants will be required to sign consent/assent forms prior to interviews taking place.

### Recruitment strategy via EPs

1. EPs in my service will be sent the sample criteria. If there are YP in their caseload that meet the criteria, they will send the information about the research to the YP's parents (appendix 1a) and school (appendix 1c).
2. Meet with the SENCO to describe the research (if requested).
3. Then I will follow steps 4-7 from the above recruitment strategy.

### Recruitment using 'snowball sampling'

Snowball sampling is a recruitment technique in which research participants are asked to assist researchers in identifying other potential subjects.

## 7.4 Appendix D : Participant Information Sheets

### Appendix 1a: Information sheet for parents / carers

Emotionally based school avoidance: an exploration of factors contributing to positive outcomes in secondary school-aged young people

**Dear Parent/Carer,**

You are invited to take part in a research project. Before you decide whether or not you wish to take part, it is important for you to understand why the research is being done and what participation will involve. Please read the following information carefully.

#### **Who is doing this research?**

My name is Claudia Seddon, and I am a Trainee Educational Psychologist at the Tavistock and Portman NHS Foundation Trust, on placement at XX Educational Psychology Services. I am carrying out this research as part of my Professional Doctorate in Child, Community and Educational Psychology. I am working under the supervision of Dr Christopher Arnold, Educational Psychologist.

#### **What is the aim of the research?**

The aim is to identify the success factors that have contributed to positive outcomes for children and young people who have been absent from school due to emotional reasons, also known as emotionally based school avoidance (EBSA). Previous research suggests that the difficulties experienced by children and young people in similar situations to your child's are related to multiple factors at school and home. Their support networks (teachers, family support workers, CAMHS and parents) are crucial for getting them back to school. It is important for us, as professionals working with schools, to better understand what helped your child's successful return to school.

#### **Who is organising and funding the research?**

My sponsor is The Tavistock and Portman NHS Trust.

#### **Who has given permission for this research?**

The Tavistock Research Ethics Committee as well as XX Educational Psychology Services.

#### **Who can take part in this research?**

I am looking for parents of children and young people who have experienced EBSA and have subsequently managed to return to school, for at least 80% of the school time in the last term.

#### **What does participation involve?**

If you decide to participate in my research, I will ask you to complete a consent form. I will also ask you for your permission to speak to the people who supported your child in this

process, including school staff and other practitioners such as Educational Psychologists, CAMHS and/or Family Support Workers.

I would also like to interview you about the factors that you think led to the successful reintegration of your child at school. This will consist of one interview with me that will last approximately one hour. The dates, times and location of the interview can be arranged for whenever and wherever is most convenient for you. You can also invite someone to accompany you to the interview, if you would feel more comfortable. There are no other commitments associated with participating.

**Do I have to take part?**

No, it is up to you to decide whether to take part in my research. The services and support you receive from XX Educational Psychology Services will be unaffected, as will the support your child gets from school and any other service providers.

**Are there any reasons why I should NOT take part in this research?**

If there are any current stressful/traumatic events in your family, we would not advise your participation in this research.

**Will I be recorded and how will the recorded media be used?**

I would like to make audio recordings of the interviews to help me remember and analyse what was said during the interview. If you prefer to conduct the interviews online, I will video-record the session with your permission. The recordings will be stored in a secure format, anonymously. No one outside the project will be given access to the recording.

**What will happen if I don't want to carry on with the research?**

You are free to withdraw from the research before the data analysis (a month after the interview), without giving a reason.

**What are the possible benefits of taking part?**

There is not a lot of research into the success factors that contribute towards positive outcomes for children and young people who have experienced EBSA. There are certainly no studies in your local area (XX) that I am aware of that have looked at this. This is a problem that can be solved if picked up and dealt with quickly. By identifying those success factors, I am hoping to contribute to the body of research in this area so more children and young people can benefit from successful intervention.

**What are the possible risks of taking part?**

The interviews are designed to elicit the successful factors that contributed to your child's positive outcomes. However, given that EBSA can be an emotive issue, there is always the possibility that interviews may trigger some difficult memories. However, the focus of the interview is and will remain the positive factors that led to your child's successful outcome and how school and home supported them. That said, we can always stop the interview at any point if you want or we can skip certain questions. If after the interview you would like to talk to somebody, we can arrange that.

**What will happen to the findings from the research?**

The findings will be written up as part of my thesis, which will be read by examiners and stored online at the University of Essex thesis repository. I may also publish the findings in a peer reviewed journal. I will share the findings anonymously schools and services in XXX that would like to hear about them and with my colleagues at XX Educational Psychology Services. You will have the option to read a summary of my findings.

**Will information about the participants taking part in this study be kept confidential?**

Yes, all information collected during this research will be kept strictly confidential.

**Are there times when the data cannot be kept confidential?**

Confidentiality is subject to legal limitations or if a disclosure is made that suggests that any harm to self and / or others may occur. In this instance, the local safeguarding procedure will be followed. Given the small sample of this research, there may be implications for anonymity. This means that you may recognise some examples and experiences shared in interviews. However, to protect their identity, pseudonyms will be used.

**How will my data be stored?**

All data will be stored in accordance with the [Tavistock and Portman NHS Foundation Trust data protection and handling policies](#). In line with Research Councils UK guidance, doctoral project data will be stored for up to ten years, and then securely destroyed.

**Who has given permission for this research?**

This research has been approved by the Tavistock and Portman Trust Research Ethics Committee (TREC).

**Contact details for further information**

If you are interested in your child taking part in this research or have any questions, please contact [cseddon@tavi-port.nhs.uk](mailto:cseddon@tavi-port.nhs.uk)

**If you have any concerns about the research you can contact:**

-My supervisor, Dr Christopher Arnold, [carnold@tavi-port.nhs.uk](mailto:carnold@tavi-port.nhs.uk)

-Simon Carrington, Head of Academic Governance and Quality Assurance, [academicquality@tavi-port.nhs.uk](mailto:academicquality@tavi-port.nhs.uk)

**Thank you for reading this!**

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If you are interested in this research and would like to take part, please contact me on [cseddon@tavi-port.nhs.uk](mailto:cseddon@tavi-port.nhs.uk) or 07899853684. Alternatively, please sign below and return this to the person who gave you the information sheet, so I can contact you.

Name:

Signature:

Date:

Email address:

I give my consent for the researcher to contact me via this email address and/or phone number

I give my consent for my email address and/or phone number to be used solely for the purpose of this research

## Participant Information Sheet for Professionals

The Tavistock and Portman 

NHS Foundation Trust

### Information Sheet

**Title:** Emotionally based school avoidance: an exploration of factors contributing to positive outcomes in secondary school-aged young people

#### **Who is doing the research?**

My name is Claudia Seddon, and I am a Trainee Educational Psychologist on placement at XX Educational Psychology Services. I am doing this research as part of my training for the Doctorate in Child, Community and Educational Psychology which I am doing at Tavistock and Portman NHS Trust, the sponsors of this research project. The Principal Investigator is Dr Christopher Arnold.

I would like to invite you to take part in my research study. Before you decide whether you would like to participate, it is important for you to understand what the research entails and why I am doing it. Please take some time to read the information on this sheet.

#### **What is the aim of the research?**

The aim is to identify the success factors that have contributed to positive outcomes for children and young people who have been absent from school due to emotional reasons, also known as emotionally based school avoidance (EBSA).

#### **Who is organising and funding the research?**

My sponsor is Tavistock and Portman Trust.

#### **Who has given permission for this research?**

The Tavistock Research Ethics Committee as well as XX Educational Psychology Services.

#### **Who can take part in this research?**

I am looking for practitioners who have worked with children and young people who have experienced EBSA and have subsequently managed to return to school, for at least 80% of the school time in the last term. You have worked with a young person who fits this criterion and their parents have given me consent to contact you to ask you to take part in my research.

#### **Do I have to take part?**

No, it is up to you to decide whether to take part in my research. You are free to withdraw during the data collection phase without giving any reason and any data that you have contributed to the research can be destroyed at this point.

#### **What will happen to me if I take part?**

You will be invited to attend one interview with me. The dates, times and location of the interview can be arranged for whenever and wherever is most convenient for you. We could meet at XXX Council's Office, your workplace or arrange a virtual online meeting.

#### **What do I have to do?**

If you decide to participate in my research, I will ask you to complete the consent form below, stating that you wish to take part. Apart from one interview that will last one hour, there are no other commitments associated with participating.

#### **What are the possible disadvantages and risks of taking part?**

Participating in the research is not anticipated to cause you any disadvantages or discomfort. The interviews are designed to elicit the successful factors that contributed to the child/young person's positive outcomes. However, given that EBSA is an emotive issue, there is always the possibility that interviews may trigger some uncomfortable feelings. We can stop the interview at any point if you do not wish to continue or we can skip certain

questions. I will also offer you some time for a debrief at the end of the interview, to get your feedback about what you thought about the process and/or any feelings it might have evoked. You don't have to do this if you prefer not to.

**What are the possible benefits of taking part?**

There is not a lot of research into the success factors that contribute towards positive outcomes for children and young people who have experienced EBSA. There are certainly no studies in your local area (XX) that I am aware of that have looked at this.

This is a problem that can be solved if picked up and dealt with quickly. By identifying those success factors, I am hoping to contribute to the body of research in this area so more children and young people can benefit from successful intervention. I also hope that it will allow you to have a space and time to reflect on your practice, with a focus on the supportive factors and your contributing role in the child/young person's progress. This would hopefully help you when working with children/young people with similar difficulties in the future.

Ultimately, I am also hoping to help the school community which X EPS serves, by facilitating the creation of an EBSA pathway for XX Educational Psychology Services, which will support other children and young people in similar situations with early and effective intervention, by informing schools and practitioners of what constitutes good practice based on evidence.

**What happens if the research study stops earlier than expected?**

Should the research stop earlier than planned and you are affected in any way we will tell you and explain why.

**What if something goes wrong?**

If you have any concerns about my conduct or any other aspect of this research project, you should contact Simon Carrington, Head of Academic Governance and Quality Assurance ([academicquality@tavi-port.nhs.uk](mailto:academicquality@tavi-port.nhs.uk)).

**Will my taking part in this project be kept confidential?**

All the information that I collect about you during the course of the research will be kept strictly confidential. You will not be identified or identifiable in any reports or publications and nor will your institution. Although studies with a low number of participants such as this one carry a theoretical possibility of identification, best practice will be followed at all times. Any data collected about you in the interviews will be anonymised and stored online in a form protected by passwords and other relevant security processes and technologies. The data will be kept for 5 years and stored and used in compliance with the UK Data Protection Act (2018) and the [Tavistock and Portman Trust Data Protection Policy](#).

**Are there times when my data cannot be kept confidential?**

If you tell me something that makes me concerned about the safety of you or someone else, then I might have to share that information with others in order to keep you or someone else safe. However, I would always aim to discuss this with you first when possible. As I am meeting a few participants (not a large amount of people) there is a chance that you may recognise some of the things that you said in my write-up or presentations. However, others will not be able to identify you from your comments as your name will be replaced with a pseudonym so that others cannot easily recognise you from your comments.

**Will I be recorded and how will the recorded media be used?**

I would like to make audio recordings of the interviews to help me remember and analyse what was said during the interview, minimising the possibility of me changing what you have said. The recordings will be stored in a secure format, anonymously and deleted once I have submitted my thesis.

**What type of information will be sought from me and why is the collection of this information relevant for achieving the research project's objectives?**

In the interview, I will explore with you the factors you think may have contributed to the progress of the child/young person in question. I will ask you questions about the nature of your involvement (in terms of intervention, time, frequency, etc), what was this case like for you, what factors contributed to the child's progress and why; what could have been done to improve their progress faster or further; and any learning points for working with young people with similar difficulties. It is your views and experience that my project is interested in exploring.

**What will happen if I don't want to carry on with this research?**

You can change your mind about participating in the research without providing an explanation. This applies up until I start to analyse the data, as at this point the data will be completely anonymised and untraceable to everyone, including me.

**What will happen to the findings of the research?**

The findings of my research will be presented in my thesis, which is part of my Child, Community and Educational Psychology qualification. I will share the findings with any schools and services in XXX that would like to hear about them, but individual contributions will remain completely anonymous. Quotes from the interviews may be used when I present the findings, but they will also be anonymised. We can discuss the way in which you would like to know about the findings, such as discussing them in person, or sending them to you in a summary sheet. You will also have full access to my thesis.

**Contacts for further information**

Me: Claudia Seddon

Email: XXXXXX

Telephone: XXXXX XXXXXX

Principal Investigator: Dr Christopher Arnold

Email: XXXXXXX

Thank you for taking the time to read this.

## Participant Information Sheet for School Staff

The Tavistock and Portman 

NHS Foundation Trust

### Information Sheet

**Title:** Emotionally based school avoidance: an exploration of factors contributing to positive outcomes in secondary school-aged young people

#### **Who is doing the research?**

My name is Claudia Seddon, and I am a Trainee Educational Psychologist on placement at XX Educational Psychology Services. I am doing this research as part of my training for the Doctorate in Child, Community and Educational Psychology which I am doing at Tavistock and Portman NHS Trust, the sponsors of this research project. The Principal Investigator is Dr Christopher Arnold.

I would like to invite you to take part in my research study. Before you decide whether you would like to participate, it is important for you to understand what the research entails and why I am doing it. Please take some time to read the information on this sheet.

#### **What is the aim of the research?**

The aim is to identify the success factors that have contributed to positive outcomes for children and young people who have been absent from school due to emotional reasons, also known as emotionally based school avoidance (EBSA).

#### **Who is organising and funding the research?**

My sponsor is Tavistock and Portman Trust.

#### **Who has given permission for this research?**

The Tavistock Research Ethics Committee as well as XX Educational Psychology Services.

#### **Who can take part in this research?**

I am looking for school staff who work in secondary schools and have had a recent experience of working directly with a school non-attender whose issues are emotionally based. I would like to speak to the person or people who are at the forefront of this work in schools. You have supported a young person who fits this criterion and their parents have given me consent to contact the school to ask you to take part in my research.

#### **Do I have to take part?**

No, it is up to you to decide whether to take part in my research. You are free to withdraw during the data collection phase without giving any reason and any data that you have contributed to the research can be destroyed at this point.

#### **What will happen to me if I take part?**

You will be invited to attend one interview with me. The dates, times and location of the interview can be arranged for whenever and wherever is most convenient for you. We could meet at XXX Council's Office, your workplace or arrange a virtual online meeting.

#### **What do I have to do?**

If you decide to participate in my research, I will ask you to complete the consent form below, stating that you wish to take part. Apart from one interview that will last one hour, there are no other commitments associated with participating.

#### **What are the possible disadvantages and risks of taking part?**

Participating in the research is not anticipated to cause you any disadvantages or discomfort. The interviews are designed to elicit the successful factors that contributed to the child/young person's positive outcomes. However, given that EBSA is an emotive issue, there is always the possibility that interviews may trigger some uncomfortable feelings. We can stop the interview at any point if you do not wish to continue or we can skip certain

questions. I will also offer you some time for a debrief at the end of the interview, to get your feedback about what you thought about the process and/or any feelings it might have evoked. You don't have to do this if you prefer not to.

**What are the possible benefits of taking part?**

There is not a lot of research into the success factors that contribute towards positive outcomes for children and young people (CYP) who have experienced EBSA. There are certainly no studies in your local area (XX) that I am aware of that have looked at this. This is a problem that can be solved if picked up and dealt with quickly. By identifying those success factors, I am hoping to contribute to the body of research in this area so more children and young people can benefit from successful intervention. I also hope that it will allow you to have a space and time to reflect on your practice, with a focus on the supportive factors and your contributing role in the child/young person's progress. This would hopefully help you when working with children/young people with similar difficulties in the future.

Ultimately, I am also hoping to help the school community which X EPS serves, by facilitating the creation of an EBSA pathway for XX Educational Psychology Services, which will support other children and young people in similar situations with early and effective intervention, by informing schools and practitioners of what constitutes good practice based on evidence.

**What happens if the research study stops earlier than expected?**

Should the research stop earlier than planned and you are affected in any way we will tell you and explain why.

**What if something goes wrong?**

If you have any concerns about my conduct or any other aspect of this research project, you should contact Simon Carrington, Head of Academic Governance and Quality Assurance ([academicquality@tavi-port.nhs.uk](mailto:academicquality@tavi-port.nhs.uk)).

**Will my taking part in this project be kept confidential?**

All the information that I collect about you during the course of the research will be kept strictly confidential. You will not be identified or identifiable in any reports or publications and nor will your institution. Although studies with a low number of participants such as this one carry a theoretical possibility of identification, best practice will be followed at all times. Any data collected about you in the interviews will be anonymised and stored online in a form protected by passwords and other relevant security processes and technologies. The data will be kept for 5 years and stored and used in compliance with the UK Data Protection Act (2018) and the [Tavistock and Portman Trust Data Protection Policy](#).

**Are there times when my data cannot be kept confidential?**

If you tell me something that makes me concerned about the safety of you or someone else, then I might have to share that information with others in order to keep you or someone else safe. However, I would always aim to discuss this with you first when possible. As I am meeting a few participants (not a large amount of people) there is a chance that you may recognise some of the things that you said in my write-up or presentations. However, others will not be able to identify you from your comments as your name will be replaced with a pseudonym so that others cannot easily recognise you from your comments.

**Will I be recorded and how will the recorded media be used?**

I would like to make audio recordings of the interviews to help me remember and analyse what was said during the interview, minimising the possibility of me changing what you have said. If you prefer to conduct the interviews online, I will send you a zoom link in advance with a password to ensure that only you have access to the meeting, and I will

video-record the session with your permission. The recordings will be stored in a secure format, anonymously and deleted once I have submitted my thesis.

The recordings will be stored in a secure format, anonymously and deleted once I have submitted my thesis.

**What type of information will be sought from me and why is the collection of this information relevant for achieving the research project's objectives?**

In the interview, I will explore with you the factors you think may have contributed to the progress of the child/young person in question. I will ask you questions about the nature of your involvement (in terms of any interventions you may have supported to implement, time, frequency, etc), what was the experience of supporting this pupil like for you, what factors contributed to the child's progress and why (e.g., a resilience program implemented, a special relationship with a peer or member of staff, etc); what could have been done to improve their progress faster or further; and any learning points for working with young people with similar difficulties. It is your views and experience that my project is interested in exploring.

**What will happen if I don't want to carry on with this research?**

You can change your mind about participating in the research without providing an explanation. This applies up until I start to analyse the data, as at this point the data will be completely anonymised and untraceable to everyone, including me.

**What will happen to the findings of the research?**

The findings of my research will be presented in my thesis, which is part of my Child, Community and Educational Psychology qualification. I will share the findings with any schools and services in XXX that would like to hear about them, but individual contributions will remain completely anonymous. Quotes from the interviews may be used when I present the findings, but they will also be anonymised. We can discuss the way in which you would like to know about the findings, such as discussing them in person, or sending them to you in a summary sheet. You will also have full access to my thesis.

**Contacts for further information**

Me: Claudia Seddon

Email: XXXXXX

Telephone: XXXXX XXXXXX

Principal Investigator: Dr Christopher Arnold

Email: XXXXXXX

Thank you for taking the time to read this.

## Participant Information sheet for children/young people



Title of my study: *Emotionally based school avoidance: an exploration of factors contributing to positive outcomes in secondary school-aged young people*



Dear .....

My name is Claudia, and I would like you to take part in my university research about what helps children and young people get back to school after a period where they have found it difficult to attend.

I am interested in learning about what helped you to get back to school and feel happier there, as well as how schools, parents, and other professionals (such as mentors, therapists, or psychologists) may have supported you.

Your parent(s) have already said that they wanted to take part, and I will also be talking to someone in your school and maybe a person outside school that helped you. I wanted to check if you would like to be included in the project because I am interested in your views on these topics and in what could have helped you even more. I hope that the results of my study will help other young people experiencing difficulties attending school.

### ***What will this involve?***

If you would like to be in my project, we will meet in a place where you feel comfortable (which could be online). You are welcome to bring someone to the interview if it will make you feel more comfortable. We will talk for about an hour.

You won't be the only participant in my study; I will be talking to other young people, asking them the same questions.

If you decide that you don't want to take part, that's OK. It is your choice, and nobody will be upset if you don't want to participate.

Also, it's OK if you agree to take part but then change your mind later, or even want to stop halfway through the interview. You can also skip some questions if you like; just say 'I don't want to answer that question'. You can ask any questions about my project now or at any time.



***What happens if I feel upset during or after the interview?***

We can talk about your feelings after the interview. We can also discuss who are the adults you trust that can support you, if you feel comfortable talking with them afterwards. There are also confidential online counselling services such as [Kooth](#), which offer free advice for young people.

***What will happen to the information I collect from you?***

The interview will be recorded and typed up so I can analyse it later. Everything you tell me and things we work on together will be anonymous. That means that I will note down what you say, but not who said it when I write it up. Your information will also be confidential to me, you, and people involved in helping me with the study. This means that although other people will hear about the views given in the interviews, no one will know who said what in the sessions and no names will be given, unless it sounds like you or someone else is not safe or is at risk of not being safe.

***What will happen with the findings from this research?***

The findings of my research will then be presented in my thesis (a long essay or dissertation involving personal research, written by a candidate for a university degree), which is part of my Child, Community and Educational Psychology qualification. I will share the findings with any schools and services in XXX that would like to hear about them, but individual contributions will remain completely anonymous (WITHOUT your name or any other information that may identify you such as the name of your school). This means that I may use direct quotes of the things you say when I write about your interview which you may recognise, but names will be changed so that others cannot easily identify you.

We can discuss the way in which you would like to know about the findings, such as discussing them in person, or sending them to you in a summary sheet. You will also have full access to my thesis.

Please feel free to ask me any questions. If you are happy to continue you will be asked to sign a consent form before we start.

If you have any questions or concerns, please email me at [cseddon@tavi-port.nhs.uk](mailto:cseddon@tavi-port.nhs.uk).

Many thanks for reading this and I look forward to meeting you soon.

Claudia Seddon  
Trainee Educational Psychologist

## 7.5 Appendix E – Participants consent forms

### Participants Consent Form for professionals

The Tavistock and Portman 

NHS Foundation Trust

**Research Title:** Emotionally based school avoidance: an exploration of factors contributing to positive outcomes in secondary school-aged young people

**Researcher:** Claudia Seddon

**Principal Investigator:** Dr Christopher Arnold

**Please initial the statements below if you agree to them**

*I have read and understood the information sheet and have had the opportunity to ask questions*

*I understand that this research project is part of the researcher's training for the Doctorate in Child, Community and Educational Psychology and has been approved by XX Educational Psychology Services*

*I understand that the researcher will be in contact with professionals that have been involved in supporting my child. This may include (where applicable) school staff, CAMHS practitioners and Family Support Workers.*

*I understand that my participation in this research is voluntary, and I am free to withdraw without giving a reason. This includes the option to withdraw any unprocessed data previously supplied.*

*I agree for my interviews to be recorded.*

*I understand that my data will be anonymised so that I cannot easily be linked to it.*

*I understand that my interviews will be used for this research and cannot be accessed for any other purposes.*

*I understand that studies with a low number of participants such as this one carries a theoretical possibility of identification, although best practice will be followed at all times and my name and any other identifiable information will not be used.*

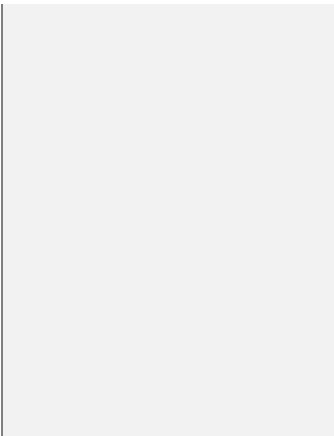
*I understand that if I make a disclosure of imminent harm to self and/or others, the researcher has a duty to pass this information on.*

*I understand that the findings from this research will be published and available for the public to read.*


*I understand that the research findings may be presented in schools and services in the local authority.*

*Any dissemination of findings may include anonymised quotes taken from my interviews. I understand that I may be able to identify my own contributions and quotes, but that pseudonyms will be used so that others cannot easily identify me.*

*I am willing to participate in this research.*



**Your name**.....  
**Signature**.....  
**Date**.....

**Participants Consent Form for parents**  
**The Tavistock and Portman**   
 NHS Foundation Trust

**Research Title:** Emotionally based school avoidance: an exploration of factors contributing to positive outcomes in secondary school-aged young people

**Researcher:** Claudia Seddon

**Principal Investigator:** Dr Christopher Arnold ([carnold@tavi-port.ac.uk](mailto:carnold@tavi-port.ac.uk))

**Please initial the statements below if you agree to them**

*I have read and understood the information sheet and have had the opportunity to ask questions.*

*I understand that this research project is part of the researcher's training for the Doctorate in Child, Community and Educational Psychology and has been approved by XX Educational Psychology Services.*

*I understand that my participation in this research is voluntary, and I am free to withdraw without giving a reason. This includes the option to withdraw any unprocessed data previously supplied.*

*I agree for my interviews to be recorded.*

*I understand that my contribution will not contain any information that could be identified as coming from me.*

*I understand that my interviews will be used for this research only and cannot be accessed for any other purposes.*

*I understand that if I make a disclosure of imminent harm to self and/or others, the researcher has a duty to pass this information on.*

*I understand that the findings from this research will be published and available for the public to read.*

*I understand that the anonymised research findings may be presented in schools and services in the local authority.*

*Any dissemination of findings may include anonymised quotes taken from my interviews. I understand that although I may be able to identify my own contributions and quotes, names will be changed so that others cannot easily identify me.*

*I am willing to participate in this research.*

**Your name**.....

**Signature**.....

Date.....

Thank you for your help.

## Participants Consent Form for Young People

The Tavistock and Portman 

NHS Foundation Trust

**Research Title:** Emotionally based school avoidance: an exploration of factors contributing to positive outcomes in secondary school-aged young people

**Researcher:** Claudia Seddon

**Principal Investigator:** Dr Christopher Arnold ([carnold@tavi-port.ac.uk](mailto:carnold@tavi-port.ac.uk))

**Please tick the statements below if you agree (consent) to them**

*I have read and understood the information sheet and I asked any questions I needed to.*

*I understand that this research project is part of Claudia's training for the Doctorate in Child, Community and Educational Psychology and has been approved by XX Educational Psychology Services.*

*I agree to take part in the project. I know that I can choose to leave the project at any time, until two weeks after my interview and I don't have to say why.*

*I agree to take part in a recorded interview (sound only) with Claudia.*

*I understand that only Claudia will listen to and write about my interview.*

*I understand that my interview will be written about in a thesis.*

*I understand that Claudia might use direct quotes of the things I say when she writes about my interview which I may recognise.*

*I understand that although I may be able to identify my own contributions and quotes, names will be changed so that others cannot easily identify me.*

*I understand that other Educational Psychologists and teachers might read the thesis (without my name on it).*

*I understand that the anonymised findings from this research may be presented in schools and services in the local authority.*

*I understand that the thesis might be read online in the future.*

*I understand that if I make a disclosure of imminent harm to myself and/or others, Claudia has a duty to pass this information on to my parents/carers.*

**Your name.....**

Signature.....

Date.....

Thank you for your help.

## **7.6 Appendix F – Interview schedules**

### **7.6.1 Interview schedule for CYP**

- (1) Tell me a little bit about yourself. Do you have any hobbies? What do you like about school?
- (2) When did you first notice that it was difficult for you to go to school? How were you feeling during that time?
- (3) Do you remember speaking to someone about it? What was happening around that time (at school or outside school) that might have influenced the way you felt?
- (4) Were you given any support? What type of support were you given? What was helpful/unhelpful? Who was helpful and important for you at the time? Was there anyone who helped you during this time?
- (5) From the support that you received, what do you think was most helpful to go back to school? Can you tell me more about this?
- (6) How was school helpful? How was your mentor/EP/any other professional involved in the case helpful? How was your parent/carer helpful?
- (7) What did you do to help yourself during this time?
- (8) Do you think there was anything which helped you the most?
- (9) When you started going to school more regularly, were you feeling happier about school? How did you know?
- (10) What was different about yourself/school or university/home when you started to attend more regularly compared when you were not?
- (11) What did you learn about yourself during this time?
- (12) What could have helped you more?
- (13) What would have helped you to get back into school more quickly?
- (14) Anything else?
- (15) What do you think is different now about your education/yourself/your family compared to the time when you were not going to school regularly?
- (16) What do you like about school/university now? Any subjects or activities? What about your teachers? friends?
- (17) How could school be even better for you now?
- (18) What would your advice be to a friend who was in a similar situation and were not going to school? What would you advise teachers supporting children who may find it hard to come to school? What advice would you give to their parents? What would you advise to their classmates?
- (19) Is there anything else you would like to tell me about your current or past experience at school that I have not asked you?

Could use 'The School Wellbeing Cards (Dr Jerricah Holder)' if necessary (where open-ended questions may not work for the young person), to help the YP identify aspects about their school or home life that were helpful to feel better and improve their attendance. Scaling questions may also be asked to facilitate comparing different aspects of their life before and now.

### **7.6.2 Interview schedule for parents**

- (1) Can you tell me about the time leading up to your daughter not wanting to go to school?
- (2) When did you first notice that XX was avoiding school for emotional reasons? What factors do you feel led her to school avoid? Can you tell me about her school avoidance?



- (3) COVID question. Do you think COVID affected her difficulties going back to school? Why?
- (4) When did you first speak to school about it?
- (5) When did you first receive involvement from an external agency?
- (6) Factors that support the return to school What **factors do** you think facilitated child's name's reintegration and daily attendance? Why?
- (7) Can you tell me about the support she received to help her return to school? What did you find helpful? Why?
- (8) How were you involved in supporting her return to school?
- (9) What might have facilitated more success? Why?
- (10) What might have facilitated his/her success more quickly? Why?
- (11) Can you tell me about any support that you received as a parent?
- (12) How is your daughter getting on at school at the moment? How are things different in school now? What provision is in place for her?
- (13) How is her attendance now?
- (14) What factors do you think help her maintain her attendance?
- (15) How do you think her wellbeing is promoted?
- (16) Is there anything else that you would like to add?
- (17) Is there anything else that I haven't ask you that you thought I might ask you today?

### 7.6.3 Interview schedule for school staff

- (1) How did you become involved supporting XX(child's name)?
- (2) What did your involvement entail? (Rough idea of time and frequency of support provided to YP as well as type of support e.g. communicating with parents, planning and/or implementing an intervention, speaking to other professionals, etc).
- (3) Can you tell me about the support school provided whilst she/he was off?
- (4) Can you tell me about the support she received to help her/him return to school? What factors do you think supported her/him to re-engage with school and improve attendance?

- (5) Does your school have specific policies on how to work with young people who are not attending school for emotional reasons?
- (6) When she returned to school, what provision was in place for her? How were things different in school for her?
- (7) What factors do you think helped her to maintain her attendance?
- (8) What was the experience of supporting this pupil like for you?
- (9) How do you think her wellbeing was promoted?
- (10) What factors do you think facilitated XX's success? Why? (e.g., a resilience program implemented, a special relationship with a peer or member of staff, etc).
- (11) What might have facilitated more success? Why?
- (12) What might have facilitated his/her success more quickly? Why?
- (13) What learning points have you made for working with pupils who have similar difficulties?
- (14) Was there anything else that you think would be relevant for me to know? Or were there any other questions that you thought I might ask you today?

#### 7.6.4. Interview schedule for external professionals

- (1) How did your involvement start? Who referred this young person to your service and what was the main reason for requesting your involvement?
- (2) What did your involvement consist of in terms of: number of sessions, other people you might have contacted (parents, school), strategies or interventions used, time of involvement, multidisciplinary meetings
- (3) What was this case like? (Try to get some idea of the communication efficacy, degree of consensus between stakeholders)
- (4) In your view, what are the main contributing factors to this CYP's improvement? When and how did you first notice some improvement? Why do you think (those factors) they helped this CYP?
- (5) What resources (material or personal) enabled you to support this CYP's improvement?
- (6) Are there any more distal or contextual factors/processes that may have further influenced the primal factors identified in question 4?
- (7) What if you hadn't had those factors? What else might have been possible? (try to identify what else might have been possible given the resources/contextual/distal factors)
- (8) Are there any specific frameworks or theories that you applied to this case which might have been helpful for this CYP? Why?
- (9) How has this case been different from other less successful cases? How has your involvement been different?
- (10) What might have facilitated more success? Why?
- (11) What might have facilitated success more quickly? Why?
- (12) What learning points have you made for future cases?
- (13) Was there anything else that you think would be relevant for me to know? Or were there any other questions that you thought I might ask you today?

## 7.7 Appendix G – Ethical Approval form

The Tavistock and Portman   
NHS Foundation Trust

Quality Assurance & Enhancement  
Directorate of Education & Training  
Tavistock Centre  
120 Belsize Lane  
London  
NW3 5BA

Tel: 020 8938 2699  
Fax: 020 7447 3837

Claudia Seddon

**By Email**

20 May 2022

Dear Claudia,

**Re: Trust Research Ethics Application**

**Title:** Emotionally based school avoidance: an exploration of factors contributing to positive outcomes in secondary school-aged young people

Thank you for sending your response to the conditions set by the Assessor with regards to your TREC application. I am pleased to inform you that subject to formal ratification by the Trust Research Ethics Committee your application has been approved. This means you can proceed with your research.

**Please note that any changes to the project design including changes to methodology/data collection etc, must be referred to TREC as failure to do so, may result in a report of academic and/or research misconduct.**

If you have any further questions or require any clarification do not hesitate to contact me.

I am copying this communication to your supervisor.

May I take this opportunity of wishing you every success with your research.

Yours sincerely,



**Paru Jeram**

Secretary to the Trust Research Degrees Subcommittee

T: 020 938 2699

E: [academicquality@tavi-port.nhs.uk](mailto:academicquality@tavi-port.nhs.uk)

cc. Course Lead, Supervisor, Course Administrator

**Tavistock and Portman Trust Research Ethics Committee (TREC)**  
**APPLICATION FOR ETHICAL REVIEW OF STUDENT RESEARCH PROJECTS**

This application should be submitted alongside copies of any supporting documentation which will be handed to participants, including a participant information sheet, consent form, self-completion survey or questionnaire.

Where a form is submitted and sections are incomplete, the form will not be considered by TREC and will be returned to the applicant for completion.

For further guidance please contact Paru Jeram ([academicquality@tavi-port.nhs.uk](mailto:academicquality@tavi-port.nhs.uk))

**FOR ALL APPLICANTS**

**If you already have ethical approval from another body (including HRA/IRAS) please submit the application form and outcome letters. You need only complete sections of the TREC form which are NOT covered in your existing approval**

Is your project considered as 'research' according to the HRA tool? ( <a href="http://www.hra-decisiontools.org.uk/research/index.html">http://www.hra-decisiontools.org.uk/research/index.html</a> )	Yes/No
Will your project involve participants who are under 18 or who are classed as vulnerable? (see section 7)	Yes/No
Will your project include data collection outside of the UK?	Yes/No

**SECTION A: PROJECT DETAILS**

<b>Project title</b>	Emotionally based school avoidance: an exploration of factors contributing to positive outcomes in secondary school-aged young people		
<b>Proposed project start date</b>	March 2022	<b>Anticipated project end date</b>	September 2023
<b>Principle Investigator (normally your Research Supervisor): Dr Christopher Arnold</b>			
<b>Please note: TREC approval will only be given for the length of the project as stated above up to a maximum of 6 years. Projects exceeding these timeframes will need additional ethical approval</b>			
<b>Has NHS or other approval been sought for this research including through submission via Research Application System (IRAS) or to the Health Research Authority (HRA)?</b>	YES (NRES approval)	<input type="checkbox"/>	
	YES (HRA approval)	<input type="checkbox"/>	
	Other	<input type="checkbox"/>	
	NO	<input checked="" type="checkbox"/>	
<b>If you already have ethical approval from another body (including HRA/IRAS) please submit the application form and outcome letters.</b>			

**SECTION B: APPLICANT DETAILS**

<b>Name of Researcher</b>	Claudia Seddon
---------------------------	----------------

<b>Programme of Study and Target Award</b>	Professional doctorate in Child, community and educational psychology (M4)
<b>Email address</b>	<a href="mailto:cseddon@tavi-port.nhs.uk">cseddon@tavi-port.nhs.uk</a>
<b>Contact telephone number</b>	07899853684

### **SECTION C: CONFLICTS OF INTEREST**

<p><b>Will any of the researchers or their institutions receive any other benefits or incentives for taking part in this research over and above their normal salary package or the costs of undertaking the research?</b></p> <p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, please detail below:</p>	
<p>Is there any further possibility for conflict of interest? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>	
<p><b>Are you proposing to conduct this work in a location where you work or have a placement?</b></p> <p>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>If YES, please detail below outline how you will avoid issues arising around colleagues being involved in this project:</p> <p>As some of the intended participants may include Educational Psychologists (EPs) within the service where I am on placement, there may be concerns about being identified in research write-ups. As they are known to me as a researcher, there may also be concerns about the impact on professional relationship post interview. Precautionary measures will include:</p> <ul style="list-style-type: none"> <li>• Ensuring data is anonymised so that participants cannot be identified.</li> <li>• Keeping details of participants confidential (including consideration of locations).</li> <li>• Explaining how the information will be used and processed (according to the Data Protection Act) and how anonymity will be maintained, including not being referred to in personal or professional encounters.</li> <li>• Making sure that they are informed of their right to withdraw from the research at any point and that they are freely involved in the research (if they want to be) without feeling obliged to participate.</li> <li>• Confusion of role will be avoided by making a clear distinction between research activity and my other activities as a trainee EP.</li> </ul> <p>This has been discussed with my line manager and the principal EP who understands and supports the aim of the research project conducted in the service (see Appendix 6). I do not line-manage anybody in the service, which avoids conflict of a power relationship where people may feel coerced to participate or withholding information for fear to this affecting the manager's perception of themselves in role.</p>	

<p><b>Is your project being commissioned by and/or carried out on behalf of a body external to the Trust? (for example; commissioned by a local authority, school, care home, other NHS Trust or other organisation).</b></p> <p><small>*Please note that 'external' is defined as an organisation which is external to the Tavistock and Portman NHS Foundation Trust (Trust)</small></p> <p>If YES, please add details here:</p>	<p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>
<p><b>Will you be required to get further ethical approval after receiving TREC approval?</b></p>	<p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>


If <b>YES</b> , please supply details of the ethical approval bodies below AND include any letters of approval from the ethical approval bodies (letters received after receiving TREC approval should be submitted to complete your record):	
If your project is being undertaken with one or more clinical services or organisations external to the Trust, please provide details of these:	
Hammersmith and Fulham Educational Psychology Service	
If you still need to agree these arrangements or if you can only approach organisations after you have ethical approval, please identify the types of organisations (e.g., schools or clinical services) you wish to approach:  Hammersmith and Fulham schools, Hammersmith & Fulham Family Support Service & CAMHS service (where applicable to case study).	
Do you have approval from the organisations detailed above? (this includes R&D approval where relevant) Please see letter from Principal Educational Psychologist (Appendix 6) Please attach approval letters to this application. Any approval letters received after TREC approval has been granted MUST be submitted to be appended to your record	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>


#### **SECTION D: SIGNATURES AND DECLARATIONS**

<b>APPLICANT DECLARATION</b>	
<p>I confirm that:</p> <ul style="list-style-type: none"> <li>• The information contained in this application is, to the best of my knowledge, correct and up to date.</li> <li>• I have attempted to identify all risks related to the research.</li> <li>• I acknowledge my obligations and commitment to upholding ethical principles and to keep my supervisor updated with the progress of my research</li> <li>• I am aware that for cases of proven misconduct, it may result in formal disciplinary proceedings and/or the cancellation of the proposed research.</li> <li>• I understand that if my project design, methodology or method of data collection changes I must seek an amendment to my ethical approvals as failure to do so, may result in a report of academic and/or research misconduct.</li> </ul>	
<b>Applicant (print name)</b>	Claudia Seddon
<b>Signed</b>	<i>C Seddon</i>
<b>Date</b>	16.12.22

#### **FOR RESEARCH DEGREE STUDENT APPLICANTS ONLY**

<b>Name of Supervisor/Principal Investigator</b>	Dr Christopher Arnold
--	-----------------------

<b>Supervisor –</b>	
<ul style="list-style-type: none"> <li>• Does the student have the necessary skills to carry out the research? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></li> <li>▪ Is the participant information sheet, consent form and any other documentation appropriate? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></li> <li>▪ Are the procedures for recruitment of participants and obtaining informed consent suitable and sufficient? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></li> <li>▪ Where required, does the researcher have current Disclosure and Barring Service (DBS) clearance? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></li> </ul>	
<b>Signed</b>	
<b>Date</b>	17.12.22

<b>COURSE LEAD/RESEARCH LEAD</b>	
Does the proposed research as detailed herein have your support to proceed? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
<b>Signed</b>	
<b>Date</b>	18.12.2022

### **SECTION E: DETAILS OF THE PROPOSED RESEARCH**

<p><b>1. Provide a brief description of the proposed research, including the requirements of participants. This must be in lay terms and free from technical or discipline specific terminology or jargon. If such terms are required, please ensure they are adequately explained (Do not exceed 500 words)</b></p>
<p>This research seeks to explore the views and experiences of young people parents, school and practitioners (i.e., Educational Psychologists [EPs], Family Support Workers, CAMHS practitioners) who are or have supported children and young people (CYP, aged 11-18) that were absent from school for emotionally based reasons but have managed to reduce their levels of emotional distress and improve their attendance. The focus of this research will be on the successful factors that have contributed (in the participants' view) to the progress of the CYP.</p> <p>The present study will focus on a particular type of absence which will be referred to as Emotionally Based School Avoidance (EBSA; West Sussex Educational Psychology Service, 2018<sup>61</sup>) as the emphasis is on understanding persistent non-attendance for emotional difficulties (usually anxiety and/or fear) at the thought of attending school. EBSA is different to school truancy (where the parents do not know the whereabouts of the child) or other types of school non-attendance due to, for example, physical illness or 'parentally condoned absences' (Thambirajah et al., 2008<sup>62</sup>).</p> <p>Participants will be asked to provide informed consent to take part in the research where they will be given information about the topic of investigation and the opportunity to ask the researcher further questions (see Appendix 1). Once they have agreed to take part, they will be asked to</p>

<sup>61</sup> West Sussex Council EPS (2021). *Emotionally Based School Avoidance*.  
<https://schools.westsussex.gov.uk/Page/10483>

<sup>62</sup> Thambirajah, M., Grandison, K. J., & De-Hayes, L. (2008). *Understanding school refusal: A handbook for professionals in education, health and social care*. Jessica Kingsley Publishers.



attend one semi-structured interview with the researcher (see Appendix 2 for interview schedule). The participants will be asked for their availability and the interviews will be scheduled around the participants' schedules. The interviews will last approximately one hour. Participants will be asked questions about their views and experience of supporting the YP experiencing EBSA, with a focus on the factors that facilitated the success of the case, including the support the YP received, the processes perceived as helpful and any specific strategies or interventions that may have facilitated positive outcomes for the CYP. In the case of CYP, the interview will aim to gather their views of what they found helpful/supported them to overcome EBSA.

Interviews will be recorded with a digital device and stored safely. Once the interviews are transcribed word by word, they will be anonymised. Participants will be informed in advance that a transcript of the interview will be kept by the researcher (anonymised) for the purpose of supporting the analysis phase of the research, in a password protected device. I will analyse transcripts using reflective thematic analysis. Confidentiality will be assured to each participant regarding their identity, the identity of their place of work and the information collected. Anonymised data will be kept for a maximum of 10 years. Participants will be debriefed after the interview, and it will be explained that they will have full access to the research when it has been completed (in line with BPS Code of Human Research Ethics, 2021).

**2. Provide a statement on the aims and significance of the proposed research, including potential impact to knowledge and understanding in the field (where appropriate, indicate the associated hypothesis which will be tested). This should be a clear justification of the proposed research, why it should proceed and a statement on any anticipated benefits to the community. (Do not exceed 700 words)**

In the UK, CYP are legally required to receive full-time education at school or through home education (Education Act, 1996). However, UK statistics on school non-attendance indicate that 10.5% of school-age children had persistent absence in the period 2017-18, with students in secondary schools consistently reporting higher rates of absence than primary age children (Department for Education [DfE], 2020<sup>63</sup>). School attendance and achievement are correlated (DfE, 2016<sup>64</sup>) with absence rates being the biggest predictor of progress (Riordan et al., 2021<sup>65</sup>); as well as related to decreases in educational and social engagement (Gottfried, 2014<sup>66</sup>), reduced social opportunities, limited employment prospects and poor adult mental health (Taylor, 2012<sup>67</sup>; Sobba, 2018<sup>68</sup>). Moreover, the economic impact of CYP being out of school and at risk of becoming 'not in education, employment, or training' (NEET, currently representing 10% of the 16–25-year-old population in the UK, ONS, 2021<sup>69</sup>) is significant. CYP's attendance is a national priority highlighted by government guidance and legislation.

<sup>63</sup> Department for Education (2020). *A guide to absence statistics*. Retrieved from [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/787314/Guide\\_to\\_absence\\_statistics\\_21032019.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/787314/Guide_to_absence_statistics_21032019.pdf)

<sup>64</sup> Department for Education (2016). *The link between absence and attainment at KS2 and KS4 2013/14 academic year*. Retrieved from [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/509679/The-link-between-absence-and-attainment-at-KS2-and-KS4-2013-to-2014-academic-year.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/509679/The-link-between-absence-and-attainment-at-KS2-and-KS4-2013-to-2014-academic-year.pdf)

<sup>65</sup> Riordan, S., Jopling, M., & Starr, S. (2021). *Against the odds: achieving greater progress for secondary students facing socio-economic disadvantage*: June 2021.

<sup>66</sup> Gottfried, M. A. (2014). Chronic absenteeism and its effects on students' academic and socioemotional outcomes. *Journal of Education for Students Placed at Risk (JESPAR)*, 19(2), 53-75.

<sup>67</sup> Taylor, C. (2012). *Improving attendance at school*. Department for Education.

<sup>68</sup> Sobba, K. N. (2019). Correlates and buffers of school avoidance: a review of school avoidance literature and applying social capital as a potential safeguard. *International Journal of Adolescence and Youth*, 24(3), 380-394.

<sup>69</sup> Office For National Statistics (2021). *Young people not in education, employment or training (NEET), UK: November 2021*. Retrieved from <https://www.ons.gov.uk/employmentandlabourmarket/peoplenotinwork/unemployment/bulletins/youngpeoplenotineducationemploymentortrainingneet/november2021>

COVID-19 has affected CYP's mental health, with a disproportionate effect on more vulnerable CYP (Creswell et al., 2021<sup>70</sup>; Royal College of Psychiatrists, 2021<sup>71</sup>). It is highly likely that school absence has increased following the relaxation of lockdown restrictions in the UK due to an exacerbation of difficulties already experienced by CYP (Oxfordshire County Council EPS, 2021). EBSA is a problem which can be solved if picked up and dealt with quickly (Cole, 2009<sup>72</sup>). EPs have a responsibility to support the learning and wellbeing of all pupils, particularly the most vulnerable (Fallon et al., 2010), working across schools' systems with the CYP and adults that support them. Previous research has highlighted the importance of better understanding what works to support motivation in EBSA cases (Mortimer, 2019<sup>73</sup>) and the importance of gathering further evidence to consolidate a theoretical model for EBSA intervention (Nuttall & Woods, 2013<sup>74</sup>).

EBSA is a priority for the EP service where I am on placement where one of their aims is "developing an offer for schools and other agencies around EBSA, which is an area of growing concern currently in the borough". EPs are often involved too late, when the problem is entrenched and there is not good case history to understand how the CYP got into this position. This research will aim to contribute to that 'offer' as it will aim to answer the question: 'What are the perceived factors that facilitate positive outcomes for some CYP in secondary schools experiencing EBSA and why?', to develop ways of better supporting CYP to prevent a situation of long-term school avoidance.

**3. Provide an outline of the methodology for the proposed research, including proposed method of data collection, tasks assigned to participants of the research and the proposed method and duration of data analysis. If the proposed research makes use of pre-established and generally accepted techniques, please make this clear. (Do not exceed 500 words)**

The proposed research has a qualitative design and is underpinned by a critical realist ontology and epistemology where it is recognised that there is a reality out there (independent of the individual's perceptions). However, we only have limited access to this reality, therefore through people's perceptions (in this case, of successful factors) we can have some access to it. In other words, I would only have a mediated access to this reality through the account and perceptions of the participants of this research (Braun & Clarke 2022<sup>75</sup>).

**Research design and questions**

This study will adopt an exploratory case study design (consistent with a qualitative methodology) which will involve 2-3 cases. Case study here is understood as "a strategy for doing research which

<sup>70</sup> Creswell, C., Shum, A., Pearcey, S., Skripkauskaitė, S., Patalay, P., & Waite, P. (2021). Young people's mental health during the COVID-19 pandemic. *The Lancet Child & Adolescent Health*, 5(8), 535-537.

<sup>71</sup> Royal College of Psychiatrists (2021). *Record number of children and young people referred to mental health services as pandemic takes its toll*. <https://www.rcpsych.ac.uk/news-and-features/latest-news/detail/2021/09/23/record-number-of-children-and-young-people-referred-to-mental-health-services-as-pandemic-takes-its-toll>

<sup>72</sup> : H.C.M. (Tim) Carroll (2015) Pupil absenteeism and the educational psychologist, *Educational Studies*, 41:1-2, 47-61.

<sup>73</sup> Mortimer, E. (2019). *Going back to school following a period of extended school non-attendance: what do secondary-aged young people and their parents find supportive? an appreciative inquiry*. [Unpublished doctoral dissertation]. University of Bristol.

<sup>74</sup> Nuttall, C., & Woods, K. (2013). Effective intervention for school refusal behaviour. *Educational Psychology in Practice*, 29(4), 347-366.

<sup>75</sup> Braun, V., and V. Clarke. 2022. *Thematic analysis: A practical guide*. London: Sage.

involves an empirical investigation of a particular contemporary phenomenon within its real-life context using multiple sources of evidence” (Robson, 2002, p.178<sup>76</sup>).

The phenomenon under study is successful cases of EBSA and the different sources would be the parents, school and practitioners involved in the case.

### **Data gathering**

Data will be gathered through semi-structured interviews with young people, parent(s), school staff, and other professionals, including EPs, Family Support workers and CAMHS practitioners (where relevant and involved in the case). Consistent with this critical realist epistemology, participants will be encouraged to link their perceptions, views and explanations of what worked (e.g., a particular intervention) or helped the CYP with facts and events that they observed and occurred at that time in the CYP’s life, although no other independent measure will be sought (e.g. anxiety measures of the CYP). It is acknowledged that parents may be unreliable narrators and unlikely to see their own contribution to the emotional, relational, behavioural difficulties of their CYP. However, consistent with the critical realist ontology and epistemology proposed above, the researcher can only have access to a partial view of reality, mediated by the participants’ perceptions. By gathering different perspectives through a case study design, the research is more likely to access that reality. Parents and young people are service users, and it is crucial that the research captures their views and perceptions, in line with Department for Education guidance on gathering their views (2015). Furthermore, involving parents and young people as service users aims at making the research “more relevant, improv[ing] the interpretation of the results, and overall enhanc[ing] the design by incorporating the perspective of experts by experience” (Mental Health Research UK, 2022)<sup>77</sup>.

### **Data analysis**

Interviews will be analysed using Reflective Thematic Analysis (RTA; Clarke & Braun, 2021<sup>78</sup>). This method is compatible with the critical realist position I am taking, given that RTA “provides access to situated, interpreted realities, not simple decontextualised truths” (Braun & Clarke, 2022, p.171), acknowledging that the material and social world of the participants constrains and depicts the participant’s reality, in this case, with regards to the successful factors that facilitated a positive outcome for the CYP experiencing EBSA. Through considerable analytic and interpretative work, RTA would allow me to organise the data into ‘thematic statements’ across the participants so that meaning-based themes could be shared with the EPS to inform future practice. It is anticipated that data analysis will be conducted over a period of 3 months after the completion of interviews.

## **SECTION F: PARTICIPANT DETAILS**

**4. Provide an explanation detailing how you will identify, approach and recruit the participants for the proposed research, including clarification on sample size and location. Please provide justification for the exclusion/inclusion criteria for this study (i.e., who will be allowed to / not allowed to participate) and explain briefly, in lay terms, why these criteria are in place. (Do not exceed 500 words)**

The case studies will be selected from my EPS<sup>79</sup> placement schools, based on the following criteria adapted from Nuttall and Woods (2013):

1. A student in secondary school or college (aged 11-18)<sup>80</sup> who has been identified as experiencing EBSA where (1) attendance fell below 70% for a period of a school term or more, and (2) there were identified

<sup>76</sup> Robson, C. (2002). *Real world research: A resource for social scientists and practitioner-researchers*. Wiley-Blackwell.

<sup>79</sup> . I will not include my own casework, given that this is likely to confuse roles for the client’s parents (practitioner v/s researcher)

emotional difficulties, with an element of anxiety or fear relating to home/school (e.g., anxious of leaving home as they are concerned for a parent's health or anxious about a social situation in school), as the primary cause for school avoidance. Persistent school absence is more prevalent in secondary school students (DfE, 2018).

2. The CYP has gone back to school, and their attendance has improved for at least a term.
3. There was some involvement from other professionals in the case, e.g., EPs, family support workers and/or CAMHS practitioners. This will allow the researcher to get a broader and more in-depth picture of the successful factors that facilitated the CYP's progress, very important for a case study design.
4. Professional involvement was within the last three years (so that they can remember key information about possible successful factors to the case)
5. There are no other known current significant stressful or traumatic event for the family (e.g., bereavement, divorce).

The CYP's school will also be contacted via the SENCo to give information about the study and arrange a meeting if more information is required.

A purposive sample of 2-3 cases will be recruited from the local authority according to the above criteria. The parents of the CYP will be invited to take part in the research (see Appendix 1a) either via school staff or EP. Snowball sampling technique may also be used (see appendix 4 for full recruitment strategy). Consent will be sought from young people and parents to take part in the research. Once they have agreed to participate<sup>81</sup> and have signed the consent form (Appendix 3), I will arrange interviews with school staff and other practitioners (appendix 1b & 1c). At this point, it may be necessary to ask for approval from the director of the practitioner's services (e.g., Family Support Service, CAMHS Service - where appropriate) for me to conduct the interviews.

The number of cases has been decided given that the aim of case studies is to gain an in-depth understanding of the phenomena from a small group of participants and build what Yin (2013) calls 'analytic generalisation', such as illuminating a theoretical concept or advance practice. Each case will involve at least three interviews, which totals a minimum of 6 participants.

**5. Please state the location(s) of the proposed research including the location of any interviews. Please provide a Risk Assessment if required. Consideration should be given to lone working, visiting private residences, conducting research outside working hours or any other non-standard arrangements.**

**If any data collection is to be done online, please identify the platforms to be used.**

The research will take place at my current Local Authority placement. Interviews will take place in person in a quiet room in a setting of preference for the school staff, parents and practitioners where there is no risk of being overheard to protect confidentiality. I will record the interviews and save them on an encrypted mobile device (e.g. work laptop and/or mobile phone) which is password protected. I will transfer the data safely using for example the 'Box' service for file transfer into the University of Essex OneDrive system.

If interviews are conducted online, I will use the video-conference app Zoom. I will send a link with a password to control the entrance to a Zoom session and ensure confidentiality. Another useful feature to ensure confidentiality is Zoom's 'waiting room' which allows the initiator of the meeting to control who enters the video conference. Zoom

<sup>78</sup> Braun, V., & Clarke, V. (2021a). Can I use TA? Should I use TA? Should I not use TA? Comparing reflexive thematic analysis and other pattern-based qualitative analytic approaches. *Counselling and Psychotherapy Research, 21(1)*, 37-47.

<sup>79</sup> . I will not include my own casework, given that this is likely to confuse roles for the client's parents (practitioner v/s researcher)

<sup>80</sup> The student might be over 18 now, but the EBSA episode occurred while they were in secondary education or college.

<sup>81</sup> Parent participants included in this research will have to meet the criterion of being 'Adults with mental capacity to give consent to participate in the research'.

also allows for video recording, allowing to securely record and store sessions without recourse to third-party software (Archibald et al., 2019<sup>82</sup>).

Permission for recording the session is granted by participants by clicking a button (although this will be explained beforehand to all participants and consent sought prior to interview) and the company is GDPR compliant. When recording, I will save the interview on my desktop and encrypt the file using a password. All possible identifying data will be removed/anonymised.

If an interview takes place in a private residence (e.g. parent's private residence), I will inform the head of my service of the location and the time of the interview and confirm by text or email once it has finished and I am out of the residence. I will aim to conduct all the interviews within my working hours. I will follow the same procedure for recording, transferring and storing the interview data as explained above. See appendix 5 (Risk Assessment) for more details about how I am planning on minimising risks-for participants and me- related to the interviews.

**6. Will the participants be from any of the following groups?(Tick as appropriate)**

- Students or Staff of the Trust or Partner delivering your programme.
- Adults (over the age of 18 years with mental capacity to give consent to participate in the research).
- Children or legal minors (anyone under the age of 16 years)<sup>1</sup>
- Adults who are unconscious, severely ill or have a terminal illness.
- Adults who may lose mental capacity to consent during the course of the research.
- Adults in emergency situations.
- Adults<sup>2</sup> with mental illness - particularly those detained under the Mental Health Act (1983 & 2007).
- Participants who may lack capacity to consent to participate in the research under the research requirements of the Mental Capacity Act (2005).
- Prisoners, where ethical approval may be required from the National Offender Management Service (NOMS).
- Young Offenders, where ethical approval may be required from the National Offender Management Service (NOMS).
- Healthy volunteers (in high risk intervention studies).
- Participants who may be considered to have a pre-existing and potentially dependent<sup>3</sup> relationship with the investigator (e.g. those in care homes, students, colleagues, service-users, patients).
- Other vulnerable groups (see Question 6).
- Adults who are in custody, custodial care, or for whom a court has assumed responsibility.
- Participants who are members of the Armed Forces.

<sup>1</sup>If the proposed research involves children or adults who meet the Police Act (1997) definition of vulnerability<sup>3</sup>, any researchers who will have contact with participants must have current Disclosure and Barring Service (DBS) clearance.

<sup>2</sup>'Adults with a learning or physical disability, a physical or mental illness, or a reduction in physical or mental capacity, and living in a care home or home for people with learning difficulties or receiving care in their own home, or receiving hospital or social care services.' (Police Act, 1997)

<sup>3</sup> Proposed research involving participants with whom the investigator or researcher(s) shares a dependent or unequal relationships (e.g. teacher/student, clinical therapist/service-user) may compromise the ability to give informed consent which is free from any form of pressure (real or implied) arising from this relationship. TREC recommends that, wherever practicable, investigators choose participants with whom they have no dependent relationship. Following due scrutiny, if the investigator is confident that the research involving participants in dependent relationships is vital and defensible, TREC will require additional information setting out the case and detailing how risks inherent in the dependent relationship will be managed. TREC will also need to be reassured that refusal to participate will not result in any discrimination or penalty.

<sup>82</sup> Archibald, M. M., Ambagtsheer, R. C., Casey, M. G., & Lawless, M. (2019). Using Zoom Videoconferencing for Qualitative Data Collection: Perceptions and Experiences of Researchers and Participants. *International Journal of Qualitative Methods*. <https://doi.org/10.1177/1609406919874596>

**7. Will the study involve participants who are vulnerable? YES  NO**

For the purposes of research, 'vulnerable' participants may be adults whose ability to protect their own interests are impaired or reduced in comparison to that of the broader population. Vulnerability may arise from:

- the participant's personal characteristics (e.g. mental or physical impairment)
- their social environment, context and/or disadvantage (e.g. socio-economic mobility, educational attainment, resources, substance dependence, displacement or homelessness).
- where prospective participants are at high risk of consenting under duress, or as a result of manipulation or coercion, they must also be considered as vulnerable
- children are automatically presumed to be vulnerable.

**7.1. If YES, what special arrangements are in place to protect vulnerable participants' interests?**

Children who are of secondary school age or above (college) will take part in the study. There are elements of risk in involving young people who have had previous experience of psychological adversity in the past and who made find it hard to talk about the topics that cause those difficulties. However, the focus of the interview is on the factors that facilitated their recovery and reengagement with education. The questions in the semi-structured interview are written in a way to elicit the positive factors of support, and not an exploration of their difficulties. As it is acknowledged that this could still evoke some memories of difficult experiences, I will make sure that young people have full information about the research before taking part (including being sent an interview schedule beforehand). I will send information about the research and their fully informed consent will be sought in advance, and I will offer them and their parents the opportunity to discuss in advance details about the purpose and aims of the research and procedures, including how their identity will be protected by anonymising the data. As well as this, a debrief will be offered to all participants, including young people, after the interview. Young people will be offered the possibility to come with a person they trust and feel comfortable with. Further signposting of support-where needed-will be provided to young people and their parents.

As it is not possible to foresee whether parents of the CYP who had experienced EBSA or other professionals involved may be classed as vulnerable based on the criteria in point 7 above, the following measures will be put in place:

- Offering debrief and support after the interview.
- Explicitly reminding them in writing and verbally of their right to withdraw, at any point, from the research (exception is after data has been anonymised as then it is not possible to track it). This includes stopping the interview at any point or not answering some questions.
- Option for a chaperone at the interview (for parents and young people). This also takes into account potential issues of power imbalance between researcher and parent participant.

**If YES, a Disclosure and Barring Service (DBS) check within the last three years is required.**

Please provide details of the "clear disclosure":

Date of disclosure:19 <sup>th</sup> August 2020
Type of disclosure: enhanced
Organisation that requested disclosure: Tavistock and Portman NHS Foundation Trust
DBS certificate number:001707133020

(NOTE: information concerning activities which require DBS checks can be found via <https://www.gov.uk/government/publications/dbs-check-eligible-positions-guidance>). Please **do not** include a copy of your DBS certificate with your application

**8. Do you propose to make any form of payment or incentive available to participants of the research?**  
 YES  NO

If **YES**, please provide details taking into account that any payment or incentive should be representative of reasonable remuneration for participation and may not be of a value that could be coercive or exerting undue influence on potential participants' decision to take part in the research. Wherever possible, remuneration in a monetary form should be avoided and substituted with vouchers, coupons or equivalent. Any payment made to research participants may have benefit or HMRC implications and participants should be alerted to this in the participant information sheet as they may wish to choose to decline payment.

**9. What special arrangements are in place for eliciting informed consent from participants who may not adequately understand verbal explanations or written information provided in English; where participants have special communication needs; where participants have limited literacy; or where children are involved in the research? (Do not exceed 200 words)**

I will send a letter explaining the purpose and outline of the research (Appendix 1), including procedures for gaining informed consent/assent. Participants will sign a consent form before any interviews are arranged (see Appendix 3). The letter will make it clear to participants that they do not have to take part in the research and if they do choose to participate, they can withdraw at any time. Participants will be informed that they are able to withdraw their involvement after the interview up to the point of anonymising contributions (up to four weeks after each interview). In case of participants for whom English is a second language or who have disabilities, all efforts will be made to communicate this information in an accessible way for them.

## **SECTION F: RISK ASSESSMENT AND RISK MANAGEMENT**

**10. Does the proposed research involve any of the following? (Tick as appropriate)**

- use of a questionnaire, self-completion survey or data-collection instrument (attach copy)
- use of emails or the internet as a means of data collection
- use of written or computerised tests
- interviews (attach interview questions)
- diaries (attach diary record form)
- participant observation
- participant observation (in a non-public place) without their knowledge / covert research
- audio-recording interviewees or events
- video-recording interviewees or events
- access to personal and/or sensitive data (i.e. student, patient, client or service-user data) without the participant's informed consent for use of these data for research purposes
- administration of any questions, tasks, investigations, procedures or stimuli which may be experienced by participants as physically or mentally painful, stressful or unpleasant during or after the research process
- performance of any acts which might diminish the self-esteem of participants or cause them to experience discomfiture, regret or any other adverse emotional or psychological reaction
- Themes around extremism or radicalisation
- investigation of participants involved in illegal or illicit activities (e.g. use of illegal drugs)
- procedures that involve the deception of participants
- administration of any substance or agent
- use of non-treatment of placebo control conditions
- participation in a clinical trial
- research undertaken at an off-campus location (risk assessment attached)
- research overseas (please ensure Section G is complete)

**11. Does the proposed research involve any specific or anticipated risks (e.g. physical, psychological, social, legal or economic) to participants that are greater than those encountered in everyday life?**

YES  NO

If **YES**, please describe below including details of precautionary measures.

As EBSA can be an emotive issue, there is the possibility that interviews with young people and their parents may trigger some painful memories, when their children were having difficulties at school. Given that the interviews are designed to elicit the successful factors that contributed to the CYP's positive outcomes, there is an even smaller risk of this happening.

Precautionary measures to avoid this include:

1. Participants are well informed of the purpose of the research and what it will involve, so that they can give fully informed consent before taking part and of their right to withdraw at any point, including not answering questions on topics they do not want to discuss.
2. I will offer a debrief at the end of the interview, checking how participants are feeling.
3. I will signpost to other services/charities in case participants continue to experience distress (see point 16).

**12. Where the procedures involve potential hazards and/or discomfort or distress for participants, please state what previous experience the investigator or researcher(s) have had in conducting this type of research.**

I worked for two years and a half as a research assistant for a large-scale research project called DE-ENIGMA (Centre for Research in Autism, Institute of Education)

I have extensive experience of working with children and young people, parents and health care professionals in different roles including a year as a trainee EP, on CAMHS placement and two years on placement at a Local Authority Education Psychology Service (as part of my training at the Doctorate in Child, Community and Educational Psychology); working in a school as Special Educational Needs Coordinator for a year; as Special Needs teacher for children with autism for five years; as Nursery Nurse teacher for two years and as a trainee clinical psychologist working in a children's hospital in Santiago (Chile) for six months.

In these roles, I have gained a range of experiences of supporting young people facing wellbeing difficulties, therefore I feel that I am well placed to recognise when participants may feel distressed and can also support any young people who may be feeling distress or discomfort.

**13. Provide an explanation of any potential benefits to participants. Please ensure this is framed within the overall contribution of the proposed research to knowledge or practice. (Do not exceed 400 words)**

**NOTE:** Where the proposed research involves students, they should be assured that accepting the offer to participate or choosing to decline will have no impact on their assessments or learning experience. Similarly, it should be made clear to participants who are patients, service-users and/or receiving any form of treatment or medication that they are not invited to participate in the belief that participation in the research will result in some relief or improvement in their condition.

This research study aims to contribute to the literature about EBSA and the success factors that facilitated positive outcomes for CYP who had experienced difficulties attending school for emotional reasons. As it focuses on the positive aspects that have supported CYP, participants (such as young people and parents) may find it beneficial to identify what has helped them, focusing on personal, relational and systemic positive factors. Awareness of this may prevent this from happening in the future and may empower CYP and parents when identifying how they were



important agents for change in their CYP's lives and how they (the CYP) were able to overcome their difficulties with support. By eliciting the views of young people (in line with legislation and guidance; DfE, 2015, Office of the High Commissioner for Human Rights (OHCHR), 1989) it is hoped to contribute to the body of research that aims to amplify the voices of less-represented groups and to balance adult narratives with young people's experiences of reengaging with education. There are ethical implications of excluding children from research into their views and experiences (Economic and Social Research Council, n.d.). Children's competencies and vulnerabilities, based on the purpose and context of this research, have been considered in line with guidance. Factors such as age, disabilities and economic circumstances will be considered when inviting them to participate in research. By including their views, it is not only hoped that young people will be empowered, but that the results will help others experiencing similar difficulties.

Participants may also benefit from knowing that they are contributing to a body of research that aims to help other young people in similar situations as them, to get the right support, creating a sense of altruism and purpose, as well as new meaning to the experience about which they are being interviewed which can contribute to their future wellbeing ( Alexander et al., 2018). Furthermore, by reading the results findings, participants may learn and reflect on what supported others and themselves to reengage with education which can further support their learning from difficult experiences and in developing their resilience<sup>83</sup>.

Conversation with school staff will also increase awareness of the positive factors and the key supportive role of school which may contribute to school's prevention and early interventions with CYP experiencing similar difficulties before the problem is entrenched. For other professionals, taking part in this research provides the opportunity for reflective practice and may increase their awareness of protective factors and the role they play in the system in supporting CYP experiencing EBSA, with the potential of improved practice as a result.

This study responds to national as well as local priorities. It aims to better understand the factors that facilitated positive outcomes for CYP in secondary schools experiencing EBSA and why. By gaining the views of parents, education professionals and external agents involved, it aims to advance practice-based evidence and contribute to the design of a clear EBSA pathway for the EPS. This will support EPs' understanding and consistency in interventions improving practice, which can then be disseminated to other services. The research also aims to disseminate the results to the community that the EPS serves, informing schools and other professionals to contribute towards EBSA prevention and early intervention.

**14. Provide an outline of any measures you have in place in the event of adverse or unexpected outcomes and the potential impact this may have on participants involved in the proposed research. (Do not exceed 300 words)**

As the research focuses on the success factors that contributed to the CYP's progress, it is unlikely that it will upset the participants. However, I will monitor the emotional state of participants and adopt an encouraging and non-judgmental stance, checking regularly with participants if they are ok to continue with the interview and offering a break if they appear distressed. I will explain the participants of their right to withdraw from the interview at any point and a debrief will be offered after every interview (see point 15). I will signpost participants to other services/charities in case they continue to experience distress after debriefing (see point 16). In the case of young people, the most likely potential unexpected outcomes are those related to emotional distress. I will therefore take extra measures to support them (with their consent) by seeking help from supportive family, friends or adults they trust such as parents, teachers or staff trained to support emotional wellbeing who may be in a position to help them – if and when needed (i.e., if YP experience emotional distress). There will also be a debriefing period after the interview, to check how they found it and how they are feeling. As pointed out by Fylan (2005), "the fact that we can talk though the topic with participant, debrief them afterwards, and answer their questions about why we are doing the research, and stop at any point means that we can be much more confident that at the

<sup>83</sup> Resilience here is understood as a process through which people, including children, are able to continue or resume a long-term positive trend in growth and adaptation, despite their exposure to adversity (Bouvier, 2005).

end of the interview they are not worse off emotionally than they were before” (p.67). Details of external support will also be offered at the end and shared with school staff or parents (as appropriate) and will be included in the YP’s participant information sheet (see Appendix 1d).

If any safeguarding concerns arise during the interview (which I will make clear to the YP of my professional obligation to inform others), I will inform relevant adults and follow my professional practice placement’s (Hammersmith and Fulham Educational Psychology Services) safeguarding procedures.

**15. Provide an outline of your debriefing, support and feedback protocol for participants involved in the proposed research. This should include, for example, where participants may feel the need to discuss thoughts or feelings brought about following their participation in the research. This may involve referral to an external support or counseling service, where participation in the research has caused specific issues for participants.**

A debrief will be offered at the end of each interview, to provide the participants with an opportunity to feedback (if they wish) about their experience of taking part in the research, how they felt during the interview and if they have any further questions for the researcher. If distressing thoughts, feelings or memories were evoked by the interview, the researcher will signpost the participants for further support such as the Local Authority Parental Support Service (<https://www.lbhf.gov.uk/children-and-young-people/children-and-family-care/parenting-support>) or children’s support services such as Young Minds and West London NHS Trust (see section 16), and other free online confidential services such as [Kooth](#) and [my health London](#).

For school staff, further support from the link EP could be offered, which would be agreed in advance with the link EP for that school. For other professionals, signposting to their supervisor or line manager for support will be encouraged. For EPs, I can arrange with the Assistant Principal EP for additional supervision to be offered to participants to discuss work-related issues.

Participants will also be asked whether they would like additional information following their involvement in the research with the options of verbal feedback, a written summary of the analysis or access to the full write-up of the thesis.

**16. Please provide the names and nature of any external support or counselling organisations that will be suggested to participants if participation in the research has potential to raise specific issues for participants.**

Family Support Services provide support for families with children aged 0-19 who may be experiencing difficulties (<https://www.lbhf.gov.uk/children-and-young-people/children-and-family-care/family-support-service>)

The main provider of mental health services in Hammersmith and Fulham is West London NHS Trust, which also provides services aimed at children and young people. They have a single point of access helpline 24/7 (<https://westlondon.nhs.uk/news-events/new-mental-health-helpline-number/>). As well as these services, charities such as ‘Young Minds’ organisation, provide advice for parents whose children experience EBSA. At the bottom of the page, there is a list of contact from different organisations that provide different type of support for parents (<https://www.youngminds.org.uk/parent/a-z-guide/school-anxiety-and-refusal/>). The charity ‘Mind’ offers support for mental health problems and advocacy services (<https://www.mind.org.uk/>). Hammersmith and Fulham Mind provides a wide range of service to support people with mental health conditions ([enquiries@hfmind.org.uk](mailto:enquiries@hfmind.org.uk)).

**17. Where medical aftercare may be necessary, this should include details of the treatment available to participants. Debriefing may involve the disclosure of further information on the aims of the research, the participant's performance and/or the results of the research. (Do not exceed 500 words)**

N/A

#### **FOR RESEARCH UNDERTAKEN OUTSIDE THE UK**

**18. Does the proposed research involve travel outside of the UK?**

YES  NO

**If YES, please confirm:**

I have consulted the Foreign and Commonwealth Office website for guidance/travel advice? <http://www.fco.gov.uk/en/travel-and-living-abroad/>

I have completed a RISK Assessment covering all aspects of the project including consideration of the location of the data collection and risks to participants.

All overseas project data collection will need approval from the Deputy Director of Education and Training or their nominee. Normally this will be done based on the information provided in this form. All projects approved through the TREC process will be indemnified by the Trust against claims made by third parties.

If you have any queries regarding research outside the UK, please contact [academicquality@tavi-port.nhs.uk](mailto:academicquality@tavi-port.nhs.uk):

Students are required to arrange their own travel and medical insurance to cover project work outside of the UK. Please indicate what insurance cover you have or will have in place.

**19. Please evidence how compliance with all local research ethics and research governance requirements have been assessed for the country(ies) in which the research is taking place. Please also clarify how the requirements will be met:**

N/A

#### **SECTION G: PARTICIPANT CONSENT AND WITHDRAWAL**

**20. Have you attached a copy of your participant information sheet (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials.**

YES  NO

If **NO**, please indicate what alternative arrangements are in place below:

**21. Have you attached a copy of your participant consent form (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials.**

YES  NO

If **NO**, please indicate what alternative arrangements are in place below:

**22. The following is a participant information sheet checklist covering the various points that should be included in this document.**

- Clear identification of the Trust as the sponsor for the research, the project title, the Researcher and Principal Investigator (your Research Supervisor) and other researchers along with relevant contact details.
- Details of what involvement in the proposed research will require (e.g., participation in interviews, completion of questionnaire, audio/video-recording of events), estimated time commitment and any risks involved.
- A statement confirming that the research has received formal approval from TREC or other ethics body.
- If the sample size is small, advice to participants that this may have implications for confidentiality / anonymity.
- A clear statement that where participants are in a dependent relationship with any of the researchers that participation in the research will have no impact on assessment / treatment / service-use or support.
- Assurance that involvement in the project is voluntary and that participants are free to withdraw consent at any time, and to withdraw any unprocessed data previously supplied.
- Advice as to arrangements to be made to protect confidentiality of data, including that confidentiality of information provided is subject to legal limitations.
- A statement that the data generated in the course of the research will be retained in accordance with the [Trusts 's Data Protection and handling Policies](https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/).:  
<https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/>
- Advice that if participants have any concerns about the conduct of the investigator, researcher(s) or any other aspect of this research project, they should contact Simon Carrington, Head of Academic Governance and Quality Assurance ([academicquality@tavi-port.nhs.uk](mailto:academicquality@tavi-port.nhs.uk))
- Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

**23. The following is a consent form checklist covering the various points that should be included in this document.**

- Trust letterhead or logo.
- Title of the project (with research degree projects this need not necessarily be the title of the thesis) and names of investigators.
- Confirmation that the research project is part of a degree
- Confirmation that involvement in the project is voluntary and that participants are free to withdraw at any time, or to withdraw any unprocessed data previously supplied.
- Confirmation of particular requirements of participants, including for example whether interviews are to be audio-/video-recorded, whether anonymised quotes will be used in publications advice of legal limitations to data confidentiality.
- If the sample size is small, confirmation that this may have implications for anonymity any other relevant information.
- The proposed method of publication or dissemination of the research findings.
- Details of any external contractors or partner institutions involved in the research.
- Details of any funding bodies or research councils supporting the research.
- Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

#### **SECTION H: CONFIDENTIALITY AND ANONYMITY**

**24. Below is a checklist covering key points relating to the confidentiality and anonymity of participants. Please indicate where relevant to the proposed research.**

- Participants will be completely anonymised and their identity will not be known by the investigator or researcher(s) (i.e. the participants are part of an anonymous randomised sample and return responses with no form of personal identification)?
- The responses are anonymised or are an anonymised sample (i.e. a permanent process of coding has been carried out whereby direct and indirect identifiers have been removed from data and replaced by a code, with no record retained of how the code relates to the identifiers).
- The samples and data are de-identified (i.e. direct and indirect identifiers have been removed and replaced by a code. The investigator or researchers are able to link the code to the original identifiers and isolate the participant to whom the sample or data relates).
- Participants have the option of being identified in a publication that will arise from the research.
- Participants will be pseudo-anonymised in a publication that will arise from the research. (i.e. the researcher will endeavour to remove or alter details that would identify the participant.)
- The proposed research will make use of personal sensitive data.
- Participants consent to be identified in the study and subsequent dissemination of research findings and/or publication.

**25. Participants must be made aware that the confidentiality of the information they provide is subject to legal limitations in data confidentiality (i.e. the data may be subject to a subpoena, a freedom of information request or mandated reporting by some professions). This only applies to named or de-identified data. If your participants are named or de-identified, please confirm that you will specifically state these limitations.**

YES  NO

If **NO**, please indicate why this is the case below:

**N/A. Does not apply to anonymised data.**

**NOTE: WHERE THE PROPOSED RESEARCH INVOLVES A SMALL SAMPLE OR FOCUS GROUP, PARTICIPANTS SHOULD BE ADVISED THAT THERE WILL BE DISTINCT LIMITATIONS IN THE LEVEL OF ANONYMITY THEY CAN BE AFFORDED.**

**SECTION I: DATA ACCESS, SECURITY AND MANAGEMENT**

**26. Will the Researcher/Principal Investigator be responsible for the security of all data collected in connection with the proposed research? YES  NO**

If **NO**, please indicate what alternative arrangements are in place below:

**27. In line with the 5<sup>th</sup> principle of the Data Protection Act (1998), which states that personal data shall not be kept for longer than is necessary for that purpose or those purposes for which it was collected; please state how long data will be retained for.**

1-2 years  3-5 years  6-10 years  10> years

**NOTE: In line with** Research Councils UK (RCUK) guidance, doctoral project data should normally be stored for 10 years and Masters level data for up to 2 years

**28. Below is a checklist which relates to the management, storage and secure destruction of data for the purposes of the proposed research. Please indicate where relevant to your proposed arrangements.**

- Research data, codes and all identifying information to be kept in separate locked filing cabinets.
- Research data will only be stored in the University of Essex OneDrive system and no other cloud storage location.
- Access to computer files to be available to research team by password only.
- Access to computer files to be available to individuals outside the research team by password only (See 23.1).
- Research data will be encrypted and transferred electronically within the UK.
- Research data will be encrypted and transferred electronically outside of the UK.

**NOTE:** Transfer of research data via third party commercial file sharing services, such as Google Docs and YouSendIt are not necessarily secure or permanent. These systems may also be located overseas and not covered by UK law. If the system is located outside the European Economic Area (EEA) or territories deemed to have sufficient standards of data protection, transfer may also breach the Data Protection Act (1998).

Essex students also have access the 'Box' service for file transfer:

<https://www.essex.ac.uk/student/it-services/box>

- Use of personal addresses, postcodes, faxes, e-mails or telephone numbers.
- Collection and storage of personal sensitive data (e.g. racial or ethnic origin, political or religious beliefs or physical or mental health or condition).
- Use of personal data in the form of audio or video recordings.
- Primary data gathered on encrypted mobile devices (i.e. laptops).

**NOTE:** This should be transferred to secure University of Essex OneDrive at the first opportunity.

All electronic data will undergo secure disposal.

**NOTE:** For hard drives and magnetic storage devices (HDD or SSD), deleting files does not permanently erase the data on most systems, but only deletes the reference to the file. Files can be restored when deleted in this way. Research files must be overwritten to ensure they are completely irretrievable. Software is available for the secure erasing of files from hard drives which meet recognised standards to securely scramble sensitive data. Examples of this software are BC Wipe, Wipe File, DeleteOnClick and Eraser for Windows platforms. Mac users can use the standard 'secure empty trash' option; an alternative is Permanent eraser software.

All hardcopy data will undergo secure disposal.

**NOTE:** For shredding research data stored in hardcopy (i.e. paper), adopting DIN 3 ensures files are cut into 2mm strips or confetti like cross-cut particles of 4x40mm. The UK government requires a minimum standard of DIN 4 for its material, which ensures cross cut particles of at least 2x15mm.

**29. Please provide details of individuals outside the research team who will be given password protected access to encrypted data for the proposed research.**

N/A

**30. Please provide details on the regions and territories where research data will be electronically transferred that are external to the UK:**

N/A

## **SECTION J: PUBLICATION AND DISSEMINATION OF RESEARCH FINDINGS**

**30. How will the results of the research be reported and disseminated? (Select all that apply)**

- Peer reviewed journal
- Non-peer reviewed journal
- Peer reviewed books
- Publication in media, social media or website (including Podcasts and online videos)
- Conference presentation
- Internal report
- Promotional report and materials
- Reports compiled for or on behalf of external organisations
- Dissertation/Thesis
- Other publication

- |   |
|---|
| <input checked="" type="checkbox"/> Written feedback to research participants<br><input checked="" type="checkbox"/> Presentation to participants or relevant community groups<br><input type="checkbox"/> Other (Please specify below) |
|---|

#### **SECTION K: OTHER ETHICAL ISSUES**

<b>31. Are there any other ethical issues that have not been addressed which you would wish to bring to the attention of Tavistock Research Ethics Committee (TREC)?</b>
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No
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#### **SECTION L: CHECKLIST FOR ATTACHED DOCUMENTS**

<b>32. Please check that the following documents are attached to your application.</b>
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- |   |
|---|
| <input type="checkbox"/> Letters of approval from any external ethical approval bodies (where relevant)<br><input type="checkbox"/> Recruitment advertisement<br><input checked="" type="checkbox"/> Participant information sheets (including easy-read where relevant)<br><input checked="" type="checkbox"/> Consent forms (including easy-read where relevant)<br><input type="checkbox"/> Assent form for children (where relevant)<br><input checked="" type="checkbox"/> Letters of approval from locations for data collection<br><input type="checkbox"/> Questionnaire<br><input checked="" type="checkbox"/> Interview Schedule or topic guide<br><input checked="" type="checkbox"/> Risk Assessment (where applicable)<br><input type="checkbox"/> Overseas travel approval (where applicable) |
|---|

<b>34. Where it is not possible to attach the above materials, please provide an explanation below.</b>
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## 7.8 Appendix H- Sample transcripts

### Sample 1

R: And it wasn't like, it was funny because she didn't go to assembly but when she did well, like what brilliant effort or something, they still celebrated her in assembly without her without her there. So then people would come up to her and say: "you were on the board in assembly". And it was that kind of school that they really did, not quite naming and shaming, but these are the five most important improved students this week. These are the people that have done really well this week. And you know, they didn't get anything. They just got their name on the board. And in that school, it was a really big thing to get your name on the board in assembly. And so sometimes that would be her. And even though she wasn't there, the other kids would come: "you know you were on the board."

I: Did she mind that?

R: I think she was quite intrigued by it. The first time she said: "people came up to me and said my name was on the board but I didn't know what it meant." And then the twin would come home and explain why she was on the board and what was said. So in some way she was included in quite a nice way. And it wasn't like you know she went back to school with this traffic light scheme and it was all fabulous.

I: Yeah, I was about to ask you, what kind of maintained her attendance? What supported that?

R: oh, she continued to go but someday she wouldn't go in the lesson. She just said: "No, not today.

I: But she continued to go to school?

R: She would go to school and so we tried really hard that everyday she go to one, one classroom. And usually she was better at that. And there were odd days when she just went: "no, I can't go in there today." And I'm not sure that she ever really knew why. And that there were some days that she just she even in SEN she'd have a panic attack. And they ring me up and they would say "she's having a panic attack. She is rigid on the floor.

But they got less they got less and less. She still could have one but she doesn't very much.

I: Did she have like a key person in the school all the time? Was NN checking in on her regularly or what was the support?

R: So she had these one to ones and NN was in charge of all of them. But sometimes obviously NN was teaching she wasn't always there. And she had favourite ones that were ones that we liked better. So I would take her in the morning to reception and it was really quiet and then the one for the first lesson would come and get her. They were always very sweet, they gave her time.

### Sample 2

I: You mentioned that you were given some support. Was that by LL, that helped you with understanding your anxiety?

R: I don't really remember his name but if he was the CBT [ ] then yeah, I think.

I: Okay. And what was helpful about that type of support, the CBT support?

R: It was helpful because... I'd kind of... for as long as I'd been in school, I kind of struggled with it a bit and I kind of put that up to that it's normal to struggle in school, and stuff like that. And it never really was a major impediment until then.

R: So it was kind of key [to] explain that my body's reactions, some of the more extreme things that I was feeling had a reason and that sometimes it wasn't really a matter of that you need a particular reason to suddenly... it's build-up, it's not like a big reason now, it's just build-up.

R: It's getting too much, I guess.

I: Was it helpful for you to understand that?

R: Yeah, because before being diagnosed, like the explanation because I wasn't really thinking or feeling much beyond the physical stuff and most of my feelings and thoughts were about the physical stuff. It didn't seem like it could be the other way around.

R: So having explained but it did have an the emotional root and that if I started to feel more comfortable that it would get better, then it was kind of more comforting than having some kind of mystery sickness.

I: Understanding the reasons behind.

R: Yeah.

### Sample 3

I: How was this case different from other maybe less successful cases for you?

R: Um, I think Mum engaging so well. Mum was very, very easy to communicate with, very easy to share things with, in terms of if I had a concern about Sophie, for example of close family member. I felt [I had a] very, very good relationship with mum, that mum knows Sophie very well. I think Mum trusted that I was learning who Sophie was very well as well and I think that gave her comfort you know, like I said, you know when someone working with a young person doesn't really know that young person. I think Mum got a sincerity from me in terms of Sophie which I think made that working relationship really good. I think in terms of Sophie and her own kind of "comfortability" and coming out of that thing, that also really helped as well.

I: Can you say a little bit more about that last thing? That you think maybe because of the way she was, it was more successful? The relationship? Her own feelings that she brought?

R: Yeah, I think like I said, Sophie coming on time and being keen to kind of see what mentoring was about. She hadn't been mentored before. So coming into and stepping in, it's kind of throwing herself into what she was initially quite afraid of – [this] really helped. You know, there was no activity that Sophie said "no, I'm not going to do", there was no conversation that Sophie would shy from, you know, even some difficult conversations because obviously at a certain point, in terms of things with close family member, there are things that maybe might raise a concern, where I think, "Do I need to investigate this further? Is this a safeguarding issue that you know, I need to look into?" and there was always times where I shared with Sophie, "Can you be clear?" and you know, quite difficult conversations, difficult questions around "is this thing happening?" "Is this something that's going on? Is that?" and she would be very honest, always. And that helped [in] how open she was being, she was being very open, very honest and very transparent. And like I said, her eagerness to attend the mentoring and to get involved. There was never a time she refused to have any conversation or partake in any activity. And I think that was crucial in how well she kind of did with mentoring.

I: Okay, so that might have been something that – her eagerness and motivation to want to get better and made it a bit different to other cases. And what do you think... these last questions are all about what could have facilitated more success: What could have helped

her even more, and why? In case you think of something that could have facilitated more success in, in Sophie's case, in relation to her emotionally based school avoidance.

R: Yeah, I think, some intervention just after COVID, when she wasn't going [to school] over that period of time after COVID. I think not just Sophie but a lot of young people after COVID found it very difficult to reengage back into school. And I think the lockdown was something we've all never experienced before as adults, and these young people are having to experience it and then having to be thrown back into a Monday to Friday eight-hour day situation where they don't necessarily want to be, their minds are not necessarily there. And I think if she had had that intervention just a bit earlier for the GCSEs, I think it was a lot to kind of have it while she was trying to do GCSEs as well. Even though it was successful I think, maybe before she got to the GCSE period, it could have helped to kind of in that revision period, that kind of scoping "what's going to happen next" period. I think she did very well in managing "what my GCSEs is going to look like, what will sixth form be like, what's my next steps?" "What am I going to do as a job at one time", but that could have been broken down over a period of time. I think even from the same last September before her GCSEs started, I would have given her a good academic year to really look at year 11 and look at sixth form and I think that would have been a good factor.

## 7.9 Appendix I- Familiarisation notes made during RTA

### Familiarisation notes made for CASE 2

Interview 1: CYP's mother	<p>Much of what Sophie's mum mention for RQ2 (what would have worked) was what worked in case 1. It is amazing that the CYP still managed to go to school with little organised coordinated approach from school. It sounds like she still experiences high levels of anxiety in the mornings, and she has kind of learn to cope with them, although I wonder whether some professional involvement like CBT might have helped even further to manage her anxiety as it sounds like she still has to put up with a lot of anxiety herself, without much support at school. Lots of ideas from mum of what could have gone better, including comments on CAMHS again like in case 1.</p>
Interview 2: mentor	<p>Long detailed interview with lots of information, more than with the other two interviews, giving a better idea of the bigger picture, of what could have been going on for Sophie at the time and what might have helped. Interesting what she said about friends not really being of conversation, which then the school nurse was also reluctant to talk about and mum just mention in passing when I asked, but I do not get the impression that they were pivotal in her reintegration.</p> <p>The person-centred aspect of the intervention comes across at many points when she is describing what they did in 'mentorship'.</p>
Interview 3: school nurse	<p>I get the sense that there were quite a lot of people in school aware of Sophie's difficulties (school nurse, HOY, head of pupil wellbeing and school counsellor) but there is a sense of a lack of a clear reintegration plan and a lead person to implement that (different to case 1). This lack of consistency might have made it harder or slower for Sophie to get back to</p>

	<p>school. However, I get the impression that there were some key adults who understood her and made themselves available for her, even though they did not understand fully what she was anxious about. They respected her pace, her not wanting to talk about it (I wondered if alternatives were offered to communicate how she was feeling like in case 1), but still offered that space, that unconditional positive regard in a way. This is similar to case 1 but obviously without the plan of what to do when she is in school but cannot cope with going into lessons. Something that sticks with me is that image of Sophie sorting those letters in the school nurse's room, and just being in school, not expected to do the work, but just being in a space and with an adult she trusted that didn't demand anything from her, which was comforting for Sophie. The lack of available staff in pastoral capacity is mentioned as a barrier given that all HOYs also have a teaching timetable. This seems quite different to case 1, I guess because Sophie did not fall under SEN which was what gave her that extra extensive support from the SEN lead who was key. However, I wonder if it is only down to staff capacity, because the SEN lead also had a teaching timetable but managed to oversee Emma's reintegration when she was not teaching. A similar theme with case 1 is that feeling that the school nurse of not knowing what to do to help CYP. But then she went onto do something that to me, seemed very helpful, in just offering that safe space and relationship, doing any activity like sorting letters.</p>
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## 7.10 Appendix J– Example coded extracts

### Code: Progressive reintegration plan “baby steps”

1

It was kind of... there was an agreement made with my mum and SEN, that it was okay if I could only make it to reception, but I had to put on my uniform and go to reception every day. And try and stay there as long as I can, then advance into the school.

2

And then she spent a lot of time in SEN and then when it eventually got to the point where I was in a rush to go to SEN every day, they made arrangements like I'd spend half a day there or I'd spend a full day there.

3

And I was kind of scared of my classmates and teachers in general because... I wasn't scared of them in the sense they've I thought that they were bad or something like that. But they were scary because I'd have to kind of face the fact that I had lots to catch up on and that I had missed a lot and it kind of felt like even though most of them were strangers, or I knew they were nice and stuff like that but that they'd have questions that would be awkward and I didn't know how to handle that. So at first it was trying to get into classrooms when they were empty. And then I'd sit by myself with someone from SEN and I wouldn't have to sit near my classmates.

4

Sometimes I went into the classroom while the teacher had just finished or was preparing for a new lesson. But a lot of the time it was empty classrooms and then I tried to get to the classrooms... they weren't full when I went in but it was kind of like one other pupil went in.

5

And I kind of expected to get back into it quickly. And when that wasn't happening, it was hard. So the fact that I was allowed to go slowly was reassuring because I didn't think I could go any faster.

6

So then we started with a plan and she had support in SEN all the time, so she would just go to school for a slightly longer time each day but she still wasn't sitting in any classes. She couldn't really bear to be in a class. So they had people doing work with her in SEN, but she couldn't sit in a classroom

7

So like for a week she was like, always with NN (SEN teacher), not always directly with NN but at times when NN wasn't teaching so NN was in the Learning Support room because they had a big Learning Support Hub that was several rooms so NN was never far away. So NN was there, and Emma would go and have a lunch with these other people, and if she went to a lesson, then she would sit near the door, and she had to know that she could leave. So she didn't go to any lessons first. She just went with NN. And then gradually she started going into the classrooms.

8

She would go to school and so we tried really hard that every day she went to one, one classroom. And usually she was better at that. And there were odd days when she just went: “no, I can't go in there today.” And I'm not sure that she ever really knew why. And that there were some days that she was just, even in SEN she'd

have a panic attack. And they ring me up and they would say "she's having a panic attack. She is rigid on the floor."

9

So obviously, that's when and so we were kind of doing that on the peripheries, but in the meantime working within school to try and get back into school on a very short timetable short day. Specific timetabling starting off with obviously (pause) getting her into school between the hours of I mean, to be honest, I can't remember it seems quite a long time ago. But you know, sort of getting her into for a short day, mum dropped her off, picked her up, and then obviously slowly sort of trying to integrate her back into sort of the school day.

10

And I think that from there we recognise that actually telling her to come in and getting her straight to a lesson was not going to happen, we needed to get her, you know, almost like baby steps. So, we had her in school brilliant, so now school needed to get her into SEN, so that you know, she would be familiar with that. And then from there, we will be able to go outside to be with friends and from there we'll be able to get her into lessons. So it was really it was it was a bit trial and error. And it certainly did evolve over time.

11

So once we got her into school, so therefore, she had achieved what she had perceived to be difficult about getting into school. Actually getting her into the classroom was obviously the next stage.

12

whilst we as a school were accommodating and obviously recognise that getting her in for a smaller period of time, rather than a larger period of time was better, obviously, you know, as, you know, understanding her ability and what she can do so therefore, perhaps reducing our expectations of her being at school every day from the hours that she should be.

There was understanding, there was recognition, there was space. And that led to a number of changes. So gradual reintroduction, schools were very happy to try the things we put in place. So both environments were very supportive, which I think was really, really important. There was no expectation that she should return to school immediately. There's no expectation that she'd be in there, participating in everything at once, it was at her pace, that she was comfortable.

### **Code: Empowering CYP**

1

The flexibility was amazing. And because it was all kind of, it wasn't like they ever said we're going to do this. It was always like, they asked me do you think she could manage this? And then I talked to her, or they talked to her. So, it was all very collaborative. It was really working with her and empowering her really to see what she could do. So they said, like, for example, they said, do you think that you could go to the gym with your learning support person if nobody else was there? And she said, as long as I don't have to get changed. So there's always her being allowed to say the bits that really she couldn't do. As I can sit in the class - if nobody talks to me; I can sit in the class- if I can leave.

2

Her and I went on a journey together because ultimately, we went on a journey together, Emma and I, I suppose part of it. And my experience was, because there

was sometimes when I didn't know what to do with her either. So you know, for instance, you know, we would get around outside during the day, but at lunchtime, we were with her peer group. And, you know, that was her choice as well. Everything I think was her choice

3

Somebody who understood the difficulties of being slightly you know, being different or whatever, you know, being and so therefore, you've got her to where she needed to be. So I think again, it was all of these small, you know, it was choices for her, you know, do you want to go outside? you do not want to go outside, so you want to sit here, so I will sit here and that obviously helped her as well. Because it's, I think it started to empower her to make her own decisions.

4

So they wanted to be involved as I said, we'd always check in if there are activities, or strategies that are particularly useful, and we encouraged Emma to kind of share those and to take ownership of them.

5

And then Emma could kind of write down and draw how her body responded and what it felt like for her. And then we'd go through it again, reiterating why all these feelings were happening. And that was something she could then share, take ownership of with school and with home. Okay, when I feel this, the first thing I notice you know is my heart rate might increase and how she designed that represents how she felt. I think she found that really helpful, again, that psychoeducation and the ownership but as well as that and kind of the squiggle game and communications

6

Throughout, I hoped to kind of provide opportunities for Emma to take ownership to feed back to school around what was helping what was impactful, what she'd learned. To be confident in owning that knowledge, be confident and kind of saying, this is me, this is what's helpful

7

Plus, I think the difference we saw from starting and finishing across the eight weeks, was powerful in itself. And I think that was probably supported by the fact that there was that consistent, regular meeting with a familiar other, sharing understanding and empowering Emma.

### **Person-centred mentorship**

1

So it's once a week, the time kind of varied depending on the needs that Sophie had in that time. So it could be anything from like half an hour, to an hour to you know, it depended on what we're working on that week or what she felt she needed that week. That went on for about three months. So we just ended in about September, end of August, September.

2



what we're going to be doing how I like to work that is very much guided by her. So we do holistic mentoring. So it's really guided by the individual and I think that's an element that she liked that it was about her telling me what she needed, and us working with that as opposed to "we're going to do this all week long, whether it applies to you or not." So she was she really worked with me in that. And as we progressed, we made two activities from like an activity book, depending on what it is that she talks about that time so for example, if she's all about anxiety, I have anxiety kind of worksheets and activities, that I think if they kind of relate to her and kind of make her break down her thoughts maybe or maybe see a different way of thinking, that kind of thing. Then we would do some of that. Some sessions we just spoke we didn't do any activities. Just let her speak. For some sessions, she was looking for like advice. So it would be kind of like I'm in this situation, I don't know what to do about it. And then we were just talking and worked it out together. So very holistic are very geared toward whatever it was that Sophie needed in that time.

3

And I think that was a big factor in terms of having somebody to meet outside of the home. So I think that was one of the big resources, coming out of the home. I think the activity booklets we did were great too in terms of, I know we did some communication, some activities, and I think the balance of both really worked well. So in my organisation, I designed the booklet for our organisation so different ideas we all had and I put them together and I've got a booklet that we have. And this booklet could range from like friendships, anxiety, so many different things, fitness, goals, plans, home – it ranges [across] different topics. And it's not for the young person to complete every single page because every single page might not be for them. But it's about doing the activities that are tailored to that person that is going to help that young person. And it could be that week one, this activity has nothing to do with that person. But by week four, through conversation, through the way that we've worked, through the progression of the mentee, week four, all of a sudden, is very relevant to that person and they do it and they can see themselves what they've done, what they've written. And it's very much for them to do, so they're very much guided. And once they've done it, they can look back and see, "Oh, this is my plan. This is my life. This is where I'm anxious. This is where I can improve. How am I going to do it?" And I think doing those activities helps a lot of communication conversation come out of that, because like I said they write it themselves, they see what they've written, then they can talk about it. And it opens a lot of honesty and truth and again, transparency.

4

Yeah. It was just based upon the fact that you know. In a holistic, we meet the young person where where's best for them. Obviously, for a lot of young people who don't go to school, I'm not prepared to (inaudible). So, it might be about that for some other mentors that in my organisation as well, let's say we start off working with that young person, it might be a park, it might be a cafe might be wherever they feel, we don't do home visits, but wherever they feel most comfortable. And one of the reasons is because like I said earlier, it's about bringing that young person out of the home space and encouraging that. So we start off with that kind of thing. Then throughout the mentoring as they start to reengage into school, then we can look at meeting them in school and and that's almost like, not the reward, but you know, you get to see us in school, you can come in and meet me in school, and often that engages them to come back in because once they've got a relationship with you, you

know, so you're almost a reason for them to come back into school sometimes as well.

### **Code: making school feel safe for CYP**

1

I think taking out all the scary things because I think now, I know her better. So in retrospect, I can see that somethings she can manage. But they're exhausting. And so then by the end of the day, she's just kind of run out of energy. She's kind of tired of trying so if you waste all that energy almost on walking through the corridor and going to assembly then she hasn't got any resource left within her to learn in the lesson. Like she's all used up. So they managed somehow, by taking out so many of the scary things they managed to leave her enough kind of concentration and energy and willpower to get herself through the lessons.

2

So these were the three girls that had been in the club right at the beginning, so they were allowed to eat their lunch in learning support. So they ate their lunch together in learning support, so she had some company. One of the lessons she did with one of them. And when they were feeling great from learning support, you could go straight to the playground so they would sometimes stand in a little corner of the playground, which I think they felt safe because they could go straight back in and nobody else was allowed to come inside.

3

So she had these one to ones and NN was in charge of all of them. But sometimes obviously NN was teaching she wasn't always there. And she had favourite ones that were ones that we liked better. So I would take her in the morning to reception and it was really quiet and then the one for the first lesson would come and get her. They were always very sweet, they gave her time.

4

There was no expectation that she should return to school immediately. There's no expectation that she'd be in there, participating in everything at once, it was at her pace, that she was comfortable. School made it very clear that they kind of make everyone aware of some of the particular areas of difficulty for Emma, such as if she was freezing, looking down what that looked like, what that meant for her and how she could be supported in a kind of competent and non... look at her sort of way.

## 7.11 Appendix K – Coding System

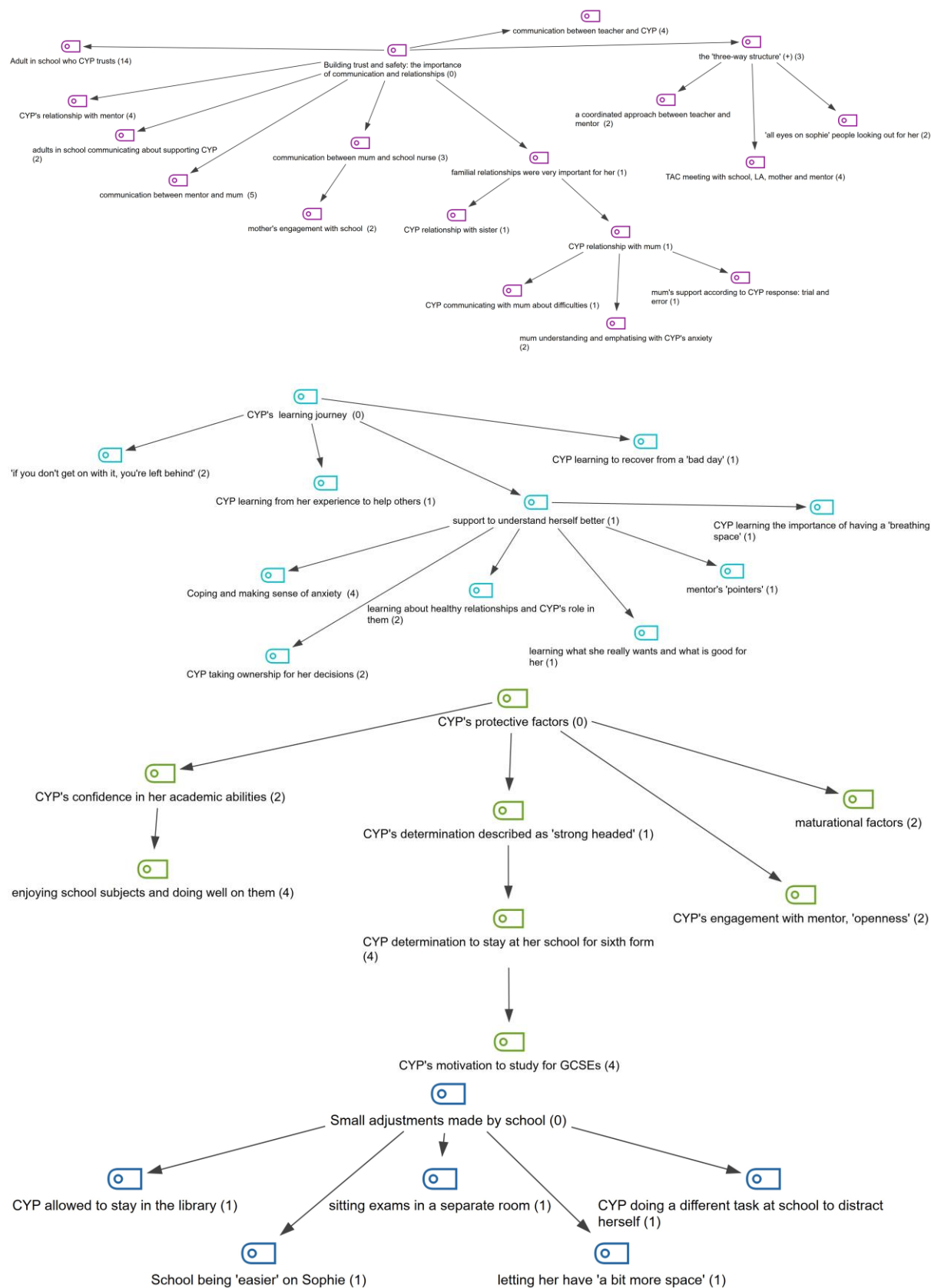
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<ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>progressive reintegration plan 'baby steps'                             <ul style="list-style-type: none"> <li>'it was at her pace'</li> </ul> </li> </ul> </li> <li>CYP best interests at heart for both school and home                             <ul style="list-style-type: none"> <li>building CYP's comfort and confidence</li> </ul> </li> <li>CYP full-time SEN support                             <ul style="list-style-type: none"> <li>one to one support at school</li> <li>EP playfulness in intervention</li> </ul> </li> <li>Empowering CYP                             <ul style="list-style-type: none"> <li>supporting CYP's communication skills</li> <li>Rapid response from school</li> <li>curriculum adjustments</li> <li>exam access arrangements</li> </ul> </li> <li>listening to CYP's views                             <ul style="list-style-type: none"> <li>co-producing reintegration plan with CYP</li> <li>school's trust in CYP</li> <li>lowering demands</li> <li>personalised timetable</li> <li>school being discreet</li> </ul> </li> <li>trial and error                             <ul style="list-style-type: none"> <li>School adapting plan according to CYP's responses</li> <li>school kept trying</li> </ul> </li> </ul> </li> <li>A RELATIONAL APPROACH: BUILDING TRUST AND SAFETY IN SCHOOL                             <ul style="list-style-type: none"> <li>Making school feel safe for CYP                                     <ul style="list-style-type: none"> <li>Safe space at school</li> <li>relaxing environment</li> </ul> </li> <li>the importance of Trust                                     <ul style="list-style-type: none"> <li>CYP trust in school knowing how to help her</li> <li>SEN teacher trusting professionals and understanding CYP needs</li> <li>Trust in the professionals</li> <li>school trust in CYP's family</li> <li>trust in the system</li> <li>trusted adult</li> </ul> </li> </ul> </li> <li>AN INCLUSIVE AND POSITIVE SCHOOL ETHOS THAT PROMOTES A SENSE OF                             <ul style="list-style-type: none"> <li>School inclusive culture                                     <ul style="list-style-type: none"> <li>school celebrating CYP's success in an inclusive way   <ul style="list-style-type: none"> <li>'the teachers were really positive about her'</li> </ul> </li> </ul> </li> <li>Well resourced school                                     <ul style="list-style-type: none"> <li>procedure for lateness</li> <li>school SEN strategies</li> </ul> </li> <li>school's large physical space                                     <ul style="list-style-type: none"> <li>ASC resource base</li> <li>large learning support hub</li> </ul> </li> <li>staff capacity and experience</li> <li>students access to mental health support staff</li> <li>school showing they care</li> <li>strong pastoral support</li> </ul> </li> <li>ACTIVATING A SUPPORTIVE NETWORK AROUND EMMA                             <ul style="list-style-type: none"> <li>Broad and extensive professional multi-agency                                     <ul style="list-style-type: none"> <li>CAMHS involvement and multidisciplinary assessment</li> <li>Clinical psychologist's support in school</li> </ul> </li> <li>Extensive EP CBT intervention                                     <ul style="list-style-type: none"> <li>EP report   <ul style="list-style-type: none"> <li>therapeutic letter</li> </ul> </li> <li>Thought trials</li> <li>progressive desensitization</li> <li>psychoeducational work about anxiety with CYP</li> </ul> </li> <li>time/day boundaries to therapeutic intervention                                     <ul style="list-style-type: none"> <li>CBT intervention in school</li> </ul> </li> <li>medical support</li> <li>professionals supporting mother</li> </ul> </li> <li>LA support                             <ul style="list-style-type: none"> <li>LA EHCNA EP</li> <li>LA EP support CBT during COVID (remote)</li> <li>LA resources contingency funding</li> </ul> </li> </ul> </li> </ul>		
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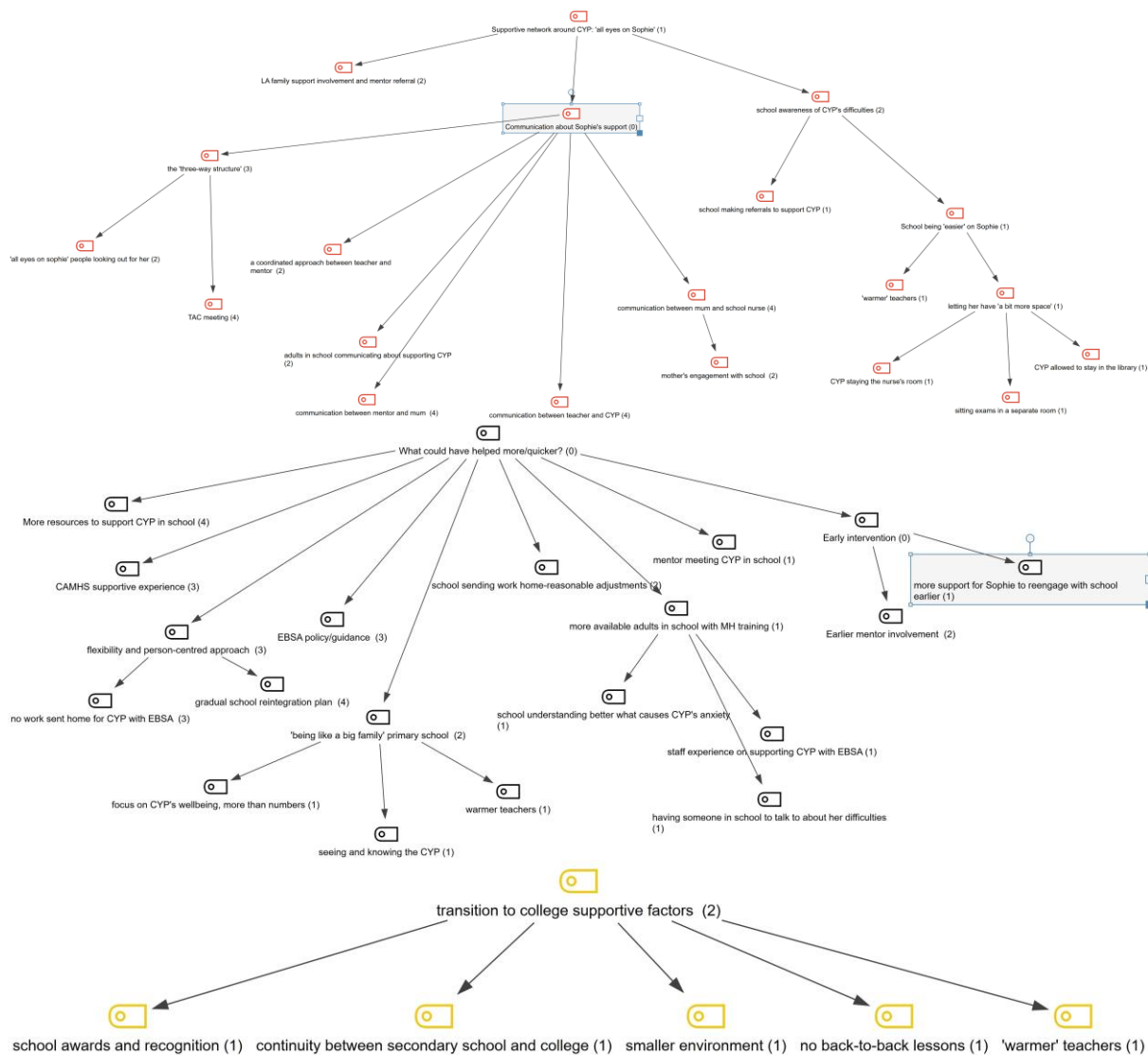
Code System

• progressive desensitization	3
• psychoeducational work about anxiety with CYP	2
✓ • time/day boundaries to therapeutic intervention	3
• CBT intervention in school	7
• medical support	3
• professionals supporting mother	3
✓ • LA support	0
• LA EHCNA EP	3
• LA EP support CBT during COVID (remote)	4
• LA resources contingency funding	2
• LA support 'team around the child'	5
✓ • School's support	0
• school regular monitoring of CYP	5
✓ • school supporting mother	3
• school supporting parent EHCNA application	1
• school taking action and listening to professional's advice	2
• support from HOY	2
✓ • support from SEN	4
✓ • SEN teacher organising and overseeing reintegration plan	6
• school facilitating therapeutic interventions	1
• learning support	1
• support from education welfare officer from school (+)	6
✓ • family support	3
• 'not another family would be able to do it'	3
• all down to mum	18
• parental understanding of CYP's needs (+)	3
• siblings' support	1
• peer support	14
✓ • Privilege of knowing and being known to the system	0
• 'conventional' family already known to the school	9
• mother's knowledge of the system	10
• mother's knowledge of autism	3
• sibling at school	8
✓ • A SENSE MAKING NARRATIVE	21
✓ • CYP building self-awareness	7
• CYP understanding her anxiety	4
• being reflective	1
✓ • The potential power of a diagnosis	12
• having an EHCP	2
• psychological support post autism diagnosis	1
• normalising	3
✓ • EMMA'S PROTECTIVE FACTORS]: "SHE IS A UNIQUE LADY"	0
✓ • CYP motivation/engagement/perseverance	5
• CYP determination to do well academically/achieve qualification	6
• CYP liked/wanted to go back to school	5
✓ • CYP realisation that something needed to change	3
• CYP developing strategies to deal with anxiety with support	1
• CYP understanding of the need for school adjustments	2
• CYP's recognition of attendance difficulties	1
✓ • CYP personality traits/personal qualities	0
• CYP ability to verbalise what she needed from others	2
• CYP academic abilities	8
• CYP resilience	2
✓ • described as 'brave'	3
• CYP's confidence	1
• described as 'clever'	4
• she's a unique young lady	2
✓ • THE TIMING OF EBSA SUPPORT	0
✓ • A system that provides early EBSA support	6
• CAMHS identifying CYP's needs earlier	2
• availability for emergency input for school	1
• better communication between the health and education system	1
• earlier EP support	5
• The process cannot be rushed	2
• Reflexivity Check	17

Code System		712
Code System		
THE IMPORTANCE OF BUILDING TRUSTING RELATIONSHIPS WITH ADULTS		0
familial relationships were very important for her'		1
CYP relationship with mum		1
CYP confiding in mum about difficulties		1
mum supporting CYP		2
mum understanding and empathising with CYP's anxiety		2
CYP relationship with sister		1
CYP's trusting relationship with mentor		4
CYP's engagement with mentor, 'openness'		2
Person-centred mentorship 'it was guided by her'		5
Mentor's transparency with CYP		1
Resources to support CYP communication with mentor		3
asking for CYP's feedback		1
mentor chosen to suit CYP's needs		3
a safe space to 'speak all out'		3
Relationship with adult in school who makes her feel safe		0
having CYP's welfare at the centre		1
knowing there is someone to talk to at school		3
letting her know that I understood and I could help		1
offering a space to talk or not talk but feel safe		5
ACTIVATING A SUPPORTIVE NETWORK AROUND SOPHIE		1
Activating the supportive network		0
LA family support involvement and mentor referral		2
mother's engagement with school		2
school becoming aware of CYP's difficulties		2
School being 'easier' on Sophie and making adjustments		1
'warmer' teachers		1
letting her have 'a bit more space'		1
CYP allowed to stay in the library		1
CYP staying in the nurse's room		1
sitting exams in a separate room		1
school making referrals to support CYP		1
the 'three-way structure'		3
'all eyes on sophie' people looking out for her		2
TAC meeting		4
Communication about Sophie's support		0
a coordinated approach between teacher and mentor		2
adults in school communicating about supporting CYP		2
communication between mentor and mum		4
communication between mum and school nurse		4
communication between teacher and CYP		4
SOPHIE'S INTRINSIC MOTIVATION AND SELF-DETERMINATION: "I will "		5
CYP's confidence in her academic abilities		2
CYP's determination		1
CYP's motivation to study for GCSEs		5
A RECIPE FOR SUCCESS: THE IMPORTANCE OF CHOICE AND AUTONOMY		2
college environment being more like an adult setting		2
continuity between secondary school and college		1
maturational factors and age		2
no back-to-back lessons		1
regular check-ins		2
school awards and recognition		1
smaller environment		1
studying subjects that she is interested in and enjoys		5
more people looking out for her		2
CLEAR PROCESSES AND RESOURCES AROUND EBSA SUPPORT		0
Available adults in pastoral roles with MH training		8
EBSA policy/guidance		3
early support for Sophie to reengage with school		3
SCHOOL ETHOS THAT PROMOTES CYP'S BELONGING		0
Person-centered flexible approach		3
gradual school reintegration plan		4
school sending work home		4
a 'warmer' place...'like a big family'		3
focus on CYP's wellbeing more than numbers		2

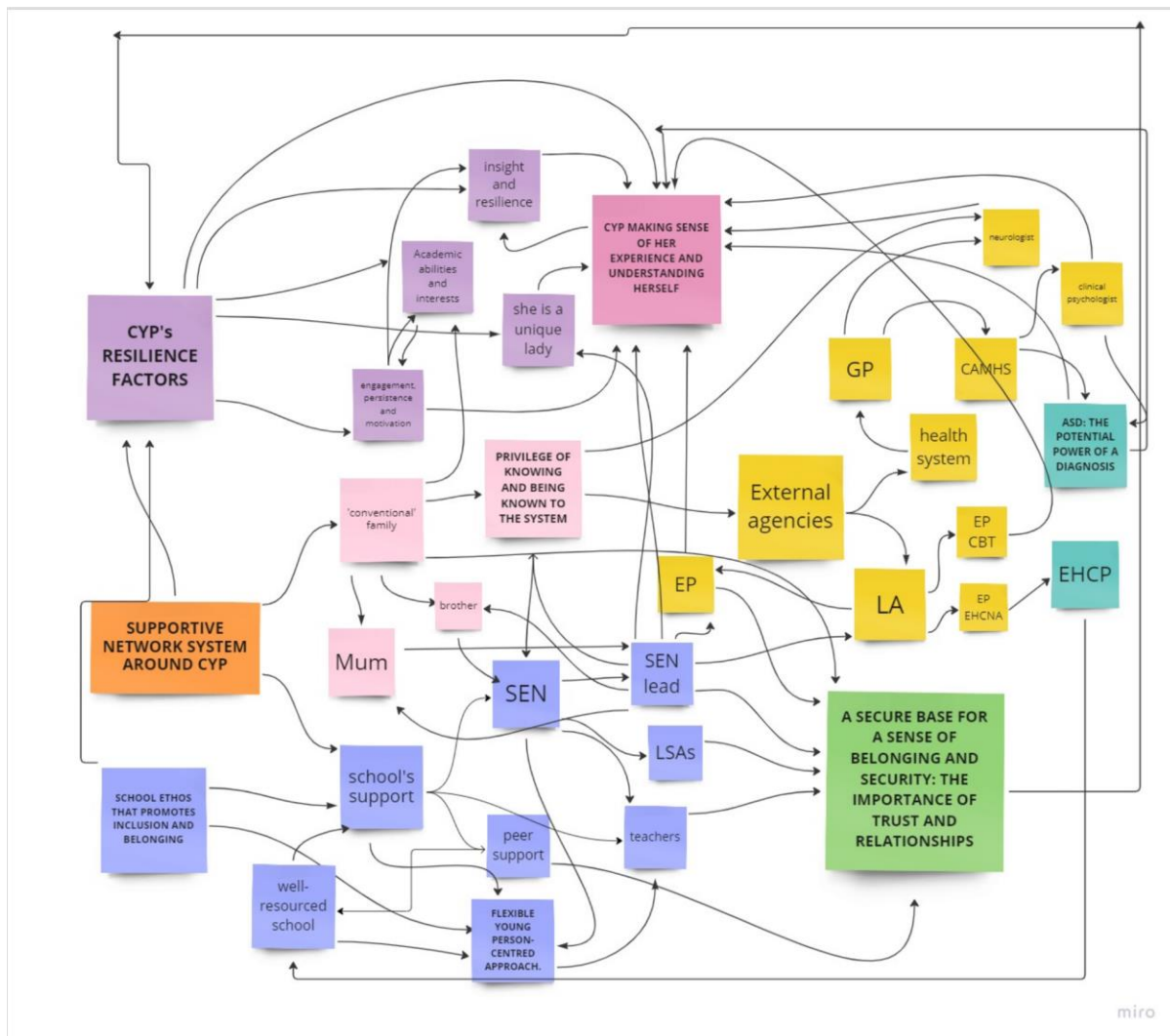
## 7.12 Appendix – L Initial themes







7.13 Appendix M–Candidate theme maps



## 7.14 Appendix N – Reflexive journal extracts

02.06.23

Revising coding of EP interview, I feel pulled to the whole CBT approach as a TEP who has been trained and done CBT. The other thing that comes across is how well the EP managed to empower and support Emma to communicate with school, which is much more powerful as he says, giving her the tools and strategies to let school know what she needed. I think that was very powerful and something I had not thought before. He was also in communication and had meetings with school and home which was also key but what theme is different in this interview is that empowerment, which was present in the other interviews, but even more so in this one.

05.06.23

Revising my coding parent interview (Case 1) I still can't quite believe how much support Emma had and how much the school staff were able to accommodate and support her, which was so key, as well as plenty of professional involvement. Just thinking about a case I had this year where school does not have quite so many resources (like a big SEN room where CYP can feel safe), and how this is dependent on circumstances as well. For example, that the doctor knew a clinical psychologist trainee who could help and that the school could allocate that many hours for the EP to do direct CBT work with CYP in school.

12.06.23

Starting to see possible redundant codes that might need merging. For example, I am wondering whether 'CYP's ability to verbalise what she needed' and 'support CYP's communication skills' might be two sides of the same coin. The fact Emma was supported enabled her to communicate what she needed. Another example is 'building her self-awareness was very important' which is very close to 'CYP self-knowledge'. That is, some of her strengths are related to the support she had to develop these skills, which allowed Emma to make sense of her experience, plus the context and reasonable adjustments made by school which enabled her to be there and communicate her needs and wants.

18.06.23

Interestingly, on RQ2, what could have facilitated more success or quicker, both the EP and Emma agreed that the timing was right and that she needed the time that she took to get better. This is different from mother's and teacher's opinion. Maybe mum had more of the overall picture and was the one that had to really keep fighting with the system, seeing all the things that have gone wrong (such as initial CAMHS involvement) and the frustration of seeing your daughter so unwell and having to contain those hard feelings. For the teacher, she can also probably see the faults in the system so easier to pinpoint that there should be a quicker response or earlier intervention support for school in EBSA cases. The importance of taking time to building those relationships really stood up to me when, in a high needs environment in which I work in as an EP I know is such a luxury to have, but actually, just what can make a difference and what Emma needed, so it shouldn't be a luxury because it was what she needed.

25.06.23

Having spent a lot of time systematically working my way through the data in different order at least twice (as suggested by B&C) making sure that I was somehow consistent in the

coding, I am now beginning to attempt to group codes in meaningful way. According to them coding is never finished as you will always notice something different every time you go through the data which is what I experienced: changing, refining and beginning to cluster some codes, making meaning of the data. I also experienced the pull to stay coding because as I became more fluent it feels safe and makes me want to stay. I have decided that I have made a 'good enough' job of coding these data, because I am that point of just tweaking my codes and coding labels. Aware of the need to make progress, I have decided to move onto stage 3 of developing some candidate themes.

20.07.23

### **Developing candidate themes**

Having spent time clustering and re-clustering codes, seeing which ones might be connected and what is the unifying concepts, I have come up with the following:

School resources

Family resources

CYP direct support

CYP making sense of her experience.

Professional involvement

CYP strengths

The importance of safety

Autism diagnosis

Relationships

Reasonable adjustments made by school

The importance of trust

What could have facilitated more success/quicker?

Other factors

21.07.23

I realised that some of these initial themes might look more like what Braun and Clarke refer as topic summaries that capture a range of responses around a particular issue but that ARE NOT themes. Trying then to make sense of what a theme actually means in RTA, defined by B&C as 'shared meaning' or 'conceptual patterns', united by a 'central organising concept'. I am not sure about 'school ethos' as a sub-candidate theme. It captures many different things which might be like a candidate them but not sure at this stage yet as it seems too soon to start with themes. It contains things like the school setting clear boundaries to CYP, showing they care, praising students and teachers being positive about students. Also not sure about 'school resources' as it encompasses many things that might not reflect actual resources like 'school listening to parent views' & 'school supporting mother'. Also 'reasonable adjustments' seem to include so many different things that I wonder whether it should have a more descriptive name that tells what the school actually did. However, Braun and Clarke warn about the risk of staying in the descriptive, the risk of superficial coding and the importance of this being a conceptual process.

Also aware of the importance of themes being clustered patterning ACROSS data set, so if only one participant expressed one idea many times, does not make it a theme

22.07.23

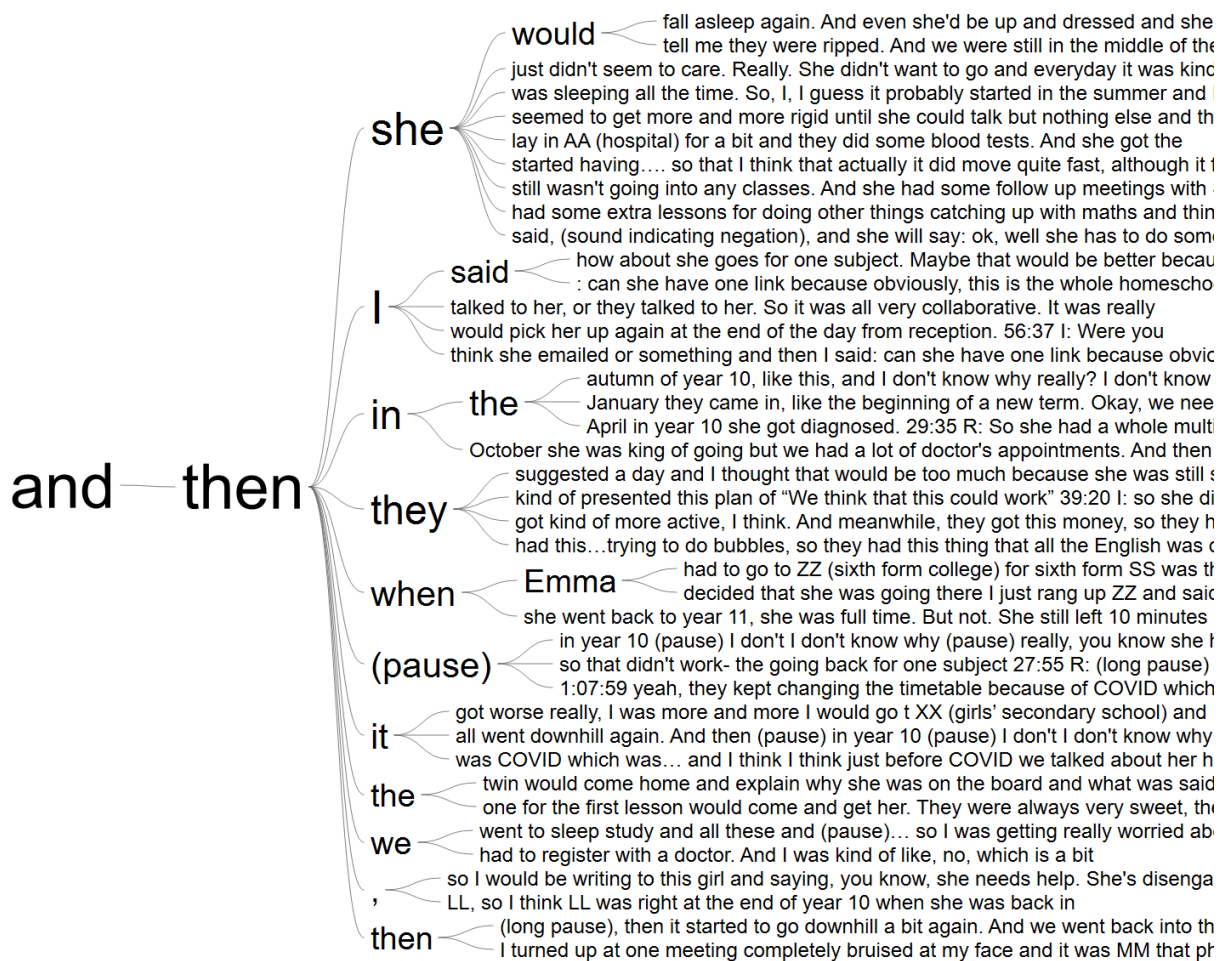
Unsure about 'school resource's as possible candidate theme for things school did. Some of them I think go beyond resources, like the fact that the school went out of their way to make changes and adapt things to meet CYP's needs. For example, under school resources I have 'school listening to parent's views, which is beyond resources and more about the ethos and values of the school.

There is also an overlap between 'communication between CYP and school and school and parents' and listening to their views, which is quite similar but not the same. Other codes like 'increase CYP sense of safety at school' could be merged with 'the importance of safety'.

24.07.23

Having organised the data in initial themes, I started to review the data to verify which segments related to those themes and whether they are present in all 4 interviews, to make sure that it does represent the views across all 4 participants and not just one, in line with case study methodology. I have also started using some MAXQDA tools to help me visualise the themes (and going back to the segments coded to check for consistency) and other tools such as 'word combinations', word trees and word frequencies, searching for certain words that might be repeated more often which relate to the initial themes and seeing whether they appear in all 4 interviews or just repeated in 1. Interestingly, the word 'safe' which was found 23 times and evenly spread across all four interviews which is interesting. With trust, on the other hand, there were 29 hits but across 3 interviews (none from the parent interview) and all of those except 4 (2 CYP and 2 EP) were from SEN teacher, giving an indication that this was a major factor in her perception. Also, the word 'support', key in my research question had 90 hits which were quite evenly distributed. When revising each segment where 'support' appeared and once I deleted the ones where I had mentioned the word or where it was not referring to the direct support Emma and her family had, it creates an interesting picture of factors, mainly distributed between the parent, SEN teacher and interviews. I searched for other key words such as 'friend' (29 hits, evenly spread between parent and SEN teacher's interviews, plus a few in CYP's), 'help' which are key aspects that supported. It's interesting that other words such as 'relationship' are much less evenly distributed (with mainly all hits mentioned by SEN teacher (12) except 5 by EP-an indication that maybe it is a term maybe more technical when professionals describe what happened, which does not mean that this was not key for CYP and parent. 'Flexibility is mentioned by all, except CYP, but mainly by SEN teacher (12), with parent and EP mentioning it twice only. Words like 'timetable' are more frequently mentioned by her SEN teacher (16) and mum (9) as they were overseeing the reintegration plan. Autism, on the other hand, is only present in parent (9) and CYP interview (4)

It almost felt like taking a step back and going to re-familiarising with the data, but I think it is part of the process of zooming in and out of data and this tool has helped exactly to do that: zoom in certain extracts that contain certain key words to then zoom out and make sense of it as a whole.



25.07.23

I learnt today that in MAXQDA I can add a 'reflexivity check' code which allows me to think about my role as a researcher on the process of data analysis. I therefore coded segments of data that were talking to me as a researcher with my social graces, in terms of how I was viewing the data in the process, and I made notes and comments about those reflections. Although I have kept a reflective diary about those comments, I have now added a reflexivity check code and have gone back to the data, particularly those segments that struck me the most. SO I have been zooming out of data sets for reflexivity checks that I can attach to data items.

Checking for consistency in coding: using MAXQDA 'smart coding' tool, I was able to check for consistency of code labels and refine codes.

When using visual tools to show code segments, I was sometimes surprised with finding an underlayer meaning behind the coded segments. For example, for 'school inclusive culture', the word cloud was this:



This figure suggests a strong narrative around girls, SEN and inclusion and makes me wonder how the perception of a 'fragile girl' might have influenced school's perception and support given.

Mind maps, started visualising initial themes and rearranging, collapsing codes.

Reflections on different initial themes:

School resources:

I wondered whether, 'school recognition of CYP's needs' is too similar to 'school staff sensitive to CYP needs' and should be collapsed into one? Went back to coded segments to check and collapsed both codes into one renamed 'school recognition and sensitive to CYP's needs'.

Also wondering whether 'school SEN strategies' supported staff knowledge on how to best support CYP and 'school recognition and sensitive to CYP's needs' should all go under 'inclusive culture' umbrella.

Should 'school ethos' be another theme separate from 'school's resources'?

Also, looking at all segment coded as 'school resources' and trying to fit them into subcodes that are more descriptive than analytic, that say more about what was going in the school.

For example, added new code 'Learning support Hub'. I reflected that having a large LSH does not necessarily mean a school is inclusive (it could actually be the opposite) although in this case, it really supported Emma to reintegrate and was key to enabling her to reengage with school in a safe space.

When looking at segments also noticing that most of the comments about school ethos, inclusive culture, pastoral side, etc came from mum and SEN teacher. Wondering also 'they had a little party in SEN', does that show a school being inclusive? Although it allowed Emma to go back to school and celebrate with others after COVID while feeling safe so maybe it is. Is being 'accepting of difference' necessarily inclusive? Is 'school supporting mother' part of school ethos or resources? I decided to move it under relationship between school and mother as I think it is more relevant to that than school resources but could be both.

