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Research paper

School refusal behaviour: Are children and adolescents with autism spectrum disorder at a higher risk?



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ABSTRACT

School refusal behaviour in students with autism spectrum disorder (ASD) is poorly studied despite being considered a serious problem. This study assessed the frequency, duration, and expression of school refusal behaviour in students with ASD, aged 9–16 years, without intellectual disability. Further, the associations between school refusal behaviour and socio-demographic factors were explored. Teachers and parents assessed this behaviour over 20 days in a cross-sectional study of 216 students, including 78 students with ASD and 138 typically developing (TD) students. School refusal behaviour was significantly higher in students with ASD as compared to TD students. Significant associations were found between school refusal behaviour and illness of other family members. The study concludes that school refusal behaviour is pervasive in students with ASD.

1. Introduction

School refusal behaviour is defined as child-motivated refusal to attend school and/or difficulties remaining in class for an entire day, that manifests in students aged 5–17 years (Kearney & Silverman, 1999; Kearney, 2008). This definition refers to an overarching term that covers behaviour associated with (1) students who want to go to school but stay home out of fear or anxiety, often described as school phobia or school refusal, and (2) students who skip school because of defiant behaviour or lack of interest in school, also referred to as truancy (Kearney & Albano, 2004; Kearney, 2008). The duration of school refusal needs to be considered when assessing the severity of the behaviour. Kearney and Silverman (1996) proposed differentiation between varying durations, where ‘self-corrective’ indicates that the behaviour occurs occasionally in a period of less than 2 weeks, ‘acute’ indicates that the period of such behaviour lasts from 2 to 52 weeks, and ‘chronic’ indicates this behaviour occurs in a period lasting for 53 weeks or more. However, the severity of the problem may be independent of the duration, and its mode of expression needs to be considered as well. School refusal behaviour can have several expressions, including verbal or physical refusal (such as pleading, clinging, crying, or

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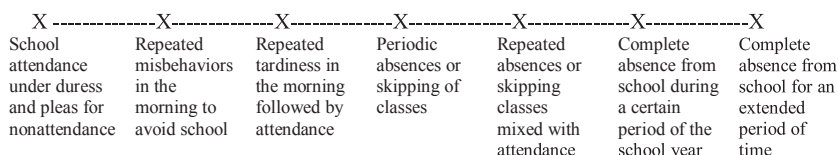


Fig. 1. Continuum of school refusal behavior in youths (Kearney, 2006).

noncompliance), verbal and physical aggression, distress, tardiness, and partial or complete absenteeism. The condition may be understood to occur along a continuum, with different expressions and episodes which might change on a daily basis (Kearney, 2006) (Fig. 1).

Kearney and others defend the use of this broad and more inclusive concept to meet the causal heterogeneity of the condition (Ingles, Gonzalez-Macia, Garcia-Fernandez, Vicent, & Martinez-Monteagudo, 2015; Kearney & Silverman, 1996). This definition of school refusal behaviour has been more influential in recent years; however, some researchers prefer to differentiate between school refusal and truancy (Heyne, King, Tonge, & Cooper, 2001).

The prevalence of school refusal behaviour is indicated to be 5–28% in the general child and adolescent population (Havik, Bru, & Ertesvag, 2015; Kearney & Bensaheb, 2006; Kearney, 2008). Most studies have reported a prevalence rate of school refusal about 5% (Egger, Costello, & Angold, 2003; Havik et al., 2015; Ingles et al., 2015; King & Bernstein, 2001). School refusal behaviour is more difficult to quantify because most studies and school statistics mainly report full time absenteeism and do not include refusal behaviour (Kearney, 2008). School refusal behaviour occurs in all ages; however, its onset is often reported in early adolescence. Further, it is found to be equally common in girls and boys (Heyne et al., 2001; Ingles et al., 2015; Kearney, 2008).

A number of socio demographic factors are reported to be associated with school refusal behaviour in the general child and adolescent population (Heyne et al., 2001; Kearney, 2008). Physical or psychiatric disease in other family members, parental unemployment, low educational level of mothers, and disorganized and unsafe home environments with poor adult support and attendance are among the factors reported (Bahali, Tahiroglu, Avci, & Seydaoglu, 2011; Fernando & Perera, 2012; Ingul, Klockner, Silverman, & Nordahl, 2012; Kearney, 2008).

School refusal behaviour represents a stressful situation for the child, the family, and the teachers, and it is a serious public welfare problem. Several researchers point out the importance of early identification of this behaviour to prevent both short and long-term consequences. In the short term, failure to attend school may influence both academic and social achievement and attitudes towards school. The long-term consequences may negatively influence the students' academic, psychological, and social development, and it may ultimately be a risk factor for dropping out of school. The consequences in adulthood may include failure to enter the labour market, low social status, and marital and psychiatric problems, and it may lead to an increased need for social security benefits (Fremont, 2003; Havik et al., 2015; Kearney, 2008; Reid, 2005; Thambirajah, Grandison, & De-Hayes, 2008). Several studies have reported high rates of emotional and behavioural problems as well as somatic complaints in students with school refusal behaviour (Egger et al., 2003; Ingul et al., 2012; Kearney & Albano, 2004; McShane, Walter, & Rey, 2001). Further, language disorders and learning disabilities have been found to be associated with it (Havik et al., 2015; McShane et al., 2001; Naylor, Staskowski, Kenney, & King, 1994). Few studies explore such behaviour in students with ASD. The only study conducted on this topic reported school refusal behaviour in 27.3% of students with ASD with and without intellectual disability, mainly attending special classes or schools (Kurita, 1991).

ASD is a lifelong set of pervasive neurodevelopmental disorders with onset in childhood. Children with ASD are a heterogeneous group; sharing the core symptoms of persistent deficits in social communication; social interaction; and restrictive and repetitive patterns of behaviour, activities, or interests (American Psychiatric Association, 2013; Lai, Lombardo, & Baron-Cohen, 2014). The etiological factors of ASD are mostly unknown, but it might best be understood as a complex interaction between environmental factors and genetics (Lai et al., 2014). Estimates of the prevalence of ASD vary; however, most research indicates a prevalence rate of about 1%. Further, boys are considered to be 2–3 times more likely to be affected than girls are (Lai et al., 2014). ASD affects children of all levels of cognitive functioning, but approximately 50% have normal intellectual ability (Lai et al., 2014).

Inclusion of students with ASD in mainstream schools, and especially those with intellectual abilities within the normal range, is increasing and may be beneficial for these children as they have greater access to peer role models, to relationships with peers, and to the general curriculum (Dillon, Underwood, & Freemantle, 2016; Osborne & Reed, 2011). However, there are indications based on clinical experiences, reports and contact with educational and mental health services, schools, and family support groups, that school refusal behaviour is a problem in students with ASD (Autism-och Aspergerförbundet, 2016; Socialstyrelsen, 2016). Nevertheless, no pertinent data are available regarding the prevalence, expression, and duration of school refusal behaviour in students with ASD without intellectual disability in mainstream schools. Further, no systematic studies of associations between sociodemographic factors and school refusal behaviour have been performed in this population. The lack of knowledge in this field might impede necessary preventive steps and treatment by professionals in both educational and mental health services.

1.1. Aim of the study

The present study assessed the frequency of school refusal behaviour in students with ASD aged 9–16 years without intellectual disability (IQ > 70) compared to typically developing (TD) students. Further, the aim was to explore the duration and expression of school refusal behaviour and possible sociodemographic factors associated with it in children with ASD.

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