

**Square Peg & Not Fine In School  
submission of evidence to attendance consultation**

**February 2022**

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## INTRODUCTION

### Square Peg and Not Fine In School

Square Peg (Team Square Peg CIC) is a not-for-profit company that exists to campaign, lobby and effect change for all children and young people who face barriers to attendance or may be at risk of persistent absence from school. We work across policy, practice, academia, research and innovation. We are EBE led, grassroots strategic stakeholders in education attendance difficulties. The website can be found here: [www.teamsquarepeg.org](http://www.teamsquarepeg.org)

Not Fine In School (NFIS) is a social enterprise that supports the same families. It has a closed Facebook Group of 23,500+ parents, growing at a rate of approximately 800-1000 pcm. The website can be found here: [www.notfineinschool.co.uk](http://www.notfineinschool.co.uk)

### Evidence included in this report

Not Fine In School has run surveys in the past which touch on behaviour, attendance, protective characteristics and wellbeing. Not Fine In School's two major surveys ran May 2018, completed by 1,661 respondents, and March 2020, completed by 714 respondents. The full report comparing both surveys can be accessed here <https://notfineinschool.co.uk/nfis-surveys>, and is included in appendices to this report (Appendix 3).

Square Peg and NFIS ran a specific attendance consultation survey for this submission, which was live for 10 days between 11<sup>th</sup> and 21<sup>st</sup> February 2022. It sought to collate evidence on the impact of current attendance policy and practice for the families of children and young people who face barriers to attendance. 1,960 responses were submitted. Qualitative data is available upon request.

We have appended Square Peg's previous Government and Departmental submissions, along with relevant Square Peg reports shared with colleagues in Health, Social Care, research, academia, innovation and as a member of third sector organisations. In addition, pertinent reports of note from partners and organisations can be found annexed in the final section.

Throughout this report *SEND* refers to Special Educational Needs & Disabilities and *SEMH* refers to Social, Emotional & Mental Health.

*CAMH* refers to Child & Adolescent Mental Health; *MH* = mental health; *BIPOC* = bi-racial people of colour; *EAL* = English as an Additional Language.

*EBE* = Expert by Experience; *CYPFs* = children, young people and their families

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## EXECUTIVE SUMMARY

Almost all respondents, a colossal 94%, felt school adversely harmed their child or young person's MH and impacted wellbeing. Levels of need were exacerbated by an inflexible, rigid system response which refused to authorise absence arising from hidden disabilities or unrecognised challenges, in particular MH. Difficulties for these children and young people is compounded as their parent carers are blamed for complicity in the absences or fabricating induced illness or, school maintains the child is 'fine' when they are attending in person.<sup>1</sup> A disconnect emerges between school and parental opinion where often the child is left alone and isolated, struggling while the adults around them are in conflict and disagreement. A notable theme from our children and young people is they do not feel listened to or believed and are deeply distressed and additionally burdened when their parent carer advocates aren't either.

Children share their despair at not being believed<sup>2</sup>, either by one of their parents or school staff and have cited school-related factors impacting their MH and wellbeing, with 59% saying pressure at school was the no.1 factor causing negative MH; 49% citing exam pressure as no. 2 school factor.<sup>3</sup> Often our children cope for a very long time, just about making progress (or in some cases exceeding expected progress which adds invisibility), until they can cope no more falling into collapse and spiralling into crisis. Many are subsequently diagnosed with hidden disabilities, additional learning needs, chronic illness or recognised as young carers.

Children and young people from Roma, gypsy & traveller communities are particularly disadvantaged, as are those who are from ethnic minorities, are BIPOC, EAL, live in poverty, access free school meals, experience deprivation and adversity, housing insecurity etc. But there is an equally alarming number who despite having a known background of vulnerability, disadvantage, are Looked After, diagnosed SEND or have long-term ill health or have been recently bereaved etc., still find themselves subject to exclusion<sup>4</sup>, isolation, use of reasonable force, become a flight risk, truant or struggle with extended non-attendance from school<sup>5</sup>.

We know the pandemic has driven up referrals to CAMH services<sup>6</sup>, with pre-pandemic waiting lists for specialist MH assessments and support already adding delays in excess of months and years. We also know CAMH, Children & Family, specialist teaching and SEND support services were already stretched and heavily burdened prior to Covid. An assessment-heavy, criteria-led local offer narrowed due to funding cuts announcements and cost savings since 2010 leaves schools, children and families turning on each other.

It should be noted that a worrying limited view of disability prevails, with Equality entitlements and protective characteristics often ignored or overlooked. Regardless of diagnosis or labels, an intolerant, inflexible system-wide unconscious or conscious disregard towards difference, complexity, intersectionality, neurodivergence, chronic illness, early trauma, adversity and emerging SEMH needs is a recurring theme, which highlights a fragile and stressed education system. Similar themes emerge regarding local authority and joint working services with value for money, cost saving, hubris, absence of CPD, flawed beliefs and a disregard for child and family voice and their right to care and support as the precedent.<sup>7</sup>

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<sup>1</sup> Not Fine in School Survey report <https://notfineinschool.co.uk/nfis-surveys>

<sup>2</sup> MIND report 'Not Making the Grade' <https://www.mind.org.uk/media/8852/not-making-the-grade.pdf>

<sup>3</sup> Ditch the Label Annual Survey Dec 2020 <https://www.ditchthelabel.org/research-papers/the-annual-bullying-survey-2020/>

<sup>4</sup> <https://www.gov.uk/government/collections/statistics-exclusions>

<sup>5</sup> <https://www.gov.uk/government/collections/statistics-pupil-absence>

<sup>6</sup> <https://www.independent.co.uk/news/health/child-mental-health-waiting-times-b1972830.html>

<sup>7</sup> <https://cerebra.org.uk/research/institutionalising-parent-carer-blame/>

We would like to thank all parents, carers and colleagues who completed and shared this survey and support our work. We look forward to collaborating with stakeholders, partners, professionals and families in developing proposed solutions going forward.

## METHODOLOGY

This submission draws on the experiences and opinions of 1,960 parents and carers from across the UK who took part in a short online survey between 11<sup>th</sup> and 21<sup>st</sup> February, 2022.

The survey was shared across social media by Square Peg, Not Fine In School, individual parents and carers, professionals and partner organisations, primarily via Facebook and Twitter.

Data has been analysed and visualised by Ben Wainwright, Consulting Data Engineer & Analyst at Square Peg.

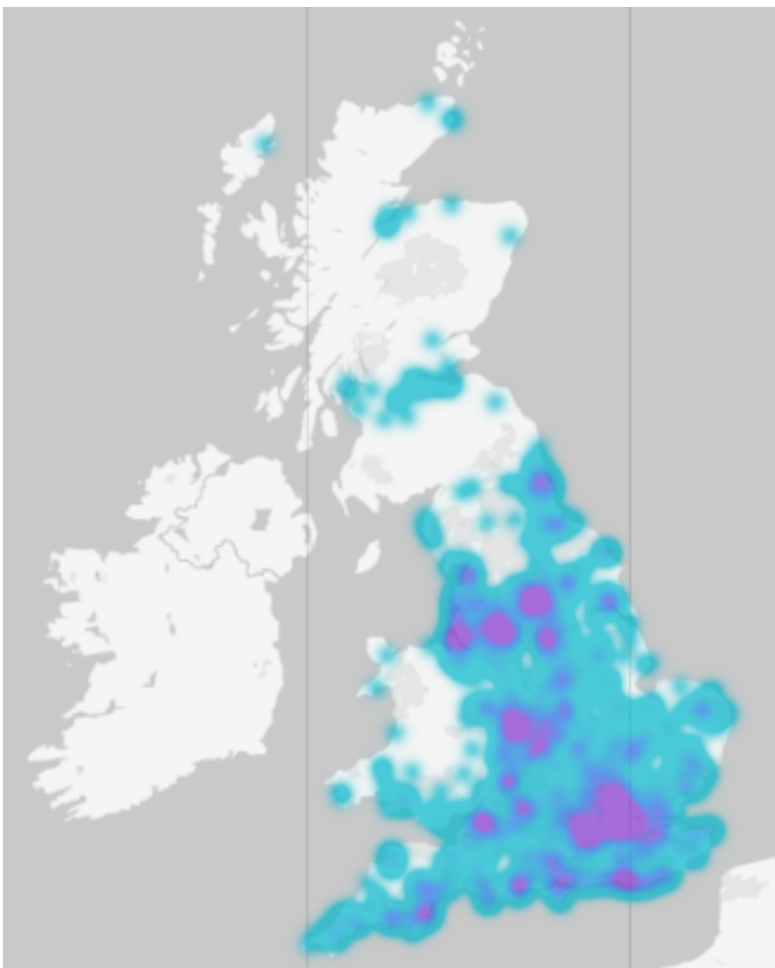


Fig 1. Heat map depicting location of respondents using first part of postcode information collected

## DEMOGRAPHICS

Out of 1,960 respondents surveyed, 1% have children in Reception, 5% have children in KS1, 26% have children in KS2 (with 7% in Year 5, 9% in Year 6). 36% have a young person in KS3 (10% of respondents' children in Year 7, 13% in Year 8 and 13% in Year 9). 26% have a young person in KS4, with the highest percentage of all year-groups (15%) in Year 10. 6% of respondents have a young person facing attendance challenges in KS5.

### Year Group of Respondents' Children

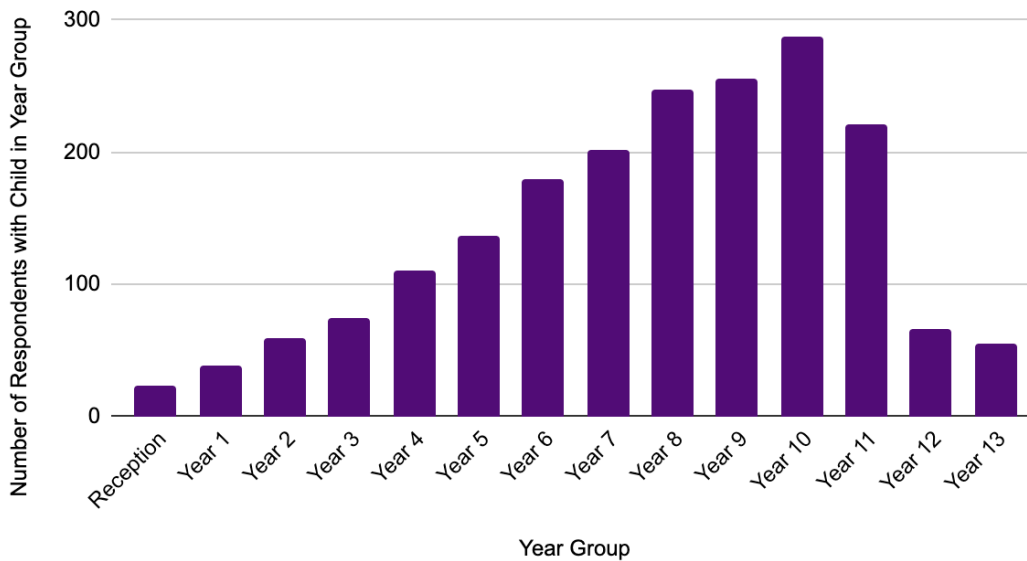


Fig 2. Respondents' children & young people by current year group

We did not capture additional socio-economic information as this can sometimes confuse or upset respondents leading them to disengage from completing the survey or raise concerns around data collection, privacy, anonymity etc. Given the short window of opportunity this consultation has, we decided against further demographic data gathering.

Many vulnerable families are extremely wary of being judged, identified or pursued as a result of their child's difficulties or being a disadvantaged household, managing adversity, unemployment, parental ill health or disability and there are understandable concerns this will be held against them or impact them in some way. Most of our families wish to be seen as individuals, surveyed from a place of equity, focussing on who they are, not what they are.

And while focussing on vulnerable groups is useful, the fallibility of data blind spots – those not identified or captured in a particular group or dataset - means collection bias is a problem. This can lead to misappropriated commissioning and policy. We don't know what we don't know and attempting to know all unknowns is an impossibility and is why human-centred, EBE led conversations are vital.

## ATTENDANCE

Q2. What has been your child's attendance during this academic year from Sept 2021?

1,960 responses

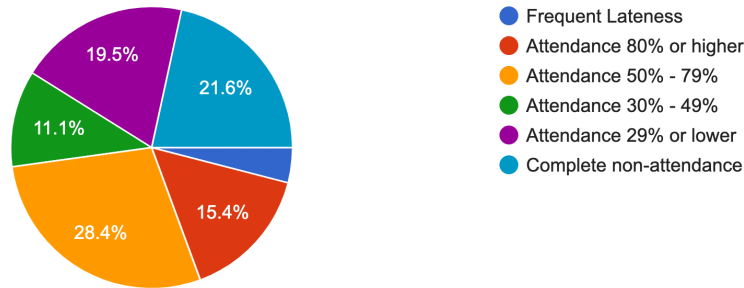


Fig 3: CYP Attendance at school since Sept 2021 (Frequent Lateness = 4%)

All parents and carers who completed the survey reported attendance difficulties, the largest proportion, (557 respondents) almost 30%, have a child or young person attending school for more than 50% of the time. 20% have a child attending 29% during term time, or less. 22% of families (423 respondents) have a child or young person completely unable to attend school currently.

### Year Group and Attendance of Respondents' Children

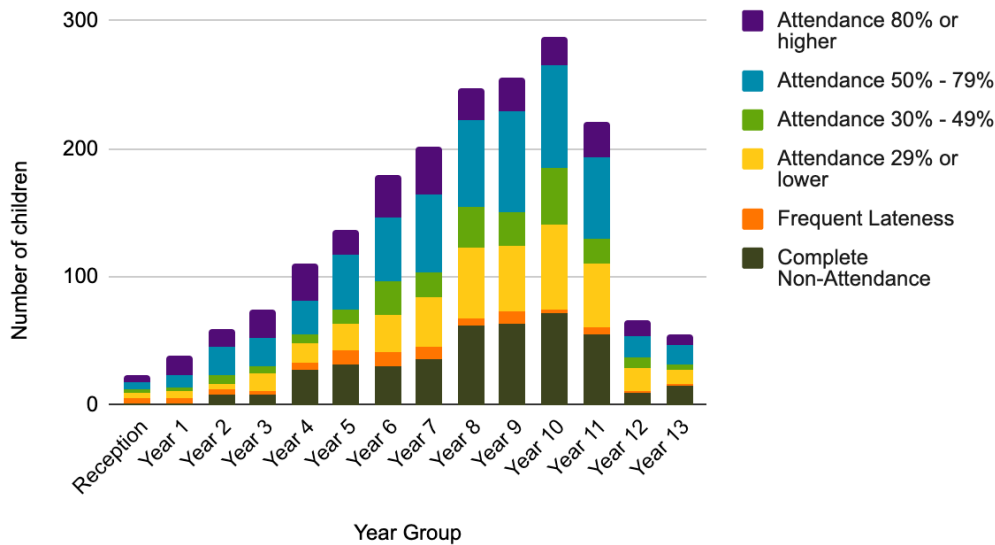


Fig 4: Attendance frequency & difficulty by year group

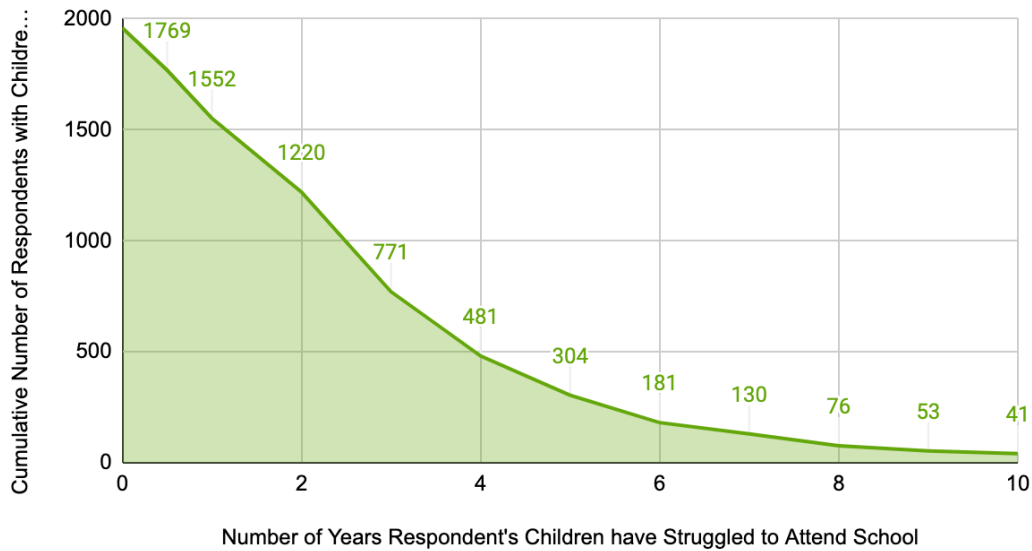
In comparison to Ks1 children, the alarming rise in frequent lateness and complete non-attendance in KS2 and Year 7 is notable. This certainly bears out qualitative data reporting around increased pressure and expectations linked to SATs, baseline testing and larger class-sizes once infant class size restrictions are lifted. And as more formal learning is introduced, mitigating positive pro-development factors such as play-based learning, outdoor learning, forest school, longer or more frequent breaktimes and creative, kinaesthetic activities mean higher numbers of children start to struggle sooner.

Not Fine In School families report disturbed sleep, eating difficulties, self-harm and higher incidence of regular daily distress, anger and anxiety in the home is now more commonly experienced around Year 3 or 4, in children as young as 6.

Fig. 4 additionally highlights a jump in complete non-attendance (or attendance at 29% or lower) for families with a young person in Years 8-11 inclusive is an additional concern. And like the jump between primary key stages, the impact of preparing for multiple GCSEs could be a driver.

Fig 5: number of respondents by number of years school attendance has been a challenge for family & child or young person

### Years Respondents' Children have Struggled to Attend School



17% of all respondents have been struggling with attendance difficulties for more than a year, 23% for longer than two years, 15% for longer than 3 years, 9% for longer than 4 years. 6% have been struggling for 5 years or more. 7% of all families have been struggling for between 6 and 9 years. And a shocking 2% of respondents have been coping with attendance challenges for 10 years or longer.



## SYSTEM RESPONSE TO ATTENDANCE

In Question 4 of our survey (Fig. 6), we asked our families how their school or local authority had responded to their child's attendance difficulties. We invited respondents to tick any or all that applied from the following list:

- Conversation / informal meeting to explore challenges
- Formal attendance letters sent to parents/carers
- Increased support in school (eg pastoral, attendance, MH Support Team, Ed. Psych, SEN Support, specialist teaching service etc)
- Increased support for medical needs (eg Individual Healthcare Plan, medical needs tuition)
- Reduced Timetable (temporary, with or without alternative provision offer)
- Moved to on site nurture / SEND hub
- Placed in isolation for low-level disruption
- Threats of fine / prosecution
- Issued a fixed penalty notice (fine)
- Referred for prosecution / am currently being taken to court
- Parenting contract, parenting order, or education supervision order
- Action taken to tackle social / peer difficulties (e.g., bullying or assault)
- Early Help / Family Support Worker
- Social Care referral (Children with Disabilities Team)
- Social Care / Safeguarding referral (Child Protection / Welfare check)
- EHCP assessment requested (by school)
- EHCP assessment requested (by parent)
- EHCP agreed and implemented by LA
- Issued Fixed Period Exclusion / Suspended
- Permanently Excluded from that school
- Managed move to another school
- Off-rolling (removed from school roll and placed in an alternative provision)
- De-registered completely (without consent and no provision)
- Parent accused of Fabricated or Induced Illness (FII)
- None of these have been initiated

Almost 50% of children and young people have been offered a reduced timetable. 42% have been offered additional support in school via the pastoral or attendance welfare team, MH support team, following input from an Education Psychologist, or specialist teaching service or were placed on SEN Support. 36% of families have received a formal attendance warning letter.

Only 9% have received additional medical needs tuition support.

Almost 30% of families have been threatened with fines or prosecution.

Almost 10% of families have been referred for a child protection / welfare check.

For 11% of families, school requested an EHC Needs Assessment; 32% families self-requested an EHCNA themselves; 19% had received an EHC Plan following assessment for their child or young person.

More than 5% of respondents' CYPs have received a fixed period exclusion (been suspended); almost 2% have been permanently excluded from school.

5% have seen their child off-rolled into AP; 4% have been deregistered without their consent and with no alternative provision in place. 8% of parents and carers have been accused of fabricating or inducing illness in their child as a result of raising concerns with the school or local authority. A shocking 4% of respondents have not received or been offered anything from this list.

Respondents were invited to share anything not on the list that they've been offered. A few respondents mentioned play therapy, a referral to CAMHS, or access to a counsellor. The majority though, shared inconsistent approaches which were removed or withheld without warning and that fears around 'setting a precedent' seemed to preclude a person-centred, child-led, manageable plan.

Many were told to force attendance 'or else'. Several spoke of secondary trauma as a result of attempting to force attendance. Several spoke of the use of restraint on their child. One parent carer said:

***"Child was distressed and suicidal due to excessive restraints by school. School refused to stop restraining. They said she needed to learn to do as she was told and restraint was the most effective way of correcting her behaviour in their opinion."***

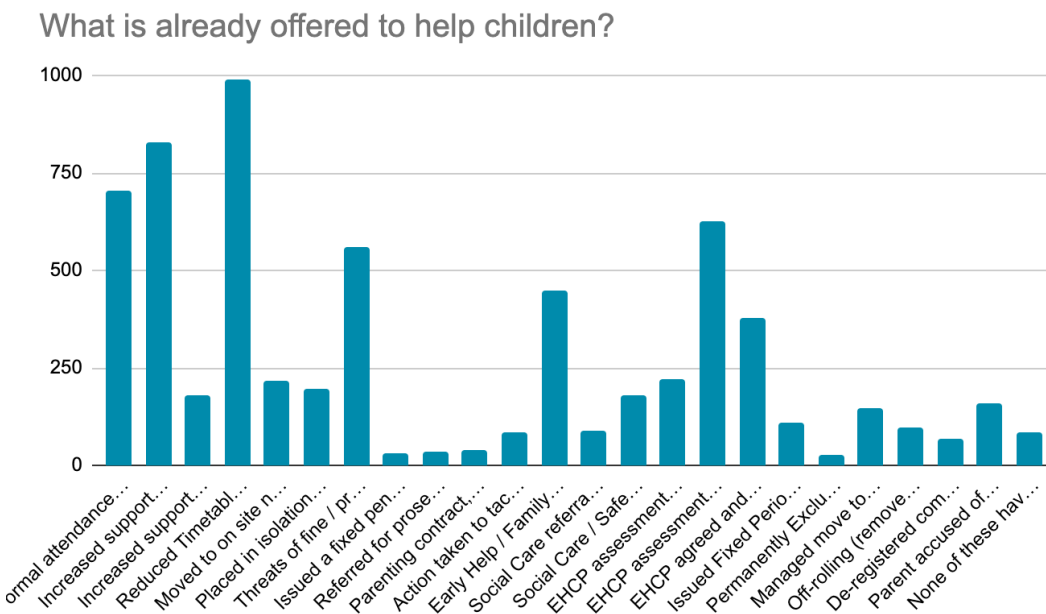
Another said:

***"Only when threats of off rolling and prosecutions still didn't make her well enough to attend school, they suggested a part time timetable by then it was too late, she had lost faith and trust in them."***

This respondent shared: ***"Bounced for 7 years between Child protection to CIN and Early Help...back and forth. Ended up going from a selective grammar school straight to a residential SEN school at 16...but the damage had been done by then. She is destroyed."***

Several shared they'd followed professional advice, but it had left their child traumatised and the family had been obliged to deregister: ***"Graded exposure - go to school every day and stand near the gate. Each time try to stay longer and get closer to school. It made my son very unwell, and we deregistered."***

Fig 6: how has the school or local authority responded to your child's attendance difficulties or extended absence from school

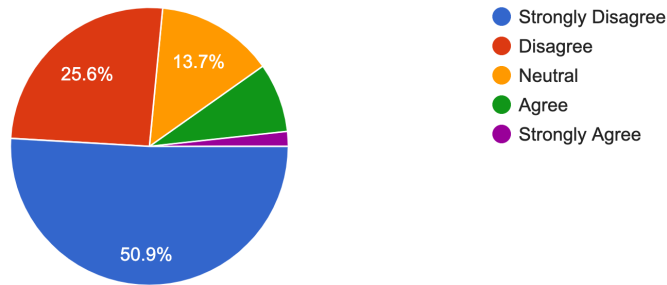


A single example of good practice leapt out:

***“Completely child led approach, allowing child to make all decisions regarding what they are capable of. Access to pastoral care TA and SENCO at any time. Adapted CBT in school. Art therapy with pastoral care TA. Parent allowed to sit in corridor during periods of attendance as child is unable to leave parent. Work sent home for child to complete with parent when not in class.”***

Fig 7: Did the school's response increase my child's attendance at school? (8% agree, 2% strongly agree)

Q7. The school's response helped my child to increase their school attendance.  
1,960 responses



77% of respondents disagreed or strongly disagreed that the school's response helped improve their child's attendance (Fig. 7).

### School Actions that don't help - Attendance

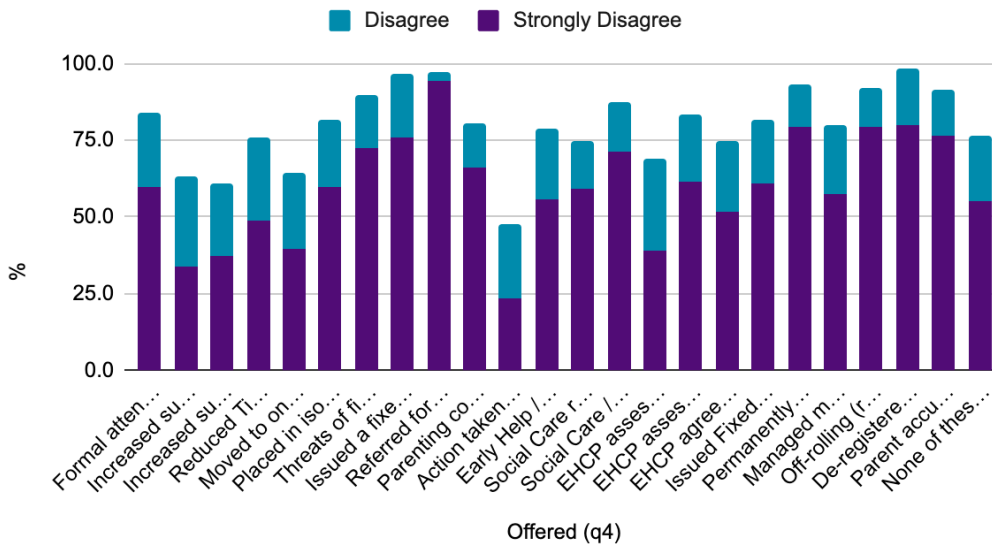


Fig 8: Of options listed in Q4, what percentage of respondents disagreed or strongly disagreed regarding schools' input improved attendance?

Q9. The Local Authority response helped my child to increase their school attendance.  
1,960 responses

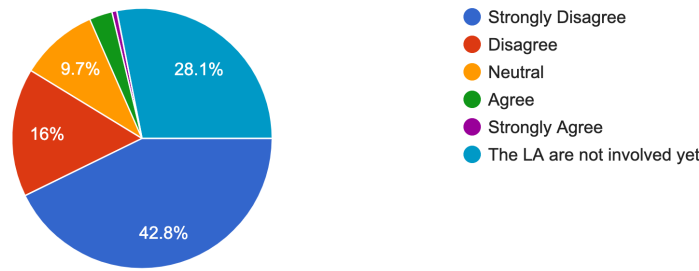


Fig 9: Did the Local Authority's response increase my child's attendance at school? (3% agree, 0.6% strongly agree)

28% of respondents who completed the survey stated the LA were not yet involved (Fig. 9). Removing those respondents without Local Authority involvement, 81% of remaining respondents for whom the LA is involved in their child's difficulties around attendance either strongly disagreed or disagreed the LA's actions to the child's absence from school helped improve the child or young person's ability to attend school.

### LA Actions that don't help - Attendance

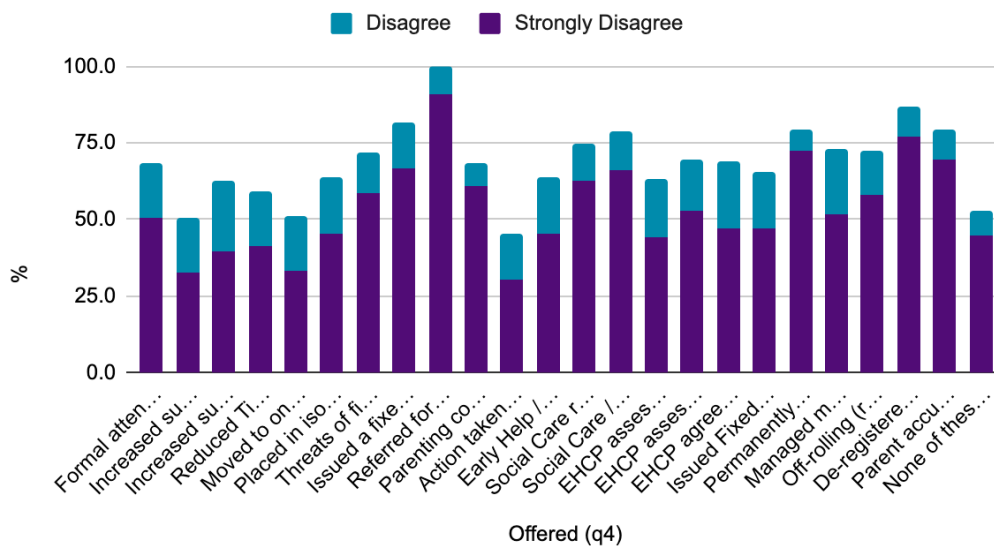


Fig 10: Of options listed in Q4, what percentage of respondents disagreed or strongly disagreed regarding LA's input?

We asked our respondents whether LAs and schools setting clear expectations around attendance was helpful and whether it improved their child's MH, wellbeing and attendance. 25% reported clear boundaries were important. We know from previous research that having a clear pathway which schools and Local Authorities must follow helps families to access appropriate and timely support, such as S.19 duties, placement on SEN Support, access to specialist support services or an assessment for EHC Plan. It can also signal a shift from punitive approaches, threats and coercion to a more person-centred approach which includes collaborative working placing the child and family's wellbeing at the centre of discussions.

### Are clear expectations effective?

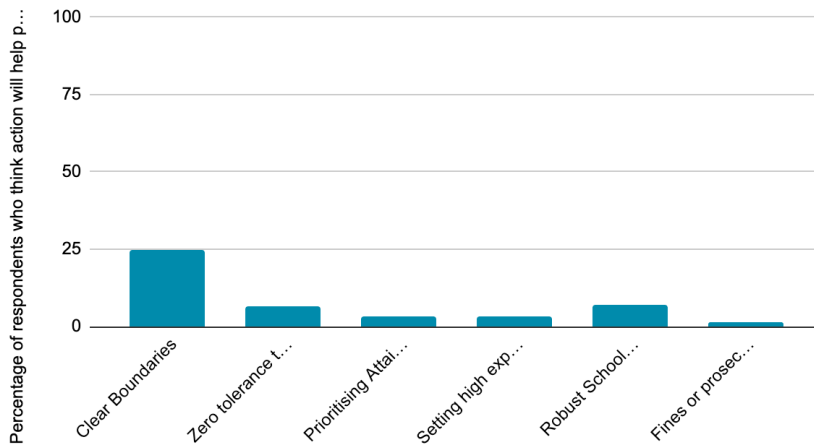


Fig 11: Are clear expectations on LAs and schools regarding attendance effective?

But only 6.5% felt zero tolerance towards behaviour prevented attendance difficulties and only 3% felt setting high expectations or prioritising attainment prevented non-attendance from school. Just 7% of respondents felt a school with robust policies prevented non-attendance and just 1% of respondents felt the punitive measures of fines and prosecutions prevented non-attendance from school.

A recurring theme we see again and again is whilst it may seem necessary to set expectations and insist on putting clear policies in place, what happens when either the systems (schools and Local Authorities) do not follow policies or understand the values underpinning expectations – welfare of the child, protecting mental health and wellbeing, remaining person-centred, individualised, rights respecting, Equality focussed, champions for those who are (or may be) disadvantaged or vulnerable?

And, how do the systems respond when children, young people or their families are unable to meet those expectations, what then? Too often, relationships, pragmatism, flexibility, human-centred, social-model thinking, kindness and care goes out of the window as schools and LAs rigidly quote policy, which isn't necessarily in line with nor upholds statutory duty, guidance or legislation. These are the gaps families, and their children fall through.

We asked respondents whether they were aware of their school or academy's attendance policy. A reassuring 1,148 confirmed they were. Just 172, approx. 9% were unaware; 640 were unsure (Fig. 12).

#### Q12. Does your school or academy have an attendance policy that you have been made aware of?

1,960 responses

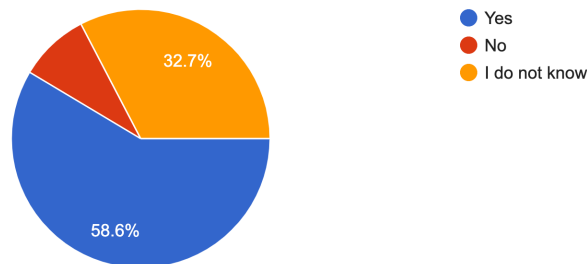


Fig 12: Are you aware of your school or academy's attendance policy? (8.8% No)

However, families' awareness and understanding of local policy or local criteria around attendance and whether it follows DfE guidance, statutory duty or legislation, families are far less certain, with most respondents surveyed being unsure of school, academy or Local Authority compliance or divergence. This highlights not only the postcode lottery of approaches, differing culture and practice but also confusion in the system (Fig. 13 & 14).

Q13. Does your school or academy apply local policies / set criteria (in relation to attendance) that follow and comply with DfE statutory guidance or legislation?

1,960 responses

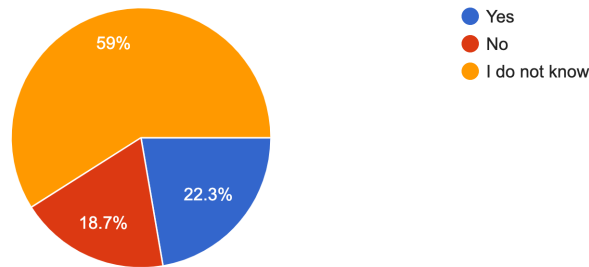


Fig 13: Are you aware of your school or academy's local policies around attendance and whether they comply with Government guidance and legislation?

Q14. Does your Local Authority apply local policies / set criteria (in relation to attendance) that follow and comply with DfE statutory guidance or legislation?

1,960 responses

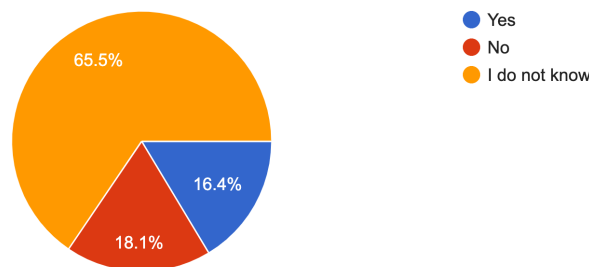


Fig 14: Are you aware of your LA's local policies around attendance and whether they comply with Government guidance and legislation?

It comes as no surprise that a mere 1% of respondents felt the use of fines and prosecutions prevented non-attendance from school (Fig. 11). We would request research is shared which evidences these measures are effective long term, both as a deterrent and as a solution to improving outcomes for all families and their children. Our research shows that systems' response demonstrates a clear abuse of power in the use of threatening fines and prosecution in order to 'inform and nudge' behaviour and far too often families are fast-tracked and issued with a fine or court proceedings implemented with vulnerable families receiving a criminal judgement. We have also seen Judges demonstrate scant understanding of hidden disabilities, impact of mental health and caring responsibilities or chronic illness in their ruling against the family.

A 2019 research paper undertaken by Rona Epstein, Honorary Research Fellow at Coventry Law School, et al.<sup>8</sup> found that mothers were disproportionately fined and prosecuted, with formal warnings and correspondence usually being issued to women regardless of whether there was a father present and visible in the child or young person's life.

Ms. Epstein observed:

"The law is both cruel and ineffective. This is seen most clearly in the case of Sylvia (Lancashire), a single parent on benefits. She is a professional woman with a Masters degree in Social Work who cannot work because of her ill-health. She has a 13-year-old son who has ASD, a number of learning difficulties and anxiety. She had one fine, which she paid.

When the authorities issued her with a second fine for non-attendance she refused to pay and it was taken to court: ***'I represented myself and gave full details of my son and the reasons for his school refusal and the court fully appreciated my mitigating circumstances and said they agreed that it must be very hard raising a child like my son. 54 They found me guilty (because they had to) but gave me an absolute discharge with no court fees! I deregistered my son the day after the new term started because I was threatened again by the attendance officer saying that the school could not accommodate my son's part-time timetable and them not knowing when he was going to turn up and that I should find a different school.'***

Ten parents replied that they had paid fines and it had been difficult to do so.

As with almost all the parents in this study they are coping with children with serious illness and disability. Janet (N. Hertfordshire) mother of a 15-year-old boy, who has a number of serious health issues: ***'I had to borrow the money to pay the fine, £60 each time.'*** Beatrice (Sutton) is a single parent whose two sons both have mental health issues. Her 14-year-old son has a: Mental health diagnosis of anxiety OCD and depression. She was fined twice, paid £60 each time: ***'it had an impact on my low income.'***

Beth (Coventry City Council) has a 15-year-old son who is very anxious: ***'He said he is frightened that something might happen to the family when he is at school. Also bullying, he keeps saying he is scared. He can sometimes go in sometimes he can't'***. They were fined £500 each: ***'We did pay the fine and yes it was difficult to pay it. Also, we each had to do 25 days probation.'***

Claudia (Rotherham) was prosecuted. She is a single parent who suffers from depression anxiety, diabetes and a heart condition. ***'Everything I had discussed with school and EWO thinking it was confidential was used as evidence against me. I wasn't ever cautioned. I pleaded guilty because I had no support or knowledge what I was going into. It severely damaged my mental health to the extent I couldn't get out of bed for at least a week afterwards.'***

It is essential that vulnerable CYPFs are not further disadvantaged, nor disproportionately affected by the use of punitive measures, and if we back-track upstream to the registrations system, we are able to see a system which radically requires improvement laced, as it is currently, with questionable cultural practice, subjective and coercive judgements and inadequate data collection. Too many families are told absence is authorised only to find out later it isn't and unfortunately some schools appear to weaponise unauthorised absences to coerce families under the mistaken belief it will make them magically change their circumstances and remove the barriers to attendance.

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<sup>8</sup> Prosecuting Parents, Coventry Law School <https://covrj.uk/prosecuting-parents/>

## MENTAL HEALTH

The link between declining mental health and low attendance has been well evidenced<sup>9</sup>. Square Peg has previously submitted evidence to the CAMHS MH Inquiry.<sup>10</sup> Our research and contact with families sharing their child's disabling anxiety, distress and overwhelm around school, peers, staff, expectations, transitions, environment, testing etc. is extensively documented.

We asked respondents what the impact of school had been on their child's mental health and wellbeing. 94% 1,831 surveyed felt school had been negative or very negative on their child's mental health and wellbeing.

### Q1. What has been the impact of school on the mental health and wellbeing of your child?

1,960 responses

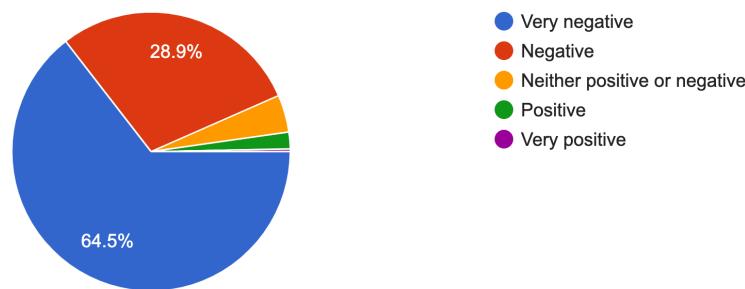


Fig 15: Impact of school on child's mental health & wellbeing

Respondents reported which factors about school they felt contributed to their child's adverse SEMH and increased needs (Fig. 16).

1,749 respondents felt the school environment played a part (for example noise, size of premises, changing rooms, toilets, dining hall, outdoor spaces), with 1,594 and 555 respondents reporting existing MH or physical health difficulties (respectively) contribute to higher MH needs or a decline in wellbeing in their child or young person. 1,473 respondents felt their child's SEND diagnosis meant school was a challenge that ultimately ebbed at their child's mental health.

1,191 respondents felt peer and social challenges, including bullying or assault contributed to negative MH; 1,168 families felt school lacked relevance for their child (curriculum vs. interests and passions) and therefore the environment and attending contributed to worsening mental health and wellbeing.

1,179 families reported behaviour policies adversely harmed their child or young person's MH and wellbeing with 918 stating uniform policy contributed to declining MH for their child or young person.

Over 1,100 respondents shared additional qualitative information and further context on the school or system-related drivers that have contributed to their child or young person's declining MH. A sample is included below:

***"School's insistence on parent blaming rather than working with parent & relevant professionals to identify and meet needs."***

<sup>9</sup> See Annex documents 1-4 MIND; Prof. Tamsin Ford et al; NHS Digital 2021

<sup>10</sup> See Appendix document 7



***“Harsh treatment, children being shouted at in front of others, poor classroom behaviour management, lack of knowledge of SEN & how to help children with SEN.”***

***“Teachers lack of understanding & training on special needs children - not trained in how to deal with special needs children, how to communicate with them etc & children being expected to just be the same one size fits all.”***

***“When a parent has to fight for so long to help their child have a chance in life it completely burns out the parent and strains relationships at home.”***

***“School never following through with any promises of support.”***

***“Failure to validate child, refusal to work in partnership with child and allow child and parent to have an input in child’s needs and support acknowledge and support that every child is different and has different needs the one glove fits all approach does not work and finally schools especially SENCO need to be fully qualified and need an outside agency to oversee and make sure the child is being put first and their care and health is centre for all support and interactions.”***

***“The assistance the children need to even try to manage in mainstream only highlight their differences from their peer group and distress them further.”***

***“Absolutely, our education system is outdated, it is not suitable for every child, it needs to change and be flexible and adaptable for ALL. It is a very discriminatory system.”***

***“Refusal by LA to assess and school to acknowledge special educational needs.”***

***“Level of conformity into a system that says we all have to be the same, follow the same rules etc. the system discriminates against children with additional needs and/or disabilities and destroys the independent thinkers we need in the modern world. The whole system needs a complete overhaul. It is damaging most children, but the SEN children are the canaries in the mine who struggle so much quicker and sometimes more obviously than neurotypical children.”***

***“Rigidity of whole culture and environment. Not believing the child or interpreting their claims of feeling unwell as just trying to avoid learning. Just trying to get them back in school when it’s clearly unsuitable for them. Only suggesting the option that we take child out of school if they can’t cope. Saying that there is only alternative provision for children with poor behaviour not those that are struggling mentally with mainstream school, schools that are just far too big to treat children as individuals. They are just herds of year groups.”***

***“The emphasis on attendance not actually looking into the individual needs of a child. The ability for schools to help ‘if your child is at school’. The fact that if a child does not attend no strategies are in place to support learning being missed ‘as this encourages the child to stay at home’.”***

***“No support from community services (i.e. CAMHS) to support those experiencing MH difficulties, so problems escalate, impacting on school attendance. Perception by CAMHS that “it’s just their autism”, ignoring the fact that mental health conditions can co-exist and left unsupported. We wouldn’t dent a cancer patient anxiety or depression support because they had cancer and were bound to be anxious/depressed about it. So why are autistic kids denied support? Disability discrimination meaning our children’s mental health spirals to the point of crisis, even then there us little if any CAMHS support. Also LA being process driven, not listening to parents/school saying needs can’t be met there, or looking at individual child’s needs. The LA ignored school and us in Jan 2021 when request for specialist setting made on issuing of EHCP, another 2 terms of needs not able to be met in mainstream has caused the school avoidance now. And protracted process (delays & denials, policies of plan do review cycles) in getting EHCP also contributed to current avoidance, in subjecting him to an inappropriate school environment for too long, which has caused trauma to the point he can no longer attend and is unable to consider another school as so traumatised. There needs to be recognition of school trauma and support in place to help with it when it arises. There is nothing available to help our son and many others like him whose school trauma is preventing attendance and having huge detrimental effects on their mental health.”***

***“Homophobia transphobia trauma”***

***“Schools trying to ‘catch up’ and not looking at the needs of the child and changing the curriculum and expectations in light of Covid disruptions to their education.”***

***“Assumption that all children are motivated by the same “rewards” and that punishments work. A change of head last year has improved things massively but the damage was done.”***

***“Poorly trained, judgmental staff.”***

***“Size of schools and classes - no personalisation, teachers just don’t know the children, too easy for the quiet, anxious, well behaved kids to be overlooked.”***

***“Listen to, believe and trust parents.”***

***“Red card system.”***

***“My daughter was sexually harassed by another child. It stopped when I confronted a male member of staff about the message this was giving to the boy and what would happen if he perused a female staff member in this way and the offending child was removed from the school.”***

***“My son has medical conditions that require hospital appointments and stays. He is never going to get 100% attendance. I have received attendance letters after he has had time in hospital having an operation and then recovering at home.”***

***“Physical restraint of child. Not listening to parents’ early concerns.”***

***“Lack of belief in children, lack of autonomy and trust in their curiosity and natural creative instincts.”***

***“Being a previously LAC or adopted child - previous trauma.”***

***“Response towards vulnerable children / families during the pandemic.”***

***“School not accepting a child’s diagnoses and not following EHCP.”***

***“How school is used to control kids. The curriculum needs to be more flexible, kids given more autonomy and pointless rules ditched.”***

***“A complete lack of timely coordinated joined up assessment and support. Everything takes far too long. The child’s health and well-being are not anyone’s priority. Systems are not flexible or responsive to a child’s needs.”***

***“Recent bereavement.”***

It is a difficult and challenging truth to face when reading these experiences and understanding institutional and systemic adverse impact on our children and young people’s mental health, wellbeing, happiness and engagement with school but we cannot and should not ignore it. Persistent absence was exponentially rising pre-pandemic with a 20% increase on the 2018/2019 figures in the Autumn term of 2019.<sup>11</sup> Pre-pandemic demand for CAMH services had grown untenable waiting lists which buckled under Covid. Our children and young people regularly share the drivers and challenges and undoubtedly, school is a primary factor in terms of challenge and stress, which in turn fuels negative mental health, disengagement, non-attendance, exclusion, behaviour, low attainment, diminished wellbeing, life satisfaction and health inequalities.

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<sup>11</sup> See page 4, footnote 5

### Factors that negatively affect mental health

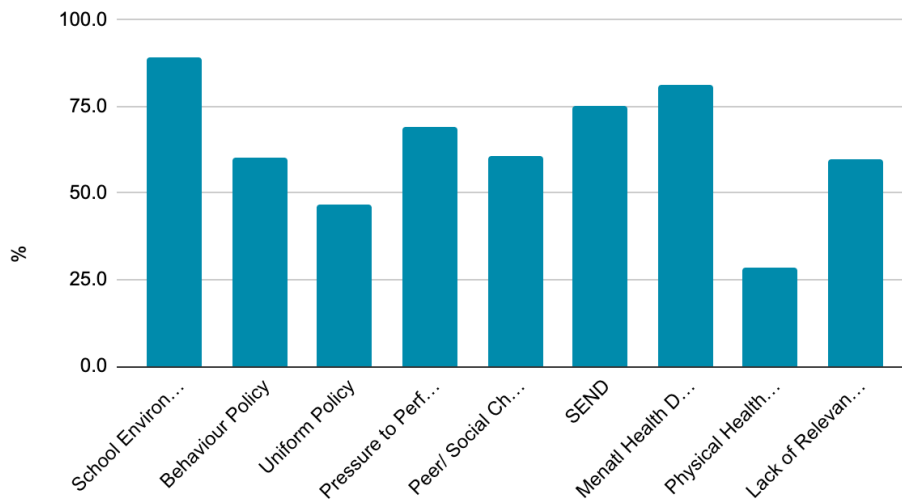


Fig 16: Reported factors that harm CYPs mental health & wellbeing connected to school

As with attendance, respondents felt school and local authority responses negatively impacted wellbeing and exacerbated poor MH.

#### Q6. The school's response helped my child to experience improved mental health and wellbeing.

1,960 responses

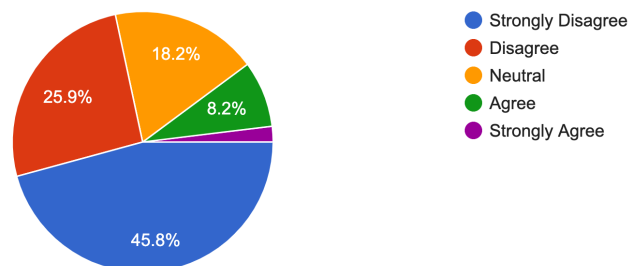


Fig 17: School's response to my child's attendance difficulties improved their MH & wellbeing (2% strongly agree)

72% of respondents either disagreed or strongly disagreed that school's response to low or non-attendance brought an improvement to their child or young person's MH & wellbeing (Fig. 17).

Returning to Question 4 (page 9), how did school and / or the Local Authority respond to your child's difficulties with school attendance, we can see how those measures have directly impacted the child or young person's MH and wellbeing, with high numbers of respondents reporting such action did not improve MH for the CYP. Highest percentages in terms of adverse impact were around the use of or threat of punitive measures – fines and prosecutions. It should be no surprise to see that a child who is permanently excluded or issued with a fixed period exclusion (suspended from attending school) or off-rolled or non-electively deregistered has a negative and harmful impact on their MH & wellbeing (Fig. 18).

## School Actions that don't help - Mental Health

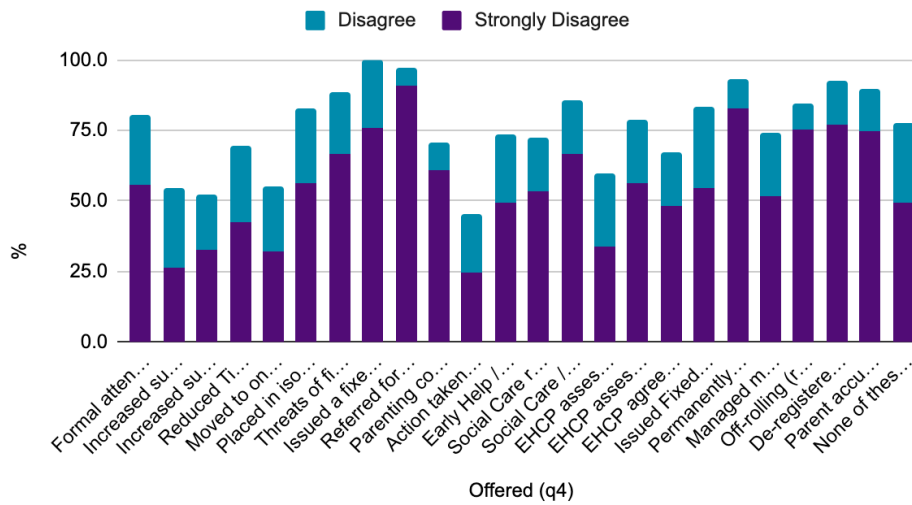


Fig 18: Of options listed in Q4, what percentage of respondents disagreed or strongly disagreed regarding schools' input improving CYP's mental health & wellbeing?

## SOLUTIONS

What, if anything, could help these CYPs? What, in their experience or opinion, could prevent persistent absence and attendance difficulties, what might mitigate mental health adversity and protect wellbeing?

In Question 11, we asked respondents to share their views on this by selecting any of the following options:

- Reasonable adjustments
- Flexibility (by the school)
- Accommodations / creative thinking
- Staff training
- Whole school approaches
- Unconditional positive regard
- Inclusion (SEN / disability / ill health)
- Restorative practice
- Giving students a voice
- Person-centred approaches
- Effective anti-bullying culture
- Pastoral & early mental health support
- Trauma-informed practice
- Proactive SENCO
- Kindness
- Prioritising wellbeing & happiness
- Parity of esteem for mental health difficulties
- Clear boundaries

- Zero tolerance towards behaviour
- Prioritising attainment
- Setting high expectations
- Robust school policies
- Fines or prosecutions for non-attendance (threatened or issued)
- Information around the importance of school attendance for safeguarding and attainment
- Information on parental duty to ensure attendance
- Working together (family, child, school, services)
- Trusting parental opinion / experience
- Referral to a parenting course
- A home visit
- Physically forcing attendance

### What should be offered to help children?

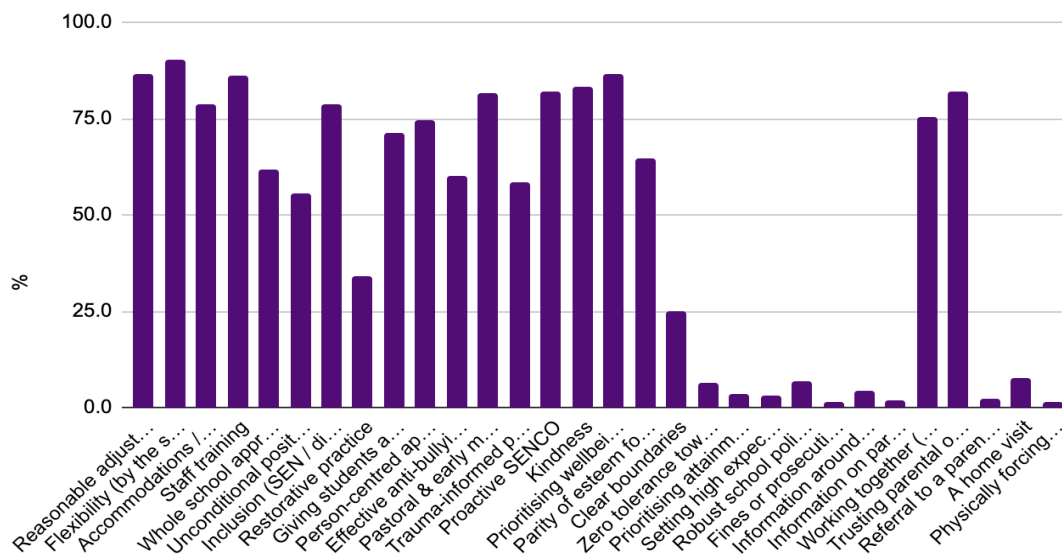


Fig 19: Q.11 in your opinion, what factors help prevent attendance difficulties? (tick all that apply)

Respondents' top 5 answers were:

- flexibility** (90%)
- reasonable adjustments** (87%)
- prioritising wellbeing and happiness** (86%)
- staff training** (86%)
- kindness** (83%)

Special mention must also go to the next 5 top answers, which also scored exceptionally highly and tied in popularity:

- pastoral & MH support** (82%)
- proactive SENCO** (82%)
- trusting parental opinion / experience** (82%)

**accommodations / creative thinking** (79%)  
**inclusion for SEN, disability, ill health** (79%).

The ten answers that received the least number of votes were:

**a home visit** (8%)

**robust school policies** (7%)

**zero tolerance on behaviour** (7%)

**information around the importance of school attendance for safeguarding and attainment** (4%)

**prioritising attainment** (4%)

**setting high expectations** (3%)

**information on parental duty to ensure attendance** (2%)

**referral to a parenting course** (2%)

**fines or prosecutions** (1%)

**physically forcing attendance** (1%)

Our research together with the collective lived experience of Square Peg and Not Fine In School members certainly bears these findings out, with a consistent theme around system responses and the culture, behaviour, policy and practice within those systems increasing and exacerbating low attendance in addition to placing barriers to access education.

As touched on throughout this document and further illustrated in the supported documents attached, the inescapable fact is that systemic and institutional policy and practice, combined with insufficient funding, a lack of capacity, resource, agile support networks and an ill-judged preoccupation with the wrong priorities and standards all too often drives up individual needs, vulnerability and increases disadvantage.

Respondents to our survey and Square Peg / Not Fine In School's previous research repeatedly calls for the same solutions. Most involve a shift in priorities, a change in culture, behaviour and practice from within the systems children, young people and their families engage in. Many request a change in values, looking towards rights respecting, inclusive, kind, compassionate behaviour modelling. Families are experiencing and unprecedented load currently, with Covid magnifying that burden and children and young people acutely aware of the concerns adults have about their futures and outcomes. We all need to work together respectfully and courageously, with curiosity and open-mindedness to help take on the challenges our CYPFs face.

## RECOMMENDATIONS

Square Peg and Not Fine In School have developed and shared with the previous Ministerial education team draft proposals which we recommend as initial start points for further consideration and development.

**Attendance coding + triage plan (Appendix 2)** harnessing a specialist Key Worker to work alongside and support the family and school.

Note: look to NHSE / CDC national Key Worker service (with particular regard to the Arden service based in Warwickshire) for an excellent example of an MDT rooted in ethical practice, equality focussed, CYP-centred principles delivering extraordinary outcomes - avoiding custodial sentences, Tier 4 admissions, preventing suicide and re-engaging extremely vulnerable CYPs with education, training or employment. This should not be a coercive or threatening service solely focussed on attendance for attendance's sake. This is a highly skilled local offer service for schools and vulnerable families. Effective joint-working partners and integrated support services such as Virtual Heads and Children with Disabilities teams are recommended.

**MH Absence Code** currently there is no code tracking absence for mental ill health or children and young people experiencing early negative wellbeing decline. The establishment of a MH absence code will ensure parity of esteem for mental health, it will give schools agency to authorise absence arising from mental ill health. It will act as a flag for schools to respond compassionately and can initiate early pastoral and welfare support.

**Attachment focussed schools / Relational practice** embedding effective practice around attachment awareness and the importance of secure relational foundations in the classroom will help build capacity, resilience, connection and belonging on both a micro and macro level. Prioritising relationships as the solid foundational bedrock in schools is essential. In doing so, CYPs are more likely to share their views, challenges, aspirations and frustrations which will help with pastoral, safeguarding, positive wellbeing and give space to detect mental health difficulties.

Note: programmes available via organisations such as The Solihull Approach (Heart of England NHS), Anna Freud Centre, TouchBase etc.

**Trauma-informed schools (TAC & Clinical Supervision)** there has never been a more pressing call to implement a national trauma-informed schools framework than in the vestiges of a pandemic. Trauma-informed practice is an integrated, clinically supported approach which allows schools to compassionately focus on their most vulnerable and complex high needs CYPs and also benefits every child, team member and extended workforce. Rooted in child developmental neuroscience and the science of early adversity and toxic stress, TI schools work implement responsive and agile practice building capacity, connection, re-engagement and stronger school communities.

Note: programmes available via organisations such as Anna Freud Trauma Council / Anna Freud Reflective Practice offer; Trauma Informed Education (DDP / TheraPlay / YellowKite); Trauma Informed Schools; Dr. Karen Triesman (Trauma Informed Organisations).

**Mentally healthy schools** – prioritising wellbeing and MH support in schools. Mentally healthy CYPs and school workforce is essential. By focussing on happiness, emotions, wellbeing we are helping to support healthy brain development in addition to being agile and proactive in our response to emerging mental health challenges.

Note: see offers from orgs such as Anna Freud MHSTs; Well Schools; States of Mind.





**Ensuring safeguarding is reviewed** and extended particularly around the use of restraint, threats, coercion. Link in with Prof. Luke Clements work on Institutionalising Parent Blame / Working Together guidance. Also review use of reasonable force and impact on attendance and mental health.

**Ensuring SEND is integrated** in all training, policy, practice, culture to include equanimity and equity for all. Look to whole-school approaches which include foundational principles of good practice around hidden disability, mental health and early / complex / relational trauma / FASD, neurodivergence, physical health / chronic illness.

**Ensuring integration & accessibility with AP & hospital schools**, stop the revolving door of time-limited access to appropriate, suitable or accessible provision for a highly vulnerable child or young person.

**Ensuring all work is integrated and joined** up e.g. Social Care Review, SEND Review, Schools white paper etc.

**Accountability in the system**, adequate and ring-fenced long-term funding.

## CONSULTATION QUESTIONS CRIB SHEET

*Requiring schools to have an attendance policy and have regard to statutory guidance on the expectations of schools, academy trusts and governing bodies of maintained schools on attendance management and improvement.*

Questions on proposal 1:

1. Do you agree that all schools should be required to publish an attendance policy?  
Somewhat agree
2. Are the proposed principles to be covered in school policies (outlined on page 8) sufficient to improve the consistency of attendance support that pupils and parents receive?  
Unsure
3. Do you agree that minimum attendance management expectations should be set for academy trusts and governing bodies of maintained schools?  
Somewhat agree
4. Are the proposed expectations for academy trusts and governing bodies of maintained schools (outlined on pages 9 and 10) sufficient to improve the consistency of attendance support and challenge schools receive?  
Unsure

**NB See pages 9-25**

*Introducing guidance on the expectations of local authority attendance services.*

Questions on proposal 2:

5. Do you agree that a minimum set of components for LA attendance services should be set?  
Somewhat agree
6. Are the proposed components for LA attendance services (outlined on pages 13 and 14) sufficient to improve the consistency of attendance support which pupils, parents and schools receive?  
Unsure

**NB See pages 9-25**

*A clearer more consistent national framework for the use of attendance legal intervention, including a new regulatory framework for issuing fixed penalty notices for absence.*

Questions on proposal 3:

7. Do you agree that a national framework for the use of attendance legal intervention, including a new regulatory framework for issuing fixed penalty notices for absence should be set?  
Strongly disagree
8. Are the proposed areas for inclusion in the new regulatory framework for fixed penalty notices (outlined on page 18) sufficient to improve the consistency of them being issued?  
Unsure

**NB See pages 9-25**

*Bringing the rules for granting leaves of absence in academies in line with other state funded schools.*

Questions on proposal 4:

9. Do you agree there should be consistency in the rules around granting leaves of absence across all state funded schools?  
Strongly agree

**NB See pages 9-25**

*Public Sector Equality Duty*

Questions on the equalities impact:

10. What do you consider to be the equalities impacts of the proposals on protected characteristics (mentioned above)?  
Significant and considerable risks, particularly with regard to use of punitive measures

**NB See pages 9-25**

## APPENDICES

1. OFSTED response *April 2019*
2. Letter to Minister N Gibb *August 2019*
  - a. Proposed triage plan enc. with NG letter *August 2019*
3. Parent Survey Report *March 2020*
4. Covid Impact on Schools Reopening report *April 2020*
  - a. Covid Impact on Schools Reopening summary *April 2020*
5. Education Select Committee evidence *September 2020*
  - a. Education Select Committee evidence published *September 2020*
6. Special Education Consortium Autumn Survey report *Sept-Dec 2020*
7. Children & Young People's MH Inquiry evidence *February 2021*
8. Behaviour Consultation submission *August 2021*
  - a. Behaviour Consultation Executive Summary *August 2021*
9. Care Review submission *August 2021*
10. Education Policy Institute briefing document requested for David Laws *September 2021*

## ANNEX

1. MIND 'Not Making The Grade'
2. 'Association of school absence & exclusion with recorded ND disorders, MH or self-harm', Prof. Tamsin Ford et al.
3. Lancet full publication 'Association of school absence & exclusion with recorded ND disorders, MH or self-harm', Prof. Tamsin Ford et al.
4. NHS Digital September 2021 'MH in Children & Young People'
5. 'Prosecuting Parents', Rona Epstein