



*A study of persistent absence from school in Sheffield : Prevalence and associated educational, psychological and social factors.*

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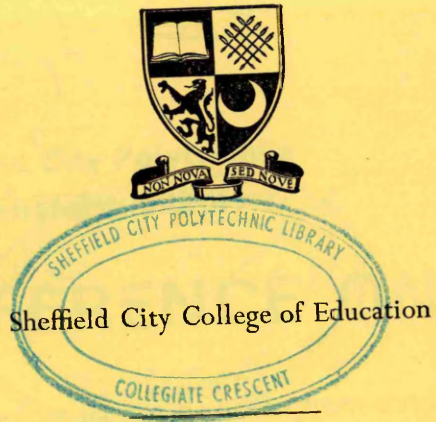
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A STUDY OF  
PERSISTENT ABSENCE FROM SCHOOL IN SHEFFIELD:  
PREVALENCE AND ASSOCIATED  
EDUCATIONAL, PSYCHOLOGICAL AND SOCIAL FACTORS.

BY

DAVID M. GALLOWAY

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Prevalence and Associated Educational, Psychological and Social Factors.

By David M. Galloway.

A B S T R A C T

Following a pilot project and a literature review, three annual surveys were undertaken on the prevalence of persistent absence from Sheffield schools. The results showed:-

- (a) that persistent absentee rates remained stable between the ages 5-12, but rose sharply thereafter;
- (b) that there was no important association between a secondary school's size and its absentee rates;
- (c) that poverty in the school's catchment area was a reliable predictor of absence rates;
- (d) that in an important minority of schools, mostly serving socially disadvantaged areas, absentee rates varied substantially over the three years;
- (e) that less than 40 per cent of persistent absence was attributed primarily to illness, and less than 20 per cent to absence without parental knowledge;
- (f) that less than 33 per cent of absentees were known to the police.

To obtain information on social, psychological and educational variables associated with absence, interviews were carried out with all unauthorised absentees from one part of Sheffield. Results showed:-

- (a) that school influences were reported by parents and pupils to become more significant in the secondary school years than at primary schools;
- (b) that persistent absentees from primary schools were living under severely and multiply disadvantaged circumstances, and that the same applied, though somewhat less consistently, to secondary school absentees;
- (c) that many absentees resisted pressure to attend school partly because of well-founded anxiety about their parents' health;
- (d) that absentees referred to the psychological service tended to have a more serious history of anti-social behaviour and of inadequacy in social relationships at school;
- (e) that truants differed in several ways from other unauthorised absentees;
- (f) that the outlook for subsequent attendance was poor.

The results are discussed in the light of their possible implications for schools and for the educational support services.

### DECLARATION

While registered as a candidate for the degree of Ph.D. the author has not been a registered candidate for another award of the C.N.A.A., nor of a University during the research programme.

### OTHER ADVANCED STUDIES UNDERTAKEN

The following advanced studies were undertaken in partial fulfilment of the requirements of the degree of Ph.D.:-

- (i) An advanced course of reading directed by the candidate's supervisors.
- (ii) Attendance at a course in computer programming, with particular reference to the Statistical Package for the Social Sciences, organised by Sheffield City Polytechnic.
- (iii) A literature search based on the ERIC programme.
- (iv) The organisation of and attendance at a Research Workshop on School Attendance Problems under the auspices of the Association for Child Psychology and Psychiatry.
- (v) Submission of results for critical discussion at a series of three seminars for staff and post-graduate students at Sheffield City Polytechnic.
- (vi) Submission of results for critical discussion at seminars: (a) in the Academic Department of Child Psychiatry, Hospital for Sick Children, Great Ormond Street, London; and (b) in the Institute of Psychiatry, De Crespigny Park, London.

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described in Part IV of the research report; Ms. Ball and Ms. Seyd also helped in the analysis of some of the work described in Part III, and provided valuable criticisms throughout preparation of the report. Professor R. Loynes of the Division of Probability and Statistics, University of Sheffield provided helpful advice on statistical analysis of the results. Professor J. Roach, of the Division of Education, University of Sheffield, helped the research with his support and advice in his capacity as Chairman of the advisory committee of Sheffield School and Home Project. Members of South Yorkshire Constabulary assisted in collection of data for the section on absenteeism and delinquency. Dr. R.G. Lansdown, Principal Clinical Psychologist in the Hospital for Sick Children, Great Ormond Street, London and Dr. P. Ashworth, Principal Lecturer, Sheffield City Polytechnic, were my supervisors for the whole of the research from its beginning in 1975 and provided a great deal of assistance, advice and encouragement, for all of which I am most grateful. Mrs. Rosemary Dickinson, Mrs. G. Rogers and Mrs. S. Tew showed great patience and skill in deciphering and typing the Manuscript. Finally but by no means means least, I am grateful to the necessarily anonymous schools, teachers, parents and pupils whose co-operation made this research possible.

David Galloway.

November, 1979.

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Abbreviations Used in Text

D. E. S.	Department of Education and Science.
E. S. W.	Education Social Worker (also known as Education Welfare Officer)
H. M. I.	Her Majesty's Inspector of Schools.
L. C. I.	Lewis Counselling Inventory.
L. E. A.	Local Education Authority.
N. A. C. E. W. O.	National Association of Chief Education Welfare Officers.
N. A. C. R. O.	National Association for the Care and Rehabilitation of Offenders.
N. C. D. S.	National Child Development Study.
N. S. P. C. C.	National Society for the Prevention of Cruelty to Children.
R. A.	Reading Age.
V. S. I. Q.	Verbal Scale Intelligence Quotient.

Origin of the Research

In the Autumn of 1973 Sheffield Education Department set up a working party under the chairmanship of a senior assistant education officer to consider the adequacy of existing facilities for problem children. The working party resulted from the mutual interest and concern of teachers, senior officers of the l.e.a. and members of the l.e.a.'s support services both about poor attenders and about pupils who presented severe disciplinary problems in schools.

The working party devoted its early sessions to consideration of the needs of two groups of children, both of whom required an administrative response from the authority. The first consisted of very poor attenders; in their case the administrative response was whether or not the l.e.a. should take formal action to ensure their more regular attendance. The second group consisted of pupils whose behaviour had led to their exclusion or suspension from school; here the administrative response was that the l.e.a. had to provide many of the pupils with some alternative form of education. The research in the present report is concerned only with the poor attenders.

It quickly became clear that many people, both inside and outside the working party, had strong views about unauthorised absence from school. Unfortunately, it was equally clear that they disagreed : (i) on the size of the problem, (ii) on its causes, and (iii) on the most effective response from schools and the support services. As a result of these differences in opinion, the author proposed a city-wide survey of all pupils who had missed over half of their education in the first half of the Autumn term. The proposed survey was to have two principal aims:

- (a) to investigate the size of the problem in each age range, and
- (b) to report on the reasons for absence as assessed by education welfare officers (e.w.o.s). This proposal was accepted. The resulting survey is summarised in Part II of the present report.

This preliminary project raised a number of questions about the size, the nature and the management of the problem of persistent unauthorised absence from school. Following further discussions with senior officers of the l.e.a., and with teachers, broad agreement was reached on a long-term research programme with three phases. Phase one was to carry out further city-wide surveys in 1974, 1975 and 1976 in order to examine further the pattern of persistent poor attendance within schools and throughout the city as a whole. Phase two was to consist of a detailed study of individual absentees and their families, in order to examine in some detail the social, educational and psychological factors associated with absence. Phase three was to involve a detailed study of the l.e.a.'s response towards poor attenders.

Detailed work on phase one started in 1975 and on phase two in the summer of 1976. These projects are described in Parts III and IV of the present report. Planning of phase three started in 1978 and the field work was completed by the Autumn of 1979. Detailed reports on phase three are currently in preparation.

#### Aims and Scope of the Study

The detailed objectives of the study are described in the text. At this stage it is necessary to mention only the fundamental aim underlying the whole programme of the research. This was simply to obtain information on the subject of persistent unauthorised absence from school that would assist members of the l.e.a.'s support services,

the problem. It was hoped that this would subsequently be of value to them in planning appropriate forms of intervention. Hence, the underlying intention was to illuminate rather than to prescribe.

The decision to concentrate on persistent absence was a controversial one, particularly as the agreed criterion was attendance of less than 50 per cent in an Autumn term. Some teachers have said - quite reasonably - that their greatest problem is the occasional absentee, rather than the persistent one. On the other hand, it is persistent absentees who most obviously challenge the legitimacy of their school's and of society's authority. These are the pupils against whom - or against whose parents - the l.e.a. is most likely to feel obliged to take legal action. In view of the dearth of systematic information on any absentees, apart from the small minority described in clinical studies of truancy and school refusal, it seemed reasonable to concentrate resources where the problem was most extreme.

### Structure of the Report

Part I of the report reviews the previous literature on school attendance and identifies the principal questions arising from it. The final chapter of Part I summarises the principal gaps in the literature. This summary provides the detailed rationale for the decision to investigate persistent absence. Part II describes the pilot project mentioned above, consisting of a city-wide survey of persistent unauthorised absence, and identifies the questions arising from this project.

The three annual city-wide surveys described in Part III

Successive chapters describe the prevalence, the categories of absence as assessed by e.w.o.s, and school and community influences on persistent absentee rates. By their nature, however, these surveys were unable to provide information about the stresses at home, at school or in the community that were associated with absence in individual cases. Part IV reports the results of a study of persistent absentees and their families, which was designed to throw light on these questions. Interviews with parents, interviews with children, and delinquency and subsequent attendance are covered in successive chapters. These are followed by a review and reassessment of the popular distinction between truants and school refusers.

Part V of the report provides an overview of the results and identifies the principal questions outstanding. The final chapter discusses the implications for schools and the support services. This final section of the report also shows the logical progression from phases one and two of the original long-term research programme, (described in Parts III and IV of the present report), to phase three, which investigated the l.e.a.'s administrative and legal responses to poor attendance. The results obtained in phase three are not reported here, but further information may be obtained from the author.

## PART I

### BACKGROUND TO THE STUDY

#### CHAPTER 1 THE PREVALENCE OF ABSENCE FROM SCHOOL

##### HISTORICAL BACKGROUND

Free and compulsory education came to England following the Elementary Education Acts of 1870 and 1876, though not always on a full-time basis. It was not until the Education Act of 1918 that half-time schooling was finally abolished and all elementary education made entirely free until the end of the term after the child's fourteenth birthday. Nevertheless, in most parts of the country education had already been compulsory since 1876.

Pallister (1969) notes that attendance before compulsory education was generally poor. Urban schools suffered from an extremely high turn-over of pupils, many staying less than four months. Rural schools had lower turnover, but even worse attendance. Many reasons were given for poor attendance, but by far the most significant was the parents' low opinion of what education had to offer. Except at a very few schools, the children had no wish to attend, and were often kept at home for trifling reasons. More than 100 years before Reynolds and Murgatroyd (1977) rediscovered the schools as a factor in the generation of truancy, Pallister notes that "enthusiasm for education varied with the standards of the schools, good schools quickly obtaining the support of parents, and similarly bad schools, at least in the eyes of parents, quickly losing support". Research could perhaps have made a more useful contribution in the field of school attendance had it pursued this early recognition of the school's influence instead of concentrating so



much energy on the study of individual children.

Attendance at London Board schools improved from 65.8 per cent of those on roll in 1872 to 89 per cent in 1906. Attendance at voluntary schools was similar (Rubinstein, 1969). Table 3.1 shows the percentage attendance in Sheffield up to 1900 at elementary schools recognised as efficient, and at efficient primary and special schools combined up to 1938 (Sheffield Education Committee, 1907; 1938).

Table 1.1

Attendance rates at efficient elementary schools in Sheffield from 1873-1900, and at efficient primary and special schools from 1904-1938

<u>Year</u>	<u>Average number on register</u>	<u>Percentage of average attendance</u>
1873	35,053	65
1880	50,319	68.5
1890	57,625	80
1900	66,957	82.5
1904	76,375	87.4
1910	76,162	88.2
1920	86,196	85.8
1930	77,584	90.1
1938	62,955	89.6

It is seen from these figures that attendance rates varied little between 1904 and 1938. The only remarkable result was in 1920, when the lower average attendance was associated with the social upheaval of the first world war.

Evidence from Registers. Tyerman (1958) quoted surveys showing an average attendance in London of 88 per cent in 1949-50 compared with 91 per cent in Birmingham in 1954 (London County Council, 1950; Anon, 1955). The Northern Ireland figure was similar to that in London. Schools in the Inner London Education Authority averaged 89 per cent in 1970 (Hill, 1971). More recently the Department of Education and Science (1974) surveyed the attendance of all pupils in England and Wales aged twelve or over on one day in January. The results showed that 9.9 per cent of pupils were absent, and schools knew of no legitimate reason for the absence of 22.7 per cent of the absentees. These unjustified absentees represented 2.2 per cent of the total on roll at the time. Unjustified absence amongst girls was only .1 per cent more than amongst boys, but more girls were thought to be absent for legitimate reasons. Absence was highest in the final year of compulsory education, with 14.1 per cent not attending. Unjustified absence was also highest in this age group; just under five per cent of the total on roll were not present without good reason.

In Central Scotland Mitchell (1972) found an overall attendance rate of less than 90 per cent in only one of the seven secondary schools she studied. She found a consistent trend for absence rates to increase with age. As part of a wider longitudinal research programme the National Child Development Study followed up the attendance of eleven year olds born in one week of March 1958 (Fogelman and Richardson, 1974). Their results showed a fairly consistent association between attendance and social class. In the

Registrar General's classification (1970), 6.3 per cent and 5.7 per cent in social classes I and II had attendance rates of less than 85 per cent compared with 11.5 per cent and 19.8 per cent in social classes IV and V. In comparison, the percentages attending for over 95 per cent of the time were 66.2 per cent and 60.6 per cent in social classes I and II, and 50.6 per cent and 45.6 per cent in social classes IV and V. The association between attendance and social class is discussed further in Chapter 4.

In Aberdeen, the attendance records of all boys born over a four year period from 1951-54 were collected for two years in 1960-62 (May, 1975). This survey showed that 90.1 per cent had absence rates of less than 12.5 per cent. Of the remainder just over two per cent could not be classified, but only .9 per cent were absent for more than 25 per cent of the time. Persistent absence was also investigated in Northern Ireland, in a survey which used some of the methodology of the Sheffield studies described in Parts II and III of the present report. Harbison and Caven (1977) reported that 7.8 per cent of the compulsory school age population missed over 25 per cent of possible attendances in the Spring term of 1977.

An average attendance rate of, say, 90 per cent, does not, of course, imply that only ten per cent of pupils were absent. The National Association of Chief Education Welfare Officers (1974) surveyed one week's attendance in four counties and twelve county boroughs or cities. They reported an average attendance of 92.7 per cent, with little variation between the secondary and primary age ranges. More interesting, though, was their observation that over 22 per cent of pupils were absent at some stage in the week.

An exception to the general finding of attendance rates around 90 per cent is Wales, which has consistently had lower overall attendance rates. The N.C.D.S., for example showed Wales to have a higher proportion of pupils missing more than fifteen per cent of attendances than Scotland or any of the nine regions of England (Fogelman and Richardson, 1974). Similarly, Reynolds and Murgatroyd (1977) reported average attendance rates over seven years at nine small secondary modern schools ranging from 77 per cent to 89 per cent.

Changes Over Time. Some of the evidence described above is summarised in Table 1.2. The studies included in this table are those which provided overall average percentage attendance rates. For reasons discussed more fully below, this is a potentially misleading way to present the evidence. Further problems in interpreting the evidence in Table 1.2 are: (i) that the studies were carried out in different parts of the country; (ii) that the time period in which the evidence was collected ranged from one day to a full year; (iii) that the school leaving age was raised in 1947 and again in 1974, but the figures relate to the overall average for all pupils.

The point of the rather motley collection of evidence in this table is to show that there is little obvious evidence that attendance rates have altered substantially since before the first world war. The slightly higher rates in the studies by N.A.C.E.W.O. (1974) and D.E.S. (1974) may simply reflect the fact that they were not confined to large industrial cities with associated social problems. While it could perhaps be considered encouraging that the evidence does not suggest any decline in overall attendance rates in spite of the fact that two extra years have been added to the period of compulsory education, it

is also worth pointing out that improved standards of child health since the early part of the century do not seem to be reflected in the results of attendance surveys. This point is discussed below.

Table 1.2 School Attendance Rates 1904-1974

Author and date of publication	Place	Year in which survey was conducted	Average % attendance
Sheffield Education Committee (1907)	Sheffield	1904	87
Rubinstein (1969)	London Board Schools	1906	89
Sheffield Education Committee	Sheffield	1920	86
Sheffield Education Committee (1938)	Sheffield	1938	90
London County Council (1950)	London	1949	88
Anon (1955)	Birmingham	1954	91
Hill (1971)	Inner London Education Authority	1970	89
N.A.C.E.W.O. (1974)	4 counties and 12 county boroughs or cities	1973	93
D.E.S. (1974)	England and Wales	1974	90

Limitations of the Attendance Register. The N.A.C.E.W.O. study illustrates the difficulty in interpreting the results of attendance register searches. Should we speak of an attendance rate of nearly 93 per cent, or an absence rate of more than 22 per cent? This point

was also made by an anonymous writer (Anon., 1973) who quoted attendance rates at two different schools in his authority. Each school had almost the same average attendance (88.4 per cent and 88.5 per cent), yet at the first 54 per cent of pupils had a recorded absence, while at the second only eleven per cent had any recorded absence. Baum (1979) has made the additional point that attendance varies according to the day of the week and the month of the year. Consequently, a figure based on a single day, or even a single month, may be grossly misleading as an index of average attendance throughout the year.

Moreover, as Anon. (1973) points out, attendance registers cannot account for pupils who absent themselves after registration. A final, though rather obvious, point is that attendance registers are not intended to specify reasons for absences. If we wish to discover the prevalence of different reasons for absence, such as illness or truancy, we have to ask the children or their parents, or seek the opinion of professional groups such as teachers or education welfare officers.

#### REASONS FOR ABSENCE

Illness. Although attendance registers have consistently yielded overall attendance rates around 90 per cent, Table 1.3 shows that there is surprisingly little agreement on how many of the absent children are ill. Bransby (1951) reported that 3.3 per cent of non-attendance was due to non-medical reasons. Similarly the Plowden Report (D.E.S. 1967) attributed 4 per cent of all absences to non-medical reasons. Shepherd et al (1971) thought that at least 80 per cent of absence at all age groups was due to illness in the



Buckinghamshire children they studied. Mitchell (1972) reported teachers as thinking just over 70 per cent of absences in Central Scotland were due solely to medical reasons. The D.E.S. (1974) reported that teachers regarded 22.7 per cent of all absentees as being absent with no legitimate reason. In the majority of cases the remainder were presumably ill, though other possibilities are discussed in Chapter 2. N.A.C.E.W.O. (1974) quoted unpublished studies suggesting that 75 per cent of absences are due to illness. Their own estimate was 40 per cent. This is consistent with Harbison and Caven's (1977) Northern Ireland study where 46.5 per cent of pupils who had missed over 25 per cent of possible attendances were thought by education welfare officers to have been physically ill. These figures for illness, however, are high compared with those of Reynolds and Murgatroyd (1974) who considered 75 per cent of absences to be unjustified.

Table 1.3 Number of Absences Attributed to Non-medical Reasons

Author and date of publication	% absence attributed to non-medical and/or unjustified reasons	Informants
Bransby (1951)	3.3	Teachers
D.E.S. (1967) (Plowden Report)	4.0	Teachers
Shepherd et al (1971)	20	Teachers
Mitchell (1972)	30	Teachers
N.A.C.E.W.O. (1974)	60	E.W.O.s
D.E.S. (1974)	22.7	Teachers
Reynolds and Murgatroyd (1974)	75	Pupils
Harbison and Caven (1975)	46.5	E.W.O.s

Thus the estimates for non-medical reasons for absence range from 3.3 per cent to 75 per cent. This variation does not seem to be attributable to different definitions of truancy, though not all studies have followed the same practice in including other legitimate reasons for absence, for example holidays, in the "non-medical" category. An interesting point which is obvious from Table 1.3 is that teachers have a marked tendency to attribute a smaller proportion of absences to non-medical reasons than e.s.w.s. It would be wrong to read too much into these results, since they are based on surveys of different age groups and in different parts of the United Kingdom. Moreover, the higher proportion reported by e.s.w.s could simply be an artifact caused by the fact that teachers only ask them to investigate cases of non-medical absence. To summarise the evidence:-

(i) it is possible that teachers take a more charitable view of the reasons for absence than e.s.w.s; (ii) it is certain that there is little consistent evidence on the prevalence of justified absence, and research on the subject would be of considerable value.

School Refusal. School refusal is generally seen as one symptom of a neurotic disorder, characterised, inter alia, by reluctance to leave home. The question of definition is dealt with more fully in Chapter 3. No authoritative account has been traced of the prevalence of school refusal in the country as a whole. Rutter et al (1970) found no cases in their epidemiological study of ten-year-olds in the Isle of Wight. At follow-up when the children were fourteen, however, Rutter et al (1976) noted fifteen cases of school refusal. Reports of prevalence among children attending child guidance clinics range from one per cent (Chazan, 1962) to eight per cent (Kahn and Nursten, 1962). These figures show that school refusal, as diagnosed by child guidance clinics, accounts regularly for a relatively small proportion of clinic attenders.



Unfortunately, they do not give any idea what proportion of all absentees show some or all of the symptoms associated with school refusal. This problem is not overcome by the N.A.C.E.W.O. survey (1974) which classified 1.2 per cent of all absentees as school refusers, but defined school refusal as: "only those cases identified by the Officer of the Authority or receiving treatment by a competent agency such as Child Guidance, Psychologist, etc.". The same difficulty applies to the Northern Ireland study (Harbison and Caven, 1977) which rated 1.9 per cent of pupils missing over 25 per cent of possible attendances as "school phobics". It is at least possible that the medical aura surrounding the term led the education welfare officers who categorised the children to include in this category only those who were receiving or expecting to receive treatment.

In a study in Leeds (Pritchard 1974) education welfare officers asked the mothers of 55 absentees aged five to twelve on their current hard-core caseload to complete a questionnaire derived from Wolff's (1967) behavioural inventory. Pupils were allocated to three groups from the results: school phobics, truants and "others". Results showed that 40 per cent of the total were deemed school phobic and these pupils were the most likely to have legal proceedings taken against them. These results are of considerable interest as they suggest that the prevalence of school refusal may be a great deal higher than is suggested by the prevalence among clinic attenders. Unfortunately, two factors make it difficult to draw firm conclusions: (a) the criteria for differentiating the three groups are certainly different and perhaps less rigorous than those used in clinical practice, and (b) it is likely that education welfare officers use their discretion in deciding which families to visit regularly (the criterion for inclusion in the study). It is possible that this could have created a bias which

might have influenced the results.

Tennant (1969) also found characteristics of school refusal in his study of absentees on remand. With Pritchard's work, this suggests for two reasons that diagnosis and eventual management may depend not so much on the pupil or his family, as on the profession of the person to whom he is referred:

(1) legal action is seldom mentioned in the clinical literature as a management technique; hence, absentees referred to clinics may be less liable to prosecution;

(2) Pritchard (1974) found that e.s.w.s refer a much smaller number of their hard-core caseload to child guidance clinics than they refer for legal action.

Truancy. Truancy refers to absence without parental knowledge or consent (see Chapter 3). Estimates of the prevalence of truancy vary according to definition, but there is little information on prevalence when the term is used as in this report. Tyerman (1972) states that truancy occurs more often than school phobia. Only two pieces of evidence have been traced to support this assertion. The first is from the Isle of Wight where Rutter et al (1970) found that 1.8 per cent of ten-year-old boys were thought by their teachers to have truanted, but found no cases of school refusal. This is scarcely conclusive, for three reasons: (i) the initial sample only investigated ten-year-olds and the follow-up did not report on truancy; (ii) the study was carried out in an area with remarkably few absentees; (iii) the criterion for "diagnosing" truancy was a teachers' questionnaire (Rutter, 1967), while school refusal depended on more rigorous criteria following a psychiatric interview of known reliability (Rutter and Graham, 1968).

These objections do not apply to N.A.C.E.W.O.'s survey, where truancy was thought to account for 3.3 per cent of all absentees while school refusal accounted for only 1.2 per cent. Unfortunately, as we have seen, their definition of school refusal may have introduced an artificial bias into their results by implying that school refusers are likely to be receiving treatment from para-medical agencies.

We shall see in Chapter 5 that child psychological services appear to have devoted little interest to the treatment of truancy. In consequence, there seems to be no evidence on its prevalence from clinical research. Estimates must therefore be based on the opinions of parents, professional persons, or on the reports of pupils themselves.

Reporting on a random sample of over 6,000 school age children in Buckinghamshire, Shepherd et al (1971) reported parents and teachers as agreeing on the higher prevalence of truancy in older boys, though until adolescence the differences were not marked. According to teachers, only 49 pupils had truanted in the previous complete term; about two thirds of these were over twelve years old, with the highest numbers in the last two years of compulsory education. According to parents, 41 boys and 31 girls had truanted more than three or four times a year, but only seventeen more than once or twice a month. The differences between teachers' and parents' estimates could have been attributable to the different ways the questions regarding attendance were asked.

May (1974) found that six per cent of Aberdeen boys with poor attendance records were identified as truants by their teachers eighteen months later. These pupils represented an overall truancy rate of 2.5 per cent. In contrast, Pritchard (1974) reported that 34.5 per cent of current hard-core cases of Leeds e.s.w.s fell into his truant category, though his selection criteria are questionable. It is not clear, for

example, how many unjustified absences had to be due to truancy for a pupil to be included in this category.

In their second follow-up at the age of eleven, the N.C.D.S. (Fogelman and Richardson, 1974) estimated truancy rates from teachers' returns on the Bristol Social Adjustment Guide (Stott, 1971). Only 1.2 per cent of their sample had truanted or been suspected of truancy. Of these, nearly 75 per cent were boys.

At the sixteen-year-old follow-up, however, a somewhat different picture emerged (Fogelman, 1976). On a teachers' questionnaire (Rutter, 1967) truancy applied "somewhat" to 12 per cent of pupils and "certainly" applied to eight per cent. On a similar questionnaire for parents, in contrast (Rutter et al, 1970), ten per cent were thought to have truanted occasionally, and only three per cent at least once a week. A possible reason for the higher truancy rates reported by teachers is that twelve per cent of parents admitted that they had "found it necessary to keep the study child off school in order to help at home". Teachers may have regarded this as truancy, even though parents and pupils did not.

A further complication in the N.C.D.S. data is that 52 per cent of the pupils themselves replied "yes" to the question: "have you stayed away from school at all this year when you should have been there?". This surprisingly high rate of unjustified absence (not necessarily truancy) was not contradicted in another self-report study (Mawby, 1977). Eleven to fifteen-year-old pupils in two Sheffield secondary schools were asked the question: "have you ever, in the last twelve months, deliberately not gone to school although you were well enough to do so and had no other good reason for not going?". The results showed that 47.6 per cent of pupils (46.3 per cent of boys and 49.5 per cent of girls) admitted unjustified absence.

Mawby referred to all these absences as truancy, though it is clear that he was using the term to include all unjustified absences, not simply those attributable to absence without parental knowledge or consent.

The branch of the l.e.a. responsible for investigating cases of poor attendance is the education social work service (in many areas known as the education welfare service). In view of this fact it is surprising that few studies have been traced which sought information about truancy from members of the service. As mentioned above, N.A.C.E.W.O. (1974) found that truancy accounted for only 3.3 per cent of absences, though in secondary schools the figure rose to five per cent. As in the N.C.D.S., truancy was only more common amongst boys in the secondary age group.

Another study was carried out in Northern Ireland (Harbison and Caven, 1977) where education welfare officers thought that twelve per cent of pupils unjustifiably missing more than 25 per cent of possible attendances had been absent without their parents' knowledge or consent. The term truancy was not used, but the definition was identical with the one used in the present report.

Other Reasons for Absence As we have seen, there is wide disagreement about the amount of justified absence, and the prevalence of truancy depends on the definition used. Although most studies agree in attributing a minority of unjustified absences to truancy, there has been surprisingly little research on other reasons for absence. Neither the sixteen year old follow-up of the N.C.D.S. (Fogelman, 1976) nor Mawby's (1977) self-report study were able to follow up this question.

In Mitchell's (1972) Central Scotland study, teachers thought seven

per cent of boy absentees and twelve per cent of girls were helping at home, while a further 24 per cent of boys and 21 per cent of girl absentees were thought to be absent for "trivial or unsatisfactory reasons". In Buckinghamshire Shepherd et al (1971) found that seven per cent of girls aged thirteen to fifteen had missed school because of the illness of a parent or other family member. Absences of this sort were less often reported for boys, and were much rarer amongst younger children of both sexes. Pritchard's (1974) study in Leeds suggested that 25 per cent of e.s.w.s' hard core caseload were neither school phobic, nor truants, but absent for "other" reasons.

N.A.C.E.W.O. (1974) reported family neglect as the main reason for 6.4 per cent of all absences. In Northern Ireland Harbison and Caven (1977) adapted the categories described in Parts II and III of the present report and found that over half their unjustified absentees were absent with the full knowledge and consent of their parents. A further 21 per cent were "absent in spite of parents' knowledge and consent". Other categories accounted for smaller numbers. Just under two per cent were absent for "socio-medical" reasons, and 2.5 per cent were "otherwise excluded or suspended from school". Psychosomatic illness was thought to account for just 1.4 per cent.

Patterns of Absence Several studies have shown attendance to be higher at the beginning of the week than the end (Jackson, 1978; Sandon, 1938; Trigg, 1973). Jackson's study was of interest in demonstrating, in the fourth year of a large comprehensive school, a cumulative tendency for attendance to deteriorate towards the end of the day, the week, the term and the school year. Except when afternoons were compared with mornings, the differences were statistically significant. Unlike Jackson, Sandon (1961) found absence rates highest in January and February, though he did not take into account the possibility that

attendance at secondary schools is deflated by teachers at some schools not encouraging attendance in the last four weeks when public examinations have finished. Sandon's suggestion that weather conditions may depress attendance was supported by Karweit (1973) who found that absenteeism increased on rainy days. No studies have been traced which investigate the possibility of a link between high absence rates and (i) certain subjects in the curriculum, and/or (ii) the lessons of certain teachers.

#### GAPS IN THE EXISTING LITERATURE

It seems fairly clear that overall attendance rates are remarkably constant at around 90 per cent. This is only slightly higher than the figures reported before the first world war. How these results are interpreted depends on one's philosophy. An optimist could say they disprove the theory that attendance rates - along with the general fabric of society - are deteriorating. A pessimist could say that child health has improved enormously since the first quarter of the century, so there are grounds for considerable alarm that surveys do not demonstrate a similarly dramatic improvement in school attendance; if the attendance rate is still more or less the same, this must mean that far more pupils are illegally absent.

This problem is clearly reflected in the uncertainty about the proportion of absent pupils who have no justifiable explanation. In general the tendency has been for recent work to attribute unjustified absenteeism to a larger proportion of all absentees than the earlier surveys such as Bransby's (1951). The validity of the estimates is, however, open to doubt for at least two reasons:

- 1) personnel in child health and social work services (including educational welfare) are now more numerous and better trained than they were five years ago, let alone 25; this could conceivably mean that it

is now more difficult for parents to attribute their children's absence to illness, without arousing suspicion;

2) more important, many of the estimates have been based on teachers' statements, although teachers are not the l.e.a.'s officers responsible for investigating cases of absence; indeed at some schools there is a policy that teachers should not visit pupils' homes.

A more serious gap in the literature is the absence of any satisfactory estimate on the prevalence of the symptoms associated with school refusal and, to a somewhat lesser extent, truancy. This is not, of course, quite the same as an estimate of the prevalence of school refusal or truancy.

The possibility that truants and school refusers represent poles on a continuum of reasons for absence is discussed in Chapter 3. If this is correct, it would seem more useful to describe the characteristics of a random sample of absentees than to attempt an estimate of the number of pupils in each diagnostic category. The difficulty in the latter possibility lies partly in establishing agreed criteria for inclusion in each category, and partly in coping with overlap between categories. These problems could be overcome in a study which simply sought to ascertain the prevalence of various symptoms which have consistently been reported in association with truancy or school refusal.

A related issue is the relative lack of information in the literature on the characteristics of the majority of absentees. It is agreed, on remarkably inadequate evidence, that truancy and school refusal account for a minority of unjustified absentees, yet apart from Mitchell's (1977) study in Central Scotland and Harbison and Caven's (1977) in Northern Ireland, there is virtually no evidence on the prevalence of other reasons for absence. Here too there is a need for a descriptive study of a random sample of absentees which would investigate systematically other possible reasons for absence.



## CHAPTER 2 BACKGROUND ISSUES

### LEGAL REQUIREMENTS

The 1944 Education Act. The legal requirements regarding school attendance are laid down in the 1944 Education Act and subsequent amendments. Parents are required by Section 36 to ensure that their children receive education "suitable to their age, ability and aptitude" between the ages of five and sixteen. In practice, most parents do this by registering their child at a school maintained or aided by their local education authority. The authority is empowered by Section 37 to make a School Attendance Order if they consider parents are not meeting their obligations; this requires the parents to register the child at a school named in the Order.

Once a child is registered at a school, it is his parents who have a responsibility under Section 39 to ensure that he or she attends regularly. This remains the case even if the "child" happens to be a sixteen-year-old married daughter who has not yet reached the legal school leaving age. The Act acknowledges three principal reasons for absence: (i) "sickness or any unavoidable cause"; (ii) religious observance, and (iii) the l.e.a.'s failure to provide suitable travel arrangements if the child lives more than three miles from school.

The l.e.a. is empowered to prosecute parents under Section 40 for failing to meet this responsibility. The child may not, strictly speaking, be prosecuted in the Juvenile Court for non-attendance, but under Section 1 of the 1969 Children and Young Persons Act non-attendance is one of the grounds for "Care proceedings", although the Magistrates must also satisfy themselves that the juvenile is in need of care or control before making any Order. The l.e.a. may bring him before the

Juvenile Court for care proceedings on its own initiative, but it may also be instructed to do so by the Magistrates when a parent is charged under Section 40.

Use of Legal Sanctions. In the past, l.e.a.s appear to have been reluctant to publicise their use of legal sanctions over school attendance. <sup>M</sup>Tyerman (1958) reported that in one medium-sized Welsh town 405 children from 321 families were taken to court in a six year period from 1946-52. These children represented 1.4 per cent of the total on roll. One hundred and thirty seven of the children were identified by their attendance officers as truants, the rest presumably being withheld by their parents (see Chapter 2). Ninety of them were boys. In the whole of the United Kingdom in 1954, 750 children were brought to court for poor attendance (Anon., 1955).

More recently, <sup>M</sup>Tyerman (1968) reports 5,544 prosecutions in 1963-64 for truancy or for withholding a child, representing .07 per cent of the total on roll. Berg et al (1977) states that 179 children were brought before the Juvenile Court in Leeds in the school year 1972-73, roughly 0.14 of the total on roll. <sup>I</sup>In Sheffield, the l.e.a.'s records show that in the educational year 1976-77, 87 parents were prosecuted for their children's poor attendance under the 1944 Education Act, and Care proceedings were taken in connection with 80 children in the Juvenile Court. Combined, these represented approximately .15 of all pupils on roll. Earlier, Tennent (1970) found that .2 per cent of pupils from ordinary schools in London were taken to court for poor attendance. The highest incidence was .7 per cent among fourteen year olds.

Areas of Uncertainty. Although the legal position is clear in principle, it is far from clear in practice. Some doctors refuse, as a matter of principle, to issue certificates saying that a child is medically unfit



to attend school. The reasons appear to be a combination of reluctance to involve themselves in possible conflict between parents and the l.e.a., and lack of time to spend in distinguishing genuine illness from possible malingering. Without clear medical direction, the point at which a child becomes fit to return to school after an illness is a matter for some debate. In the not infrequent cases where there is disagreement, an officer of the l.e.a. needs to satisfy himself that the general practitioner has no objection on medical grounds to the child's return to school.

Another grey area is exclusion or suspension from school. Section 54 of the 1944 Education Act empowers a medical officer of the local authority to exclude a pupil "infested with vermin or in a foul condition". Barker (1944) notes that the proviso about "Sickness or any unavoidable cause" in Section 39 "seems to open a door rather wide"; a child expelled from school would presumably be regarded as absent "with leave" until his name was removed from the school register.

The situation is not, however, quite so simple. A child excluded from school for refusal to accept some aspect of the school's rules or regulations is not legitimately absent unless the school has indicated a refusal to allow him to return. The point is that teachers are in loco parentis; hence, they are empowered, like parents, to make reasonable regulations for the safety and discipline of their pupils.

A pupil who refuses to abide by these regulations is considered to be acting unreasonably, and his parents may therefore be prosecuted under Section 40 for not ensuring his continued education. This became clear when a parent was successfully prosecuted for not causing his child to attend the school



at which he was registered, although the child had been excluded for refusal to wear the school's uniform. When a head teacher indicates that the child will not be allowed to return, even if he and his parents agree to accept all the school's rules, the resulting absence is considered to be legitimate, and the onus rests on the l.e.a. to offer some alternative form of education. This is known in Sheffield as suspension.

Figures on pupils absent from school owing to exclusion or infestation are notorious by their absence. The annual reports of the Principal School Medical Officer (e.g. D.E.S., 1966) are silent on the matter. In Sheffield the Area Nurse, Child Health (1978) reported that 343 pupils (.32 of the total on roll) were excluded from Sheffield schools in 1977 on account of infestation, each exclusion officially lasting two or three days after which the child could in theory be regarded as absent illegally. Whether these figures are typical for the country as a whole is not known, though if they follow the trends for overall attendance, they may be lower in rural areas (Tyerman, 1972).

Understandably, l.e.a.'s have not been eager to publicise the number of exclusions. York et al (1972) reported that 32 children had been indefinitely suspended from Edinburgh schools in a two year period in 1976-79, but did not give information on the much more frequent category of exclusion. Liverpool Education Committee (1974) reported 90 suspensions in six years from secondary schools, and 30 in four years from primary schools. Again, they were silent on the subject of exclusion. It is not known what percentage of the total is represented by these figures.

Galloway (1979) reported that 70 pupils (.07 of the total) from

Sheffield schools missed over three weeks' education following exclusion or suspension in 1976-77.

#### EDUCATIONAL SIGNIFICANCE OF ABSENCE

Attendance and Attainment. It is often assumed that pupils who are persistently absent from school become educationally retarded because of their absence. The most common reasons for absence are discussed further in Chapters 3 and 4. At this stage, it is only necessary to note that an alternative explanation is that some pupils may absent themselves because of anxiety about their educational retardation. A number of studies have reported truants as being less successful on tests of attainments and general intelligence than non-truants (Tyerman, 1958; May, 1975; Carroll, 1977a). May's study offers slight support for the view that the truants in his sample were performing badly at school before they started truanting, though the evidence is inconclusive, and it does not follow that the absence was caused by the educational retardation. Carroll supports May's view, on the grounds that poor attenders were significantly more likely to be in a low stream than good attenders.

Longitudinal studies have helped to answer this "chicken and egg" question. Douglas and Ross (1965) compared composite scores on intelligence, reading, vocabulary and mathematics tests with attendance in the previous four years. In general they found a positive relationship between average scores and attendance, but this did not hold for their "upper middle class" group. With these children, an average of eight weeks' absence per year was not associated with lower test scores than those obtained by the best attenders. Fogelman and Richardson (1974) found a similar overall association between attendance and attainment, but after taking account of social class

background, the relationship only reached statistical significance for children whose fathers were in manual occupations. These results may be seen as evidence that children in more affluent homes have experiences at home that benefit their progress in school; working class children may have educational experiences at home, but these experiences are of less direct benefit at school. Another possibility is that children from more articulate, better educated families are under more pressure from home to "catch up" when they return to school.

More recently, Fogelman (1978) extended analysis of the National Child Development Study to the age of sixteen. He examined the relationship between school attendance, at the ages of seven and fifteen, and reading and mathematics test scores and school behaviour at the age of sixteen. He found the expected relationship between attendance and attainment, but observed that it could simply be due to associated social factors in the poor attenders' backgrounds. In fact, this was not the case; although the relationship between attendance and attainment was reduced after allowance for associated social factors, it remained statistically significant.

Of more interest to the present discussion, however, was the lack of a significant relationship between attendance at age seven and attainment or behaviour at age sixteen, after allowing for attendance at fifteen. In other words, poor attenders at the age of seven were not educationally retarded at the age of sixteen, compared with their peers, provided they were attending regularly at fifteen. On the other hand, continued poor attendance at the age of fifteen was related to poor attainment. This tends to suggest: (i) that absentees who miss a considerable amount of schooling at an early age can catch up through subsequent regular attendance, and hence (ii) that



the poor attainments of the continued absentees may be causally related to their absence. Nevertheless, more information about possible differences between the two groups, for instance the incidence of prolonged stress at home, is needed before firm conclusions may be drawn.

Conflicting Explanatory Models. It is worth making the point that Section 40 of the 1944 Education Act and Section 1 of the 1969 Children and Young Persons Act empower l.e.a.'s to take action through the courts in connection with illegal absenteeism, but do not oblige them to do so. Although the fact of illegal absence is not generally in dispute, the appropriate reaction from society must depend on one's explanatory model.

As we shall see in the next chapter, psychiatrists and, to a somewhat lesser degree, psychologists have tended to regard absence as a symptom of disturbance in the child or his family. The disturbance may result from temperamental vulnerability, or from disturbed family relationships. Under this model, the child and/or his family should be offered treatment for the presenting symptom or its underlying causes. Legal action would be seen as a last resort when offers of help had been refused.

On the other hand, absenteeism may be viewed from a sociological perspective. Here the emphasis is not on the individual child or family, but rather on the individual's reaction to the conflicting expectations he experiences from society or at school. Thus Gutfreund (1975) considers the alienation of some pupils from the competitive ethos of schools to be a cause of truancy. At a more concrete level, work described in Chapter 4 has started to identify

the social and administrative variables within secondary schools which seem to be associated with differential attendance rates.

Like the psychiatric model, an emphasis on the attitudes and objectives of school in treating the problem of absence, implies a critical attitude towards the use of legal procedures to enforce attendance. If the cause lies within the school's own attitudes or organisation, it is illogical to enforce attendance without tackling the problem at source. A different view is that although a minority of absentees may require psychiatric treatment, the majority of cases reflect an indifferent or irresponsible attitude towards education, in which case legal sanctions may be appropriate. This view is widely held by teachers, and is shared by many psychiatrists and psychologists. In the next chapter it is argued that it has little supporting evidence, though this does not, of course, necessarily invalidate it.

## CHAPTER 3    DESCRIPTIVE CATEGORIES

### INTRODUCTION

Psychiatric assessment of poor school attenders tends to differentiate between truants, school refusers or school phobics, and pupils who are withheld by their parents (Hersov, 1977). Before describing the conditions differentiated in this way and assessing the validity of the distinction, we must be clear about terminology.

### DEFINITION OF TERMS

Truancy and School Refusal There appears to be no legal definition of truancy. The 1944 Education Act makes no reference to the term. The Little Oxford dictionary defines a truant as: "a child who absents himself from school without leave". This is not as clear as it appears: does permission rest with the teachers or the parents? Since responsibility for attendance rests with parents, one may legitimately conclude that a child who is absent with their leave is not, strictly speaking, truanting. Work was reviewed in Chapter 1 which suggests that the majority of illegal absentees are absent with their parents' knowledge.

Unfortunately, the term truancy has been used in different ways by different writers. Consequently, conclusions about one group of "truants" do not necessarily apply to another. Reynolds and Murgatroyd (1977) use truancy to describe overall attendance rates, irrespective of reason. Less sweepingly, May (1975) distinguishes poor attenders who are truants from those who are not on the basis of teachers' statements. More specifically still, Tyerman (1968) reserves the term for children who are unlawfully absent on their own initiative without

their parents' permission. This last definition is the one used throughout this report when referring to truancy. It is generally regarded as only one aspect of a more extensive pattern of delinquent or anti-social behaviour.

Defining school phobia or school refusal is even more difficult than defining truancy. While truancy generally involves absence from school or home during school hours, school refusal is seen as a major manifestation of a neurotic disorder characterised by reluctance to leave home. Problems arise because different authors prefer different terms. Psychoanalysts tend to prefer school phobia, since this reflects the classical psychoanalytic belief that phobias arise by externalising frightening internal conflicts, and projecting them on to a neutral object such as school, which is then avoided. Davidson (1960) and Chazan (1962) refer to school phobia, while Hersov (1960a and 1960b) prefers school refusal. Evans (1966) uses "school avoidance" but also refers to school phobia. Cooper (1966) confusingly uses the term school refusal to include both truancy and school phobia.

Different writers conceptualise the condition in different ways, and do not always agree about its sharp distinction from truancy. The term school refusal is used throughout this report, except when referring explicitly to the work of a writer who prefers school phobia or some other term. The reason for preferring school refusal is simply that school phobia is misleading since the condition does not always involve a straight-forward phobia of school (and the psychoanalytic view of phobias is not widely accepted).

Withholding by Parents Parents may withhold their children from school unlawfully for many reasons. Horn (1977) cites employment on

the local farms as the prime cause of poor attendance in Oxfordshire in the 1890's. The School Board could - and did - exercise its powers to take parents to court, but had some reluctance to prosecute the children's employers; some of its own members were the worst offenders! More prosaic reasons for withholding a child are lack of suitable clothing, needing the child to help look after a younger sibling, or needing the child to do the shopping when the parent is ill.

Statements that a child is "withheld" distinguish him from a school refuser in not ascribing any quasi-medical condition to the child himself or to his family. There is also an implication that the parent is withholding the child; much of the literature on school refusal implies that the child is refusing to attend, in spite of his parents' attempts to persuade him.

#### TRUANCY

##### Characteristics of the Children and their Families Tyerman (1958)

compared 23 persistent truants selected by education welfare officers with controls selected from two child guidance centres in the same areas. There were, in fact, 40 children in Tyerman's original sample, but the remainder were either only occasionally truanting, or were at home with their parents' knowledge. The children were matched for age, sex and township. He found that the truants were significantly more likely than the controls: (i) to have parents who exerted control principally by corporal punishment; (ii) to live in unclean and overcrowded homes with more than three children in the family; (iii) to be inadequately clothed; (iv) to lack a strong emotional tie with a responsible adult of good standards; (v) to have fathers who were

unskilled workers and both parents taking little interest in their welfare; (vi) to be withheld from school unlawfully on occasion; (vii) to experience a faulty parent-child relationship. Looking at factors within the child he found that truants tended to have few friends, to be of below average intelligence, and to be retarded educationally. The last observation was consistent with Burt's earlier suggestion (1925) that truants tend to be backward. It is worth noting, however, that it is not legitimate to draw any causal connection between truancy and the characteristics noted by Tyerman. What he does seem to be showing is that truancy is associated with multiple deprivation in the Welsh town under study.

The average age in Tyerman's full sample of 40 children was eleven. This is consistent with later studies (Hersov, 1960a; Cooper, 1966b). It does not seem from these studies that family position is particularly significant, nor that there are any particularly frequent precipitating factors.

Tyerman's study has been widely quoted, so it is worth looking at its limitations. His emphasis on child and family variables at the expense of precipitating factors within the school has led to some severe criticism. Reynolds and Murgatroyd (1977), for example, complain that he "seems to feel justified in scapegoating parents and exonerating teachers, perhaps because this is convenient to a model of truanting which sees the parents as the cause of the problem".

This, perhaps, is criticism of Tyerman for not doing something which he never set out to do though it is certainly true that he does not pay similar attention to school and community influences. More serious is the problem facing any study which compares a clinic population with an arbitrarily selected non-clinic population. The

problem is that we do not know how far social, family and attitudinal characteristics influence referral. It may be that referral agencies consciously select children who do not have the characteristics of Tyerman's persistent truants, on the reasonable grounds that they are thought unlikely to keep clinic appointments.

This problem is to some extent overcome in Hersov's (1961a) comparison between a group of 50 truants, 50 school refusers and 50 child psychiatric departments' out-patients, since both groups of poor attenders had also been referred to the same department. Hersov's study sought to test the hypothesis that persistent absentees are split between the two principal diagnostic categories commonly used in child psychiatry (Rutter, 1965): (i) those whose behaviour is one facet of a "neurotic" disorder involving emotional disturbance or withdrawn introverted behaviour and (ii) those whose attitude and behaviour indicate a "conduct" disorder involving aggressive and/or anti-social behaviour.

The truants in Hersov's study did show many of the problems associated with "conduct disorder". Over three quarters had appeared before the Juvenile Court (a point dealt with in more detail in Chapter 4 when dealing with the connection between absence and delinquency). Between a third and a half had a history of enuresis, tension habits, "aggressive manifestations", persistent lying and wandering from home. Turning to factors in the child's environment, Hersov confirmed Tyerman's observations regarding inconsistent home discipline, but also noted a high incidence of absence of one or both parents in the first five years of life, and of fathers subsequently. Like Tyerman, he found his truants tended to have poor social adjustment, a poor standard of work, and to have a low average I.Q. Cooper (1966b), however, found that truants were working up to





standard for their intelligence, though their I.Q. tended to be lower than that of their peers.

School Influences Recent research on the school's influence on overall attendance levels is dealt with in Chapter 4. We are here concerned with causal or precipitating factors in the relationship between schools and the small proportion of absentees who fit our definition of truants.

Tyerman (1958) reported that nine of his 23 persistent truants stated fear of a teacher as the reason for their truancy. Other common fears were bullying or caning. Tyerman seems to discount these fears on the grounds that truants' excuses should probably not be accepted at face value. This conclusion was criticised by Reynolds and Murgatroyd (1977) but Hersov (1961a) devotes a similarly small amount of attention to school factors.

Cooper (1966b) found schools noticeably less sympathetic to truants than to school refusers. Truants were regarded as offenders. They were somewhat more likely than "normal" controls from the same class to have experienced frequent changes of school. Only  $12\frac{1}{2}$  per cent were in classes considered to be run on informal lines.

The lack of systematic attempts to examine causal or precipitating factors in the school represents a notable gap in the literature on truancy. This has not, however, prevented discussion of the subject. In an early article, Dayton (1928) opposed the current eugenicist lobby by arguing that mental deficiency is seldom a cause of truancy. He considered school factors a great deal more important. Claiming that truants usually dislike their teachers, he argued that this could



be "due to (their) vindictive attitude towards past offences". Large classes geared to the needs of the normal child, academic difficulties resulting from improper grading, and detention after school were all given as possible explanations.

More recently Jones (1974) goes further than Dayton in attributing responsibility for truancy to schools: "it seems not so much that school means nothing to them, but that they sense in school a lack of respect and sympathy for them". Jones also acknowledges the possible influence of powerful sub-cultures within the school which require truancy as a token of non-conformity with the "enemy". This would seem to be inconsistent with Tyerman's and Hersov's picture of the truant as a somewhat socially isolated child, but is in agreement with the notion of "secondary deviance" in the school setting, put forward by Hargreaves et al (1975). This point is considered further in Chapter 4.

### SCHOOL REFUSAL

The Children and their Families As indicated earlier, school refusal is regarded in the psychiatric literature as the main symptom in a neurotic disorder, usually indicative of disturbed family relationships. Following Broadwin's (1932) description of two school refusing children with obsessional fears about harm befalling their mother, the aetiology, current symptomology and treatment of school refusal have attracted extensive discussion.

In a detailed review Hersov (1977) considers that school refusal should not be regarded as "a true clinical entity with a uniform aetiology, psychopathology, course, prognosis and treatment, but rather a collection of symptoms or a syndrome occurring against the background of a variety of psychiatric disorders". Later in the same article,



Hersov states that the clinician has to decide what causes the school refusal, and cites as possibilities separation anxiety, a phobic manifestation, an aspect of depressive illness, a psychotic disorder or a personality disorder. The problem can occur at any age, though acute onset is more often seen in younger children (Hersov, 1977). There is a tendency for the children to be the oldest or youngest in the family or an only child (Chazan, 1962). Common precipitating factors are a change of school or class, death or disturbance in the family, and illness (Hersov, 1977).

While there is broad consensus in the psychiatric literature on the overall clinical picture, there is considerable disagreement on points of detail. Johnson et al (1941) were the first authors to use the school phobia label for Broadwin's (1932) "exceptional" cases of truancy. They described a mixture of hysterical, phobic and obsessional symptoms, and related these to an unusually dependent mother-child relationship. Subsequent attention to this relationship led to an emphasis on separation or anxiety as a frequent characteristic of school refusal (Estes et al, 1956; Eisenberg, 1958; Waldfogel et al, 1957). Separation anxiety is not, however, a necessary condition for a diagnosis of school refusal. In his study of 50 school refusers referred to a hospital child psychiatry department, Hersov (1960a; 1960b) found fear of separation from home reported in only seventeen cases, and Berg (1970) found differences in dependency on parents between adolescents who did not show acute onset and those who did.

There has been similar disagreement on the significance of depressive reactions in school refusal. Davidson (1960) found signs of depression in 23 out of 30 cases, but in the same year in the same city Hersov (1960a) reported it in only ten out of 50 cases. This inconsistency may simply reflect differences in diagnostic practice. Davidson's children



were withdrawn and unable to take part in social activities; it is not clear that they would have been regarded as depressed if the criterion for diagnosis had been inability to experience pleasure or to accept the possibility of recovery and successful return to schools (Gittleman-Klein and Klein, 1971).

Other traits reported in many of the children are eating problems, sleep disturbance, tension habits such as nail-biting, aggression towards other members of the family (Hersov, 1960a), emotional immaturity and dependency, timidity and nervousness (Chazan, 1962), fastidiousness, and anxiety to respond to authority (Cooper, 1966b). In addition, a "somatic disguise" is said to be characteristic of school refusers (Eisenberg, 1958). The child is ill, but no organic cause is evident; the overt physical symptom reflects a covert refusal to attend school, or simply to leave home.

Family relationships in cases of school refusal have attracted attention, especially from writers with a psychoanalytic orientation. Developing the early suggestions of a faulty mother-child relationship (Broadwin, 1932; Johnson et al, 1941), Davidson (1960) and Kahn and Nursten (1968) claimed that the mothers gave their children conflicting messages; at first it seemed they were trying to send their children to school, but gradually it became clear that they were themselves maintaining the problem.

Hersov (1960b) attempted a more detailed analysis, and identified three main groups of relationship: (i) "an over-indulgent mother and inadequate, passive father, dominated at home by a wilful, stubborn and demanding child who is often timid and inhibited in social situations away from home;" (ii) "a severe, controlling and demanding mother who manages her children without much assistance from her passive husband; the child is most often timid and fearful away from home, and passive and obedient at home, but may become stubborn and rebellious at puberty";

(c) "a firm, controlling father who plays a large part in home management and an over-indulgent mother closely bound to and dominated by a wilful, stubborn and demanding child, who is alert, friendly and outgoing away from home".

Intellectual and educational assessment has generally shown a majority of school refusers to be of high average intelligence or above when compared with other clinic populations (Hersov, 1960a; Chazan, 1962; Cooper, 1966b). This conclusion has, however, been questioned in America by Hampe et al (1973) on the grounds that school refusers themselves constitute a clinic - and hence biased - population. Different studies have yielded conflicting results on the educational status of school refusers. Chazan (1962) reported that more than half the children in his study were experiencing great difficulty with their school work. In contrast, only eight per cent of Hersov's (1960a) school refusers showed a poor standard of school work, and both Cooper (1966b) and Leventhal and Sibbs (1964) obtained similar results.

School Influences Studies of the school's possible influence in the development of school refusal are conspicuous mainly for their absence. Carroll (1977b) accepts the prevailing view in the psychiatric literature that school refusal should be included amongst medical reasons for absence. One result of this has been to focus attention on psychopathology in the child and his family at the expense of causal or precipitating factors within the school. Likely reasons for the dearth of research on school influences are:

- (1) the small number of children diagnosed as school refusers with the associated wide scatter of schools;
- (2) the professional training and bias of the psychiatrists and psychologists who make the diagnosis, which may incline them to



emphasise child rather than school variables.

In one of the few studies of possible school influences, Cooper (1966b) found that neither size of school nor streaming policy within the school could reliably be said to differentiate school refusers from truants. On the other hand, the percentage of unstreamed classes was higher than the overall percentage in the area under study. A quarter of the sample children were on the register of classes considered to be run on informal lines, and a similar proportion attended schools which administered corporal punishment. As indicated above, teachers were a great deal more sympathetic towards the school refusers than towards the truants. On the other hand, only 60 per cent of heads were willing to consider changing a child's class or allowing him not to attend certain lessons. It is not known how often a change was actually arranged, nor whether it helped.

Chazan (1962) reported that 22 out of 33 school phobics stated difficulties at school as possible precipitating factors. The most common of these were dislike of punishment or being shouted at in class, and fear of other children. The latter is, of course, consistent with the observation noted above of difficulty in social relationships with other children. Eight children attending grammar schools showed anxiety associated with failure to adjust to new demands; four of these came from homes with no grammar school tradition and felt a sense of social inferiority.

The forms of treatment in common use with truants and school refusers are reviewed in Chapter 5, as are the characteristics known to be associated with good or poor outcomes.

#### OTHER CATEGORIES OF ABSENCE

Extended Illness Although illness is one of the legitimate reasons for absence from school, it is often impossible to state with confidence

whether a child's absence is attributable to illness. The point at which a slight cold turns into an upper respiratory tract infection requiring treatment is one which few doctors would be happy to define with confidence. This is reflected not only in the general concern in the medical profession about over-prescription, but also in doctors' refusal in some areas to issue medical certificates to children as proof of justified absence. Similarly, a recuperating child's fitness to attend school may depend on such indeterminate factors as the weather, the length of journey, whether he has to wait at the bus stop or can be taken to school by car, how warmly clothed he is, whether his school will make provision for him to remain inside at play-time and so on.

An even more difficult point to quantify is the effect of a child's attitude towards school - or towards separation from home - on his physical health. The "somatic disguise" in school refusal has already been mentioned. Yet for every diagnosed school refuser presenting in this way, it is likely that there are many children whose absence with minor complaints is prolonged by limited emotional resilience or by experience of stressful circumstances at home or at school.

Parental Withholding As stated earlier, psychiatric diagnosis distinguishes between truancy, school refusal and parental withholding. The last is used for all cases of poor attendance which do not fit the clinician's model. Two points should be made about it:

1) In practice this assessment seems to be used extremely seldom. This may indicate a high level of diagnostic reliability amongst referral agencies; alternatively, it may indicate a bias on the part of psychiatrists or psychologists against an assessment likely to result in punitive action against the child's parents; a related possibility is

that "diagnosis" of parental withholding implicitly negates the professional's role in treatment; there is no assumption of abnormal psychopathology either in the child or his parents.

2) The term parental withholding is an over-simplification. Children may remain at home with their parents' knowledge and consent for many different reasons. They may be kept at home to help look after younger siblings or a sick parent; they may be expected to help their parents with the housework or the shopping; they may remain at home because their parents have simply given up trying to persuade them to attend school.

Yet even these reasons over-simplify the position. In a longitudinal study of children's development Moore (1966) found that 80 per cent of ordinary children experienced difficulties at some stage in adjusting to their infants' school. The most frequent problem was over-dependence, with associated reluctance to go to school. In most cases, this is presumably dealt with satisfactorily by a mixture of firmness and sympathy. A physically or mentally sick parent, however, may lack the resources to cope with what is essentially a quite normal problem. When this happens, prolonged absence may result. To refer to this simply as parental withholding would be misleading, yet neither is it clear that the label of school refusal would be appropriate.

#### QUESTIONS ARISING FROM THE EXISTING CATEGORISATION

School Influences There has recently been a good deal of interest in school variables associated with poor attendance. This work is reviewed in Chapter 4. It concentrates on the correlates of poor attendance in general, and does not focus on truancy, as defined here, in particular. Reynolds and Murgatroyd (1977) argue that more attention should be paid to school influences, maintaining that the emphasis on child and family variables in the literature on school refusal and

truancy reflects a theoretical model which regards the source of problem behaviour as lying within the individual and/or his family.

It is probably true that the traditional child guidance team of educational psychologist, child psychiatrist and social worker was concerned primarily with individual differences and family structure. The more recent emphasis amongst educational psychologists on the sociology and social psychology of schools (Gillham, 1978) has not as yet made much impact in the literature on poor attenders. Consequently, there is a need for a study which: (i) explores the possibility of causal or precipitating factors at school, and (ii) seeks to relate these to other factors in the child, his family and his community.

The "Clinical" Nature of School Refusal As stated earlier, school refusal is generally seen as a quasi-medical problem. In some cases, for example when the "somatic disguise" is suspected, medical oversight is undoubtedly necessary. Whether it is legitimate to select one numerically small group of absentees for psychiatric treatment seems much more doubtful. As we have seen, Moore's (1966) study showed that 80 per cent of ordinary children had difficulties in adjusting to infants' school. It is possible that only those with the most severe disturbance are eventually referred to psychologists as possible school refusers. Another possibility, though, is that some teachers and education social workers differ not only in their success in managing the problem themselves, but also in their willingness to refer to psychologists or psychiatrists.

A more fundamental objection to the medical aura surrounding school refusal is that it has unjustifiably concentrated specialist resources on a small, and perhaps arbitrarily selected group of absentees. Before accepting that this is an appropriate use of resources, more information is needed about the management of other, numerically larger

groups of absentees.

Validity of Distinction between Truancy and School Refusal Although the bulk of the psychiatric literature makes a clear distinction between truancy and school refusal, its validity has been questioned (Tyerman, 1968). The argument is not about the existence of poor attenders who have the characteristics described in the literature. Disagreement centres on the question whether these are discrete diagnostic categories, or merely opposite poles on the same continuum. The distinction is of more than academic importance. As we shall see in Chapter 5, school refusal seems to have a good prognosis, whatever treatment is used. In contrast, there is little evidence on the prognosis for truancy.

If the outlook for professional intervention in cases of school refusal is good, l.e.a.'s may reasonably ask how widely they should extend their selection criteria. Is it, for example, impossible for a child whose parents deposit him at school on their way to work - leaving the house locked - to be a school refuser? He may show all the "neurotic" symptoms associated with school refusal, yet he is not at home; moreover, he is absent without his parents' consent and probably without their knowledge.

A similar problem can be seen in the assessment of absentees living in areas with a high incidence of delinquency and other indices of social malaise. The implications of a court conviction differ from area to area, indicating gross non-conformity to prevailing norms in one district and relative conformity in another. Viewed in this light the distinction between truancy and school refusal loses some of its clarity. Moreover, it is insufficient to say the distinction remains valid, but that some children in each category have "mixed disorder"

indicating a combination of neurotic disorder and conduct disorder.

If the overlap is great enough, the distinction itself is suspect.

Referral Biases and Sampling Difficulties    The effects of possible differences in referral policy have already been mentioned. The fact that almost all absentees referred to psychiatrists are regarded as truants or school refusers could simply be an artifact of diagnostic policy. A more important point, however, is that virtually all the clinical literature on both truants and school refusers is drawn from samples that may be biased by referral practices. With the exception of some rather limited information from longitudinal studies, reviewed in Chapter 1, information is derived from pupils who have been selected for advice or treatment from a psychologist or psychiatrist. A study is therefore needed which: (i) investigates the needs and characteristics of a total sample of absentees in a stated area, and (ii) compares absentees who have been referred for specialist advice with the majority who have not.

## CHAPTER 4 SCHOOL, HOME AND COMMUNITY INFLUENCES - A Sociological Perspective

### INTRODUCTION

The psychological and psychiatric literature on the family characteristics of truants and school refusers was reviewed in Chapter 3. We are concerned here with sociological characteristics in the environment of poor attenders, both at home and in the immediate neighbourhood. We are also concerned with evidence that the school as an institution may exert influence on overall attendance levels, and with the factors within schools which mediate this influence.

The chapter will take a global view, making no attempt to distinguish between different descriptive categories of absentees. This is partly because the sociological study of poor attenders has not yet reached the stage where differentiation is possible. More important, though, is the view that a basic problem in the psychological literature is its emphasis on categorising children according to presenting symptoms; an alternative approach is to describe the sociological processes and conditions, in or out of school, which are associated with behaviour frowned upon by authority.

### HOME AND COMMUNITY INFLUENCES

Social Class Correlates A number of studies have reported an association between attendance and social class. As we have already seen, Fogelman and Ross (1965) showed that pupils who were often absent for their first two years at school, but attended regularly thereafter, tended to catch up in their educational attainments, unless their parents came from social classes IV or V. The N.C.D.S.

showed that only six per cent of pupils missing more than fifteen per cent of attendances came from social class I, compared with twenty per cent from social class V. With absence rates of less than five per cent this tendency was reversed (Fogelman and Richardson, 1974).

In Central Scotland, Mitchell (1972) found that poor attenders tended to come from families where the father was an unskilled or semi-skilled worker. The same tendency was evident in Aberdeen (May, 1975) where it was even more marked in the case of absentees regarded by their teachers as truants. Earlier Mitchell and Shepherd (1967) showed that girls who liked school "very much" were significantly more likely to have fathers in non-manual types of employment, though this did not apply to girls who disliked school or liked it only "as much as most children". In contrast, boys who disliked school were significantly more likely to come from non-manual homes.

Family Background and Environment Several studies have reported absentees as more likely to come from disadvantaged home backgrounds. Using evidence from the N.C.D.S., Tibbenham (1977) showed that overcrowding in all social class groupings was more common in the families of absentees, supporting May's (1975) earlier evidence that 38 per cent of truants (defined by teachers) lived in families with five or more children, compared with 26 per cent of non-truant absentees. In the same study May also showed that truants were more likely to be illegitimate, and that their fathers were more likely to be unemployed. Mitchell (1972) too found family size to be largest in the case of pupils absent entirely for non-medical reasons.

Two points emerge from the rather scanty literature on the back-



grounds of absentees: (i) although absentees are more likely to come from disadvantaged backgrounds, only a minority of children from such backgrounds become absentees. Wedge and Prosser (1973) for example, showed that only one child in 50 from socially disadvantaged families missed more than three months schooling. The second point is that the reported correlations between absenteeism and disadvantage do not imply a causal connection. Whether or not any particular child is absent from school probably depends not on his family size nor his family's income, but on other factors within his home, school or community.

Association with Delinquency As early as 1925 Burt was claiming an association between delinquency and truancy. Tennent (1971a) in fact lists twenty studies of juvenile or adult offenders which reported at least twenty per cent of the sample as having a history of truancy. As Carroll (1977b) and Tennent (1971a) rightly point out, though, the fact that many delinquents have a history of truancy does not necessarily imply that a similar proportion of truants will have a history of delinquency.

There is some evidence that truants are a high-risk group for delinquency. Tyerman (1958) reported that school welfare officers identified 144 pupils appearing in court for non-attendance between 1946-52 as truants. Of these, 44 per cent had criminal records by the end of 1953. Hersov (1960a) noted that 74 per cent of his truant sample had appeared in court, compared with two per cent of his school refusers. May (1975) found that his truants were more likely to have criminal records than absentees not regarded as truants by their teachers. Both groups were more likely to have appeared in court than good attenders. Nevertheless, it is worth noting that less than half

the truants had appeared in court. Similar results were obtained by Ferguson (1952), who concluded that absentees were nearly twice as likely as good attenders to appear in Glasgow courts. In cases where absenteeism was due to truancy, nearly 40 per cent of the sample had a criminal record.

The picture to emerge from both clinic and epidemiological studies is of a consistent association both between truancy and delinquency, and between absenteeism and delinquency. There is a tendency for the association to be more marked when truancy is defined strictly, as in the present report. Nevertheless, it is equally clear that truancy is neither a necessary nor a sufficient cause of delinquency. As both May and Tennent emphasise, there is a need for further studies which "go beyond showing a correlation between truancy and delinquency and aim to explore the determinants of this relationship," (Tennent, 1971a).

#### THE SCHOOL'S INFLUENCE

A Different Explanatory Model The last ten years have seen a growing trend for research to explore the school's possible influence on the levels of attendance and delinquency. There are both practical and theoretical reasons for this trend.

The practical reasons need little explanation. Hamblin (1977) notes succinctly: "we might well as teachers concentrate on what is modifiable, namely the interaction of teachers and pupils;.... although it would be interesting to trace the origins of the attitudes which seem to be linked with truancy, one can question if this is the most urgent task". A second practical reason for investigating school influences is the failure of child guidance and psychological services to make any real impact on the problem of poor attendance. This is discussed further in the next chapter. Here we need only note that although

treatment of primary age school refusers has a good prognosis, there is scant evidence that the remaining 95-98 per cent of absentees have been - or can be helped by treatment from agencies outside the school.

At a more theoretical level, Werthman (1963) argued that discipline in schools depends on pupils and teachers accepting that the teacher's authority is legitimate a priori. Some pupils reject this premise, only accepting the teacher's authority if the teacher conforms to their own "rules" of behaviour. Teachers whose authority is not accepted as legitimate regard the pupils concerned as deviant.

This theme was developed by Cicourel and Kitsuse (1968) who argued that the social and educational typing of pupils by teachers and school counsellors can launch a pupil on a school career of delinquency or failure. Lemert (1967) gave the term "secondary deviance" to describe this process. Initial or primary deviance elicits a social reaction, or labelling which in turn creates further problems for the individuals concerned, with the result that they identify with each other and create further problems for their teachers, thus establishing a vicious circle of labelling and deviance.

This process has been described in the English secondary school setting. Hargreaves (1967) argued that two opposing sub-cultures within a secondary school resulted from the school's streaming system. The teachers at the school would presumably have argued the reverse case - that the existence of an anti-school sub-culture necessitated streaming for the benefit of the brighter, more co-operative children - but this view overlooked the fact that low-stream boys in the first two years were not on the whole united in their opposition to the school's value system. This opposition arose from the recognition that they had been "written off" as examination prospects. Hargreaves

commented laconically: "if the examination is the carrot by which we entice the horse to run, we should not be surprised if the horse stands still when we take the carrot away". More recently, Hargreaves et al (1975) have described in greater detail the social interaction between pupils and teachers which results in certain children being labelled as difficult, and consequently forming themselves into a deviant, anti-social sub-group.

If these arguments can help to explain the development of deviant behaviour at school, it seems logical that they may also explain many instances of absence from school. At first sight the increase in unjustified absence rates in the last two years of secondary education seems to support the argument. It is possible, though, that community factors may be more influential for older pupils, and that these may account for increased absence rates.

Evidence for School Influences Only one study has been traced which specifically investigated attendance rates in schools drawing pupils from apparently similar areas. Reynolds (1977) compared attendance rates over seven years at nine secondary modern schools in a Welsh mining valley and found marked and consistent differences between the schools. The average attendance over the seven years ranged from 77 per cent to 89 per cent. Similar differences were found in delinquency rates and in educational attainments; schools with high attendance tended to have fewer delinquents and better examination results. Analysis of demographic variables in the schools' catchment areas failed to produce any satisfactory explanation for the differences, indicating that they were more likely to reflect differences in the effects of the schools' organisation than in the pupils they admitted.

Further incidental evidence comes from studies of delinquency

among pupils from different schools. Both May (1975) and Finlayson and Loughran (1976) reported that truancy was high at "high delinquency" schools. In view of the consistent association between absenteeism and delinquency it is reasonable to assume that studies which demonstrate the influence of schools on delinquency rates may be regarded as evidence for a similar potential influence on absence rates.

The earliest statistical evidence that schools exert an influence on whether or not their pupils become delinquent came from Tower Hamlets (Power et al, 1967; 1972; Phillipson, 1971). Power's conclusions were criticised on methodological grounds by Baldwin (1972) and other studies have suggested that high delinquency schools tend to admit more pupils who might reasonably be regarded as at risk on the basis of evidence from their home district (Farrington, 1972; West and Farrington, 1973). On the other hand, a longitudinal study in South London has shown that a pupil's secondary school may have a marked influence on his psychiatric and social adjustment (Rutter, 1977; 1978; Rutter et al, 1979). This last study is not only the most recent but also the most detailed. The authors followed the progress of pupils into twelve secondary schools in inner London. After controlling for intake, they found that the schools differed in attendance rates, behaviour in school, delinquency outside school and examination results. Earlier work had shown that differences in the incidence of psychiatric disorder between London and the Isle of Wight were attributable to school as well as family conditions (Rutter et al, 1975; Rutter and Quinton, 1977). This is consistent with Cannon's (1970) observation that not only the amount but the type of delinquency seemed to vary from school to school in similar areas, and with other evidence in London that referral rates to child guidance and juvenile

delinquency rates vary independently of the effects of neighbourhood (Gath et al, 1972; 1977).

School Policy and Pupil Perceptions Although many of the individual studies can be criticised on methodological grounds, they have come to similar conclusions (Mortimore, 1977). Accepting, then, that certain aspects of school are capable of influencing pupils' attendance or behaviour, for better or for worse, the next question to consider is the variables which mediate this influence.

Initial research concentrated on structural variables such as the age of the school and class size. The results were disappointing. Both the Coleman report in America (Coleman, 1966) and much of the Plowden report in England (D.E.S., 1967) were pessimistic about the school's capacity to influence its pupils' progress or their social adjustment. How well a child read and whether he showed signs of maladjustment was thought to depend a great deal on his constitution, his family and his neighbourhood, but only to a very small extent on his school.

More recent studies which have investigated pupils' perceptions of school and social relationships in school have proved more fruitful. In Ireland Eaton and Houghton (1974) found persistent absenteeism to be linked more with adolescents' belief that school failed to meet their emotional needs than with any attitudes towards homes. A study of pupils' perceptions in high and low delinquency schools in the north of England suggested that the poor relationships associated with high delinquency levels were between teachers and their classes, rather than between teachers and individual pupils. This perhaps suggests that setting up elaborate pastoral care systems to counsel difficult pupils will be ineffective since the problem lies in defensive,

authoritarian behaviour of teachers with their classes rather than with individuals.

Conflicting evidence on absentees' perceptions of school has been obtained with the School Climate Index (Finlayson, 1970). Kavanagh and Carroll (1977) found that poor attenders derived less emotional satisfaction from the school environment than good attenders; they tended to consider their teachers less concerned for them as individuals, and to be less democratic in their management of pupils. Jackson (1978), however, obtained results suggesting the reverse; his poor attenders tended to have a better perception of school than good attenders.

It is possible that Jackson's apparently anomalous results were due to the fact that he carried out his study in a large comprehensive school where many pupils were placed under a good deal of academic pressure. The good attenders tended to be in the "academic" bands, and to come from highly motivated homes. The poor attenders tended to come from a less affluent part of the catchment area with less parental motivation. They tended to be in a lower band where there was less overt academic pressure. If this is a valid explanation for Jackson's findings it appears to contradict Hargreaves' (1967) idea that opposition to school was associated with lack of opportunity to take exams. Nevertheless, it does give some indication of the complexity of the variables within schools which may affect both attendance and attitudes.

Reynolds and Murgatroyd (1977) reported the results of demographic and participant observation studies in their nine secondary modern schools. Although they found a mild trend for the smaller schools to have better attendance rates, a regression analysis showed it was "the rules operated by the school which tend to determine the extent of

its absence rates" rather than the age or adequacy of buildings, its class size, teacher turnover or the number of pupils on roll. More specifically, the successful schools tended to have prefect systems, to enforce uniform for younger pupils, and to have low rates of corporal punishment.

Reynolds (1976) suggested that attendance and behaviour deteriorate when pupils and teachers refuse a truce. If pupils feel that teachers unnecessarily enforce inflexible rules they themselves become inflexible in their resistance to these rules.

Schools' strategies for dealing with truants have attracted attention (Murgatroyd, 1974; Lewis and Murgatroyd, 1976; Murgatroyd, 1977). Both teachers and pupils tend to see responsibility for truancy as a disciplinary matter, rather than as an aspect of pastoral care. Although the three counsellors in one school saw themselves in a caring role, pupils saw two of their main responsibilities as checking attendance registers and reporting truants to the education welfare officer.

Carrying the analysis a stage further, Reynolds and Murgatroyd (1977) noted marked differences in management policy between schools with a truancy problem and schools where truancy occurred infrequently. The former dealt with truancy at "middle management" level of year tutors or heads of houses; only two out of 29 schools held class teachers responsible for dealing with truancy. In contrast, two thirds of the schools without a self-defined truancy problem made these teachers responsible for dealing with truants. It is possible, of course, that the appointments of middle management staff is the result of a truancy problem which may or may not be associated with comprehensive reorganisation. On the other hand, the authors found that the form tutor's role had actually



possibility that the growth in middle management might have caused an increase in absence in some schools.

As noted above, the most recent study is that of Rutter et al (1979). Having established the existence of school differences, they analysed the characteristics of the schools concerned. This study has been reviewed widely and favourably, but rather uncritically. The authors are much more cautious than many reviewers in their statements about the schools' influence on their pupils' adjustment and educational attainments. Nevertheless, in presenting their evidence for school influences on delinquency and attendance levels they are not altogether successful in distinguishing intake variables from variables within the schools. This said, their work is undeniably important in showing that in the most successful schools there was a strong emphasis on academic progress and attainments, a prompt start to lessons, and generally low frequency of disciplinary actions but high rate of recognition for positive achievement, well cared-for buildings, and a feeling by pupils that they could approach teachers with a personal problem. Structural variables, for example size of school, and organisational variables, for example whether pastoral care was organised on a house or year system, seemed relatively unimportant.

### CONCLUSIONS

The literature shows a consistent trend for absentees to come from disadvantaged backgrounds. The association between absenteeism and delinquency is similarly consistent. Although the evidence is not yet conclusive, there is good reason for believing that the school environment has an influence on attendance levels, and that this influence is mediated by social rather than structural variables.

Unfortunately, much of the debate has been conducted within a somewhat narrow theoretical model. Whereas the psychological and psychiatric literature has tended to underestimate or even ignore the school's contribution, some of the sociological literature seems to imply that psychological factors within the individual child or his family are similarly unimportant. Neither view is correct.

Rutter (1978) puts the argument in perspective: "Single chronic stresses are surprisingly unimportant if the stresses really are isolated. The damage comes from multiple stress and disadvantage, with different adversities interacting and potentiating each other's influence."

Information on the characteristics of schools which succeed in protecting their pupils from delinquency and in encouraging high attendance levels is still remarkably incomplete. Similarly, we still know little about the factors associated with disadvantage which contribute to unjustified absence. Both areas require further investigation.

CLINICAL TREATMENTS

INTRODUCTION

The term "clinical treatment" does not necessarily imply that the treatment was carried out within the confines of a clinic or hospital, nor that the treatment is carried out by psychiatrists or psychologists. The term is used in a broader sense to include approaches in which the primary treatment method has its origin in the theory and practice of applied psychology or psychiatry. Hence, case-work carried out at the client's home by a social worker would be included in this approach, since it has its origins in psychotherapeutic theory, even though social work is regarded as a discipline in its own right. Similarly, a behaviour therapy programme carried out by a teacher would be included.

School Refusal. The treatment of school refusal has attracted extensive attention. Many different approaches have been described, but until the development of behaviour therapy their conceptual underpinning generally came from psychotherapeutic practice (Hersov, 1977). This was consistent with theories of aetiology which emphasised psychopathology in the family, or less frequently, the child.

Initially, the principal aim of treatment was improvement in the relationship between mother and child (Johnson et al, 1941; Kahn and Nursten, 1962), but other work has placed a higher priority on the family relationships in general, rather than the mother-child relationship in particular (Hersov, 1960b; Eisenberg, 1958; Bowlby, 1973). These studies

also recognised the possible influence of the father's attitudes or personality. This was reviewed by Skynner (1974) who argued in favour of conjoint family therapy in which the therapy sessions aim to loosen the over-close tie between mother and child by involving the rest of the family.

Although the majority of studies advocate out-patient treatment, hospital admission is a recognised possibility. Of Hersov's (1960b) 50 cases, 22 were admitted as in-patients. Treatment was more intensive than with the out-patients. It consisted of three psychotherapy sessions per week, dealing with anxieties about family and school. Play therapy was used with younger children, and interpretative face-to-face discussion with older children and adolescents. Berg et al (1970) stressed the importance of a therapeutic community with a generous staff-patient ratio in an adolescent in-patient unit. They also noted that although 50 per cent of patients showed obvious difficulties in accepting a temporary stay at the unit, these cleared up in all cases.

The timing of return to school has been the subject of controversy. Davidson (1960) argued that premature pressure would result in panic or even attempted suicide, though firmness was appropriate at the right moment. A very similar view was taken by Greenbaum (1974) in criticising advocates of early return (Klein, 1945; Rodriguez et al, 1959). In general, the argument against early return is that it reduces the chances of resolving the hypothesised underlying conflicts which lie at the root of the problem. The arguments in favour of early return are that prolonged absence results in educational retardation, loss of friendship (though most studies have reported school refusers as socially isolated anyway), and the emotional gains from being at home.

There is associated controversy about the relevance of school factors. As mentioned in Chapter 2, several studies have mentioned the possibility of pressures at school precipitating school refusal (Hersov,

1960b; Chazan, 1962; Klein, 1945), though greater emphasis is generally laid on family relationships. Bowlby (1973) regarded complaints about school as a mere rationalisation, but was sharply criticised by Hersov, (1977) who maintained that: "complaints by children and parents about any aspect of the school situation should be taken seriously and investigated as carefully as possible before discarding them as important factors in aetiology and treatment ..... It seems reasonable to explore in depth the child's own perception of the school situation if one is to fully understand the reasons for non-attendance."

If overt pressure for return to school is exerted in the course of psychotherapeutic treatment, it is reasonable to ask whether success, as judged by subsequent attendance, is mediated by this pressure or by the psychotherapy. Eysenck and Rachman (1965) point out that methods of gradual return have much in common with behaviour therapy treatment, even if the aim is to bring into the open anxieties or conflicts that can later be resolved in clinical interviews (Talbot, 1957). Chazan (1962) notes the possible usefulness of change of school, in combination with other forms of treatment such as psychotherapy, play therapy or remedial teaching.

Treatments derived from behavioural analysis and therapy have increased in popularity in the last fifteen years. Typically, treatment is based on a thorough analysis of the presenting problem, though this does not necessarily imply a direct attack on the symptom itself (Galloway, 1977; Galloway and Goodwin, 1979). In consequence, there is a tendency to give more attention to school factors, but it is considered important to distinguish between fear of school and fear of leaving home, since quite different treatment plans are required (Eysenck and Rachman, 1965; Ross, 1972). Blagg (1977), however, argued that the initial interview should always be held at the child's school.

Coolidge et al (1957) discriminated between two types of school

phobia. In Type I, the phobia was a neurotic crisis, seen as a conditioned response to the separation involved in school attendance. Type II, in contrast, was seen as a chronic "way of life phobia", in which the school phobia was merely one of several maladaptive responses which had developed over time, associated with serious emotional problems in at least one parent. Type I has proved a great deal easier to treat. Kennedy (1965) insisted on immediate return to school, followed by an interview with parents and support from clinic staff. Parents were told to be firm, not to discuss school attendance with the child, and to compliment him when he stayed in school.

The outcome for school refusal is good, whatever treatment is used. Most studies have reported success rates of well over two thirds (Davidson, 1960; Hersov, 1960b; Coolidge et al, 1964; Clyne, 1966), though Kennedy's (1965) 100 per cent success rate with Type I school phobics is exceptional. It seems, however, that the prognosis is better with younger children. Berg's (1970) follow up of adolescents who had left an in-patient unit reported 41 per cent as "undoubted failures", and Rodriguez et al (1959) found that the prognosis for pupils aged more than eleven was much less favourable than for younger children.

Two retrospective studies have investigated the prevalence of school refusal in adult psychiatric patients. Berg et al (1974) asked agoraphobic women about their school attendance and found a history of school phobia was associated with early onset of agoraphobia, though only in a small proportion of cases. Similarly, Tyrer and Tyrer (1974) found a history of school refusal in more adult psychiatric patients than controls, but concluded that most school refusers will become normal adults.

Truancy and Other Reasons for Absence Compared with the extensive

literature on the treatment of school refusal, there appears to be an astonishing dearth of work on other forms of absence. Pupils withheld by their parents may be assumed not to require psychological help (albeit on no solid evidence), but this does not explain the apparent lack of interest in the treatment or management of truancy.

Brooks (1974) described the use of contingency contracts with truants. The school counsellor drew up a written contract between pupil, parent and school in which attendance was reinforced by previously agreed rewards. Brooks reported improvement, but his cases seem to have been fairly straightforward as it was not thought necessary for the contract to require active intervention from the school, for example helping the child to overcome his sense of educational failure by teaching him to read.

Only two studies have been traced which focused on poor attenders without distinguishing them from truants. Morgan (1975) compared three behaviour modification procedures with elementary (primary) school children. He found a combination of material rewards and social reinforcement from peers the most effective procedures, but his follow-up period was unfortunately very short. Hoback (1976) placed more responsibility on the school, emphasising the need to create an environment and curriculum which pupils and parents see as relevant to their needs.

Counselling procedures have been used both by teachers and outside personnel. A number of small-scale studies with truants have reported encouraging results, though again the follow-up periods were short (Law, 1973; Sassi, 1973; Cain, 1974; Beaumont, 1976; Tumelty, 1976). In a much more extensive programme of action research, Rose and Marshall (1974) reported improvement in attendance and reduction in delinquency when counsellors or social workers were introduced into schools.

Questions Arising from the Clinical Literature The good prognosis for school refusal suggests that clinic-based services may help children return to school provided: (a) they and their parents are able and willing to keep appointments; (b) they are of primary school age; (c) the school refusal is not secondary to a large number of social problems. Unfortunately, few studies have taken the possibility of spontaneous remission into account, though Kennedy (1971) accepted that his 100 per cent success rate with Type I school phobics (1965) was helped by good family backgrounds which made the chances of successful return high irrespective of treatment.

Poor prognosis may in fact be one of the main reasons for the relative lack of studies on truancy. Three points may be noted: (1) while school refusal is generally seen by psychiatrists as the main expression of a neurotic disorder, truancy tends to be regarded as just one aspect of a more wide-ranging conduct disorder; (2) conduct disorders have a worse prognosis, both for treatment and for spontaneous remission (Levitt, 1963; Robins, 1966); (3) truants and their families have a higher incidence of social problems than school refusers who are referred for treatment; these may make them less likely to co-operate with clinic-based services.

The first of these possibilities deserves further discussion. While there is a detailed theoretical literature on school refusal, the same is not true of truancy or other forms of absenteeism. Clinicians are in general agreement about the neurotic nature of school refusal, though they have differed on points of detail, for example the relative significance of depression, separation anxiety and avoidance conditioning (Davidson, 1960; Chazan, 1962; Ross, 1972). The point is that the literature offers a number of conceptual frameworks within which to base treatment programmes. The same is not true of truancy, still less of parent-condoned absence.

Yule (1977) reviewed studies which suggest that approaches drawn



from behaviour therapy or modification have been successful with a variety of behaviour problems both in the school and the home. As with behavioural treatments of school refusal, the common conceptual underpinning of these studies is a behavioural analysis which describes how the child and other people, adults or children, interact with each other in creating or maintaining the presenting problem. This approach is suitable for the study of and treatment of a problem in which the evidence suggests a highly complex interaction between precipitating variables in the family, the neighbourhood, the child himself and the school.

Seen in this way, clinic treatments may have an important role in the treatment of some truants, but are unlikely to be effective unless combined with other approaches which tackle the problem in its social context. In view of the complexity of reasons for illegal absence, it is highly doubtful whether any single approach, such as individual psychotherapy or a behaviour therapy technique, is ever justified. Clinical treatments, whether carried out by an untrained teacher-counsellor, a psychotherapist or a behaviour therapist, can nevertheless form part of an overall programme based on a thorough initial assessment (Galloway, 1977).

A further point is that the centralised child guidance clinic team of psychologist, psychiatrist and social worker has come under attack (Tizard, 1973; Loxley, 1974), on the grounds that it is expensive, ineffective and too remote from school. It is being replaced in some areas by a more loosely knit network of services as proposed by the Court Committee on Child Health Services (D.H.S.S., 1976).

#### COMMUNITY AND SCHOOL BASED APPROACHES TO MANAGEMENT

Social Work Teams The generally favourable results of an action-research project which introduced counsellors and social workers into school have

already been mentioned (Rose and Marshall, 1974). Social work in the school nevertheless remains a controversial topic, with a multitude of opportunities for accidental or intentional misunderstanding on each side (Saltmarsh, 1973; Fitzherbert, 1977a).

In principle, the education social work service (still known in many areas as the education welfare service) is well placed to provide an advisory service to schools as well as a social work service to absentees and their families. The e.s.w. service is the branch of the l.e.a. responsible for investigating cases of poor attendance, and when appropriate applying the formal sanctions described in Chapter 1. In practice, the service is still the Cinderella of the social services (Fitzherbert, 1977b) in spite of the recommendation of the D.E.S. sponsored Ralphs Report (Local Government Training Board, 1972) which concluded that its members should have social work training. Although some l.e.a.'s, amongst them Sheffield, are making notable attempts to recruit trained staff and to extend the role of the service, in many areas its members are unfortunately still seen as "school bobbies", with responsibilities limited to school attendance in its narrowest sense. This makes it difficult for e.s.w.'s in these areas to work as equals with teachers in drawing up programmes for absentees' return to school, since such programmes must tackle the complex interaction between educational, social and emotional factors that is so often seen.

An encouraging model which is gaining favour in a number of l.e.a.'s is for the support services of school health, educational psychology and e.s.w.'s to base themselves in secondary school catchment areas. As the service responsible for cases of poor attendance, e.s.w.'s co-operate with teachers in preliminary investigations. Ideally, these include a home visit, generally from the e.s.w., and an interview with the child about possible difficulties at school. Sometimes study of the attendance register shows a consistent pattern of absences, for example

from certain subjects, or at the start of the week. When a pupil has frequent absences due to minor illnesses, advice is sought from the school's visiting doctor, who may involve the educational psychologist or child psychiatrist if he thinks the illnesses may be symptomatic of other problems. Other children may be referred directly to the visiting psychologist, or discussed informally with him at a weekly staff meeting on pupils' welfare.

Liverpool l.e.a. extended this approach. Each area had a social education team headed by an "education guidance officer" whose job was to co-ordinate the efforts of all the available educational, social work and medical agencies to help both child and school (Brandon, 1974). Although the teams were based in the education department, it was hoped that they would be able to draw on the skills of other personnel, and thus prevent overlap in service provision. It is not clear how far this was in fact possible, and Brandon's account placed the emphasis somewhat heavily on the child's and family's problems rather than on contributory factors in school. Nevertheless, the social education team constitutes an interesting attempt to extend and co-ordinate the available resources for dealing with truancy and related problems.

Management Within the Ordinary School Brook's (1974) use of contingency contracts has already been mentioned. A rather different approach was advocated by Boyson (1974). He appeared to be confused as to whether responsibility for truancy lay with slack teachers, neglectful parents or subversive administrators, but described his own approach as "regular if not eternal vigilance". Teachers at his school made frequent spot checks for hidden truancy, with immediate phone calls to parents - at work if necessary - whenever any unexplained absence was discovered.

Whether this is seen as coercive or caring may depend on one's point of view. The same may be said of the role of the school counsellor, teachers responsible for pastoral care, and special units for problem pupils. Reynolds and Murgatroyd (1977) have argued that the appointment of counsellors exaggerates the influence of individual staff and underestimates the capacity of the school's internal organisation in generating its own problems.

Special units are nevertheless a growth area in British education. Many of them cater inter alia for truants or school refusers. Teachers' opinions about basing these units in ordinary schools are divided. Some believe their primary focus should be on therapy, others on deterrence; while some emphasise the need to protect the conforming majority from undesirable influences (Lodge, 1977) others stress the therapeutic and rehabilitative function, and encourage social workers, psychologists and psychiatrists to participate in the overall planning and more immediate recommendations for individual children (Jones, 1973; 1974). Some head teachers, however, oppose the introduction of any form of unit for absentees or disruptive pupils. Three reasons are commonly put forward: (1) the existence of such a unit "normalises" deviant behaviour in the eyes of pupils, and thus reduces the potential influences of group pressure from the conforming majority; (2) it is as unsound educationally to separate problem pupils from their peers as to cream off the academic elite into grammar schools; (3) the units reduce the commitment of class teachers and subject teachers to handle problems themselves, with consequent reluctance to co-operate in a pupil's return from the unit.

A growing number of head teachers appear to think these obstacles can be overcome. Following the early reports (Boxall, 1973; Jones, 1973, 1974; Labon, 1973) over 200 schools have established special groups (Berger and Mitchell, 1978). How many of these cater for truants as well

as disruptive pupils is not known, nor is there yet any reliable body of information about their methods or their results.

Special Units Outside Ordinary Schools. Parallelling the development of special units in ordinary schools has been a similar development in which units have been established to take "hard-core" cases from a number of different schools. Some of these cater primarily for delinquent or disruptive adolescents, but generally find that many of their clients have had school attendance problems. Others cater primarily for truants. No consensus has yet emerged regarding responsibility for these centres. Some are set up by the local education department and are run exclusively by teachers; others are set up by social work departments, with teachers seconded from the education department. In Scotland, provision of day units for truants has been encouraged by the Pack Report, in preference to residential provision (Scottish Education Department, 1977).

An inquiry by HMI (D.E.S. 1979) showed that 72 per cent of 96 l.e.a.s surveyed had established special units by 1976. Just over three quarters of the 239 units reported to HMI served more than one school. In fact, the results of this survey may have underestimated the number of units based in and serving individual secondary schools. There was possible ambiguity in the accompanying notes which stated that the survey was "not intended to include provision made by schools to deal with day-to-day disciplinary matters, such as sanctuaries or 'sin-bins', but only units which have been formally established to deal with the more serious behavioural problems." The possible ambiguity lay in the facts (i) that many l.e.a.s have helped schools to establish a sanctuary or similar special unit, for example by providing the school with an additional teaching post above the existing establishment; and (ii) that many sanctions, whether supported by the l.e.a. or not, exist to cater for pupils who might otherwise have to be considered for

exclusion or suspension.

HMI were critical of the quality of some of the buildings provided for units, and, to a lesser extent, of inadequate accommodation for practical subjects. Some of the units appeared to receive insufficient funds, both for capital and for day-to-day expenditure. There was some evidence that pupils attended the units more regularly than they had attended their previous schools, but no comparative figures were available, nor was there any break-down of the attendance of pupils selected to attend a court on account of truancy compared with pupils selected on account of disruptive behaviour. The percentage of pupils returning to their ordinary schools was reported as "difficult to calculate", but units catering for the secondary range contained a high proportion of disaffected 14-16 year olds for whom return was unlikely. Although the range of academic subjects offered in the units visited was wide, the number offered in individual units was inevitably small.

Rowan (1976) has noted that children are always accepted for outside units on the understanding that they remain on the register of their ordinary school, to which it is hoped they will eventually return. Although they share the common aim of providing an effective alternative to orthodox schooling, they vary widely in their methods. The Islington Centre in London caters for truants referred by local secondary schools (Grunsell, 1978). Their relatively unstructured approach tolerates a wide range of disturbed behaviour within an accepting framework reminiscent of some of the pioneer workers for maladjusted children. The Hammersmith Teenage Project (N.A.C.R.O., 1978) also caters for truants, though truancy is secondary to a history of delinquency as a criterion for admission. This project breaks new ground in the treatment of truants (and offenders) in England by employing as staff people who have themselves been in trouble as adolescents. Having similar backgrounds and problems to the project's youngsters, it is hoped that

these workers would provide more acceptable identification figures and thus offer a model of successful emergence from an incipient criminal career.

The majority of special units and centres catering for truants appear to operate on relatively unstructured lines. Descriptive accounts are not hard to find, but evaluative studies are almost non-existent. One consistent trend from the small available literature is that successful return to school is seldom achieved. The Islington Centre and the Hammersmith Project had to dismiss this as impractical for most children. This may have been due to the disturbance in the pupils; alternatively, it may be attributable to the units providing so radical an alternative to conventional education that realistic pressure to return would have run counter to their practice and philosophy. A third possibility is that the schools themselves may have been less than enthusiastic about the return of their poor attenders. Follow-up studies on the subsequent careers of truants who have attended such centres, compared with truants who remained in conventional education, are urgently needed. (Galloway, 1979).

#### Questions Arising from Accounts of Community and School Based Approaches

Legitimate concern about absenteeism has not extended to careful evaluation of the many different approaches to the management of absenteeism. This applies both to community based projects such as Liverpool's educational guidance teams, and to special units within or outside ordinary schools. Galloway and Goodwin (1979) have noted the same haphazard growth and lack of evaluation in special education for ESN(M) and maladjusted pupils.

An exception to the general lack of success in returning pupils to school is the Hungerford Centre in London (Lane, 1977a, 1977b). The centre offers short-term treatment based on a contract between each child, the centre's staff and the referring school. Significantly, the referring

school is involved in drawing up the contract which can, when necessary, specify what the school should do to facilitate the pupil's return. The child is expected to keep to his contract and can see whether the centre and his school keep to theirs. Training and advice is offered to the ordinary school's teachers and the child is consciously taught how to cope with the situations that had previously led to confrontation or escape. The centre caters primarily for disruptive pupils, some of whom, nevertheless, have attendance problems. This would seem a logical and promising avenue for further research, particularly if pupils' families can also be involved in the contract (Galloway, 1979).

Legal Sanctions The sanctions available and the limited information on their prevalence were reviewed in Chapter 1. We are concerned here only with the even more limited evidence on their efficacy. Berg et al (1977) followed up the attendance of pupils brought before Leeds juvenile court for truancy. Their results showed that attendance was better in 117 cases when the magistrates adjourned the case, repeatedly bringing the child back to court until attendance improved, than in 36 cases where they placed the child on supervision to a social worker or probation officer. The adjourned group had a mean of 41 absences out of a possible 190 in the six month period after coming to court; with the supervised group the mean was 73. About ten per cent of the adjourned group missed more than half their attendance, compared with over 25 per cent of supervised cases.

Adjournment was nevertheless not a cheap procedure. Of the 117 children adjourned, 53 were placed on interim care orders for three weeks within the period from one to twelve months following their first appearance in court, and altogether 63 pupils were eventually dealt with by care orders. In effect, this means that the problem, with parental rights, was handed over to the Social Services Department. It is not



clear whether all of these care orders were made primarily on the grounds of poor attendance. Berg et al (1977) pointed out that outcome was less satisfactory in pupils from their adjourned group who had been made the subject of interim care orders than in adjourned pupils for whom no such order was made. As interim care orders were only made when adjournment on its own was failing to achieve satisfactory results, this is perhaps not surprising.

This study is the only one traced which followed up the subsequent attendance of absentees brought before a juvenile court. No study has been traced of the subsequent attendance of absentees whose parents have been prosecuted in the magistrates' court for their children's poor attendance. Similarly, no study has been traced which compares subsequent attendance of absentees in connection with whom no legal action has been taken with absentees who themselves, or whose parents, have appeared in court.

Tennent (1970) found that about half of a group of London truants were placed on supervision, about a tenth were placed in care, while no legal order was made on the remainder. About 21 per cent of the supervision group were brought back to court, and a third of these were then placed in care. Another part of the study, however, (Tennent, 1971) showed that over 30 per cent of boys in court for truancy were remanded in custody, a similar procedure to the interim care order under the present law. The remanded children tended to have a higher number of previous convictions. Unfortunately, there is no evidence on subsequent attendance.

Although both Berg and Tennent referred to all pupils appearing in the juvenile court for poor school attendance as truants, it is clear that this was a very loose use of the term. Any absentee may be taken to court under Section One of the 1969 Children and Young Persons Act. It is probably not the case that the parents of the withheld group are

charged under Section 40 of the 1944 Education Act, while truants are taken to the juvenile court; magistrates courts can - and in Sheffield not infrequently do - instruct the l.e.a. to take the children of the parents appearing before them to the juvenile court.

There is, however, evidence that a substantial number of absentees appearing before the juvenile court display the symptoms associated with school refusal as well as with truancy. In Leeds Pritchard (1974) found that his school phobic group of absentees aged five to twelve were proceeded against significantly more often than truants or the "others" category. Tennent (1969) also found characteristics of school refusal in his absentees on remand.

### CONCLUSIONS

The methodology of treatment studies reported in the clinical literature is far from impeccable. In particular, control groups tend to be inadequate, so that comparative evidence from spontaneous remission rates is lacking. Outcome studies in the clinical literature, however, provide a model of scientific propriety compared with the nearly total lack of evidence about the effects of almost all other procedures on subsequent attendance.

With the limited available evidence it is safe to conclude that clinical treatment has an excellent prognosis for school refusers provided: (i) they are pre-adolescent; (ii) the problem is referred at an early stage; (iii) their parents will co-operate in treatment; (iv) school refusal is the main manifestation of a neurotic problem, uncomplicated by delinquency or severe social problems in the home. It is not known how many school refusers have all these advantageous characteristics without receiving specialised treatment, nor is it known how many of the pupils who do receive treatment would improve spontaneously without it. Similarly, comparative studies are needed

to evaluate the effects of special groups on school attendance in particular and social behaviour in general, whether such groups are based within the ordinary school or outside it.

OVERVIEW

In terms of quantity the literature on aspects of poor school attendance has a skewed distribution, with the largest number of books and articles devoted to what is regarded - albeit on limited evidence - as the smallest group of unjustified absentees. This group consists, of course, of school refusers. The generally favourable outcome of clinical treatment studies, particularly of pre-adolescent children, raises two important questions: (i) how many of the majority of absentees who are not referred for psychological advice share the characteristics of the minority who are referred? (ii) how many of the majority might benefit from the procedures used with the small, and perhaps arbitrarily selected, minority?

Other questions are raised by the less favourable outcome for adolescent school refusers and for pupils whose school refusal is associated with severe social problems. A majority of clinic studies report a mean or median age of ten or eleven, yet the epidemiological literature suggests a higher prevalence among adolescents. It is not clear whether the higher referral rate of younger children is due to secondary pupils being treated less sympathetically by teachers and e.s.w.s, or due to a realistic expectation that referral is likely to be more effective for younger children. In view of the lack of evidence that referral policy in general is influenced by any realistic expectation of change (Levitt, 1957, 1963; Shepherd et al, 1971), the former is more likely.

More important, though, is the lack of evidence on effective

management approaches for pupils whose absences are not known to have a good prognosis for clinical treatment. It seems probable that these pupils constitute the overwhelming majority, whatever the true prevalence of symptoms associated with school refusal or truancy.

The overall prevalence of absenteeism is not in dispute, but there is considerable disagreement about the details. There is conflicting evidence about the number of pupils absent for legitimate reasons, and inadequate information about the number of unjustified absentees who are persistently absent. The methodology in assessing absences as legitimate or otherwise has often been unsatisfactory. The branch of the l.e.a. responsible for school attendance is the e.s.w. service, yet its members have seldom been involved in systematic studies. This is especially unfortunate in the case of persistent absentees who might reasonably be regarded as candidates for legal action.

At a theoretical level, the literature is split between psychological and sociological approaches. There has so far been little apparent attempt to integrate the two into a single conceptual or explanatory framework. A lot is known about the psychological characteristics of diagnosed school refusers and a certain amount about the characteristics of truants. A rather more limited amount is available on school characteristics associated with high overall attendance rates, but this promising avenue of inquiry is still at a relatively early stage.

Although the mechanisms are unclear, it is known that a school's policy and organisation can influence the attendance, social behaviour and psychological adjustment of its pupils. An equally interesting question, on which there is so far less information, is how the attendance, social behaviour and psychological adjustment of the school's pupil intake influence its policy and organisation. It seems fairly clear that the end products of (i) school policy and practice, and (ii) pupil attendance and adjustment, are the result of a complex

interaction in which each has influenced - and continues to influence - the other. The methodologies of social psychology, the psychology of the individual and sociology are all needed in a descriptive study of this complex interaction.

### PRIORITIES

In an area where the educational and medical support services were already fully extended, inadequate information about the number of school refusers who might have responded to treatment if it had been available seemed a somewhat academic matter. For four reasons the prevalence of, and reasons for, persistent absenteeism seemed of more immediate practical importance: (i) persistent absenteeism is particularly disturbing from both an educational and a social point of view; (ii) these pupils require an administrative decision from the l.e.a., in the sense that it has to decide whether or not to initiate legal proceedings; (iii) there was little evidence available nationally, and none in Sheffield, on the prevalence of persistent absence; (iv) even less evidence was available on the reasons for persistent absence.

Although the literature reviewed in Chapter 1 suggests that certain age groups and schools in socially disadvantaged areas are likely to have disproportionately high absentee rates, the work reviewed in Chapter 4 suggests the possibility of uneven distribution between schools in similar areas. In either case, notable differences in absentee rates would have implications for delivery of support services, and might have implications for schools' own procedures in dealing with absentees.

To summarise, the immediate priority was seen as more information on:

- (i) the prevalence of severe school attendance problems in an industrial city;
- (ii) the distribution of persistent absence between schools and between age groups;
- (iii) the e.s.w.'s assessment of reasons for absence;
- (iv) the association between persistent absenteeism and other social and

educational variables in the catchment area and in the school. A pilot project carried out before the start of the main body of research described in Parts III and IV of the present report provided some of this information.



PILOT PROJECT

CHAPTER 7 THE 1973 PERSISTENT ABSENTEE SURVEY

METHOD AND RESULTS

The 1973 survey of persistent absenteeism in Sheffield has been described in detail elsewhere (Galloway, 1976a - Appendix 1a) and will only be summarised here.

All comprehensive schools and their feeding primary schools were asked by the Chief Education Officer to provide details about children who had missed at least 50 per cent of possible attendances in the first seven weeks of the Autumn term. After excluding the Roman Catholic schools, whose reorganisation into a comprehensive system was incomplete, this left 30 comprehensives and their feeding schools. When the details were received, each pupil's e.s.w. stated which of seven categories was thought to account for the greatest proportion of absences. These categories are discussed in more detail in Chapter 10 below.

The results showed that:

- 1) in primary school an average of 0.4 per cent of pupils were unjustifiably absent for more than 50 per cent of possible attendances, with little variation between each age group;
- 2) in secondary schools an average of 2.1 per cent reached this criterion with a steady increase from 1.3 per cent among twelve year olds to 4.4 per cent among sixteen year olds in their final year of compulsory education;
- 3) altogether, 872 pupils were involved, but there were enormous



differences between schools in persistent absentee rates, both in the secondary and the primary age groups;

4) there was evidence that the transfer to secondary school might not per se be a cause of the higher absentee rates in secondary schools;

5) over 40 per cent of both primary and secondary pupils were absent with their parents' knowledge, though not necessarily with their active consent;

6) truancy accounted for only 2.4 per cent of primary, and 11.2 per cent of secondary absentees; "school phobia" accounted for half as many primary and less than half as many secondary pupils;

7) illness was considered a partial explanation for the absences of 41.2 per cent of primary and 27.8 per cent of secondary absentees (though all cases where illness was thought to account for more than 50 per cent of all absences had previously been excluded);

8) no association was found between absentee rates and either the school's size or the number of pupils excluded on disciplinary grounds; in contrast there was a highly significant correlation between absentee rates and poverty in the catchment area, as measured by the number of pupils receiving free school meals; this accounted for much of the difference in prevalence rates between schools;

9) there was a non-significant correlation between absenteeism in primary and secondary schools when the common effect of free school meal rates was partialled out; this indicated the possibility of contributory factors within the schools themselves;

10) schools varied in the number of pupils they had excluded; there was a significant tendency for former selective schools to exclude more

pupils, but not for these schools to have higher absentee rates.

#### QUESTIONS ARISING FROM THE PILOT PROJECT

Information from City-wide Survey. Following publication of the pilot project it became clear not only that the survey itself had a number of limitations, but also that its results posed a number of questions requiring further work. Eight issues emerged in the course of discussions with education officers, advisers, educational psychologists, the e.s.w. service and teachers.

- 1) There was a possibility that the seven week survey period was too short, a 'flu epidemic at the time could have increased absence rates, and e.s.w.'s might wrongly have assumed some pupils' absences to be unjustified on the grounds of previous poor attendances.
- 2) The Autumn term of 1973 was the first term of the year in which the school leaving age was raised to 16; the high fifth year absentee rate would therefore simply reflect some pupils' disapproval of this innovation; when the raised school leaving age became more widely accepted there would, in theory, be less of a peak in the final year.
- 3) The pilot project gave no information about the sex distribution in each age group, nor within each of the e.s.w.'s categories.
- 4) The reliability of the categories was in doubt; moreover, e.s.w.s' assessment of problems could change as a result of the appointment of social work trained staff, and the development of an extensive programme of in-service training for existing staff.
- 5) It was desirable to continue to monitor the prevalence of persistent absenteeism, in order to investigate the possibility of trends either within individual schools or across the city as a whole.

- 6) Exclusion rates were thought to vary from year to year, implying that the pilot project's results were not conclusive.
- 7) Analysis was needed of the association between absenteeism and a wider range of educational and social variables than that provided in the pilot study.
- 8) The decision to exclude pupils from the survey if over 50 per cent of absences were due to illness was misguided. It was possible that e.s.w.s differed in their willingness to ascribe absence to illness; in addition, little was known about the prevalence of severe absenteeism due to illness, and it was possible that many of the pupils concerned might be ill with symptoms associated with stress at home or at school.

In an attempt to deal with these points, three further surveys were carried out, from 1974 - 1976, using methodology developed from the pilot project. These surveys are described in Part III.

Information about Individual Pupils. The pilot project and the discussions held subsequently suggested three broad lines of inquiry about the characteristics and needs of persistent absentees.

- 1) The much higher secondary school prevalence rate raised the possibility that school and community variables are more influential in secondary schools than primary schools. If family stresses are assumed, on rather limited evidence, to have a similar effect on the attendance of primary and secondary school pupils, the higher secondary school ratios could be attributed to the additional effect of stress at school and/or community, or peer-group influences.

- 2) To make a start in evaluating delivery of psychological support services, it seemed important to establish whether absentees referred

to the psychological service differed in any way from absentees who were not referred; similarly, comparative follow-up information on subsequent attendance was needed.

3) In view of the almost total lack of information about the characteristics of the majority of absentees who are not formally regarded as truants or school refusers, it seemed necessary to establish how many of these pupils do in fact show the behaviours associated with truancy and school refusal in the clinical literature.

It was hoped that a study of persistent absentees, their families and their schools would help to answer these questions, and thereby suggest the most appropriate form of support service for poor attenders and their schools. This study, planned in the light of preliminary results from the first two city-wide surveys, is described in Part IV.

THREE ANNUAL SURVEYS OF PERSISTENT ABSENCE FROM SCHOOLCHAPTER 8 INTRODUCTION

In the course of the Spring or Summer terms of 1975, 1976 and 1977, information was requested about pupils who had missed over 50 per cent of attendances in the preceeding Autumn term. This information was subsequently passed to the e.s.w. for the school for him to state the most frequent reason for each pupil's absence.

DATA COLLECTION

Information from Schools. A letter from the Chief Education Officer asked head teachers to enter on an attached form (appendix 2) the name, sex, date of birth and address of pupils who had missed more than 50 per cent of possible attendances in the previous Autumn term. They were also asked to record the number of absences for each pupil. When completed, the form was to be returned either to the school's e.s.w., or to the l.e.a.'s central offices for distribution to e.s.w.s. No further information was requested from schools at this stage.

Information from e.s.w.s. Members of the e.s.w. service were asked to complete the right hand half of the form returned by head teachers (appendix 2). This required them to say whether they attributed more than half the child's absences to illness. If not, they stated which of eight categories accounted for the highest proportion of each pupil's absence. Explanatory notes were sent to each person (appendix 3), and these were supplemented when necessary by verbal discussion with the author, to whom the completed forms were eventually returned. A

commentary on the categories is contained in Chapter 10.

### Other Information

The L.E.A. provided information on the number of pupils on roll in each school and on pupils who were receiving free school meals. South Yorkshire Constabulary provided information on pupils whose offences had brought them to the notice of the police.

### ANALYSIS OF RESULTS

The returns were transcribed on to data sheets for punching on to computer tape. Analysis was then carried out using a standard set of programmes. (Nie et al., 1975; National Computing Centre, 1975) The accuracy of transcription on to data sheets was checked at random intervals; when less than 98 per cent of entries had no errors, the remaining entries were checked. Accuracy checks were carried out automatically when the data were punched on to computer tape, since the data were punched by two operators who were alerted in the event of any inconsistency.

Details of statistical analysis and reasons for choice of statistical tests are given in the relevant chapters.

PREVALENCE OF PERSISTENT UNJUSTIFIED ABSENTEEISM OVER THREE YEARS

INTRODUCTION

Scope. To avoid repetition with Chapter 10, this chapter deals primarily with the prevalence of unjustified absenteeism. Thus, all pupils whose e.s.w.s attributed over half their absences to illness are excluded from the results which follow unless otherwise stated.

Method. The total number of pupils in each age group was computed in each year of the study. The pupils whose absences were mainly attributed to illness were subtracted from the numbers thus obtained. Pupils whose absence was due to exclusion or suspension from school were included. The same applied to the small number in the 1976 survey who could not be categorised because their e.s.w.s had moved to new posts. This could in theory have introduced some bias into the results, but as only 28 children out of 997 were involved, it should not have been serious, particularly as they occurred mainly in secondary schools where absence was less often attributed to illness.

Analysis of sex distribution was carried out in the same way. Information on prevalence of persistent absenteeism within families was obtained by carrying out a search for children with the same surname and address but different date of birth in each year of the survey. The possibility of some children changing address but



out a search for children with the same surname and date of birth, but a different address.

Statistical Analysis. Statistical analysis was carried out on

the overall prevalence figures to investigate three possibilities:-

- (1) the differences between the three results for each age group (in 1974, 1975 and 1976) could be attributed to chance variation from year to year;
- (2) the differences between the eight primary school age groups could be attributed to chance variation within each age group;
- (3) the differences between the five secondary school age groups could similarly be attributed to chance variation.

The statistical test employed was the log likelihood ratio (Gabriel, 1966), which approximates closely to the more familiar chi square. Unlike chi square, however, it has the theoretical advantage of coherence, the implication of which is shown in the following example. Taking data in Table 9.2, we are not only interested in whether there is a significant overall difference between the persistent absentee rates of, for example, five year olds in 1974, 1975 and 1976. If such a difference were to be found, we would also be interested in when it occurred, whether between 1974 and 1975, 1974 and 1976, or 1975 and 1976. The property of coherence means simply that if a non-significant result is obtained from the full data, in this case the three years 1974-1976, it is impossible to obtain a significant one from a sub-set of the data, in this case results from two of the three years. A two tailed test was used in calculating probability levels. A probability level of  $p < .05$  was considered significant for the purposes of the study.



As indicated in the tables, the frequency of persistent absenteeism was first tested overall for significance; when significant differences were found, the frequency of occurrence was tested within each sub group.

The number of degrees of freedom in the pair-wise comparison between sub groups was the same as in the test for overall significance. Gabriel (1966) gives full details of the reason for this. Briefly, the purpose is to avoid the sharp rise in the probability of a Type I error, which can otherwise occur when analysing sub-sets of multiple contingency tables.

Analysis of the data on sex distribution was carried out in the same way. Statistical analysis was not considered suitable for the analysis of prevalence within families.

## RESULTS

Prevalence in Each Age Group. Table 9.1 summarises the prevalence of persistent absenteeism in primary and secondary schools. Table 9.2 shows the percentage of pupils absent from each year group in primary schools and Table 9.3 from secondary schools. Tables I and II in Appendix 4 show the actual numbers of absentees from which the percentages and the statistical analyses in Tables 9.2 and 9.3 were derived. Appendix 4 Table III gives details of statistical analysis carried out on the data in Table II.

Table 9.1    Number of Persistent Unjustified Absentees: Summary Table

	Primary Schools		Secondary Schools		All Schools	
	No.	Per cent of total on roll	No.	Per cent of total on roll	No.	Per cent of total on roll
1974	158	0.27	652	1.73	810	0.84
1975	120	0.20	672	1.77	792	0.81
1976	141	0.24	596	1.51	737	0.75
df=2 *Overall log likelihood ratio	5.45 NS		9.14 p<.02		4.99 NS	
Comparison of sub groups			1974 & 1976 6.10(p<.05) 1975 & 1976 8.08(p<.02)			

\*Calculated from total on roll, and number of absentees.

Table 9.2    Number of Persistent Unjustified Absentees from Primary Schools, Shown as a Per Cent of the Total on Roll in Each Age Group

	AGE GROUP								*Overall log likelihood ratio, df=7	*Comparison between sub-groups, df=7
	5	6	7	8	9	10	11	12		
1974	.44	.19	.26	.24	.24	.14	.31	.67	29.01 (p<.001)	6 & 12: p<.02 10 & 12: p<.01
1975	.23	.28	.15	.15	.17	.15	.21	.41	13.46 (p<.001)	NS
1976	.28	.32	.12	.14	.20	.18	.31	.54	27.64 (p<.001)	7 & 12: p<.02 8 & 12: p<.05
Overall log likelihood ratio, df=2	2.22 NS	3.30 NS	5.13 NS	2.83 NS	0.88 NS	0.71 NS	2.34 NS	2.44 NS		

\*derived from raw data (see Appendix 4 Table I)

**Table 9.3** Number of Persistent Unjustified Absentees from Secondary Schools, Shown as a Per Cent of the Total on Roll in Each Age Group

	AGE GROUP						
	12	13	14	15	16	*Overall log likelihood ratio, df=4	*Comparison between sub-groups, df=4
1974	0.22	0.81	1.68	1.70	3.81	308.92 p<.001	p<.05 for all comparisons <u>except 14 &amp; 15</u>
1975	0.30	0.81	1.49	2.09	3.70	283.16 p<.001	"
1976	0.15	0.65	1.09	1.56	3.50	329.22 p<.001	"
Overall log likelihood ratio, df=2	2.28 NS	2.08 NS	11.30 (p<.01)	6.97 (p<.05)	1.13 NS		
Comparison between sub-groups, df=2			1974 & 1976 p<.01				

\*derived from raw data (see Appendix 4 Table II)

These results confirm that persistent absentee rates remain stable throughout the primary school years, apart from an apparent tendency to increase in the final year. This, however, could possibly be an artifact resulting from the reorganisation of primary education in Sheffield on a First and Middle school basis, with transfer at the ages of eight and twelve, in place of the traditional Infant and Junior school system, where transfer occurs at seven and eleven. At present, this reorganisation is about 50 per cent complete. Hence, the twelve year old age group is split between primary and secondary schools.

If more of the children "at risk" of persistent absenteeism attend First and Middle schools, it is to be expected that the proportion of absentees among twelve year olds in primary schools will be higher than that in previous years.

There are two ways of assessing whether there is in fact a significant increase in absentee rates in twelve year olds compared with younger pupils.

(1) The pilot study showed that free school meal rates are a reasonably good predictor of absentee rates; if First and Middle schools have a higher proportion of pupils on free school meals than Infant and Junior schools, we should expect primary school children aged twelve, who all attend Middle school, to have a higher proportion of absentees than the previous years. Appendix 4 Table IV shows figures for 1974, and indicates that First and Middle Schools do in fact have a significantly higher number of pupils on free school meals. On this evidence, therefore, the apparent increase in absence rates in primary school twelve year olds may be an artifact resulting from the reorganisation of primary education.

(2) The figures for twelve year old absentees in secondary schools (Table 9.3 and Appendix 4 Table II) may be merged with those for twelve year old absentees in primary schools (Table 9.2 and Appendix 4 Table I). This enables us to see whether the overall absence rate for twelve year olds is higher than in previous years. Appendix 4 Table V shows the results of this exercise for 1974 and 1976 - the two years in which there was some evidence of significantly higher absentee rates in twelve year olds. The results now show no evidence of any significant increase in this age group compared with the previous years.

The figures for secondary schools show a statistically significant rise in unjustified absence in each age group and in each year of the study, with the sole but consistent exception that there were not significantly more fifteen year old absentees compared with fourteen year olds. The consistency of this result (Table 9.3 and Appendix 4 Table III) suggests that it is not due to a Type I error but reflects a definite slowing down in the penultimate year of compulsory education in the rate of increase of unjustified absence. Unfortunately this slowing down is not maintained into the final year, when there is a further steep rise. Table 9.1 suggests that absentee rates fell significantly in 1976, compared with the two previous years. However, the more detailed analysis in Tables 9.2 and 9.3 show that absentee rates did not vary significantly throughout the three years of the study in any age-group except fourteen and fifteen year olds; in both cases there was a tendency towards fewer absentees in 1976.

Sex Distribution. The sex distribution of persistent unjustified absentees is shown in Table 9.4.

O U P							
		13 - 15			16		
	log likelihood ratio df=1	Boys	Girls	log likelihood ratio df=1	Boys	Girls	log likelihood ratio df=1
	.45 NS	160 12869	183 12028	3.54 NS	136 3942	162 3875	2.85 NS
	.04 NS	177 13135	194 12443	2.00 NS	125 4005	162 3757	7.23 p<.01
	.01 NS	133 13502	157 12869	3.35 NS	138 4411	161 4122	3.81 NS
		8.09 p<.02	6.37 p<.05		.90 NS	.87 NS	

Table 9.4 Sex Distribution of

	A G E G				
	5 - 8		log likelihood ratio df=1	9 - 12	
	Boys	Girls		Boys	Girls
1974	35 14918	38 14200	.32 NS	52 17780	44 17256
1975	30 14926	27 14121	.36 NS	40 17855	37 17292
1976	25 14532	33 13869	1.52 NS	45 17720	45 17316
Log likeli- hood ratio df=2	1.43 NS	1.84 NS		1.63 NS	.93 NS



The results show: (a) minimal differences between boys and girls in prevalence rates throughout the primary school years; (b) a consistent but generally non-significant tendency for prevalence rates in secondary schools to be higher for girls. There are significant differences in prevalence rates over the three years for both boys and girls aged thirteen to fifteen; this suggests that the lower absentee rates for fourteen and fifteen year olds in 1976 - shown in Table 9.3 and Appendix 4 Table II - are caused by a drop in the numbers of boys as well as girls.

Prevalence in Families. Results from the analysis by family are shown in Tables 9.5 - 9.8. Appendix 4 Tables VI - IX show the same information, but includes pupils whose absences were attributed mainly to illness by education social workers.

Table 9.5     The Prevalence of Persistent Absenteeism within Families, Excluding Pupils whose Absences were Attributed Mainly to Illness; (numbers in brackets refer to percentage rates).

	<u>1974</u>	<u>1975</u>	<u>1976</u>
No. families with 1 child in survey	632(88.52)	631(89.00)	594(90.00)
No. families with 2 children in survey	72(10.08)	73(10.30)	54( 8.18)
No. families with 3 children in survey	7( 0.98)	5( 0.70)	10( 1.52)
No. families with 4 children in survey	2( 0.28)	0( 0.00)	2( 0.30)
No. families with 5 children in survey	1( 0.14)	0( 0.00)	0( 0.00)
No. families with $\geq 6$ children in survey	0( 0.00)	0( 0.00)	0( 0.00)
Total number of families involved in each survey	714	709	660



Table 9.6    Number of Families with Children Persistently Absent from School, Excluding Pupils whose Absences were Attributed Mainly to Illness; (numbers in brackets refer to percentage rates).

No. families with $\geq 1$ child in 1 survey	= 1482 (86.77)
No. families with $\geq 1$ child in 2 surveys	= 189 (11.06)
No. families with $\geq 1$ child in 3 surveys	= 37 ( 2.17)
<hr/>	
Total number of families involved in all 3 surveys	= 1708

Table 9.7    Number of Children Recorded in Three Surveys, Excluding Pupils whose Absences were Attributed Mainly to Illness; (numbers in brackets refer to percentage rates).

No. children appearing in 1 survey only	= 1796 (87.70)
No. children appearing in 2 surveys only	= 213 (10.40)
No. children appearing in 3 surveys	= 39 ( 1.90)
<hr/>	
Total number of children appearing in all 3 surveys	= 2048

Table 9.8    Frequency of Change of Address in Children Recorded in More than One Survey, Excluding Pupils whose Absence was Attributed Mainly to Illness.

	With same address	With different address on each occasion	Per cent of total who had changed addresses
Number of children appearing in 2 surveys	140	73	34.27
Number of children appearing in 3 surveys	39	0	0

Table 9.5 shows that around ten per cent of families involved in each survey had more than one child unjustifiably absent for more than half the term. Tables 9.6 and 9.7 show that rather more than ten per cent of all the families and the individual children who were recorded in one of the three surveys were recorded in more than one of them. Table 9.8 shows that just over one third of the children who appeared in more than one survey had changed address.

## DISCUSSION

The mild but consistent fall in the rise in absentee rates in the fourth year of secondary education, followed by the very sharp rise in the final year, is a surprising result. Possible explanations for the levelling off effect are: (a) that by their fourth year pupils have passed through the emotional unrest associated with puberty and early adolescence; (b) that teachers have recognised that different disciplinary techniques are needed for adolescents in their last two years of compulsory education, and this is reflected initially in more cooperative teacher-pupil relationships; (c) that fourth year pupils recognise that they are starting a two year course of work leading to GCE or CSE examinations, and must therefore attend regularly; (d) that official action is more likely to be taken against absentees in this age group.

Possible explanations for the dramatic increase in the final year are:- (a) that by this stage pupils have either recognised that they will not be successful in public exams, or have recognised that their school will not enter them, and consequently see little point in continuing to attend school; (b) that by the ages of fifteen or

sixteen some pupils feel that they have "grown out" of school, considering the discipline and curriculum to be based on the needs of younger children; (c) that teachers turn a blind eye to some non-attendance, since this enables them to give more time to the more cooperative pupils who attend regularly and may achieve good examination results with extra help; (d) that by the final year the l.e.a. is less likely to take official action over poor attendance. We shall return to some of these possibilities in later chapters.

The consistent, though generally non-significant, tendency for secondary school girls to have higher absentee rates than boys is in line with the results of other research reviewed in Part I. The tendency is less marked, however, than might have been predicted from work on overall attendance rates. The fact that it is most noticeable among final year pupils is consistent with the view that fifteen year old girls may receive more encouragement to help out at home than younger pupils.

The tables on prevalence of persistent absenteeism in families suggest that there is a hard-core of individual children and of families which is chronically absent. This hard-core accounts for little more than ten per cent of the total; hence the results do not support the views that a high proportion of absentees come from problem families whose children (a) all tend to be poor attenders and (b) all tend to remain poor attenders from year to year. On the other hand, the surveys were concerned only with very persistent absenteeism and more detailed work would be needed before rejecting this view altogether.

Table 9.8 must be interpreted with caution. Although just over one third of pupils recorded in more than one survey had changed addresses, this naturally does not necessarily imply that change of address is an added risk factor; we do not know how many absentees had a change of address, and subsequently attended regularly.

#### SUMMARY

Results of the city-wide surveys of persistent unauthorised absenteeism in 1974, 1975 and 1976 confirmed that persistent absentee rates remain stable throughout the primary school years at around .25 per cent of the total on roll. In the age groups 13-16, in contrast, there is a significant increase in prevalence each year over the preceding year, except that the prevalence amongst fifteen year olds is not significantly higher than that of fourteen year olds. Analysis of sex distribution shows a mild tendency towards a higher prevalence amongst girls in the secondary school years. Nearly 90 per cent of the families recorded in each survey were represented by only one child. Similarly, nearly 87 per cent of families recorded in at least one of the three surveys were recorded in only one of them. Over a third of the children recorded in two or more of the surveys were known to have changed address.

## CHAPTER 10

### CATEGORIES OF ABSENCE

#### INTRODUCTION

Scope. Except where otherwise stated, the results described in this chapter refer to all persistent absentees reported in the three annual surveys, including those whose absence was attributed mainly to illness.

Choice of Categories. The categories were selected in discussion with senior members of the education social work service and reflect their assessment of the most prevalent reasons for absence. Three general points should be made about the categories:

- (1) it was recognised that there would be a good deal of overlap between them; e.s.w.s were asked simply to state which one accounted for the greatest proportion of absence; it was thought that attempts to quantify the proportion of absence attributable to different categories would be extremely difficult, and have very doubtful validity;
- (2) the categories should not be regarded as causes of absence, but as a rough summary of the presenting problem; taking "absence with parent's knowledge, consent and approval" as an example, it is unhelpful to the point of being misleading to regard this as a cause of absence unless we also know something of the stresses which led to the parents condoning their child's absence;
- (3) the justification for asking e.s.w.s to carry out this exercise was threefold: (a) as explained in Chapter 7, a number of questions had been raised about the validity of the results of the pilot project; it was hoped that repeating the exercise would throw light on these questions;

(b) it was hoped that the exercise would have implications for the development of pastoral care systems in schools, and also for the training of e.s.w.s; (c) it was hoped that the exercise would suggest the areas to be explored in greater depth in the proposed study of individual absentees, described in Part IV of the present report.

The following points should be made about the choice of categories:

- (1) truancy was defined in its strict sense, to mean absence without the parents' knowledge or consent;
- (2) absence with parents' knowledge was divided between two categories:
  - (a) pupils who were absent with their parents' consent and approval, and
  - (b) those whose parents knew about their absence, disapproved of it in theory, but were unable or unwilling to insist on return to school against their children's wishes; intentionally, this overlaps with the clinical concept of school refusal, though without naming it;
- (3) a "school phobia" category was included as this concept was more familiar to e.s.w.s than school refusal, but without any explicit implication that the condition should have been recognised by a psychologist or psychiatrist; instead the accompanying notes focussed attention on the child's refusal to leave home, and severe relationship difficulties in the home;
- (4) a category of "psychosomatic illness" was included; a strong case can be made for including this in the "school phobia" category, as it should include all children showing the "somatic disguise" of school refusal; it was felt, however, that this was not always the case, and it would create confusion if the two categories were merged at the stage of data collection;

(5) the category of "socio-medical" reasons was intended to cover pupils whose absence was directly attributable to poverty or poor living conditions; it was intended to include cases of prolonged absence due to infestation, lack of suitable clothes, and illnesses such as scabies; such illnesses, like infestation, can naturally affect middle class children as well, but will not cause prolonged absence unless conditions in the home are very poor;

(6) absence due to exclusion or suspension from school was included as a category in the 1975 and 1976 surveys at the request of a number of e.s.w.s; in 1974 this small number of children was included in the category of absence with parents' knowledge, but without their active approval;

(7) a "mixed" category included children who were thought to have missed over two weeks because of illness, unless over half of all their absences were due to illness, in which case they were rated separately; the possibility of attributing the non-medical absences of children in the "mixed" group to one of the other categories was reluctantly dismissed as impractical; it was pointed out that e.s.w.s might suspect strongly that some absences were due to non-medical factors, but would often not feel sufficiently confident to state which other category applied.

Method. The number of pupils in each age group in each category, excluding special school pupils, was computed for each year of the study. Subsequently the sex distribution within each category was computed by age-group. Statistical analysis was carried out on the actual numbers using the log likelihood ratio.

The categories of "school phobia" and psychosomatic illness were combined, because of the overlap between them, and the small number of children assigned to each one.

## RESULTS

Summary Tables. The proportion of primary and secondary school absentees assigned to each category in each of the three surveys is shown as a percentage of all absentees in the year in Table 10.1. Table 10.2 shows the same data as Table 10.1, except that pupils whose absences were mainly attributed to illness have been excluded, and the proportion of pupils assigned to each category has been calculated from the remainder. Table 10.3 combines the results from the three surveys to show the percentage of boys and girls assigned to each category.



**Table 10.1** Education Social Workers' Reasons for Persistent Absence from School

	<u>Ages 5-11</u> <u>per cent</u>			<u>Ages 12-16</u> <u>per cent</u>		
	1974 N=238	1975 N=148	1976 N=165	1974 N=887	1975 N=830	1976 N=792
Absent with parents' knowledge, consent and approval	10.9	25.7	10.3	11.5	16.5	20.3
Socio-medical reasons	3.4	3.4	6.7	2.5	0.8	3.5
"School phobia" or psychosomatic illness	3.4	4.0	2.4	6.1	5.1	4.3
Parents unable or unwilling to insist on return	9.2	18.9	22.4	24.0	24.3	24.0
Truancy: absence without parents' knowledge or consent	0.8	0	0.6	11.6	18.6	8.5
Mixed, but including some illness	28.2	17.6	26.1	20.6	16.6	14.0
Excluded or suspended from school	not included	0	0	not included	0.8	0.6
Absence mainly due to illness	44.1	30.4	28.5	23.7	17.0	21.9
Could not be rated	0	0	3.0	0	0.3	2.9
Totals	100	100	100	100	100	100

Persistent Absence from School, Excluding Pupils  
Whose Absence was Attributed Mainly to Illness.

	<u>Ages</u> 5 - 11			<u>Ages</u> 12 - 16		
	Per Cent			Per Cent		
	1974 N=133	1975 N=103	1976 N=118	1974 N=677	1975 N=689	1976 N=619
Absent with parents' knowledge, consent and approval	19.6	36.9	14.4	15.1	19.9	26.0
Socio-medical reasons	6.0	4.9	9.3	3.2	1.0	4.5
"School phobia" or psychosomatic illness	6.0	5.8	3.4	8.0	6.1	5.5
Parents unable or unwilling to insist on return	16.5	27.2	31.4	31.5	29.3	30.7
Truancy: absence without parents' knowledge or consent	1.5	0	.9	15.2	22.4	10.8
Mixed, but including some illness	50.4	25.2	36.4	27.0	20.0	18.0
Excluded or suspended from school	not included	0	0	not included	1.0	.8
Could not be rated	0	0	4.2	0	.3	3.7
	100	100	100	100	100	100

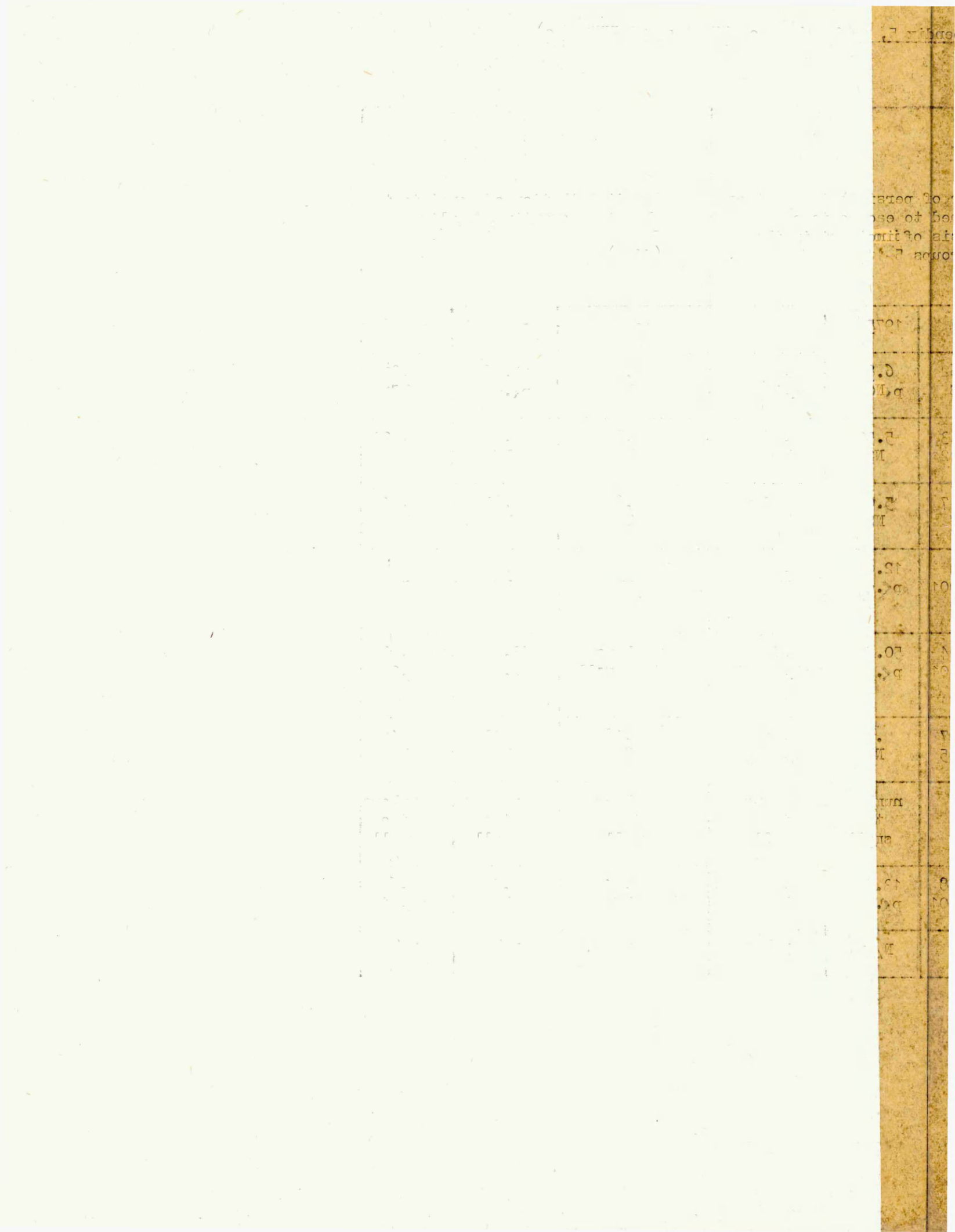
Table 10.3    Sex Distribution in Each Category of Persistent Absentees

	<u>5-11</u> <u>Ages</u> <u>(1974-1976)</u>		<u>12-16</u> <u>Ages</u> <u>(1974-1976)</u>	
	<u>Per cent</u>		<u>Per cent</u>	
	Boys (N=280)	Girls (N=271)	Boys (N=1115)	Girls (N=1394)
Absent with parents' knowledge, consent and approval	15.3	14.0	13.0	18.3
Socio-medical reasons	3.6	5.2	2.4	2.2
"School phobia" or psychosomatic illness	3.9	2.6	5.0	5.3
Parents unable or unwilling to insist on return	16.4	15.1	25.2	23.3
Truancy: absence without parents' knowledge or consent	1.1	0	19.0	8.0
Mixed, but including some illness	23.6	25.8	16.0	18.2
Excluded or suspended from school	0	0	0.7	0.3
Absence due mainly to illness	35	36.5	18.0	23.2
Could not be rated	1.1	0.8	0.7	1.2
Totals	100	100	100	100



TABLE 10.4 Summary of Statistical Analysis (from Appendix 5, Table

	LOG LIKELIHOOD RATIOS				
	Number of persistent absentees assigned to each category: analysis of incidence in 1974, 1975 and 1976. (df=2)			Number of persistent absentees assigned to each category: analysis of incidence in age groups 5-11, 12-15 (df=2)	
	Age 5-11	Age 12-15	Age 16	1974	1975
Absent with parents' knowledge, consent and approval	17.80 p<.001	16.34 p<.001	9.20 p<.02	.62 NS	6.86 p<.05
Socio-medical reasons	2.81 NS	7.71 p<.05	18.26 p<.001	8.43 p<.02	5.50 NS
"School phobia" or psychosomatic illness	.68 NS	1.48 NS	3.21 NS	3.07 NS	5.03 NS
Parents unable or unwilling to insist on return	14.77 p<.001	6.78 p<.05	9.53 p<.01	60.0 p<.001	12.06 p<.01
Truancy: Absence without parents' knowledge or consent	numbers too small	21.45 p<.001	15.26 p<.001	39.94 p<.001	50.50 p<.001
Some illness but other categories also present	6.01 p<.05	9.70 p<.01	3.84 NS	6.07 p<.05	.20 NS
Excluded or suspended from school	numbers too small	numbers too small	numbers too small	N/A	numbers too small
Absence mainly due to illness	12.86 p<.01	19.34 p<.001	4.68 NS	49.98 p<.001	13.42 p<.01
Couldn't be rated	N/A	N/A	N/A	N/A	N/A



A more detailed analysis of the results is given in Appendix 5. Tables Ia, Ib and Ic of Appendix 5 show an analysis over three years of the actual number of absentees assigned to each category in the age ranges five to eleven, twelve to fifteen, and sixteen respectively. Tables IIa, IIb and IIc show an analysis by age group of the actual number of absentees assigned to each category in 1974, 1975 and 1976 respectively. Tables IIIa, IIIb and IIIc show the actual numbers of boys and girls assigned to each category, combining the results from the three surveys, in the age groups five to eleven, twelve to fifteen and sixteen respectively. Table 10.4 summarises the statistical analyses in Appendix 5 Tables Ia-c, IIa-c, and IIIa-c.

Six main points emerge from the summary tables (Tables 10.1, 10.2 and 10.3).

- (1) Consistently, e.s.w.s did not regard illness as the main explanation for the majority of persistent absentees. Illness was in fact the main explanation for less than a third of all persistent absentees each year, with the exception of primary school pupils in 1974, when it accounted for 44 per cent.
- (2) Illness was quite often seen as a partial explanation for absence; if the two categories dealing with poor health in Table 10.1 are combined, illness is seen either as a partial or as the principal explanation for between 48 per cent and 72 per cent of persistent absentees from primary schools and between 34 per cent and 44 per cent from secondary schools, depending on the year considered.
- (3) Truancy was regarded as the principal explanation for a minimal number of primary school pupils. Table 10.2 shows that in secondary schools it accounted for between eleven per cent in 1976 and 22 per cent in 1975 of unjustified absentees.

(4) The largest proportion of unjustified absence was attributed to one of the two categories of absence with parents' knowledge:

- (i) children who remained at home with their parents' knowledge and
- (ii) children whose parents knew about their absence but were unable or unwilling to insist on their return. This is discussed in more detail below.

(5) "School phobia" or psychosomatic illness, and socio-medical factors consistently accounted for a small proportion of unjustified absentees (Table 10.2). The implications of these results are discussed below.

(6) Table 10.3 shows no notable sex differences in any of the categories for primary pupils. For secondary pupils the sole exception is that truancy was considered the principal explanation for the absences of twice as many boys as girls.

Detailed Results and Statistical Analyses. Interpretation of the detailed results in Appendix 5 and of the statistical analyses summarised in Table 10.4 is complicated by two problems.

(1) The analyses may be regarded as statements about the reliability of the categories, as much as about the reasons for pupils' absences. A good example is the number of pupils in the category: 'Parents unable or unwilling to insist on return' (Appendix 5 Table Ia, Ib and Ic). Table 10.4 shows the differences in the proportion of persistent absentees allocated to this category in 1974, 1975 and 1976 to be significant at  $p < .05$  in each of the three age-ranges shown. This may mean that there were genuine differences over the three years in the reasons for pupils' absences. At least as likely, though, is the

explanation that e.s.w.s could not distinguish reliably between the most common reasons for absences; if this was the case, random variations from year to year are to be expected in the proportion of pupils allocated to any one category. The question of reliability will be discussed at greater length in Chapter 12.

(2) Table 10.4 shows three sets of analyses for each of the three main sets of results set out in full in Appendix 5, Tables Ia-c, IIa-c, and IIIa-c. This raises the question of interpretation if a significant result is observed in one or two of the columns, but not the third. For example, the proportion of pupils in the three age-groups 5-11, 12-15 and 16 allocated to the category: 'Parents unable or unwilling to insist on return' differed significantly in 1974 and 1975, but not in 1976. It would therefore not be legitimate to make any statement about consistent differences between the three age groups with respect to this category of absence. There are in fact three possible explanations for the significant results obtained: (a) type I error; (b) chance fluctuation due to low reliability of the categories as discussed above; (c) a valid reflection of educationally significant differences between the three age groups in 1974 and 1975.

The definition of a Type I error makes it highly improbable that all the significant results in Table 10.4 are attributable to this. A glance at the pattern of significant results in Table 10.4 shows:

(a) apart from secondary boys being regarded as truants more often than girls, there are few significant sex differences, (though this could possibly be attributable to the decision to combine the results for the three years); (b) the highest and the most consistently significant results in the analyses by year and by age group occur in the five



categories dealing with illness, absence with parents' knowledge and truancy. These, of course, are not only the largest categories numerically, but also potentially the least reliable because of the overlap between them.

For these reasons it was not considered worthwhile to carry out an analysis between sub-groups when a significant result was obtained. The direction of the results obtained is generally clear from a glance at the data in Appendix 5, but these results must be regarded with great caution. To demonstrate significant differences between the sub-groups, for example between 16 year olds and 5-11 year olds in 1974 in the category: 'Parents unable or unwilling to insist on return', would add a spurious air of scientific credibility to the conclusions.

With these provisos in mind, the results of Appendix 5, summarised in Table 10.4, may be placed in three groups.

A: The proportion of pupils assigned to each category in 1974, 1975 and 1976:

- (1) the frequency with which illness was regarded either as the principal or a partial explanation of absences differed significantly over the three years for primary pupils and secondary pupils aged twelve to fifteen, but not for sixteen year olds;
- (2) the frequency with which truancy was regarded as the principal explanation for pupils in both the twelve to fifteen and the sixteen year old age groups differed significantly over the three years;
- (3) there were significant differences in both secondary school age groups, but not amongst primary pupils in the frequency with which socio-medical reasons were seen as the main cause of absence;

(4) there were significant differences in all three age groups in the frequency of allocation to both the categories of absence with parents' knowledge;

(5) no significant differences were observed in the number of pupils placed in the category of school phobia or psychosomatic illness.

B: The proportion of pupils aged 5-11, 12-15 and 16 assigned to each category:

(1) truancy was significantly more frequently seen as the principal reason for absence in the two secondary age groups than in the primary age group;

(2) in 1974 and 1975 there were significant differences between age groups in the frequency with which illness was considered the main explanation; in 1974 and 1976 there were significant differences in the frequency with which it was considered a partial explanation; it is clear from the figures in Appendix 5, Tables Ia-c that there is a consistent tendency in all these significant results for illness to be regarded as a principal or partial explanation for younger children more often than for older pupils;

(3) there were significant differences between age groups in 1975 and 1976 in the category: 'Absent with parents' knowledge, consent and approval' and in 1974 and 1975 in the category: 'Parents unable or unwilling to insist on return'; the data in Appendix 5, Tables IIa-c suggest a tendency for older pupils to be placed in the category: 'Parents unable or unwilling to insist on return' more than younger pupils; no consistent tendency can be seen in the other category;

(4) there is only one significant difference between age groups in the categories: 'socio-medical reasons' and 'school phobia or psychosomatic illness'; in 1974 there was a tendency for sixteen year olds to be

regarded as absent for sociomedical reasons less often than younger pupils, but the numbers are so small that it is doubtful whether much educational significance should be placed on this result.

C: The proportion of boys and girls assigned to each category:

(1) the number of primary school pupils in the 'truancy' category was too small for statistical analysis, but in both secondary age groups boys were significantly more likely to be regarded as truants than girls;

(2) illness was regarded as the principal reason for absence of sixteen year old girls significantly more often than boys; there were no significant differences in the other two age groups, nor in any age group in the category of illness as a partial explanation;

(3) girls aged thirteen to fifteen were significantly more often regarded as absent with their parents' knowledge, consent and approval than boys; there were no significant differences in the other two age groups, nor in any age group in the category of parents unable or unwilling to insist on return.

DISCUSSION

At the risk of repetition it is worth emphasising that these results apply only to persistent absentees. Hence, they cannot be related directly to most previous work on absence from school. A number of general points do, however, seem to emerge.

The value of the categories is restricted both on theoretical and on technical grounds. This is dealt with in detail in Chapter 12. Even when illness as a principal reason for absence is combined with illness as a partial explanation, it does not account for the majority of the pupils concerned. The evidence is more consistent with the

N.A.C.E.W.O. (1974) estimate of 40 per cent of absences as due to illness than either Bransby (1951) or Reynolds (1974) (96.7 per cent and 25 per cent respectively). The results do not on the whole support the view that girls are more likely to be absent because of illness than boys, but there is some evidence that persistent absence of primary school children is more often attributed to illness than that of older pupils.

The relatively high proportion of children placed in one of the two categories of absence with parents' knowledge has two immediate implications:- (a) much of the e.s.w.s' time will inevitably be spent in work with parents and this is not consistent with the old image of the e.s.w. as a 'truant catcher'; (b) there is remarkably little evidence in the literature on the reasons why so many pupils remain at home with their parents' knowledge. Both these points are discussed in more detail in Chapter 12.

The small proportion of pupils in the school phobia category raises as many questions as it answers. There was evidence from informal comment at the time of allocation to categories that many e.s.w.s would only use this category if 'diagnosis' had been confirmed by a psychologist or psychiatrist. The questions this poses about the criteria for referral - and hence diagnosis - were raised in Part I; all we need to reiterate here is that the results presented above do not start to answer the important question regarding the prevalence of symptoms associated in the literature with school refusal.

#### SUMMARY

Fairly consistently, the e.s.w.s' categories showed that they regarded illness as the principal explanation for less than a third of all persistent absentees. Illness was more often seen as either the principal or a

partial explanation for the absence of primary school pupils than secondary school pupils. Truancy was regarded as the principal explanation for a minimal number of primary school children; in secondary schools it accounted for between 11 and 22 per cent of persistent unauthorised absentees, depending on the year. The largest proportion of absence was attributed to the two categories of absence with parental knowledge, thus confirming the results of the pilot study.

## Introduction

Persistent absentees are not evenly distributed throughout the City's schools. In each of the three years of the study the absentee rate in secondary schools ranged from less than 0.5 per cent in the schools with fewest absentees to more than 6.5 per cent in those with the most. In terms of actual numbers of pupils absent this range represented less than two, to more than 100. It was clear from the pilot project, however, that a school's absentee rate could be predicted with some accuracy from the level of social deprivation and/or poverty in its catchment area as measured by the number of pupils receiving free school meals.

In order to investigate the possibility of contributory variables (i) within the schools' catchment areas and (ii) within the schools themselves, preliminary analysis was carried out on the relationship between absentee rates and the number of pupils receiving free school meals. It was then possible to investigate the relationship between absenteeism in secondary schools and in their feeding primary schools after controlling for the essentially demographic variable of free school meals. The purpose of this exercise was to investigate the reliability of a similar analysis in the pilot project.

Subsequently two analyses were carried out on the results from individual secondary schools: (i) a comparison of the number of absentees in each age group, in order to see whether the sharp rise in absence rates in the final year occurred in all schools; (ii) a comparison of each school's absentee rates over the three years of the study, in order to investigate the possibility that some schools might be reducing the problem, while at others the reverse might be the case.



Finally details were obtained from official records on the incidence of juvenile delinquency in all pupils in the 1976 survey, in order to investigate: (i) the association between delinquency and persistent absenteeism; (ii) the association between delinquency and the school or home district of individual absentees.

The rationale and methods are discussed in greater detail below under the appropriate sub-headings.

#### SCHOOL ANALYSIS: METHOD AND RESULTS

##### Relationship between Absenteeism in Primary and Secondary Schools

The pilot project reported that the correlation between absence rates in secondary schools and in their feeding primary schools was not significant when the common variable of free school meal rates was held constant. This was taken as evidence for the possible relevance of other variables; as free school meals is essentially a demographic variable, these might lie in the school. The same analysis was carried out on the results of the 1974, 1975 and 1976 surveys, except that absentee rates were based on all persistent absentees from a school, and not simply those whose absence was considered by their e.s.w.s to be unauthorised. This decision was based on evidence, presented in the next chapter, that e.s.w.s varied in their willingness to regard absences as justified by illness.

The results are given in Tables 11.1a and 11.1b. They show: (i) that the high positive correlation between the number of persistent absentees at a school and the number of pupils receiving free school meals is confirmed in the results of all three surveys; (ii) that the correlation between persistent absenteeism at secondary schools and at their feeding primary schools is not consistently statistically significant when the common demographic variable of free school meals is taken into account. Thus, the results give some limited support for the evidence in the pilot project for the possible relevance of other variables, which might lie within the school. They do not, of course,

Table 11.1a Pearson Product Moment Correlations Between Persistent Absentee Rates and Free School Meal Rates at 36 Secondary Schools and their Feeding Primary Schools.

	1974			1975			1976		
	FSM Sec ( $r_2$ )	Abs Pr ( $r_3$ )	FSM Pr ( $r_4$ )	FSM Sec ( $r_2$ )	Abs Pr ( $r_3$ )	FSM Pr ( $r_4$ )	FSM Sec ( $r_2$ )	Abs Pr ( $r_3$ )	FSM Pr ( $r_4$ )
Abs. Sec. ( $r_1$ )	.785	.628	.594	.749	.601	.786	.839	.726	.748
FSM Sec. ( $r_2$ )		.695	.868		.658	.667		.694	.802
Abs. Pr. ( $r_3$ )			.715			.572			.825

$p < .001$  in all cases

Table 11.1b Pearson Product Moment Correlations Between Persistent Absentee Rates from Secondary Schools ( $r_1$ ) and from Primary Schools ( $r_3$ ) Controlling for the Effect of Free School Meal Rates at Secondary Schools ( $r_2$ ) and at their Feeding Primary Schools ( $r_4$ )

	1974	1975	1976
$r_{13.2}$	.186 NS	.216 NS	.366 $p < .015$
$r_{13.4}$	.362 $p < .016$	.298 NS	.29 $p < .045$



provide any evidence about the nature of other relevant variables, nor whether they exert greater influence in primary or in secondary schools.

#### Frequency of Absenteeism in each Secondary School: Analysis by Age Group

The results presented in Chapter 9 showed a sharp peak in absenteeism in the final year of compulsory education. The purpose of the analysis presented here is to investigate the possibility of significant differences within schools in the frequency of absenteeism in the final year, compared with the frequency in previous years. It was hoped that this might identify schools which were successful in preventing a decline in attendance rates in the final year. Only the nineteen schools where the mean prevalence of absenteeism from 1974-1976 exceeded 1.5 per cent have been included in this analysis. These constituted 53 per cent of the total for whom information was available. In the remainder, numbers were too small for statistical analysis to be meaningful. The small number of pupils in the first year of some schools has also been excluded in order to facilitate statistical analysis.

In carrying out statistical analysis with the log likelihood ratio it was assumed: (i) that the number of pupils on roll in each age group would be approximately equal, and (ii) that in consequence the sample size could be taken as the total number of absentees, instead of the total number of pupils in the age group as, for example, in Appendix 4, Tables I and II. It would have been preferable to use the actual number of pupils in each age group in each school, but these were not readily available.

Appendix 6, Tables 1a, 1b and 1c give the results for 1974, 1975 and 1976 respectively. Two sets of analyses are given: (i) the overall log likelihood ratio, and (ii) where this reaches statistical significance a comparison between the fifteen and sixteen year old age-groups. The results are summarised in Table 11.2. They show that school 24 was the only school in which there

was no significant difference in the incidence of persistent absenteeism between the age groups thirteen, fourteen, fifteen and sixteen in 1974, 1975 or 1976. In a further four schools (05,06, 15 and 31) absentee rates of sixteen year olds did not differ significantly from those of fifteen year olds in any of the three years under study.

It is worth adding, however: (i) that three of these five schools only just reached the criterion absence rate of 1.5 per cent, and (ii) that only one of them (31) had a mean absentee rate of over three per cent. At the eight other schools with an absentee problem of this order, significantly more sixteen year olds were absent than fifteen year olds in at least one of the three years. While the evidence does not justify any firm conclusions, it tends to suggest that the greater the problem of persistent absenteeism in the school as a whole, the greater the problem of final year absenteeism relative to the previous years.

Of more importance, perhaps, is the fact that Table 11.2 lends little support to the view that the problem of absenteeism in the final year will become less as the raising of the school leaving age becomes more widely accepted. This Table shows: (i) that in six schools the difference between fifteen and sixteen year old absentee rates reached significance in 1974, but not in 1976 (04, 07, 12, 14, 26 and 27); but (ii) that in five other schools the difference reached significance in 1976 but not in 1974 (11, 16, 18, 22 and 23). In other words, for every school where the relative problem of final year absenteeism seemed to be decreasing between 1974 and 1976 there was another where it seemed to be increasing. This observation, however, should be regarded with considerable caution since in many cases the difference between a significant result and a non-significant one were small. Moreover, the analyses were of absentee rates within each year of the study, not between years. Analysis between

Table 11.2 Statistical Analysis of Differences Between Persistent Absentee Rates in 15 and 16 Year Olds Attending Schools with Absentee Rates above 1.5 per cent. (Summarised from Appendix 6, Tables 1a-1c)

School	Log Likelihood Ratio		
	1974	1975	1976
04	14.98 p<.01	nos too small	NS*
05	6.62 NS	NS*	NS*
06	5.68 NS	3.74 NS	NS*
07	10.94 p<.02	1.88 NS	5.13 NS
08	15.33 p<.01	4.98 NS	22.12 p<.001
11	1.76 NS	NS*	94.25 p<.001
12	8.22 p<.05	NS*	nos too small
14	12.39 p<.01	1.01 NS	4.79 NS
15	2.09 NS	2.63 NS	NS*
16	4.30 NS	3.63 NS	41.76 p<.001
18	3.23 NS	NS*	10.64 p<.02
22	NS*	NS*	9.11 p<.05
23	0.20 NS	19.19 p<.001	9.21 p<.05
24	NS*	NS*	NS*
26	9.92 p<.02	8.27 p<.02	NS*
27	11.78 p<.01	8.20 p<.05	2.01 NS
29	1.28 NS	21.36 p<.001	4.97 NS
31	5.70 NS	3.66 NS	3.71 NS
33	10.52 p<.02	nos too small	19.04 p<.001

\* For these schools, analysis of the four year groups (13, 14, 15 and 16) showed no significant overall differences. It follows from the log likelihood ratio's property of coherence that the differences between the rates for 15 and 16 year olds cannot reach significance.

years follows in the next section.

Changes in Absentee Rates over Three Years One way to investigate the possibility that some schools may be dealing effectively with the problem of absenteeism is to see whether absentee rates undergo any significant changes over the three years of the survey. Table 11.3 shows the number of persistent absentees each year in each secondary school. The number on roll each year is not shown in the table, but was used in calculating the log likelihood ratios. Again, two sets of results are given: (i) the overall log likelihood ratio, and (ii) where this reaches significance, a comparison of the possible sub-groups.

Table 11.3 shows that no significant overall differences in absentee rates were observed in 22 of the 36 secondary schools for which information was available; in a further two schools the differences between the sub-groups were not significant. In seven schools interpretation is complicated by the fact that significant differences were observed between one sub-group only (i.e. 1974 and 1975, or 1974 and 1976, or 1975 and 1976); moreover, in six of these seven schools the difference was only significant at the level of  $p < .05$ . With this proviso, the results suggest a trend towards lower absentee rates in 1975 or 1976 compared with an earlier year in five of these schools (03, 28, 29, 36, 38) and towards higher rates in two (08 and 11).

This leaves five schools, where significant differences were observed between more than one sub-group, and where, in most cases, the differences were greater than at the schools mentioned above. At four of these schools (04, 22, 27, 35) there is a clear trend towards lower absentee rates in 1976 compared with 1974, while at the fifth (23) the reverse is clearly the case.

17	3	8	2	4.27	NS	12.44	8.44	.47
18	50	41	47	0.17	NS	p<.01	p<.02	NS
21	10	4	11	4.13	NS	28.99	17.01	1.49
22	33	12	16	14.64(p<.001)		p<.001	p<.001	NS
23	45	106	86	30.98(p<.001)				
24	22	15	15	2.29	NS			
25	8	6	10	.89	NS			
26	25	27	20	.97	NS			
27	75	34	36	17.02(p<.001)		13.40	10.73	.13
28	6	0	5	6.43 (p<.05)		p<.01	p<.01	NS
29	42	26	16	12.56(p<.01)		5.99	.19	4.33
30	4	16	10	8.60 (p<.02)		p<.05	NS	NS
31	25	28	29	0.08	NS	3.65	12.40	2.63
32	3	3	11	6.41 (p<.05)		NS	p<.01	NS
33	27	11	15	5.61	NS	4.26	1.03	1.42
34	3	9	11	4.56	NS	NS	NS	NS
35	13	13	2	9.86 (p<.01)		.013	8.33	7.86
36	6	9	1	7.23 (p<.05)		NS	p<.02	p<.02
37	7	5	4	0.90	NS	.23	4.45	6.89
38	7	4	0	7.21 (p<.05)		NS	NS	p<.05
	861	812	768				7.20	numbers
							p<.05	too
								small



## DELINQUENCY ANALYSIS: METHOD AND RESULTS

### Analysis by Category and by Age Group

Information was collected about all pupils aged eleven to sixteen reported in the 1976 persistent absentee survey who were known by the police to have been convicted of an offence in the Juvenile Court and/or to have received a formal verbal caution from the police before 1st September, 1977. Details were then entered on punch cards for analysis with the same standard set of programmes as was used to analyse the results of the three absentee surveys reported in Chapters 9 and 10.

The number of boy and girl absentees from each age group known to have committed at least one offence is shown in Table 11.4; the number placed on a Supervision Order following appearance before the Juvenile Court (generally on account of delinquency rather than poor school attendance) is shown in Table 11.5. All age groups have been combined in Tables 11.6 and 11.7, which show the same information broken down into the e.s.w.s! categories.

The figures in Tables 11.4 and 11.5 are based on the criminal records of all pupils reported in the 1976 survey, including those whose absence was attributed mainly to illness.

Table 11.4 shows a tendency not only for the number of boy absentees

with a criminal record to increase with age, as would be expected from the higher prevalence of absenteeism in the secondary school years, but also for the proportion of absentees with a criminal record to increase with age. The same tendency is evident, though somewhat less consistently, for girls. Table 11.5 does not show a similar tendency for an age-related increase in the number and proportion of absentees who had been placed on a Supervision Order by the Juvenile Court. Apart from a sharp peak in fifteen year old boys, the proportion of absentees on Supervision Orders remained remarkably stable between the ages of eleven and sixteen.

As would be expected, Table 11.6 shows that pupils whose absence was attributed partly or mainly to illness were less often in trouble with the police than pupils placed in the other categories. On the other hand, it is worth noting that nearly twenty per cent of boys whose absence was attributed mainly to illness had a known record of delinquency. The numbers in three of the categories are too small to justify any conclusion (socio-medical reasons, "school phobia" and excluded or suspended from school). Apart from the small number of children who the e.s.w.s were unable to categorise, this leaves three categories: (i) absent with parents' knowledge, consent and approval; (ii) parents unable or unwilling to insist on return; (iii) truancy. Combined these categories accounted for 65 per cent of the boy absentees with a criminal record, and 60 per cent of the girls.

The results show: (i) that boy absentees tended to be more often in trouble with the police, irrespective of category, than girls; (ii) that delinquency was most frequent in boys whose absence was attributed to truancy; (iii) that absence with parents' knowledge, consent and approval is associated with delinquency in a fifth of all pupils in this category and in the case of girls, delinquency is as strongly associated



Table 11.4 Persistent Absentees Aged 11 or Over from 1976 Survey  
Known to Have Been Convicted in the Juvenile Court and/or to Have  
Received a Verbal Caution from the Police.

	AGE GROUP						TOTAL
	11	12	13	14	15	16	
Number of boys	2	1	6	12	21	47	89
% of boy absentees in age group	13.3	6.2	18.7	20.3	25.0	26.9	23.4
Number of girls	0	1	1	7	14	34	57
% of girl absentees in age group	0	4.3	2.3	9.5	15.1	15.0	11.8
Total	2	2	7	19	35	81	146
%	5.1	5.1	9.3	14.3	19.8	20.1	16.9

Table 11.5 Persistent Absentees Aged 11 or Over from 1976 Survey  
Known to Have Been Placed on a Supervision Order Following  
Appearance Before the Juvenile Court.

	AGE GROUP						TOTAL
	11	12	13	14	15	16	
Number of boys	1	1	3	4	16	13	38
% of boy absentees in age group	6.7	6.2	9.4	6.8	19.0	7.4	10.0
Number of girls	0	2	0	2	4	7	15
% of girl absentees in age group	0	8.7	0	2.7	4.3	3.1	3.1
Total	1	3	3	6	20	20	53
% of all absentees in age group	2.6	7.7	4.0	4.5	11.3	5.0	6.1

Table 11.6 Persistent Absentees Aged 11 or Over in Each Category in the 1976 Survey Known to Have Been Convicted in the Juvenile Court and/or to Have Received a Verbal Caution from the Police.

	BOYS		GIRLS		TOTAL	
	Number of Offenders	% of all boy absentees in category	Number of Offenders	% of all girl absentees in category	Number of Offenders	% of all absentees in category
Absent with parents' knowledge, consent and approval	16	23.9	17	17.3	33	20.0
Socio-medical reasons	3	21.4	1	5.9	4	12.9
"School phobia" or psychosomatic illness	4	26.7	2	7.1	6	14.0
Parents unable or unwilling to insist on return	28	26.7	12	11.8	40	19.3
Truancy: absence without parents' knowledge or consent	14	35.9	5	14.7	19	26.0
Some illness but other factors also present	6	10.5	6	8.5	12	9.4
Excluded or suspended from school	2	33.3	1	100	3	42.9
Absence mainly due to illness	13	18.8	9	7.6	22	11.8
Could not be rated	3	33.3	4	26.7	7	29.2
Totals	89	23.4	57	11.8	146	16.9

with this category as with truancy; (iv) that even in the most "delinquogenic" category - boy truants - nearly two-thirds of the pupils had not attracted any police record.

Table 11.7 shows that a very small proportion of girls were placed on Supervision by the Juvenile Court, irrespective of category. The three categories mentioned above (absent with parents' knowledge, consent and approval; parents unable or unwilling to insist on return; truancy) accounted for 68 per cent of the boys on Supervision Orders. Even so, the range, in terms of the proportion of all boy absentees allocated to each category, was only from nine per cent in the case of absence with parents' knowledge to nearly eighteen per cent for truancy.

Apart from the total number of absentees allocated to each category with a known history of delinquency, it is also of interest to know whether absentees in some categories are more likely to offend repeatedly than absentees in others. This information is shown in Table 11.8. Except for the three pupils excluded or suspended from school, the results suggest a tendency for offenders whose absence is attributed to the three largest categories of unauthorised absence to commit more offences, on average, than offenders whose absence is attributed to other categories.

The high standard deviations, however, reflect a wide range in the number of offences committed.

Table 11.7 Persistent Absentees Aged 11 or Over in Each Category in the 1976 Survey Known to Have Been Placed on Supervision Order Following Appearance Before the Juvenile Court.

	BOYS		GIRLS		TOTAL	
	Number	% of boy absentees in category	Number	% of girl absentees in category	Number	% of all absentees in category
Absent with parents' knowledge, consent and approval	6	9.0	4	4.1	10	6.1
Socio-medical reasons	2	14.3	0	0	2	6.5
"School phobia" or psychosomatic illness	0	0	0	0	0	0
Parents unable or unwilling to insist on return	13	12.4	5	4.9	18	8.7
Tuancy: absence without parents' knowledge or consent	7	17.9	1	2.9	8	11.0
Some illness, but other factors also present	2	3.5	3	4.2	5	3.9
Excluded or suspended from school	2	33.3	0	0	2	28.6
Absence mainly due to illness	3	4.3	2	1.7	5	2.7
Could not be rated	3	33.3	0	0	3	12.5
Totals	38	10.0	15	3.1	53	6.1

Table 11.8 Mean Number of Recorded Offences Committed by Persistent Absentees with a Record of Delinquency: Analysis by Category

	Number of Absentees with a Record of Delinquency	Mean Number of Offences Committed	Standard Deviation
Absent with parents' knowledge, consent and approval	33	4.61	11.18
Socio-medical reasons	4	2.00	2.00
"School phobia" or psychosomatic illness	6	2.17	1.17
Parents unable or unwilling to insist on return	40	4.48	6.10
Truancy: absence without parents' knowledge or consent	19	5.00	5.72
Some illness, but other factors also present	12	3.5	6.52
Absence mainly due to illness	22	2.5	4.9
Excluded or suspended from school	3	11.67	9.07
Could not be rated	7	2.43	2.42
Total	146	4.08	7.21

## DISCUSSION

### Statistical Analysis

In calculating the correlation coefficients between absentee and free school meal rates at primary and secondary schools, the data were converted to percentages of the total on roll. This was necessary as the population from which each sample was drawn (i.e. the number on roll) naturally varied between secondary schools and their feeding primary schools. The disadvantage lay in the fact that correlations based on percentage data tend to under-estimate the true value of  $r$ . This is because a Pearson's  $r$  is based on the assumption of a straight line of best fit, while percentage data tend to result in a mildly curved line. This underestimate is slight, however, and in any case is probably an error in the right direction when analysing "soft" data of the sort presented here.

### Demographic and School Variables

The high positive correlation between absentee rates and free school meal rates raises the question whether the latter should be regarded as a pupil variable or a school variable. In other words, is the predictive power of this variable as great if we exclude all absentees known to be receiving - or at least eligible for - free meals from the analysis? A low correlation would tend to suggest that free school meals should be regarded as a pupil variable; conversely, a high

correlation would tend to suggest that it should be regarded as a school variable. This exercise was carried out on the 1975 survey results. The correlation between secondary school absentee rates, excluding pupils receiving free school meals, and free school meal rates remained high ( $N = 36$ ;  $r = .84$ ;  $p < .001$ ).

This implies that a school's free school meals rate is as reliable in predicting the number of absentees who are not eligible for free school meals as in predicting the total number of absentees. Rutter et al (1975) obtained a similar result when examining the association between free school meal rates and deviancy in their longitudinal study in London.

A separate issue is the validity of free school meals as a measure of deprivation and poverty in the school's catchment area. Tyerman (1958) reported no significant correlation between attendance and free school meal rates in a medium-sized Welsh town. Caven and Harbison (1978) found a significant positive correlation in Belfast, but not elsewhere in Northern Ireland. These results are of some interest as their methodology was based fairly closely on that employed in the present study. Combined with the Sheffield data, these results suggest: (i) that free school meal rates are highly correlated with absenteeism in large cities; but (ii) that free school meal rates may simply reflect other social problems associated principally with the depressed areas of large cities. The results indicate the need for a more detailed analysis of demographic variables associated with poor school attendance. Tibbenham (1977) has already drawn attention to the relevance of over-crowded housing on the basis of results obtained by the N.C.D.S. In Sheffield the 1971 census data is currently being used to examine the association between absenteeism and a wide range of demographic variables.

This work will be the subject of a future report to the D.E.S.

The differences within certain schools over the three years of the study are quite striking. They seem to demonstrate that the prevalence of persistent absenteeism can vary significantly from year to year. Some of the differences could perhaps be explained in terms of random variation from year to year which has little educational significance, even though it does reach statistical significance. On the other hand, this does not seem a credible explanation for differences such as those seen in schools 04, 22, 27, 35 and 23.

Two further points are also of interest: (i) four of these five schools were either in the middle of substantial changes and/or developments in the survey period, or had undergone such changes in the three years prior to the survey starting; (ii) four of the five schools were amongst the 33 per cent of schools with the highest overall mean absentee rate from 1974-76 and three were amongst the 20 per cent of schools with most pupils on free meals. The possible implication is that changes at a school - whether for better or for worse - are likely to have the greatest impact on the level of persistent absenteeism in areas with many social problems, where the problem is likely to be greatest in the first place. Further work would be needed, though, in order to confirm this suggestion.

Delinquency Information regarding Care Orders was not given in the text. This was because only eight boys and eight girls were known by the police to have received them. In all, there were 865 persistent absentees in the eleven to sixteen year old age range, of whom 146 were known to have offended. The number of Care Orders reported may be a slight underestimate, as there did not appear to be a consistent practice with regard to reporting Care Orders made on the grounds of poor school attendance rather than delinquency. It is nevertheless clear, that the majority of persistent absentees remain in the community; it is also clear that



Supervision Orders are only made in a minority of cases. Consequently, responsibility for the education and informal supervision of the majority remains squarely with the schools and the officers of the l.e.a. The implications of this for the e.s.w. service are discussed at greater length in Part V.

Another point which emerges from the study of delinquency amongst absentees is the rather high proportion of boys with a criminal record whose absence was attributed mainly to illness. This does not entitle a conclusion that these pupils' absences were wrongly attributed to illness. Nevertheless, it does suggest that their absences attributed to illness may often conceal other social, and possibly emotional problems.

#### SUMMARY

A high correlation is reported between persistent absentee rates and free school meal rates; this correlation remains as high when persistent absentees known to be eligible for free meals are excluded from the analysis. Analysis of persistent absenteeism at individual secondary schools shows: (i) that schools vary in their success in reducing the sharp increase in absentee rates in the final year of compulsory education; (ii) that absentee rates within a school can change significantly from year to year; and (iii) that such changes are most likely to occur in schools which: (a) have a high proportion of pupils on free meals and (b) are currently, or have recently been, in the throes of major stress or development.

It is shown that well under one fifth of all persistent absentees have committed offences known to the police, and even in the case of persistent boy truants the proportion is only just over one third. Only six per cent of all persistent absentees are known to have been placed on a Supervision Order following Juvenile Court appearance.

RELIABILITY

Raw Data from Schools. There are two distinct issues about the reliability of the raw data collected from schools. The first concerns the reliability of the schools' returns. To investigate this the secondary school with the highest reported rate of persistent absenteeism in one year (1976) was identified and an independent search was carried out of the attendance register of this school and its feeding primary schools. It was then possible to compare the number of persistent absentees reported by each school with the number identified independently by the research workers. A total of 107 children were identified both by the school and by the researchers. Six were identified only by the school and eleven others only by the research officers. Agreement of 86 per cent (107 children in common out of 124 identified altogether) was considered adequate for this city-wide survey, though it certainly points to some potential error.

The second issue concerns the criterion of 50 per cent absence as a predictor of overall attendance. As described in Chapters 7 and 8, the purpose of the study was to promote knowledge about persistent absence. Nevertheless, the relationship between overall absence rates and persistent absenteeism remains a subject of interest. A weak relationship between persistent absenteeism and less severe attendance problems would suggest the possibility that persistent absentees are reacting to experiences which exert an "all or nothing" effect. In other words, either the child copes relatively well with

them, at least as far as their effect on school attendance is concerned, or he copes very badly indeed. In contrast, a strong positive relationship between persistent absence and less severe attendance problems would suggest that the persistently absent pupils merely constitute one end of a continuum, and that their problems do not differ in kind from those of pupils who present less serious difficulties. It was possible to investigate this question in two ways.

(1) In the 1976 survey information was also collected from certain primary schools about pupils who missed more than 25 per cent of possible attendances in the Autumn term. This made it possible to correlate the number of pupils absent for 25 per cent of the time with the number absent for 50 per cent at each primary school. Taking the primary schools which fed the seven secondary schools with the highest number of absentees, the results showed a high level of consistency between the two criteria ( $r=.831$ ;  $N=42$ ;  $df=40$ ;  $p<.001$ ).

(2) In the Autumn term 1977, Sheffield l.e.a. carried out a survey of attendance rates amongst fifth year pupils in secondary schools. The average percentage attendance at each school was calculated from the results. It was thus possible to correlate these results with the percentage of persistent absentees reported at each school in the 1976 survey. The results of a Pearson Product Moment Correlation showed a highly significant inverse correlation between fifth year attendance levels and overall absentee levels ( $r=-.871$ ;  $N=36$ ;  $df=34$   $p<.001$ ).

While not conclusive, the evidence suggests that the raw data provided by schools was of adequate reliability. Moreover, there is some evidence that persistent absenteeism, as defined in the present

report, is a reasonable predictor of overall attendance. The implication of this is that persistent absentees probably do not constitute a unique group, different in kind from pupils with less severe attendance problems, but rather should be seen as being at one end of a continuum.

Reliability of the Categories. The question of reliability was mentioned in Chapter 10, in connection with the interpretation of the results of statistical analysis on the numbers in each category. It was unfortunately not possible to carry out an inter-rater reliability check on the categories, since the majority of families were known to only one e.s.w. It would have been desirable to investigate reliability by asking a number of e.s.w.s to categorise the same child on two occasions, but this was not considered practicable. The initial exercise took up a great deal of the e.s.w.s' time, and asking them to repeat what they had already done was thought to be undiplomatic. Moreover, even if this had been possible, it would not have yielded information on the crucial question whether different officers interpreted similar situations in similar ways.

The only obvious ways to investigate the reliability of the categorising process require two assumptions: (i) that in any one school the relative incidence of allocation to each category will stay roughly constant from year to year; (ii) that the relative incidence of allocation to each category will not vary significantly from school to school in any one year, provided the comparison is confined to schools in roughly similar areas.

With these assumptions it is possible to investigate:

(a) whether the number of absentees allocated to a given category

varies from year to year within each school, and (b) whether the number allocated to a given category in a given year varies from school to school. In each case, low reliability would be suggested by significant differences.

The ten secondary schools with the highest persistent absentee rates were selected for analysis. The exercise was confined to the five categories which accounted for the majority of persistent absentees across the city as a whole. Even so, at some schools the number of pupils allocated to one or more of these categories was too low to justify statistical analysis. The results (shown in full in Appendix 7 Tables Ia - Ij and IIa - IIc) effectively demonstrate the low reliability of the categorising process. After discounting categories with insufficient cases to justify statistical analysis, the number of pupils allocated to over half the remaining categories differed significantly over the three years in seven of the ten schools. At School 16 there were significant differences in two categories, but not in the remaining two. Two other schools, 14 and 27, stood out in having no significant differences in any category.

Tables IIa - IIc show that variation between schools in the incidence of allocation to each category is even greater than the variation within schools. In each of the three years of the study the differences were significant at the level of  $p < .001$  in at least four of the five categories.

These results are not altogether surprising. As noted in Chapter 10, it was recognised that there would be considerable overlap between the categories. This problem must have been heightened both by changes in personnel throughout the three years of the study, and

perhaps also by differences in the sort of children which schools refer to their e.s.w.s. Research in other professions suggests that a satisfactory level of inter-rater agreement can be achieved, but only when the target variables are tightly defined and relate to observable behaviour (Rutter and Graham, 1968).

The nature of the present study made it impossible to base the categories on observable behaviour, and informal attempts to define each one more tightly produced more questions than they answered.

The reliability study described above throws severe doubt on the reliability of the categorisation of any particular child.

Nevertheless, the categories may be viewed in two different ways:-

- (i) as a general picture of the situation across the whole city, and
- (ii) as a moderate improvement on the traditional distinction between truants, school refusers and pupils withheld by their parents. The

general picture across the city remained similar throughout the three years, though there were some variations within individual categories.

It showed, consistently: (i) that the majority of unjustified absentees were at home with their parents' knowledge, and often with their consent; (ii) that truancy accounts for a much smaller proportion of these pupils; (iii) that less than half of all persistent absenteeism is attributed to illness; (iv) that other possible explanations accounted for relatively few pupils. These comments, however, must be considered in the light of the next section, on validity.

#### VALIDITY OF THE CATEGORIES

Problems of Validity. The questions of validity and reliability are logically distinct. Nevertheless, they overlap in the sense that low reliability implies low validity, though high reliability does not

necessarily imply high validity.

The methodological difficulties involved in investigating validity appear insuperable. The problem is simply that the e.s.w.s' ratings were based on their assessment of the situation at the time. The source of their information consisted of interviews with parents and/or pupils, but their assessment may not necessarily have reflected the explanations given by the interviewees. At times, for example, they may have doubted the parents' statement about a child's illness, or they may have suspected that children who were said by their parents to have been truanting were in fact at home with their knowledge and approval. Theoretically, the best way to investigate validity would have been through a simultaneous assessment, which was impossible as the categories had to be completed retrospectively. Even if it had been possible, however, it would not have overcome the problem since it would still have had to rely on the assessor's interpretation of parents' and children's explanations.

"Administrative Validity". There are, nevertheless, two ways of looking at the question of validity, the first administrative and the second socio-psychological. In one important sense, the categories have high validity. This may be called "administrative validity", and implies simply that e.s.w.s' assessments are assumed to be valid when the l.e.a. makes the administrative decision to take - or not to take - formal action in connection with the child's poor attendance. In practice, as noted in Part I, the l.e.a. takes formal action in connection with a relatively small proportion of all unjustified absentees. Thus, there is a process of selection in which the e.s.w.s decide which parents or pupils they can work with successfully on an informal basis, and which they should recommend for more formal action.

This is, of course, inevitable; all it implies is that the l.e.a. makes its decisions on the basis of advice from the officers responsible for investigating and acting upon cases of poor school attendance.

In practice the evidence on which the advice is based is most unlikely to be challenged in the Magistrates Court, since the bench is concerned primarily with whether or not an offence has been committed, and this is almost invariably established from a record of the school's attendance register. In the Juvenile Court the fact of illegal absence is unlikely to be challenged, though in Sheffield the implicit inference that the child is in need of care or control can be subjected to independent scrutiny by a social worker from the local social services department. This is because a social worker (or occasionally a probation officer) is always asked to investigate the circumstances and report to the court on the child's needs, even when the case is brought by the l.e.a.

The concept of administrative validity, then, implies simply that the assessments of e.s.w.s are accepted by the l.e.a. and the courts as valid, at least to the extent of basing decisions on them. The evidence presented above about their poor reliability - and hence probably low validity in the scientific sense - must be viewed in the context of most other decisions about social policy. The nature of the processes involved in legal action over poor attendance is probably no more subjective than that of the processes involved in, for example, the decision to seek a place of safety order on the grounds of parental neglect.

"Socio-Psychological" Validity". Although the categories may be defended on administrative grounds, they may legitimately be criticised



for social and psychological reasons. Essentially, the problem is that they all relate to family or child variables, and hence implicitly make certain questionable assumptions about the nature of persistent absenteeism. A good example is the category: "parents unable or unwilling to insist on return". From an administrative and legal point of view, this is relatively straightforward, and the l.e.a. has a clear right to initiate proceedings against parent or pupil. It may be, however, that the parents are unwilling to insist on return because they feel - rightly or wrongly - that their child has been bullied at school.

It would be quite easy to draw up another list of categories which are all school-based. Examples are: bullied at school; afraid of punishment/ridicule; difficulty in social relationships with other children; personality clash with particular teachers; crippling sense of educational failure, and so on. Taken in isolation, there is no reason, on the evidence presented so far, to believe that these would be any more or less valid than the categories which were in fact used.

There is in fact evidence from the results presented in Chapter 9 that educational variables may be of considerable importance. The sharp rise in the incidence of absenteeism throughout the secondary school years suggests that school, and possibly community, influences may become more important as pupils progress through puberty and adolescence. The increase in the incidence of truancy - absence without parents' knowledge or consent - in secondary school pupils is further evidence for this hypothesis.

Another objection is that the categories over-simplify the complexity of their social and psychological correlates to the point of being severely misleading. Taking the same category as an example:

"parents unable or unwilling to insist on return" tells us virtually nothing about the parent nor about the child. The child may be quite amenable to the idea of return; continued absence may be attributable simply to a mentally or physically ill parent's inability to get him dressed and ready for school. In contrast the parent may desperately want the child to return, yet lack the physical and emotional strength to insist, against the wishes of a determined youngster.

Problems of this sort are, of course, inevitable in any system of categorisation. At best the categories used in the present report constitute moderate improvement on the traditional psychiatric distinction between truancy, school refusal and absentees who are withheld by their parents. The point at issue is merely that the categories tell us nothing about the social, psychological or educational correlates of absence.

## CONCLUSIONS

Summary. The results presented in Chapters 8 - 11 confirm the suggestion from the pilot project that the incidence of persistent absence from school does not vary throughout the primary school years. In the secondary schools there is a sharp increase each year, with the notable exception of the penultimate year of compulsory education, when persistent absentee rates remain similar to the previous year.

Secondary schools vary enormously in their absentee rates, but much of this difference is associated with intake variables. Nevertheless, there is reasonably good evidence for the view that school variables may have a notable impact on absentee rates, especially in areas of social deprivation.

Well over 50 per cent of all persistent absentees are thought to have been absent without a legally acceptable reason. Truancy is extremely rare amongst persistent absentees from primary schools, and is thought to account for less than 25 per cent of absentees from secondary schools. E.S.W.s consider that absence with parents' knowledge, though not always with their active consent, accounts for many more pupils than truancy. Other categories of absence are also considered but are found to be less important numerically. The uses and limitations of the categories are discussed; it appears that they provide a useful overview, primarily from a legal and administrative view-point, but cannot provide valid information about the nature of the educational, social and psychological stresses associated with persistent absence.

## PART III

### A STUDY OF PERSISTENT ABSENTEES

#### CHAPTER 13 SELECTION OF SCHOOLS AND PUPILS

##### INTRODUCTION

The most important questions for policy and professional practice left unanswered by the city-wide persistent absentees surveys relate to:

- (1) the nature of the educational, psychological, and family characteristics of persistent absentees, and in particular the prevalence of behaviours associated with truancy and school refusal;
- (2) the nature of school variables associated with persistent absenteeism;
- (3) the use in general of specialist advice in connection with poor attendance, and in particular whether absentees who are referred to the l.e.a.'s psychological service differ from absentees who are not referred;
- (4) age and sex differences in the relative influence of school, family and neighbourhood.

More specifically, the city-wide surveys suggest the following possibilities:

- (1) that school and community influences may become more important in adolescence than in the primary school years;
- (2) conversely, that family deprivation or emotional disturbance may be more relevant in the primary school years;

(3) that behaviours associated with school refusal and truancy may have a much higher frequency than is suggested by the clinical literature.

The first two possibilities are suggested by the observation that absentee rates rise sharply throughout the secondary school years. The third is suggested: (i) by the number of pupils whose parents were thought to be unable or unwilling to insist on return - since a characteristic of school refusal in the clinical literature is the child's refusal to return and the parents' inability or reluctance to pursue the question - and (ii) by the generally low reliability of the categories, which suggests the possibility of multi-faceted causation.

#### METHOD

Choice of Area and Background Considerations. In planning an investigation to explore some or all of these issues, three choices had to be made:

- (1) whether to attempt to study a total population of persistent absentees in one selected area, or to draw a sample at random from across the whole city;
- (2) whether to concentrate on an in-depth study of one age-group, or to select pupils from all age-groups;
- (3) whether to interview both pupils and their parents, or to increase sample size by confining the inquiry to pupils.

Dealing with the last two questions first, it was considered essential to interview parents in order to assess the influence of family and social variables. It seemed unlikely that a project based solely on information from pupils would yield convincing evidence either

on the nature of the stresses associated with absence or on the prevalence of behaviours associated with truancy and school refusal as described in the clinical literature. Similarly, it seemed important not to select pupils from one age-group, since this would make it impossible to explore the possibility that the critical variables might alter with age, as suggested above.

The decision whether to aim to interview all unjustified absentees in one part of the city or to draw a sample at random from all schools was more difficult. Eventually the author decided to concentrate on one secondary school and its eight feeding primary schools. In reaching this decision the following points were relevant:

- (1) the city-wide surveys had shown that persistent absence was highly correlated with socio-economic hardship in the catchment areas; it therefore seemed appropriate to select an area known to have an exceptionally high proportion of children receiving free school meals - in other words, to concentrate attention where the problem was greatest;
- (2) the clinical literature reviewed in Part I suggested a tendency for school refusal to be associated with a higher social class than truancy. It seemed possible that this might be an artifact of referral policy; if so, a random or total sample of absentees in a deprived area might show many similar symptoms.
- (3) concentrating the study on one area is the most appropriate method for investigating possible age differences in the variables associated with absence. Selecting one secondary school "pyramid" (secondary school and feeding primary schools) reduces the possibility that differences observed between secondary and primary age groups are caused by neighbourhood differences over which the study has no control;

(4) the possible influence of school variables might be underestimated by selecting pupils from across the city; extreme dislike of a particular subject, for example, would not come to light unless it happened to be the same subject at all or most schools in the sample;

(5) finally, but by no means least, teachers in the selected school were concerned about the problem of absenteeism and were willing to cooperate in the project.

The Schools. The mean number of pupils of compulsory school age on roll in secondary schools covered by the city-wide survey was 1,023 (s.d.=367). The size of the secondary school selected for study was within one s.d. of the mean. Over 12 per cent of the pupils received free school meals - a high proportion by comparison with most of the Sheffield schools. Almost all of the catchment area was characterised by many social problems, and with few owner occupied houses. Prior to secondary school reorganisation into a comprehensive system the school did not have a selective intake. Most of the pupils lived within three miles of the school.

The catchment area divided roughly into three sections. Two of these had three primary schools and the third had two. The primary schools ranged in size from nearly 500 to nearly 200.

Selection of Samples. Four samples were selected:

(1) absentees from the secondary school; this sample consisted of all pupils reported in the school's return on the city-wide survey for the Autumn term 1975, apart from: (a) pupils whose absence was thought to be justified by illness, (b) those in (3) below, and (c) fifth year pupils in the year 1975-76; the latter were excluded

from the sample partly in order to reduce it to a manageable size, and partly because it was intended that interviewing should continue throughout the academic year 1976-77, by which time these pupils would have left school;

(2) persistent absentees from the feeding primary schools; this sample was selected in the same way - all pupils reported on the Autumn 1975 survey, excluding (a) those whose absence was thought to be justified by illness, and (b) those in (3) below;

(3) all pupils in one part of the city who were referred to the l.e.a.'s psychological service on account of poor school attendance over the two year period 1974-75 and 1975-76; the area included the secondary school pyramid of (1) and (2) above, but extended beyond it; pupils who had already met the criteria for samples (1) and (2) were included only in sample (3); the only criterion for inclusion was that the children must have been referred for advice from a psychologist in connection with poor attendance; it was not required that they must have missed more than a specified amount of schooling;

(4) good attenders selected from the same class as (a) the secondary school absentees who were still on the roll of the school at the start of the school year 1977-78 (thus excluding the oldest age-group in the original sample and a smaller number of the remainder who had left the school), and (b) the primary school absentees who attended the primary school with the highest number of pupils in that sample (i.e. Sample (2) above); the pupil selected was the first one, after the absentee pupil, who had been present for at least 85 per cent of possible attendances in the previous term.

Details of the samples are given in Table 13.1. The following points should be made about the selection of samples:

(1) the higher number of pupils in the sample of secondary school



absentees reflected the higher prevalence of absenteeism in this age group;

(2) the number of parent interviews in the good attenders sample was originally intended to lie between that of the secondary school absentees and the other two samples; unfortunately response rate for this sample was somewhat less satisfactory, so that sample size was only slightly larger than that of the primary absentees and the referred pupils; reasons for this are discussed in more detail below; the number of interviews with children was further depressed as the five primary school pupils were all aged less than eight, and it was not felt that interviewing such a small number of pupils of this age would yield useful information;

(3) the response rates in Table 13.1 refer only to parental willingness to cooperate; a few of the children proved much more difficult to contact than their parents; full details of the numbers from each sample contributing to each item of information are given in the relevant chapters on the results.

Table 13.1 Details of Samples

	Number identified for sample	Number whose parents agreed to participate and were interviewed	Percentage of parents agreeing to participate
Secondary School Absentees	41	39	95
Primary School Absentees	21	20	95
Pupils Referred to Psychological Service	22	20	91
Good Attenders	31	23	74

Cooperation was sought from parents of secondary and primary absentees by means of a letter from the Chief Education Officer. This letter explained the purpose and confidential nature of the project and suggested a time and date when the author or one of his colleagues might call in order to ask them whether they would be willing to take part. Parents of the referred sample were contacted direct by the author, in view of their previous contact with the l.e.a.'s psychological service of which the author was a member.

Parents of the good attenders were contacted by their school's head teacher. In the primary school this was done verbally, and all five parents contacted agreed to be interviewed. In the secondary school contact was by letter, with a request for parents to complete a tear-off slip saying whether or not they agreed to take part. As indicated in Table 13.1, this method proved less successful, although the overall response rate of the good attenders was still 74 per cent.

Interviewing of parents and pupils started in July 1976 and continued on a part-time basis throughout the following year. The majority of interviews with parents and pupils in the three absentee samples was completed within twelve months, but a few families proved exceptionally difficult to trace, usually owing to change of address; in these cases interviewing was not finally completed until February 1978. The good attender sample was deliberately left to last for the following reasons:

- (1) it was thought that they would be a great deal easier to contact, if only because the children could be interviewed in school;
- (2) it was thought desirable to interview the absentees as soon as possible after the academic year in which they were recorded on the city-wide survey; (in fact the interviews were spread over an undesirably long time period, but evidence in Chapter 16 suggests that

this should not have introduced too much bias as the majority were still attending very irregularly at the time of interview);

(3) the practical difficulties in arranging "blind" interviews (at which the author would not know whether the target child was an "ordinary" absentee, a referred absentee, or a good attender) proved insuperable. Having established this, from a methodological point of view there seemed little objection to choosing a sample of good attenders at a later date to the absentees; the important points were: (a) that they should be attending well at the time of interview, and (b) that the age distribution should roughly represent that of the original sample; both these requirements were met - (although none were drawn from the oldest age-group of the original sample, the delay in seeing the good attenders meant that their ages at the time of the interview were similar). Details of age and sex distribution are given in Table 13.2.

Table 13.2 Age and Sex Distribution

	Secondary School Absentees	Primary School Absentees	Referred Absentees	Good * Attenders
Boys: N=	18	10	12	9
Girls: N=	21	10	8	9
Total: N=	39	20	20	18
Mean age at time of int- erview with parents	15 0/12	9 8/12	13 4/12	15 6/12
s.d.	10/12	2 10/12	2 10/12	6/12

\*Calculations are based only on the secondary school good attenders. The five primary school good attenders consisted of one boy and four girls, all aged 6-7 years.

[illegible]

Wavelength	Refractive Index	Extinction Coefficient	Optical Density	Concentration
254 nm	1.50	0.1	0.1	0.1 mg/ml
280 nm	1.48	0.05	0.05	0.05 mg/ml
300 nm	1.45	0.02	0.02	0.02 mg/ml

[illegible]

DATE	BY	TO	FROM	REMARKS
1970	10/10/8	10/10/8	10/10/8	10/10/8

All the interviews were carried out by the author, a trainee social worker on placement with him, and two research officers appointed to Sheffield School and Home Project. Full details are given in Tables 13.3 and 13.4. It should be noted that the information in Table 13.3 refers to the number of parents who were interviewed. This is not identical to the number of pupils whose parents agreed to take part (Table 13.1), as parents were only interviewed on one occasion where two children in the family were included in the samples.

It will be seen from Tables 13.3 and 13.4 that the majority of interviews in each sample were carried out by the author, with the exception of those with the good attenders and the parents of secondary school absentees. These were carried out by research officers and a social work student under the author's supervision. Details of interview content are given in the appropriate chapters below.

Statistical Analysis The majority of statistical analyses was carried out with the log likelihood ratio, whose theoretical advantages over chi square were described in Chapter 9. This test allowed results from all four samples to be compared; when a significant result was obtained, pairwise comparison was performed. On occasion it was also necessary to test the difference between means, for example in questionnaire and test results, with the t test for uncorrelated means. The estimate of t was based on pooled variance or separate variance as appropriate. For ease of visual analysis, results have been converted into percentages for presentation in tables in the text and in appendices. The statistical calculations, though, were based on the actual numbers.

Table 13.3 Details of Interviewers of Parents

	Secondary Absentees N=39		Primary Absentees N=17			Referred Absentees N=19			Good Attenders N=22		
	Author	Social Work Student	Research Officer	Author	Social Work Student	Research Officer	Author	Social Work Student	Research Officer	Author	Social Work Student
Interviews with Parents	16	22	0	13	4	0	18	0	1	14	0
											8

Table 13.4 Details of Interviews with Children

	Secondary Absentees N=34		Primary Absentees N=18			Referred Absentees N=19			Good Attenders N=17		
	Author	Social Work Student	Research Officer	Author	Social Work Student	Research Officer	Author	Social Work Student	Research Officer	Author	Social Work Student
Interviews with Children	19	14	1	13	3	2	18	0	1	1	0
											16

### INTRODUCTION

Design of Interview. The interview schedule was designed to provide a range of information on: (i) family structure and living conditions; (ii) the medical histories of the target child and of other members of the family; (iii) the incidence of behaviours associated with truancy and school refusal in the clinical literature; (iv) the parents' attitude towards education and their perception of the target child's difficulties at school; (v) relationships within the family. Selection of items for inclusion was based on the clinical literature and on the author's previous clinical experience.

The interview was semi-structured in the sense that there was an expectation that all items would be covered, but that they would not necessarily be covered in the order, nor even in the systematic manner, indicated on the schedule. For example, parents often gave explanations for their child's absence from school spontaneously at any stage in the interview, thus reducing the need for systematic questions on the subject.

There was some doubt about the most appropriate way to collect information on the child's and the family's medical histories. The principal issue was the poor reliability of information based on memory. On the other hand the use of medical records would have raised major ethical and practical difficulties. The eventual decision was to ask parents for information on their own and their children's medical histories, but to supplement the parents' accounts

with a health questionnaire known as the Malaise Inventory (Rutter et al, 1970). This questionnaire was selected for its satisfactory reliability, and its reasonable validity in identifying psychiatric disorder as diagnosed at a comprehensive psychiatric interview (Chadwick, 1976). Chadwick suggests that when using the instrument for screening, or in the identification of likely psychiatric disorder, the optimum cut-off point is seven positive responses for adults, and six for adolescents.

In addition, parents were asked to complete the final section of the parents' version of the Rutter Scale (Rutter et al, 1970). This is a questionnaire covering aspects of poor health or behaviour associated with emotional disorder. The sections dealing with health and habit problems were omitted for two reasons: (i) to avoid overlap with the interview schedule; (ii) because the small sample size would make interpretation of positive responses difficult, and several of the items had not previously been reported as occurring frequently in children with school attendance problems; (iii) because it was considered essential to aim at completing most interviews in less than 90 minutes. The disadvantage in omitting the first two sections lay, of course, in preventing the possibility of comparison with a national sample. On the other hand, the most important comparisons for the present study were to be drawn between the four Sheffield samples. The reason for seeking completion of the final section, on behaviour problems, was to supplement the information obtained in interview. It was also hoped to provide material for a direct comparison between teachers' assessments and parents', since all of the 18 statements on the parents' scale have their counterparts on a teachers' scale. Unfortunately, however, this did not prove possible (see Chapter 16).



Copies of the interview schedule, the health questionnaire and the Rutter Scale are given in Appendix 8, Interview Schedules Ia, Ib and Ic.

Informants. No attempt was made to exclude children from the interview with their parents. In practice, some parents took it for granted that their children would be present, while others asked if the interviewer wished to see them on their own. The answer to this question was that he did not mind, but would be quite happy for the children to stay if the parent had no objection. There was a subjective impression that the presence of children improved the validity of the interview - many of the children took delight in correcting their parents or jogging their memory. An analysis of informants in each sample showed a slight, but statistically significant overall difference between the four samples, with a tendency for children to be present more often during interviews with parents of the secondary school absentees. However, this difference did not reach statistical significance when each sample was compared with the others, and it was not considered to have introduced any important bias. Details are given in Appendix 8 Table I.

The atmosphere in the interviews was generally relaxed. They lasted from just under one hour to well over three hours.

#### RESULTS - I Housing, Employment and Family Structure.

Nature of Accommodation. In all four samples the majority of pupils lived in the older forms of council housing, either estates of semi-detached dwellings or high-rise flats. Details are shown in Appendix 8 Table II. The majority of families in all four samples

had been living at the same address for at least four years

(Appendix 8 Table III).

The samples did not differ significantly in terms of family size, overcrowding (defined by the rather strict criterion of at least three people per bedroom after assuming that the parents occupy one bedroom on their own) or intact families. The good attenders were significantly more likely to be oldest, youngest or only children than the secondary absentees. Details of these results are given in Appendix 8 Table IV.

Some differences between the samples are seen in Table 14.1.

Table 14.1 Parental Employment

	Secondary School Absentees  N=38	Primary School Absentees  N=17	Referred Absentees  N=19	Good Attend- ers  N=22	Log lik- elihood ratio  df=3	Compar- ison of sub groups  df=3
	<u>PER CENT</u>					
Neither par- ent in cur- rent employ- ment	52.6	52.9	52.6	9.1	15.26 p<.01	Sec. & GA: 12.88 p<.01 Pr. & GA: 9.49 p<.05 Ref. & GA: 9.88 p<.02
Parents have received social sec- urity in last 12 months	65.8	88.2	63.2	27.3	16.96 p<.001	Sec. & GA: 8.51 p<.05 Pr. & GA: 15.74 p<.01
Mother or step mother in employ- ment*	36.1	35.3	26.3	63.6	6.94 NS	
Father or step father unemployed or alive but not support- ing family +	64.7	60.0	61.1	19	12.97 p<.01	Sec. & GA: 11.48 p<.01

\* N = 36, 17, 19, 22

+ N = 34, 15, 18, 21

The good attenders were significantly less likely to live in families with neither parent working than pupils in any of the three absentee samples. Similarly: (i) their parents were significantly less likely to have received social security at some stage in the previous twelve months than those of both secondary and primary school absentees; and (ii) their fathers or step fathers were significantly less likely than those of secondary school absentees not to be supporting the family financially. The general picture to emerge from these results is clearly that severe school attendance problems are associated with financial hardship to a degree that does not exist in the families of good attenders. Evidence on possible reasons for this financial hardship is presented below.

## RESULTS - II Health and Early History.

Coding. Information on medical history provided in the course of the interview was coded as follows:

- (1) chronic illness: this referred to any recurrent or persistent ailment or condition that necessitated medical treatment at fairly frequent intervals. Examples were bronchitis, asthma, skin conditions, migraine and so on;
- (2) serious illness or accident: this referred to accidents or to illnesses not covered in (1) above which had necessitated in-patient treatment for at least 24 hours; in the case of parents this referred to accidents or illnesses in the target child's life-time.

Parents were asked whether the target child had even been separated from either of them for over two weeks. Initially it was hoped to distinguish between separations in the first five years of life

and subsequently, but it gradually became clear in the course of the interviews that parents' memory of the exact time when separation had occurred was often extremely hazy and the distinction was abandoned as too unreliable to be useful.

Informants were asked whether they thought the child would remember any bereavements of close relations (parents, grand-parents or siblings). No age or time limit was imposed. Finally parents were asked about their own and their children's involvement with social work agencies. The question explicitly included the possibility of help from voluntary agencies such as the Family Service Unit or the N.S.P.C.C. Conversely, involvement with the l.e.a. psychological service was excluded from the analysis, since this service was involved, by definition, with all the referred absentees; the l.e.a.'s education social work service was also excluded since this service was involved with all pupils in the absentee samples - precisely because they were absentees.

Children's History. Children in the four samples did not differ significantly in their own or their siblings' frequency of chronic illness nor of serious illnesses or accidents (Appendix 8 Table V). Table 14.2 shows that the referred absentees were significantly more likely to have experienced over two weeks' separation from their mothers and from both parents, though not from their fathers. The four samples did not differ significantly in the number of bereavements suffered, nor did the three absentee samples differ significantly in any of the parental separation items.

Table 14.3 shows a highly significant tendency for social work agencies to have more contact with pupils in the secondary and primary school absentee samples or with their families, compared with the good attenders. In addition there was a tendency for more of the referred absentees to have been in Care, though this did not reach a

significant level on pairwise comparison.

Parents were asked whether "socio-medical" problems, as described in Chapter 10 had led to the target child missing more than a few days of school. When a positive reply was given, the reason was normally found to be head infestation. Lack of appropriate clothing for school was seldom a problem for the secondary school pupils, probably because the school had a flexible policy with regard to uniform. The results showed that the primary school absentees were significantly more likely to have missed school for socio-medical reasons than any of the other three samples. The differences were most marked in the comparison between the primary school pupils and the referred absentees and the good attenders. With the latter groups, these problems appeared to be rare and absent respectively.

Table 14.2 History of Separation from Parents and Bereavements.

	Secondary School Absentees  N=39	Primary School Absentees  N=20	Referred Absentees  N=20	Good Attend- ers  N=23	Log lik- elihood ratio  df=3	Compar- ison of sub groups  df=3
	<u>PER CENT</u>					
History of > 2 weeks' separation from mother	41.0	30	60	17.4	9.29 p<.05	Ref. & GA: 8.59 p<.05
History of > 2 weeks' separation from father	53.8	60	75	34.8	7.45 NS	
History of > 2 weeks' separation from both parents	35.9	30	55	13.0	9.16 p<.05	Ref. & GA: 8.93 p<.05
> 1 bereave- ment of close rel- ative*	53.8	45	40	27.3	5.01 NS	

\* N = 38, 17, 19, 22

Table 14.3 Involvement with Social Work Agencies and Incidence of Socio-medical Problems.

	Secondary School Absentees  N=39	Primary School Absentees  N=20	Referred Absentees  N=20	Good Attend- ers  N=23	Log lik- elihood ratio  df=3	Compar- ison of sub groups  df=3
	<u>PER CENT</u>					
Social work agency curr- ently invol- ved with child	46.2	35	70	8.70	19.70 p<.001	Sec. & GA: 10.55 p<.02 Ref. & GA: 18.74 p<.001
Child has been in Care	28.2	10	45	13.0	8.86 p<.05	NS
Social work agency curr- ently invol- ved with others in family	48.7	75	60	21.7	13.86 p<.01	Pr. & GA 12.82 p<.01
> 1 sibling has been or is in Care	35.9	25	25	13.0	4.18 NS	
7/1 parent in Care/ living away from home/ at boarding school as a child*	12.8	30	15	30.4	5.10 NS	
History of "socio-med- ical" probl- ems	28.2	70	15	0	28.90 p<.001	Sec. & GA: 8.62 p<.05 Pr. & Ref.: 13.21 p<.01 Pr. & GA: 26.48 p<.001 Pr. & Sec.: 9.58 p<.05

\* N = 38, 17, 19, 22

Parents' Histories. No significant differences were found between the three absentee samples in the incidence of chronic illness in either parent, nor in the incidence of severe illness or accidents in either parent. The only result which discriminated between any of the absentee



samples and the good attenders was that the latter were significantly less likely to have both parents suffering from chronic illness than the referred pupils (Appendix 8 Table VI).

Rather more interesting results were obtained from the Health Questionnaire. The mean scores of mothers in each sample were calculated, and that of each sample compared with each of the others using the t test for means of independent samples (Table 14.4). The results show mothers of the good attenders to have a significantly lower mean score than any of the three absentee samples. An alternative but less satisfactory approach is to use the cut-off point of seven positive responses as the best predictor of psychiatric disorder - i.e. the criterion score which results in the smallest proportion of false positives and false negatives combined. In this respect, Table 14.5 reveals no significant differences between any of the four samples in the present study. Even when frequency of response to individual items is examined, few differences emerge (Appendix 8 Table VII). However, it is also possible to compare the scores of these groups with those of two samples from the standardisation sample on the Isle of Wight: (i) a "pure control" sample of mothers who were all known not to suffer from psychiatric disorder, and (ii) a "psychiatric" sample of mothers who had been diagnosed as suffering from some disorder at psychiatric interview. The results in Table 14.5 show: (a) that none of the Sheffield samples differ significantly from the Isle of Wight psychiatric sample in the proportion scoring above criterion; (b) that all of the Sheffield samples differ significantly from the Isle of Wight pure control sample in the same respect. The implications of these results are discussed below.

Parents' Education. The majority of mothers and of fathers in all four samples were educated at Secondary Modern Schools. The majority of

Table 14.4 Mean Score of Mothers on Health Questionnaire

	Secondary School Absentees N=36	Primary School Absentees N=16	Referred Absentees N=18	Good Attenders N=19	Sec. & Pr. t df = 50	Sec. & Ref. t df = 49.06	Sec. & GA t df = 53	Pr. & Ref. t df = 23.52	Pr. & GA t df = 33	Ref. & GA t df = 35
Mean Score	6.86	8.81	6.33	4.21	1.44	0.54	2.33	1.83	3.44	2.19
s.d.	4.40	4.75	2.77	3.12	NS	NS	p<.024	NS	p<.002	p<.036

Table 14.5 Number of Mothers Scoring Above Criterion on Health Questionnaire

	Secondary School Absentees N=36	Primary School Absentees N=16	Referred Absentees N=18	Good Attenders N=19	IOW Mothers Pure Control* N=150	IOW Mothers Psychiatric Group* N=79	log likelihood ratio df=5	Comparison between sub groups df=5
Score $\geq 7$ on Health Questionnaire	55.6	68.8	44.4	31.6	5.3	59.5	109.11 p < .001	Sec. & IOW Pure Control 45.67 p<.001 Pr. & IOW Pure Control 35.77 p<.001 Ref. & IOW Pure Control 18.47 p<.01 IOW Pure Control & IOW Psychiat. 83.37 p<.001

\* from Chadwick (1976)



mothers in all four samples claimed to have attended school regularly themselves, but only half of the fathers, though the differences did not reach statistical significance (Appendix 8 Tables VIII and IX).

RESULTS - III Information from Parents on Children's Behaviour,  
Educational Difficulties and Whereabouts when not in School.

Social Relationships. To assess the target child's social relationships out of school, parents were asked: (i) whether a friend had called at the house in the last week; (ii) whether he generally stayed in the house in the evenings and at week-ends; (iii) in the case of adolescents aged thirteen or over, whether he/she had a boy/girl friend; (iv) whether they had any particular hobbies or interests, or belonged to any club or youth organisation. No significant differences were observed between the absentee samples. The only item in which any of the three absentee samples differed significantly from the good attenders was (i) above; fewer of the referred sample parents reported that a friend had called at the home in the last week (Appendix 8 Table X).

Children's Whereabouts When Absent from School. Parents of the absentee pupils were asked how often they knew their children's whereabouts when they were not at school - "generally", "sometimes", or "seldom". The second two replies imply occasional or regular truancy, while the first implies that few of the child's absences were attributable to truancy. The three absentee samples did not differ significantly in the number of children whose absences were reported by their parents "generally" not to be due to truancy.

At least 25 per cent of parents in all samples, including the good attenders, admitted to anxiety about their children when they left home in the morning, though this obviously did not always lead

to poor school attendance. Several parents in the three absentee samples maintained that illness was a frequent reason for their children missing school. There was a non-significant tendency for a higher proportion of parents in the secondary sample to say that the child was needed at home to help the parents or look after the siblings. Surprisingly, both this and illness were also cited by one of the good attenders' parents as a frequent reason for absence. The results are shown in Appendix 8 Table XI.

Contributory Factors at School. Parents were asked about eight possible contributory factors at school (Table 14.6). Five of these did not differentiate between the samples to a significant degree, but interesting differences were observed in the remaining three. Fear of a particular teacher and extreme dislike of a particular subject in the curriculum were both reported significantly more frequently in respect of secondary school absentees than of the primary school pupils. Fear of a teacher also distinguished the secondary school absentees from the good attenders, though this was not true of dislike of any particular subject. The referred absentees were characterised by a much greater frequency of difficulty in social relationships with other pupils, though this fell just short of significance in the comparison with the secondary school absentees.

Parents' Reports on Children's Behaviour. Information on behavioural problems is summarised in Table 14.7. There was a consistent tendency for parents of the good attenders to report a lower incidence of difficult behaviour, and in six of the ten items there was a significant overall difference between the four samples. On pairwise comparison, however, only one significant result was obtained; a history of stealing, either from within or outside the home, was reported significantly more often in the referred absentees sample



Table 14.6 Parents' Assessment of Contributory Factors at School.

	Secondary School Absentees N=39	Primary School Absentees N=20	Referred Absentees N=20	Good Attenders N=23	Log likelihood ratio df=3	Comparison between sub-groups df=3
		PER CENT				
Bullying or teasing	25.6	45	40	30.4	2.73 NS	
Fear of teacher(s)	66.7	10	45	21.7	23.95 p<.001	Sec & Pr 18.99 p<.001 Sec & GA 12.22 p<.01
Extreme dislike of any particular subject	46.2	5	35	39.1	12.73 p<.01	Sec & Pr 12.38 p<.01 Pr & GA 7.91 p<.05
Boredom - child feels lessons are irrelevant to his/her needs	33.3	5	20	21.7	7.2 NS	
Sense of academic failure	15.4	10	25	17.4	1.68 NS	
Difficulty with social relationships with other pupils	12.8	15	55	4.3	18.43 p<.001	Sec & Ref 11.57 p<.01 GA & Ref 15.17 p<.01
Influence of peers	28.2	15	35	30.4	2.42 NS	
Anxiety/self-consciousness related to sexual development or relationships	17.9	5	25	17.4	3.52 NS	
Parents know child's teachers	33.3	70	65	56.5	9.77 p<.05	NS



compared with the good attenders.

Table 14.7 Parents' Reports on Child's Behaviour.

	Secondary School Absentees  N=39	Primary School Absentees  N=20	Referred Absentees  N=20	Good Attend- ers  N=23	Log lik- elihood ratio  df=3	Compar- ison of sub groups  df=3
		<u>PER CENT</u>				
Child shows anxiety about harm befalling parent/about parent's health	35.9	45	45	8.7	10.29 $p < .01$	NS
History of anxiety about leav- ing home	51.3	55	40	17.4	9.14 $p < .05$	NS
Psychosomatic symptoms associated with school attendance	20.5	15	40	17.4	4.23 NS	NS
Abdominal pains	46.2	35	25	13.0	8.38 $p < .05$	NS
Eating diff- iculties	15.4	25	25	17.4	1.24 NS	NS
Sleep dist- urbance	23.1	0	30	13.0	7.88 $p < .05$	NS
Enuresis	20.5	15	20	4.3	3.89 NS	NS
Stealing	28.2	30	50	8.7	9.63 $p < .05$	Ref. & GA: 9.60 $p < .05$
Lying	12.8	20	45	8.7	9.96 $p < .05$	NS
Wandering	25.6	20	35	13.0	2.99 NS	NS

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[illegible]

$Q_1 = 2.5 \times 10^{-4}$      $Q_2 = 1.5 \times 10^{-4}$      $Q_3 = 1.5 \times 10^{-4}$      $Q_4 = 1.5 \times 10^{-4}$      $Q_5 = 1.5 \times 10^{-4}$

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1990	1.0	1.0	1.0	1.0	1.0
1991	1.0	1.0	1.0	1.0	1.0
1992	1.0	1.0	1.0	1.0	1.0
1993	1.0	1.0	1.0	1.0	1.0
1994	1.0	1.0	1.0	1.0	1.0
1995	1.0	1.0	1.0	1.0	1.0
1996	1.0	1.0	1.0	1.0	1.0
1997	1.0	1.0	1.0	1.0	1.0
1998	1.0	1.0	1.0	1.0	1.0
1999	1.0	1.0	1.0	1.0	1.0
2000	1.0	1.0	1.0	1.0	1.0
2001	1.0	1.0	1.0	1.0	1.0
2002	1.0	1.0	1.0	1.0	1.0
2003	1.0	1.0	1.0	1.0	1.0
2004	1.0	1.0	1.0	1.0	1.0
2005	1.0	1.0	1.0	1.0	1.0
2006	1.0	1.0	1.0	1.0	1.0
2007	1.0	1.0	1.0	1.0	1.0
2008	1.0	1.0	1.0	1.0	1.0
2009	1.0	1.0	1.0	1.0	1.0
2010	1.0	1.0	1.0	1.0	1.0
2011	1.0	1.0	1.0	1.0	1.0
2012	1.0	1.0	1.0	1.0	1.0
2013	1.0	1.0	1.0	1.0	1.0
2014	1.0	1.0	1.0	1.0	1.0
2015	1.0	1.0	1.0	1.0	1.0
2016	1.0	1.0	1.0	1.0	1.0
2017	1.0	1.0	1.0	1.0	1.0
2018	1.0	1.0	1.0	1.0	1.0
2019	1.0	1.0	1.0	1.0	1.0
2020	1.0	1.0	1.0	1.0	1.0
2021	1.0	1.0	1.0	1.0	1.0
2022	1.0	1.0	1.0	1.0	1.0
2023	1.0	1.0	1.0	1.0	1.0
2024	1.0	1.0	1.0	1.0	1.0
2025	1.0	1.0	1.0	1.0	1.0
2026	1.0	1.0	1.0	1.0	1.0
2027	1.0	1.0	1.0	1.0	1.0
2028	1.0	1.0	1.0	1.0	1.0
2029	1.0	1.0	1.0	1.0	1.0
2030	1.0	1.0	1.0	1.0	1.0
2031	1.0	1.0	1.0	1.0	1.0
2032	1.0	1.0	1.0	1.0	1.0
2033	1.0	1.0	1.0	1.0	1.0
2034	1.0	1.0	1.0	1.0	1.0
2035	1.0	1.0	1.0	1.0	1.0
2036	1.0	1.0	1.0	1.0	1.0
2037	1.0	1.0	1.0	1.0	1.0
2038	1.0	1.0	1.0	1.0	1.0
2039	1.0	1.0	1.0	1.0	1.0
2040	1.0	1.0	1.0	1.0	1.0
2041	1.0	1.0	1.0	1.0	1.0
2042	1.0	1.0	1.0	1.0	1.0
2043	1.0	1.0	1.0	1.0	1.0
2044	1.0	1.0	1.0	1.0	1.0
2045	1.0	1.0	1.0	1.0	1.0
2046	1.0	1.0	1.0	1.0	1.0
2047	1.0	1.0	1.0	1.0	1.0
2048	1.0	1.0	1.0	1.0	1.0
2049	1.0	1.0	1.0	1.0	1.0
2050	1.0	1.0	1.0	1.0	1.0
2051	1.0	1.0	1.0	1.0	1.0
2052	1.0	1.0	1.0	1.0	1.0
2053	1.0	1.0	1.0	1.0	1.0
2054	1.0	1.0	1.0	1.0	1.0
2055	1.0	1.0	1.0	1.0	1.0

33	38.5	39.0	39.5	40.0	40.5	41.0	41.5	42.0	42.5	43.0	43.5	44.0	44.5	45.0	45.5	46.0	46.5	47.0	47.5	48.0	48.5	49.0	49.5	50.0	50.5	51.0	51.5	52.0	52.5	53.0	53.5	54.0	54.5	55.0	55.5	56.0	56.5	57.0	57.5	58.0	58.5	59.0	59.5	60.0	60.5	61.0	61.5	62.0	62.5	63.0	63.5	64.0	64.5	65.0	65.5	66.0	66.5	67.0	67.5	68.0	68.5	69.0	69.5	70.0	70.5	71.0	71.5	72.0	72.5	73.0	73.5	74.0	74.5	75.0	75.5	76.0	76.5	77.0	77.5	78.0	78.5	79.0	79.5	80.0	80.5	81.0	81.5	82.0	82.5	83.0	83.5	84.0	84.5	85.0	85.5	86.0	86.5	87.0	87.5	88.0	88.5	89.0	89.5	90.0	90.5	91.0	91.5	92.0	92.5	93.0	93.5	94.0	94.5	95.0	95.5	96.0	96.5	97.0	97.5	98.0	98.5	99.0	99.5	100.0
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### References

100	101	102	103	104	105
106	107	108	109	110	111

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30.5	0.51	0.46	0.49
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00-6 300 18 21 10

**CONCLUSIONS**

1970-71	25.0	100	0.1	0.1	0.1
1971-72	25.0	100	0.1	0.1	0.1

[illegible]

Figure 1. The effect of the concentration of the *Ag* on the *Ag* adsorption capacity of the *Ag*-*Ag*2S-*Ag*2S2O3-*Ag*2S2O6-*Ag*2S2O8-*Ag*2S2O9-*Ag*2S2O10-*Ag*2S2O11-*Ag*2S2O12-*Ag*2S2O13-*Ag*2S2O14-*Ag*2S2O15-*Ag*2S2O16-*Ag*2S2O17-*Ag*2S2O18-*Ag*2S2O19-*Ag*2S2O20-*Ag*2S2O21-*Ag*2S2O22-*Ag*2S2O23-*Ag*2S2O24-*Ag*2S2O25-*Ag*2S2O26-*Ag*2S2O27-*Ag*2S2O28-*Ag*2S2O29-*Ag*2S2O30-*Ag*2S2O31-*Ag*2S2O32-*Ag*2S2O33-*Ag*2S2O34-*Ag*2S2O35-*Ag*2S2O36-*Ag*2S2O37-*Ag*2S2O38-*Ag*2S2O39-*Ag*2S2O40-*Ag*2S2O41-*Ag*2S2O42-*Ag*2S2O43-*Ag*2S2O44-*Ag*2S2O45-*Ag*2S2O46-*Ag*2S2O47-*Ag*2S2O48-*Ag*2S2O49-*Ag*2S2O50-*Ag*2S2O51-*Ag*2S2O52-*Ag*2S2O53-*Ag*2S2O54-*Ag*2S2O55-*Ag*2S2O56-*Ag*2S2O57-*Ag*2S2O58-*Ag*2S2O59-*Ag*2S2O60-*Ag*2S2O61-*Ag*2S2O62-*Ag*2S2O63-*Ag*2S2O64-*Ag*2S2O65-*Ag*2S2O66-*Ag*2S2O67-*Ag*2S2O68-*Ag*2S2O69-*Ag*2S2O70-*Ag*2S2O71-*Ag*2S2O72-*Ag*2S2O73-*Ag*2S2O74-*Ag*2S2O75-*Ag*2S2O76-*Ag*2S2O77-*Ag*2S2O78-*Ag*2S2O79-*Ag*2S2O80-*Ag*2S2O81-*Ag*2S2O82-*Ag*2S2O83-*Ag*2S2O84-*Ag*2S2O85-*Ag*2S2O86-*Ag*2S2O87-*Ag*2S2O88-*Ag*2S2O89-*Ag*2S2O90-*Ag*2S2O91-*Ag*2S2O92-*Ag*2S2O93-*Ag*2S2O94-*Ag*2S2O95-*Ag*2S2O96-*Ag*2S2O97-*Ag*2S2O98-*Ag*2S2O99-*Ag*2S2O100-*Ag*2S2O101-*Ag*2S2O102-*Ag*2S2O103-*Ag*2S2O104-*Ag*2S2O105-*Ag*2S2O106-*Ag*2S2O107-*Ag*2S2O108-*Ag*2S2O109-*Ag*2S2O110-*Ag*2S2O111-*Ag*2S2O112-*Ag*2S2O113-*Ag*2S2O114-*Ag*2S2O115-*Ag*2S2O116-*Ag*2S2O117-*Ag*2S2O118-*Ag*2S2O119-*Ag*2S2O120-*Ag*2S2O121-*Ag*2S2O122-*Ag*2S2O123-*Ag*2S2O124-*Ag*2S2O125-*Ag*2S2O126-*Ag*2S2O127-*Ag*2S2O128-*Ag*2S2O129-*Ag*2S2O130-*Ag*2S2O131-*Ag*2S2O132-*Ag*2S2O133-*Ag*2S2O134-*Ag*2S2O135-*Ag*2S2O136-*Ag*2S2O137-*Ag*2S2O138-*Ag*2S2O139-*Ag*2S2O140-*Ag*2S2O141-*Ag*2S2O142-*Ag*2S2O143-*Ag*2S2O144-*Ag*2S2O145-*Ag*2S2O146-*Ag*2S2O147-*Ag*2S2O148-*Ag*2S2O149-*Ag*2S2O150-*Ag*2S2O151-*Ag*2S2O152-*Ag*2S2O153-*Ag*2S2O154-*Ag*2S2O155-*Ag*2S2O156-*Ag*2S2O157-*Ag*2S2O158-*Ag*2S2O159-*Ag*2S2O160-*Ag*2S2O161-*Ag*2S2O162-*Ag*2S2O163-*Ag*2S2O164-*Ag*2S2O165-*Ag*2S2O166-*Ag*2S2O167-*Ag*2S2O168-*Ag*2S2O169-*Ag*2S2O170-*Ag*2S2O171-*Ag*2S2O172-*Ag*2S2O173-*Ag*2S2O174-*Ag*2S2O175-*Ag*2S2O176-*Ag*2S2O177-*Ag*2S2O178-*Ag*2S2O179-*Ag*2S2O180-*Ag*2S2O181-*Ag*2S2O182-*Ag*2S2O183-*Ag*2S2O184-*Ag*2S2O185-*Ag*2S2O186-*Ag*2S2O187-*Ag*2S2O188-*Ag*2S2O189-*Ag*2S2O190-*Ag*2S2O191-*Ag*2S2O192-*Ag*2S2O193-*Ag*2S2O194-*Ag*2S2O195-*Ag*2S2O196-*Ag*2S2O197-*Ag*2S2O198-*Ag*2S2O199-*Ag*2S2O200-*Ag*2S2O201-*Ag*2S2O202-*Ag*2S2O203-*Ag*2S2O204-*Ag*2S2O205-*Ag*2S2O206-*Ag*2S2O207-*Ag*2S2O208-*Ag*2S2O209-*Ag*2S2O210-*Ag*2S2O211-*Ag*2S2O212-*Ag*2S2O213-*Ag*2S2O214-*Ag*2S2O215-*Ag*2S2O216-*Ag*2S2O217-*Ag*2S2O218-*Ag*2S2O219-*Ag*2S2O220-*Ag*2S2O221-*Ag*2S2O222-*Ag*2S2O223-*Ag*2S2O224-*Ag*2S2O225-*Ag*2S2O226-*Ag*2S2O227-*Ag*2S2O228-*Ag*2S2O229-*Ag*2S2O230-*Ag*2S2O231-*Ag*2S2O232-*Ag*2S2O233-*Ag*2S2O234-*Ag*2S2O235-*Ag*2S2O236-*Ag*2S2O237-*Ag*2S2O238-*Ag*2S2O239-*Ag*2S2O240-*Ag*2S2O241-*Ag*2S2O242-*Ag*2S2O243-*Ag*2S2O244-*Ag*2S2O245-*Ag*2S2O246-*Ag*2S2O247-*Ag*2S2O248-*Ag*2S2O249-*Ag*2S2O250-*Ag*2S2O251-*Ag*2S2O252-*Ag*2S2O253-*Ag*2S2O254-*Ag*2S2O255-*Ag*2S2O256-*Ag*2S2O257-*Ag*2S2O258-*Ag*2S2O259-*Ag*2S2O260-*Ag*2S2O261-*Ag*2S2O262-*Ag*2S2O263-*Ag*2S2O264-*Ag*2S2O265-*Ag*2S2O266-*Ag*2S2O267-*Ag*2S2O268-*Ag*2S2O269-*Ag*2S2O270-*Ag*2S2O271-*Ag*2S2O272-*Ag*2S2O273-*Ag*2S2O274-*Ag*2S2O275-*Ag*2S2O276-*Ag*2S2O277-*Ag*2S2O278-*Ag*2S2O279-*Ag*2S2O280-*Ag*2S2O281-

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The mean scores of each sample on the "Behaviour Statement" of the Rutter (A2) Scale are shown in Table 14.8, and the responses to individual items in Appendix 8 Table XII. Analysis of the individual items reveals only three significant differences, all of which show a tendency for the descriptions ("squirming, fidgety child", "often destroys own or others' property" and "often tells lies") to apply to more of the referred pupils than the good attenders. The same tendency is evident from analysis of the mean scores, where both the secondary school absentees and the good attenders obtain a significantly lower mean score than the referred absentees.

Cumulative Disadvantage and Multiple Behaviour Problems. The results presented above show the incidence of each behavioural item and each item from the social history. In addition to knowing whether the four samples differ with respect to any one measure of disadvantage, it is also important to know whether they differ in the total number of measures. Similarly, it is as important to know how many items of disturbing behaviour apply to each child as it is to know which ones apply. These questions may be investigated by summarising for each child: (i) the total number of measures of disadvantage and/or potential stress in his family, and (ii) the total number of behaviour problems reported, and subsequently calculating the mean for each sample.

Nineteen measures of disadvantage were selected from the data presented above. Details are given in Appendix 8 Table XIII. Certain items were omitted to avoid possible overlap: "father or step father unemployed, or alive but not supporting family" was considered to overlap with "parents receive social security, or have done so within the last twelve months". Conversely, "not living with both parents" and "child has been/is in Care" were both included, since it was felt that being



*Abstract.* The long-time asymptotic behavior of solutions to the modified Korteweg-de Vries equation is studied by the method of steepest descent. It is shown that the solution has a large oscillation if the initial condition is periodic or quasi-periodic. This result is applied to the study of the asymptotic behavior of solutions to the nonlinear Schrödinger equation.

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• *reduced* = reduced to a minimum

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in Care constituted an additional risk factor over and above the fact of not living with both parents.

Behavioural items were drawn from three sources:

(i) items reported by parents as "definitely" applying on the "Behaviour Statement" of the Rutter (A2) Scale; (ii) items in Table 14.7 (parents' reports on child's behaviour); (iii) items in Table 14.6 (parents' assessment of contributory factors at school), with the exception of the item relating to whether parents knew their child's teachers. Some doubt was felt as to whether the school items should be included. The decision to do so was based on the view that, implicitly or explicitly, they described disturbing aspects of the child's behaviour at school, and in the case of the absentee pupils were frequently cited as contributory reasons for absence.

Table 14.9 shows the mean number of measures of disadvantage for each sample and Appendix 8 Table XIV their relative frequency in each of the four samples. Tables 14.10 and Appendix 8 Table XV give the same information on behavioural items. The results of the first two tables are unequivocal. On average, children in each of the three absentee samples are living with significantly more measures of disadvantage and/or potential stress than the good attenders. There appear to be no significant differences between the three absentee samples.

The picture with regard to multiple behaviour problems is different. The referred sample differ significantly from the other two absentee samples and from the good attenders in the higher number of problems reported by parents. The secondary pupils were also reported to show significantly more behavioural problems than the good attenders.

1. The first part of the report is a summary of the work done during the year.

2. The second part is a detailed account of the work done during the year.

3. The third part is a summary of the work done during the year.

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15. The fifteenth part is a summary of the work done during the year.

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22. The twenty-second part is a summary of the work done during the year.

23. The twenty-third part is a summary of the work done during the year.

24. The twenty-fourth part is a summary of the work done during the year.

25. The twenty-fifth part is a summary of the work done during the year.

26. The twenty-sixth part is a summary of the work done during the year.

27. The twenty-seventh part is a summary of the work done during the year.

28. The twenty-eighth part is a summary of the work done during the year.

29. The twenty-ninth part is a summary of the work done during the year.

30. The thirtieth part is a summary of the work done during the year.

Table 14.8 Mean Scores on "Behaviour Statement" Section of Rutter (A2) Scale

	Secondary School Absentees N = 39	Primary School Absentees N = 20	Referred Absentees N = 18	Good Atten- ders N = 23	Sec. & Pr. t df=57	Sec. & Ref. t df=55	Sec. & G A t df=60	Pr. & Ref. t df=36	Pr. & G A t df=41	Ref. & G A t df=26.34
Mean Score	6.64	8.45	11.0	6.65	1.32	2.74	.01	1.47	1.46	2.61
s.d.	5.27	4.35	6.24	3.75	NS	p<.008	NS	NS	NS	p<.015

Table 14.9 Mean Number of Measures of Disadvantage and/or Potential Stress

	Secondary School Absentees N = 39	Primary School Absentees N = 20	Referred Absentees N = 20	Good Atten- ders N = 23	Sec. & Pr. t df=57	Sec. & Ref. t df=57	Sec. & G A t df=60	Pr. & Ref. t df=38	Pr. & G A t df=41	Ref. & G A t df=41
Mean Number	7.7	7.9	8.4	4.9	.26	.91	3.76	.68	3.92	4.20
s.d.	2.8	2.0	2.6	2.8	NS	NS	p<.001	NS	p<.001	p<.001



Table 14.10 Mean Number of Behaviour Problems Reported by Parents

	Secondary School Absentees N = 39	Primary School Absentees N = 20	Referred Absentees N = 18	Good Attendees N = 23	Sec. & Pr. t df=57	Sec. & Ref. t df=22.96	Sec. & G A t df=55	Pr. & Ref. t df=25.43	Pr. & G A t df=41	Ref. & G A t df=39
Mean Number	6.8	6.1	10.2	4.9	.92	2.52	2.23	2.98	1.18	3.88
s. d.	3.2	2.8	5.2	3.4	NS	p<.019	p<.03	p<.006	NS	p<.001

THE UNIVERSITY OF CHICAGO

Year	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2037	2038	2039	2040	2041	2042	2043	2044	2045	2046	2047	2048	2049	2050	2051	2052	2053	2054	2055	2056	2057	2058	2059	2060	2061	2062	2063	2064	2065	2066	2067	2068	2069	2070	2071	2072	2073	2074	2075	2076	2077	2078	2079	2080	2081	2082	2083	2084	2085	2086	2087	2088	2089	2090	2091	2092	2093	2094	2095	2096	2097	2098	2099
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Table 14.11 Family Attitudes and Relationships

	Secondary School Absentees  N=39	Primary School Absentees  N=20	Referred Absentees  N=19	Good Attend- ers  N=23	Log lik- elihood ratio  df=3	Compar- ison of sub groups  df=3
	PER CENT					
Cooperative with school	30.8	10	10.5	39.1	8.32 p<.05	NS
Hostile tow- ards school	59	30	57.9	21.7	11.63 p<.01	Sec & GA 8.48 p<.05
Materially indulgent to child	35.9	45	52.6	21.7	4.95 NS	
Reluctant to accede to child's requ- ests	12.8	0	0	13.0	Nos. too small	
Overprotec- tive	51.3	80	52.6	43.4	6.98 NS	
Demand high degree of independence	20.5	5	0	8.7	Nos. too small	
Passive/inad- quate in their control of child	71.8	100	94.7	26.1	37.33 PL .001	Sec & GA 12.57 p<.01 Pr & GA 28.05 p<.001 Ref & GA 23.13 p<.001
Firm/controll- ing	7.7	0	5.3	26.1	7.51 NS	
Child over- dependent on parent	48.7	55	42.1	21.7	6.27 NS	
Child too independent of parent	35.9	20	26.3	13.0	4.56 NS	
Child wilful or stubborn	38.5	60	52.6	30.4	2.80 NS	
Child generally helpful and cooperative	48.7	60	26.3	43.4	4.86 NS	
Child has warm, satisfactory relationship with parent	69.2	65	52.6	56.5	1.94 NS	
Child has tense, mutually unsat- isfactory relationship with parent	10.3	15	10.5	0	2.84 NS	





Parents' Attitudes and Family Relationships. A form designed to record and code aspects of family attitudes and relationships was completed after each interview. The form (shown in Appendix 8 Interview Schedule Ia) gave seven descriptions in the form of opposites on a presumed continuum, for example:

Eager to cooperate	.....	Average	.....	Hostile towards
with school				school

Coding was on a five-point scale. A score of three represented a position of apparent neutrality in the example above, but in some other dimensions, for example "passive/inadequate.....firm/controlling" could be seen as representing a "happy medium".

The use of opposites on a continuum is controversial (Hargreaves, 1977). They were used here for two reasons: (i) it was felt that they might yield clinically useful information, since most of the items were suggested by evidence in the clinical literature on truancy and school refusal; (ii) the method of assessment described above lends itself to investigation of inter-rater reliability. This question is dealt with in the Discussion section below.

In collating the results in Table 14.11 scores of three were ignored and the two ratings at each end of the continuum were combined. Thus, ratings of one or two were combined to produce the number of children whose parents were thought to be "cooperative with school"; similarly scores of four and five were combined to produce the number whose parents were thought to be hostile towards school. The evidence relates to the child's relationships with, and the attitudes of the mother, except when the interview was with the father only. This was the case with five parents in the good attenders sample and with three in the sample of secondary school absentees. Information on fathers' attitudes was generally less complete in each sample, and is not presented here.

1. *What is the purpose of the study?* The purpose of the study is to investigate the effect of the use of a mobile learning application on the learning outcomes of students in a mathematics course.

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Only two significant results were obtained. The mothers of secondary school absentees were, perhaps unsurprisingly, significantly more likely to be hostile towards their children's school than mothers of the good attenders. The same tendency was evident with mothers of the referred absentees, but just failed to reach a statistically significant level. Of more interest, the mothers of the good attenders were significantly less often rated as "passive-inadequate" than those of children in all three absentee samples. This observation is consistent with the health questionnaire results. Together, the evidence suggests a high incidence of depressive reaction in the mothers of persistent absentees living in a depressed inner-city area. This is, of course, to be expected from the results of epidemiological research on psychiatric disorder in inner-city areas (Rutter et al 1975).

#### DISCUSSION

Validity. It is not generally possible to check on the validity of information provided in "one-off" research interviews. There is a prima facie case for supposing that false negatives are probably more common than false positives; people are more likely to deny the existence of problems that might be thought to reflect badly on themselves or their families than to admit to problems that do not exist. There were in fact a small number of rather obvious false negatives in the responses to the Health Questionnaire. A few families, mainly, though not exclusively in the referred sample, gave extensive evidence of severe physical and psychiatric health problems in the course of the interview, yet answered almost every question in the Health Questionnaire in the negative. This might have been due to response bias - which could also explain some of the very high scores - but may also have reflected dislike for the

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formality of this questionnaire in comparison with the relatively informal nature of other parts of the interview.

Hence, it seems quite likely that the evidence constitutes an under-estimate of the prevalence of some problems. On the other hand, the pattern of responses gives some support to the view that the interviews were reasonably valid. For example, the high rate of positive replies to the question about socio-medical problems, usually head infestation, in the primary absentees sample seems inconsistent with the view that a lot of parents were trying to conceal a socially unacceptable symptom. Similarly, the small number of parents in the same sample who made any complaints about their children's school seems inconsistent with the view that they wished to project responsibility for the children's absence on to the school. A further check on the validity (and reliability) of information provided by parents is to compare it with replies to similar questions put to their children as part of the child interview schedule. This is dealt with in the next chapter.

Reliability. The reliability of information provided in the course of a semi-structured interview is notoriously difficult to investigate. An attempt to do so was made by using the form described above for recording and coding aspects of family attitudes and relationships.

An observer was present in interviews in connection with thirty children. The author was either observer or interviewer in each case. After the interview, the observer and the interviewer completed the form independently. If both parents took part in the whole interview, the form was completed in respect of both parents; if one parent was absent, the form would be completed only if sufficient information was available. As noted above, each item was coded on a 1-5 point scale.

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For the reliability study, the author's ratings on each item were summed and correlated with the sum of the observer's ratings. For example, if the interviewer completed the form in respect of only one parent and gave ratings on the seven items of 2,1,5,3,3,4,2 and the observer gave ratings of 1,3,2,4,4,3,1, the totals for correlation would be 20 and 18. This method appears similar to that used by Rutter (1967) in the reliability study on the Children's Behaviour Questionnaire. The test used was the Pearson Product Moment Correlation.

Three correlations were performed:

(1) interviews in connection with fourteen children in which the author or a trainee social worker, who had been involved in the design of the interview schedules, was either interviewer or observer:

$r=.92$ ,  $p<.001$ ;

(2) interviews in connection with sixteen children in which the author, trainee educational psychologists or research officers on Sheffield School and Home Project were either interviewer or observer:

$r=.93$ ,  $p<.001$ ;

(3) 30 interviews, combining (1) and (2) above:  $r=.92$ ,  $p<.001$ .

Before placing too much emphasis on these impressive looking results it should be remembered that they are based on the overall totals, and do not constitute any statement about the reliability of individual items. Moreover, with this method it is quite possible for major discrepancies to cancel each other out, for example if the two ratings on one item are 1 and 5, and on a second 5 and 1. In fact, there were few, if any, discrepancies of this order, but the principle is still valid. To reduce the results to their lowest level, they fail to demonstrate the unreliability of the interview, and tend





to suggest that the author and his colleagues agreed quite well in their general inferences about aspects of family attitudes and relationships.

Results. Analysis has concentrated so far on the differences between the groups, in an attempt to answer some of the questions posed in Chapter 13. Between group comparison should not, however, obscure the high prevalence of certain variables within all four groups, or at least within all three of the absentee groups. In this connection it is worth noting that the parents of over half the children in each of the absentee samples were unemployed at the time of interview, and over 60 per cent had received social security or similar payment within the previous twelve months. Nearly a third of children in all four samples had a history of chronic illness and/or of serious illnesses or accidents. Nearly a half of their mothers obtained health questionnaire scores consistent with clinical psychiatric disorder. Social work agencies were involved with the families of nearly 50 per cent of the absentee samples and 20 per cent of the good attenders' families. Over a third of families in all three absentee samples were living in conditions of multiple disadvantage as measured by a total of at least nine of the measures listed in Appendix 8 Table XIII.

Turning to the children's behaviour and family relationships, at least 40 per cent of absentees had a history of anxiety about leaving home, and over a third of pupils in all three samples had shown anxiety about their parents' health - a point which is discussed further in the next chapter. Over 70 per cent of parents in all three absentee samples were considered passive or inadequate in their control of the child - a figure which almost certainly reflects the high prevalence of depressive disorder in the health questionnaire.

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Taken together, these results tend to suggest: (i) that persistent absentees in the area under study are experiencing severe social problems; (ii) that in many cases the children's behaviour is consistent with descriptions of school refusal in the clinical literature, but (iii) that the clinical significance of the child's behaviour has to be seen in the context of his own and his family's present circumstances. This point is dealt with in greater detail in the comparison between truants and non-truanting absentees in Chapter 17.

#### SUMMARY

Evidence on family circumstances from interviews with parents supports the view that persistent absence from school is associated with multiple deprivation. There is some evidence that social problems are of relatively greater influence in the primary absentees sample, while school factors become more important in the secondary age group. Although relatively few differences were observed between the three absentee samples, there is a fairly marked tendency for parents of the referred pupils to report a greater number of behavioural difficulties inside or outside the home than parents of the other primary and secondary school absentees.



## CHAPTER 15 INTERVIEWS WITH CHILDREN

### INTRODUCTION

Design of the Interview. Interviews with the children had four broad aims:

- (1) to establish the reasons for absence from school from the children's point of view;
- (2) to gain some idea of children's accounts of their own activities when absent from school;
- (3) to explore the possibility that the samples differed with respect to intellectual ability and/or educational attainment;
- (4) to assess the children's needs from the point of view of possible future counselling.

The parts of the interview schedule dealing with (1) and (2) above were based closely on the relevant sections of the interview with parents and need little further explanation. The approach was semi-structured and included reasons for absence to do with possible stresses at home, as well as reasons to do with school. When a child stated his dislike of or anxiety about some aspect of school, he was asked to elaborate on the theme and to give specific details. Similarly, when there was evidence of difficulties at home, whether in terms of family relationships, or of other problems, further questioning aimed to elicit their nature and the child's perception of them. If a child indicated that he did not want to discuss something, this was respected, but in practice it happened very seldom indeed. The majority of children seemed delighted at the opportunity to talk (though finding some of them in the first place, especially the truants, required great

perseverance).

Unless more detailed information was already available from cognitive assessment, a shortened version of the Wechsler Intelligence Scale for Children or its revised version, WISC-R (Wechsler, 1976) was used for intellectual assessment. The sub-tests selected were Vocabulary and Similarities, since these tests have the highest test - re-test reliability, at least in the original WISC, and have also been used extensively in epidemiological research (Rutter et al, 1970; Berger et al, 1975) on account of their high correlation with academic performance.

Except in a very few cases when other recent test results were already available, reading ability was assessed with Schonell's Graded Word Reading Test using the norms developed in Salford in 1971 by Bookbinder (Schonell and Goodacre, 1974). These norms were selected partly for their relative recency, but additionally because they were established in a predominantly working class area, and might thus provide a more valid measure for the present study than national norms. Schonell's test was selected with considerable reluctance, since it is simply a word-recognition test and yields no information about the development of higher-level reading skills which may be crucial to a child's educational progress and adjustment. A further problem is that the revised norms only reach a Reading Age of 12.6. Above this level, at which 83 out of 100 words have been read correctly, a graded word recognition test becomes even more inappropriate.

On the other hand, the reading test was intended simply as a screening procedure, to identify children with rather obvious difficulties. Bearing this restricted purpose in mind, Schonell's test did not seem too unsuitable. It was used principally because

administration usually takes less than five minutes, and none of the numerous more useful tests was as economical in time. It was considered essential to aim at completing the interview within an hour to an hour and a half, which meant allowing a maximum of fifteen minutes for cognitive and educational assessment. This was also the reason for selecting the short form of the WISC described above in preference to the alternative form described by Yudin (1966).

Three procedures were used to assess counselling needs.

(1) The 1975 revision of the Lewis Counselling Inventory (Lewis and Pumfrey, 1975) was given to all children except a few primary school absentees who were not old enough to understand it. Although unpublished at the time of the present study, the LCI was selected for four reasons: (a) it identifies pupils who have exceptional problems in the areas of interest to research on absenteeism, namely: relationships with teachers, family and peers, and the personality-related variables of irritability, social confidence and health; (b) it has satisfactory test - re-test reliability; (c) roughly 75 per cent of pupils are stated to consider the Inventory gives an adequate picture of their problems; (d) validity can be checked, to some extent, by means of a lie scale.

(2) The Health Questionnaire used in the interview with parents was administered to all pupils of secondary school age.

(3) A Repertory Grid was given to all pupils, with constructs aiming to elicit information on aspects of the child's self-image. The principal purpose of this was to provide information of a clinical nature that might be of value when preparing illustrative case histories for subsequent seminars with teachers. The grids met this limited objective successfully. Preliminary analysis, however, cast



considerable doubt on their usefulness in drawing comparisons between the samples, and it was decided not to proceed with the analysis. No details are given in this report, but the results will be used in a later paper dealing more comprehensively with the subject of the perceptions of self and environment in absentee pupils. The interview schedule and counselling inventory are shown in Appendix 9.

Informants. Selection of the samples has already been described.

In practice, it proved more difficult to arrange interviews with some pupils than with their parents. One of the good attenders was in hospital. One child in the primary school sample was too severely withdrawn to interview, and repeated attempts to contact one primary school child and one referred pupil proved unsuccessful. Three of the secondary school pupils left school before they could be interviewed, one refused to take part, and one was being sought by the police after absconding from a community home. It was decided that no useful purpose would be served by interviewing the five infant school good attenders, since the number was too small to justify comparison with the primary school absentees. Hence the number of children actually seen in the secondary, primary, referred and good attender samples was 34, 18, 19 and 17. As a proportion of the number of parents seen (excluding the infant school good attenders) these numbers represent 87 per cent, 90 per cent, 95 per cent and 94 per cent.

#### METHOD AND RESULTS - I INFORMATION FROM INTERVIEW

Children were asked about their activities when not at school. From the replies it was possible to distinguish between children who (i) claimed to spend most of their time in school hours at home (i.e. not to be truanting); (ii) claimed to spend some of their time at home (i.e. were truanting occasionally); (iii) claimed to spend little

or no time at home (i.e. were usually truanting). The results are shown in Table 15.1. Very few of the primary school absentees

Table 15.1 Pupils' Explanations of Absence.

	Secondary School Absentees  N=34	Primary School Absentees  N=18	Referred Absentees  N=19	Good Attend- ers  N=17	Log lik- elihood ratio  df=2	Compar- ison of sub groups  df=2
	<u>PER CENT</u>					
Mainly at home	50	83.3	57.9	N/A	6.02 p<.05	NS
Some tru- anting	23.5	0	21.05	N/A	10.95 p<.02	
Mainly truanting	26.5	16.7	21.05	N/A	0.70 NS	

appeared to have been truanting, but half the secondary school absentees and nearly half the referred sample described their activities in a manner consistent with occasional or frequent truancy.

The pupils' accounts in Table 15.1 appear very similar to those of parents when they were asked how often they knew of their children's absence from school (Appendix 8 Table XI). As a further check on the reliability of their information, the original interviews were re-examined.

It was assumed that if parents generally knew their children's whereabouts when they were absent from school, then the children would generally claim to be at home in school hours. 43 children in the absentee samples were interviewed whose parents claimed generally to know their whereabouts when they were absent from school. Of these

children, 88 per cent claimed to be mainly at home during school hours. Conversely, 28 children were interviewed whose parents said their absence was seldom or only sometimes with their knowledge. Of these, 82 per cent described their activities when absent from school in terms of occasional or frequent truancy. Hence, information about truancy appeared to be reliable in most cases.

The good attenders stood out sharply from the primary school and the referred absentees, and to a lesser extent from the secondary school absentees, in being more likely to have interests outside the home (Table 15.2). At first sight this seems inconsistent with evidence given in Appendix 8 Table X, where no significant differences were found in the number of children reported by their parents to belong to a specific youth organisation or to have specified hobbies. Only the parents of secondary school pupils were asked that question, however, whereas in the child interview all pupils were asked about their out of school activities. Any regular, purposeful activity was accepted; for example going swimming, or regular visits to a relative (if the child went on his own or with other children) were accepted, though a statement about "playing out" was not (however purposeful that might have been from the child's point of view).

Table 15.2 Children with Interests Outside Home.

	Secondary School Absentees  N=34	Primary School Absentees  N=18	Referred Absentees  N=19	Good Attend- ers  N=17	Log lik- elihood ratio  df=3	Compar- ison of sub groups  df=3
	<u>PER CENT</u>					
Number of children with outside interests	32.3	5.6	5.3	70.6	26.1 p<.001	Pr. & GA 17.9 p<.001 Ref. & GA 18.7 p<.001

Table 15.3 shows a tendency for more pupils in all three absentee samples to express anxiety about their parents' health or safety than the good attenders, though this only reached significance with the secondary school absentees. A similar tendency was seen in absentee pupils' reports about staying at home to help their parents or to look after younger siblings, though this did not reach significance in any of the pair-wise comparisons. Compared with the good attenders significantly more of the referred absentees expressed anxiety about academic failure and difficulty in social relationships with other children as contributory reasons for absence (Table 15.4). Only one contributory factor in or out of school was reported to distinguish the three absentee groups to a significant extent: more secondary school absentees than primary school absentees expressed fear of a particular teacher as a contributory factor.

Table 15.3 Children's Accounts of Contributory Factors Outside School.

	Secondary School Absentees  N=34	Primary School Absentees  N=18	Referred Absentees  N=19	Good Attend- ers  N=17	Log lik- lihood ratio  df=3	Compar- ison of sub groups  df=3
	<u>PER CENT</u>					
Socio-med- ical reasons	14.7	22.2	10.5	0	3.69 NS	
Fear of harm befalling parent	73.5	55.6	47.4	23.5	12.40 p<.01	Sec. & GA 11.89 p<.01
Illness a frequent reason for absence	35.3	38.9	31.6	11.8	4.29 NS	
Influence of peers	32.4	16.7	15.8	5.9	4.79 NS	
At home to help parents/ look after siblings	55.9	27.8	26.3	17.6	9.69 p<.05	NS

Table 15.4 Children's Accounts of Contributory Factors at School.

	Secondary School Absentees  N=34	Primary School Absentees  N=18	Referred Absentees  N=19	Good Attend- ers  N=17	Log lik- elihood ratio  df=3	Compar- ison of sub groups  df=3
	<u>PER CENT</u>					
Bullying or teasing	29.4	33.3	31.6	17.6	1.38 NS	
Fear of teacher	64.7	22.2	36.8	29.4	11.53 p<.01	Sec. & Pr. 8.87 p<.05
Extreme dis- like of any particular subject	55.9	38.9	52.6	35.3	2.73 NS	
Boredom - child feels lessons are irrelevant to his needs	50	16.7	42.1	41.2	6.03 NS	
Sense of acad- emic failure	44.1	44.4	78.9	23.5	12.31 p<.01	Ref. & GA 11.69 p<.01
Difficulty with social relationships with other pupils	23.5	33.3	52.6	0	13.87 p<.001	Ref. & GA 10.42 p<.02
Anxiety/self- consciousness related to sexual devel- opment and/or relationships	8.8	5.6	36.8	5.9	9.47 p<.05	NS

#### METHOD AND RESULTS - II INTELLIGENCE AND READING ABILITY

As noted above, the purpose of assessing reading ability was to identify children who were likely to be experiencing considerable difficulty in school. Interpretation of the results is complicated by the fact that the upper limit of the norms is a Reading Age of 12.6 and

Table 15.5 Prevalence of Reading Difficulties.

	Secondary School Absentees		Primary School Absentees		Referred Absentees	Good Attenders	Log likelihood ratio	Comparison between sub-groups
	N=31		N=18		N=19	N=16	df=3	df=3
PER CENT								
CA > 14.6/12 and RA ≤ 12.6/12 OR CA ≤ 14.6/12 and RA > 2 yrs. below CA	77.4		50		83.3	93.8	9.36 p < .05	Pr & GA 8.76 p < .05
CA > 14.6/12 and RA ≤ 11.6/12 OR CA ≤ 14.6/12 and RA > 3 yrs. below CA	51.6		33.3		63.2	75	6.83 NS	

Table 15.6 Mean Verbal Scale I.Q.

	Secondary School Absentees		Primary School Absentees		Referred Absentees	Good Attenders	Sec & Pr	Sec & Ref	Sec & GA	Pr & Ref	Pr & GA	Ref & GA
	N=34		N=18		N=19	N=16	df=50	df=51	df=48	df=35	df=32	df=33
Mean VSIQ	89.32	85.72	86.47	85.69	18.7	14.5	.93	.64	.87	.14	.01	.14
s.d.	13.4	13.2	18.7	14.5			NS	NS	NS	NS	NS	NS

# UNITED STATES DEPARTMENT OF AGRICULTURE

Report of the Director of the Bureau of Plant Industry  
 on the results of the investigation of the  
 cause of the loss of the cotton crop in  
 the State of Mississippi, 1911.

By the Director, Bureau of Plant Industry.

W. L. GARDNER, Director.

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W. L. GARDNER, Director.

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over 75 per cent of children in three of the four samples were over 14 years old. A pupil aged more than fourteen and a half, for example, might have superior reading ability, yet his RA would appear in the results simply as " $>12.6$ ". Nevertheless, if the same pupil obtained a RA of  $\leq 12.6$  this could safely be regarded as evidence for at least two years backwardness in reading, since he had failed to demonstrate a RA in excess of 12.6. The criterion can, of course, be strengthened to three years backwardness by reducing the RA to  $\leq 11.6$ . With children aged fourteen and a half or less, the criteria are more straightforward, namely a RA of two or three years below CA.

The proportion of pupils from each sample whose reading was backward are shown in Table 15.5 and the mean VSIQ in Table 15.6. No significant differences in IQ were noted, the mean for all samples lying in the below average range. The referred pupils had a greater range of ability, which is reflected in a higher standard deviation. The striking features in Table 15.5 on the incidence of reading difficulties are (i) the very high percentage of backwardness in all four samples and (ii) a tendency for more of the good attenders to be seriously backward in reading, compared with the three absentee samples.

Two points should be made about this somewhat disconcerting result: (i) the difference reaches statistical significance only in the comparison between the good attenders and the primary pupils; the latter may be at an advantage in this sort of comparison if absence from school has a cumulative effect on attainment, simply because they are younger; (ii) the good attenders were selected from the same class as the secondary school absentees, with many from the 'remedial' classes; it is at least possible that some absentees were placed in those classes partly because of their absence, while the good attenders were placed in them entirely because of their lack of ability. Unfortunately, it was not felt that Schonell's test lent itself to a useful distinction between reading retardation and reading backwardness.



Health Questionnaire. The mean score of each sample on the Health Questionnaire is shown in Table 15.7 and the number scoring above criterion in Table 15.8. The number of pupils giving positive responses to individual items is shown in Appendix 9 Table I. No significant differences were found between the good attenders and the referred absentees. In contrast, the mean scores of the secondary school absentees were significantly higher than those of the good attenders, and a similarly higher proportion scored above criterion. The individual items which distinguished the secondary school absentees from the good attenders were: (i) "Do you often get worried about things things?" (ii) "Are you easily upset or irritated?" (iii) "Do you often suffer from an upset stomach?" The implications of these results are discussed below.

Table 15.7 Children's Mean Scores on Health Questionnaire.

	Secondary School Absentees N=34	Referred Absentees N=13	Good Attenders N=17	Sec. & Ref. t df=45	Sec. & GA t df=49	Ref. & GA t df=28
Mean Score	6.38	4.69	3.35	1.38	2.76	1.19
s.d.	4.0	3.1	3.0	NS	p<.008	NS

Table 15.8 Pupils Scoring At or Above Criterion on Health Questionnaire.

	Secondary School Absentees N=34	Referred Absentees N=13	Good Attenders N=17	Log likelihood ratio df=2	Comparison between sub-groups df=2
Score $\geq 6$	52.9	30.8	17.6	6.73 p<.05	Sec. & GA 6.24 p<.05

Figure 1: Schematic representation of the experimental design. The figure shows a sequence of events for two groups: 'Control' and 'Experimental'. For the Control group, the sequence is: 'Pretest' (10 trials) -> 'Training' (10 trials) -> 'Test' (10 trials). For the Experimental group, the sequence is: 'Pretest' (10 trials) -> 'Training' (10 trials) -> 'Test' (10 trials). The 'Training' phase for the Experimental group is further detailed as 'Training' (10 trials) -> 'Test' (10 trials). The 'Test' phase for the Experimental group is further detailed as 'Test' (10 trials) -> 'Test' (10 trials). The 'Test' phase for the Experimental group is further detailed as 'Test' (10 trials) -> 'Test' (10 trials). The 'Test' phase for the Experimental group is further detailed as 'Test' (10 trials) -> 'Test' (10 trials).

[illegible]

with  $\mathbf{r}_i$  and  $\mathbf{r}_j$  the position vectors of the particles  $i$  and  $j$  relative to the origin of the coordinate system.

[illegible]

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6.6 The  $\alpha$ -th order derivative  $\partial^\alpha u$  of  $u$  is positive

There are two main types of information in any given message:

... children and a woman, living on, in the street, in a filthy, unhygienic

Adv. Math. 2016, 30(1), 1–14. doi:10.1016/j.am.2015.09.001

1. The first condition is that the function  $f$  is continuous on the interval  $[a, b]$ .

any of" (iii) "that I had no way of knowing" (ii) "because I

doi:10.1017/S0007122616000016

[illegible][illegible]

10. "The" of probability, not "each" of them.

1. *What is the purpose of the study?*

$$g_0 = \frac{1}{\sqrt{2}}, \quad g_1 = \frac{1}{\sqrt{6}}, \quad g_2 = \frac{1}{\sqrt{10}}, \quad g_3 = \frac{1}{\sqrt{14}}, \quad g_4 = \frac{1}{\sqrt{18}}, \quad g_5 = \frac{1}{\sqrt{22}}.$$

pt.1 pt.2 pt.3 pt.4 pt.5 pt.6 small area

Year	1990	1991	1992	1993	1994	1995
1990	0.0	0.0	0.0	0.0	0.0	0.0
1991	0.0	0.0	0.0	0.0	0.0	0.0
1992	0.0	0.0	0.0	0.0	0.0	0.0
1993	0.0	0.0	0.0	0.0	0.0	0.0
1994	0.0	0.0	0.0	0.0	0.0	0.0
1995	0.0	0.0	0.0	0.0	0.0	0.0

1. DATE OF BIRTH 2. DATE OF DEATH 3. DATE OF INTERVIEW 4. DATE OF REPORT 5. DATE OF REVIEW

1. 1990-1991 2. 1991-1992 3. 1992-1993 4. 1993-1994 5. 1994-1995 6. 1995-1996 7. 1996-1997 8. 1997-1998 9. 1998-1999 10. 1999-2000 11. 2000-2001 12. 2001-2002 13. 2002-2003 14. 2003-2004 15. 2004-2005 16. 2005-2006 17. 2006-2007 18. 2007-2008 19. 2008-2009 20. 2009-2010 21. 2010-2011 22. 2011-2012 23. 2012-2013 24. 2013-2014 25. 2014-2015 26. 2015-2016 27. 2016-2017 28. 2017-2018 29. 2018-2019 30. 2019-2020 31. 2020-2021 32. 2021-2022 33. 2022-2023 34. 2023-2024 35. 2024-2025 36. 2025-2026 37. 2026-2027 38. 2027-2028 39. 2028-2029 40. 2029-2030 41. 2030-2031 42. 2031-2032 43. 2032-2033 44. 2033-2034 45. 2034-2035 46. 2035-2036 47. 2036-2037 48. 2037-2038 49. 2038-2039 50. 2039-2040 51. 2040-2041 52. 2041-2042 53. 2042-2043 54. 2043-2044 55. 2044-2045 56. 2045-2046 57. 2046-2047 58. 2047-2048 59. 2048-2049 60. 2049-2050 61. 2050-2051 62. 2051-2052 63. 2052-2053 64. 2053-2054 65. 2054-2055 66. 2055-2056 67. 2056-2057 68. 2057-2058 69. 2058-2059 70. 2059-2060 71. 2060-2061 72. 2061-2062 73. 2062-2063 74. 2063-2064 75. 2064-2065 76. 2065-2066 77. 2066-2067 78. 2067-2068 79. 2068-2069 80. 2069-2070 81. 2070-2071 82. 2071-2072 83. 2072-2073 84. 2073-2074 85. 2074-2075 86. 2075-2076 87. 2076-2077 88. 2077-2078 89. 2078-2079 90. 2079-2080 91. 2080-2081 92. 2081-2082 93. 2082-2083 94. 2083-2084 95. 2084-2085 96. 2085-2086 97. 2086-2087 98. 2087-2088 99. 2088-2089 100. 2089-2090 101. 2090-2091 102. 2091-2092 103. 2092-2093 104. 2093-2094 105. 2094-2095 106. 2095-2096 107. 2096-2097 108. 2097-2098 109. 2098-2099 110. 2099-2100 111. 2100-2101 112. 2101-2102 113. 2102-2103 114. 2103-2104 115. 2104-2105 116. 2105-2106 117. 2106-2107 118. 2107-2108 119. 2108-2109 120. 2109-2110 121. 2110-2111 122. 2111-2112 123. 2112-2113 124. 2113-2114 125. 2114-2115 126. 2115-2116 127. 2116-2117 128. 2117-2118 129. 2118-2119 130. 2119-2120 131. 2120-2121 132. 2121-2122 133. 2122-2123 134. 2123-2124 135. 2124-2125 136. 2125-2126 137. 2126-2127 138. 2127-2128 139. 2128-2129 140. 2129-2130 141. 2130-2131 142. 2131-2132 143. 2132-2133 144. 2133-2134 145. 2134-2135 146. 2135-2136 147. 2136-2137 148. 2137-2138 149. 2138-2139 150. 2139-2140 151. 2140-2141 152. 2141-2142 153. 2142-2143 154. 2143-2144 155. 2144-2145 156. 2145-2146 157. 2146-2147 158. 2147-2148 159. 2148-2149 160. 2149-2150 161. 2150-2151 162. 2151-2152 163. 2152-2153 164. 2153-2154 165. 2154-2155 166. 2155-2156 167. 2156-2157 168. 2157-2158 169. 2158-2159 170. 2159-2160 171. 2160-2161 172. 2161-2162 173. 2162-2163 174. 2163-2164 175. 2164-2165 176. 2165-2166 177. 2166-2167 178. 2167-2168 179. 2168-2169 180. 2169-2170 181. 2170-2171 182. 2171-2172 183. 2172-2173 184. 2173-2174 185. 2174-2175 186. 2175-2176 187. 2176-2177 188. 2177-2178 189. 2178-2179 190. 2179-2180 191. 2180-2181 192. 2181-2182 193. 2182-2183 194. 2183-2184 195. 2184-2185 196. 2185-2186 197. 2186-2187 198. 2187-2188 199. 2188-2189 200. 2189-2190 201. 2190-2191 202. 2191-2192 203. 2192-2193 204. 2193-2194 205. 2194-2195 206. 2195-2196 207. 2196-2197 208. 2197-2198 209. 2198-2199 210. 2199-2200 211. 2200-2201 212. 2201-2202 213. 2202-2203 214. 2203-2204 215. 2204-2205 216. 2205-2206 217. 2206-2207 218. 2207-2208 219. 2208-2209 220. 2209-2210 221. 2210-2211 222. 2211-2212 223. 2212-2213 224. 2213-2214 225. 2214-2215 226. 2215-2216 227. 2216-2217 228. 2217-2218 229. 2218-2219 230. 2219-2220 231. 2220-2221 232. 2221-2222 233. 2222-2223 234. 2223-2224 235. 2224-2225 236. 2225-2226 237. 2226-2227 238. 2227-2228 239. 2228-2229 240. 2229-2230 241. 2230-2231 242. 2231-2232 243. 2232-2233 244. 2233-2234 245. 2234-2235 246. 2235-2236 247. 2236-2237 248. 2237-2238 249. 2238-2239 250. 2239-2240 251. 2240-2241 252. 2241-2242 253. 2242-2243 254. 2243-2244 255. 2244-2245 256. 2245-2246 257. 2246-2247 258. 2247-2248 259. 2248-2249 260. 2249-2250 261. 2250-2251 262. 2251-2252 263. 2252-2253 264. 2253-2254 265. 2254-2255 266. 2255-2256 267. 2256-2257 268. 2257-2258 269. 2258-2259 270. 2259-2260 271. 2260-2261 272. 2261-2262 273. 2262-2263 274. 2263-2264 275. 2264-2265 276. 2265-2266 277. 2266-2267 278. 2267-2268 279. 2268-2269 280. 2269-2270 28

100-443887-1000

[illegible]

10 <sup>-1</sup> .0001	28.2	6.71	3.08	1.94	1.000
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Lewis Counselling Inventory. The 1975 revision of the Lewis Counselling Inventory contains 40 statements in the following six areas:-

- (1) relationships with teachers (8 items)
- (2) relationships with family (7 items)
- (3) irritability (6 items)
- (4) social confidence (7 items)
- (5) relationships with peers (6 items)
- (6) health (6 items)

To the right of each item there are two boxes, in which the pupils indicates his agreement or disagreement with each item. Each item is scored one or three, the latter indicating the greater need for counselling. If items are omitted, or the pupil marks both the "agree" and the "disagree" boxes, a score of two is given. In addition, there is a lie scale of six items, each scored 0 or 4; if the subject agrees with four or more of these, a "lie score" of 16 or over, the scores on the other six scales should be treated with great caution. The lie scale items are not included in the total.

Provisional norms for each of the six scales and for the total have been provided by Brock (1975), based on results from nearly 1,500 third year secondary school pupils from eight comprehensive, three secondary modern and two grammar schools in the North West of England.

The inventory assumes a reading age of about ten and a half. It was generally read to pupils with a R.A. of less than eleven, but even so the language proved too complicated for several primary school pupils, and a number of the older children needed some assistance in unravelling the double negatives implied in disagreeing with statements which were

- (1) The first of the three parcels was located in the  
vicinity of the town of ...
- (2) The second of the three parcels was located in the  
vicinity of the town of ...
- (3) The third of the three parcels was located in the  
vicinity of the town of ...
- (4) The fourth of the three parcels was located in the  
vicinity of the town of ...
- (5) The fifth of the three parcels was located in the  
vicinity of the town of ...
- (6) The sixth of the three parcels was located in the  
vicinity of the town of ...

The first of the three parcels was located in the  
vicinity of the town of ... and was owned by ...  
The second of the three parcels was located in the  
vicinity of the town of ... and was owned by ...  
The third of the three parcels was located in the  
vicinity of the town of ... and was owned by ...  
The fourth of the three parcels was located in the  
vicinity of the town of ... and was owned by ...  
The fifth of the three parcels was located in the  
vicinity of the town of ... and was owned by ...  
The sixth of the three parcels was located in the  
vicinity of the town of ... and was owned by ...

The first of the three parcels was located in the  
vicinity of the town of ... and was owned by ...  
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The third of the three parcels was located in the  
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The fourth of the three parcels was located in the  
vicinity of the town of ... and was owned by ...  
The fifth of the three parcels was located in the  
vicinity of the town of ... and was owned by ...  
The sixth of the three parcels was located in the  
vicinity of the town of ... and was owned by ...

already in the negative. There was a non-significant tendency for more of the primary school absentees to score unacceptably high on the lie scale (Appendix 9 Table II), but this was almost certainly due to their difficulty in understanding the items. The whole of this sample was therefore excluded from the subsequent analysis, as were all pupils in the other three samples who scored at or above criterion on the lie scale.

The mean total scores of secondary school absentees, referred absentees and good attenders are shown in Table 15.9; no significant differences were observed. If absentees have exceptional counselling needs, it might reasonably be expected that a higher proportion of absentees than of good attenders would obtain scores in excess of one standard deviation above the mean obtained by the standardisation sample. In fact, Appendix 9 Table III shows that this is not the case, while Appendix 9 Table IV shows that the four samples do not differ significantly when the criterion is lowered to the number scoring above the mean. The implication of these results and the usefulness of the L.C.I. as an index of the need for counselling is discussed below.

Table 15.9 Mean Total Score on L.C.I.

	Secondary School Absentees  N=25	Referred Absentees  N=16	Good Attenders  N=15	Sec. & Ref. t df=39	Sec. & GA t df=38	Ref. & GA t df=29
Mean Total Score	65.52	66.88	64.67	.40	.24	.60
s.d.	11.1	9.9	10.7	NS	NS	NS

## DISCUSSION

Reliability and Interpretation. Information provided by the children was generally reasonably consistent with that obtained in the interviews

and you may find it interesting to see how the results of the analysis change when you vary the parameters of the model.

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What time would you like to call me? I'll be home at 6:00 PM, or you can call me at 7:00 PM.

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It is important to note that the above information is for informational purposes only and should not be used as a basis for any investment decision. The information is not intended to be a recommendation or an offer to sell or buy any security.

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collected by W. F. Gillette at various localities throughout the State, and are as follows:

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10. To determine whether a child is eligible for services, the parent must provide information about the child's current and past behavior, including any history of abuse or neglect, and any other factors that may affect the child's ability to learn.

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• How can we get a better estimate of the true value of the variance?

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*Received 10 June 2018; accepted 27 April 2019; first published online 16 May 2019*

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Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13	Q14	Q15	Q16	Q17	Q18	Q19	Q20	Q21	Q22	Q23	Q24	Q25	Q26	Q27	Q28	Q29	Q30	Q31	Q32	Q33	Q34	Q35	Q36	Q37	Q38	Q39	Q40	Q41	Q42	Q43	Q44	Q45	Q46	Q47	Q48	Q49	Q50	Q51	Q52	Q53	Q54	Q55	Q56	Q57	Q58	Q59	Q60	Q61	Q62	Q63	Q64	Q65	Q66	Q67	Q68	Q69	Q70	Q71	Q72	Q73	Q74	Q75	Q76	Q77	Q78	Q79	Q80	Q81	Q82	Q83	Q84	Q85	Q86	Q87	Q88	Q89	Q90	Q91	Q92	Q93	Q94	Q95	Q96	Q97	Q98	Q99	Q100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100

1. *Introduction*

"The original notice of the 1948 election was not sent to the following:

received a total of 50 calls from this telephone number, of which 30

with parents. The instances where it differed were probably attributable to the ways the questions were worded. Thus, according to the parents, good attenders were not more likely to belong to any specific youth organisation, yet the children's accounts suggested that they were in fact engaged in more purposeful activities out of school hours than many of the absentees. Another apparent discrepancy lay in the relevance of socio-medical factors as a contributory cause of absence. This was mentioned by a substantial number of the absentees' parents, particularly those of primary school pupils, but by few of the children themselves. There are two possible reasons: (i) that the children felt embarrassment about the symptom; (ii) that the children did not regard this as a reason for much of their absence, even though it might have initiated absence in the first place.

Reasonably high agreement between pupils and their parents on the prevalence of truancy has already been noted. Another issue is the legitimacy of children's anxiety about their parents' health. Over half of the secondary and primary school absentees and nearly half of the referred sample expressed fear of harm befalling a parent as a contributory reason for absence. An important question that arises from this is whether the anxiety is irrational. Much of the literature on school refusal, reviewed in Part I, stresses the neurotic nature of the children's separation anxiety. If, however, the parents are actually in poor health, the anxiety would seem to be a rational response to stress. It is possible to investigate this by matching positive responses to the question about harm befalling a parent with the parents' score on the Health Questionnaire.

Table 15.10 shows the results. They suggest that the majority of pupils in the secondary and primary school absentee samples may have good reason to be anxious about their parents, at least as far as their





mental health is concerned. The lower proportion of mothers scoring at or above criterion in the referred sample is surprising, but other evidence from the interview suggested strongly that in many cases the low health questionnaire score did not reflect lack of stress in the family, or even the parents' health. As noted in the Discussion section of the last chapter, there were some very obvious false negatives. The general impression was that in the majority of cases the children had good reason to feel anxiety about harm befalling their parents.

Table 15.10 Health Questionnaire Score of Mothers of Pupils Expressing Anxiety about Harm Befalling their Parents.

	Secondary School Absentees N=25	Primary School Absentees N=10	Referred Absentees N=9
	<u>PER CENT</u>		
Mothers' score ≥ 7 on Health Questionnaire	72	90	44.4

Test and Questionnaire Results. The brief cognitive and educational assessment suggests that not only the three absentee samples but also the good attenders were of below average intelligence and were quite seriously backward in reading. As noted above, however, the latter were selected from the same ability-banded class in school as the secondary school absentees, and it is therefore not possible to make any statement about their attainments by comparison with a random sample from the school as a whole.

The largely negative results from the L.C.I. tend to cast doubt on this instrument's usefulness, at least in clinical work with absentees. It could be agreed that the results are useful in demonstrating that absentees - whether referred to the psychological service

1. The first step in the process of identifying a problem is to recognize that a problem exists. This involves gathering information about the situation and identifying the specific issue that needs to be addressed.

[illegible]

standardisation sample. On the other hand, there is ample evidence from other parts of the interview with children and from the interviews with parents, that these children are in fact exposed to - and affected by - a substantial number of stressful experiences both at home and at school. A further problem with the L.C.I. is the number of double negatives in the questions, which caused difficulties for many of the less able pupils.

### SUMMARY

A brief cognitive and educational assessment showed a large proportion of pupils in all four samples to be of below average intelligence and to be severely backward in reading. The prevalence of truancy did not differ between the absentee samples to a significant degree, though it was less common amongst primary school absentees. In respect of truancy, there was high reliability between pupils' and parents' accounts. Nearly 75 per cent of secondary school absentees and somewhat fewer in the other absentee samples expressed anxiety about harm befalling a parent. The secondary school absentees differed from the primary school absentees in expressing greater fear of particular teachers. The referred absentees expressed significantly more anxiety than the good attenders about academic failure and about difficulty in social relationships with other pupils. The secondary school absentees scored significantly higher than the good attenders on the health questionnaire, indicating poorer mental health, but the Lewis Counselling Inventory was found not to discriminate between the groups.

INTRODUCTION

The intention at the start of the research was that a teacher who knew each child well should complete a Rutter Scale (B2) and a short questionnaire designed specifically for the project. Unfortunately this intention was based on the unrealistic assumption that all very poor attenders would be known well by at least one teacher. In practice, teachers of 49 per cent of the pupils originally identified for the sample of secondary absentees felt unable to complete the Rutter Scale (B2). They explained that the children's absence had been so prolonged that they could not complete the form reliably and - quite correctly - saw no point in responding at random. The same applied to teachers of 33 per cent of the primary school absentees and 32 per cent of the referred sample.

Inferences based on the results of small sample research have always to be treated with caution. When the sample size is further reduced, as in the present case, it becomes even more difficult to draw conclusions from the available information. It could be argued that the completed Rutter (B2) Scales should give a useful picture of the behaviour in school of those absentees who had become reasonably well known to at least one teacher. This is true, but it overlooks the point that the <sup>of</sup> reliability of questionnaire-based information falls rapidly with a drop in the number of cases on which it is based. When there is evidence that the cases themselves are unrepresentative of the population from which they are drawn - in this case a total population of persistent unauthorised absentees - the problem becomes even more acute.

For these reasons, it was reluctantly decided not to present the results of analysis of the school questionnaire and the Rutter (B2) Scale. More complete information was, however, available on the children's attendance

for two years from the Autumn term 1975. In addition, information was available about children who had been in trouble with the police.

#### ATTENDANCE.

Details were extracted from school records about the attendance of all pupils whose parents agreed to take part in the project. A six term period was covered from the Autumn term 1975 up to, and including the Summer term 1977. A small number of children was lost to the survey, mainly through committal to care or (in the Summer 1977) through leaving school. A few more children had prolonged but legitimate absences, due for example to temporary reception into care, or a period with relatives away from Sheffield. In these cases, calculations on attendance were based on the part of the term in which the child both could and should have been attending.

Tables 16.1 - 16.4 show (i) the sum of possible attendances each term for all pupils in each sample; (ii) the sum of actual attendances each term for all pupils in each sample; (iii) the mean per cent attendance calculated from (i) and (ii) above. Statistical analysis was not considered appropriate. The problem is partly that the data for each term are not discrete, since they refer to the same children. Moreover even if one did make the highly dubious assumption that they could be regarded as discrete within each term, the numbers are so large that small differences which have little or no educational significance nevertheless have statistical significance. The attendance of the good attenders, for example ranged from 90.5 per cent to 93.9 per cent over the six terms. Overall this would be highly significant (log likelihood ratio 33.15; d.f. = 5;  $p < .001$ ), yet it is hard to see any educational significance.

The results suggest that :-

- ( i) apart from a small improvement in the three terms of 1976 the secondary school absentees continued to attend school highly irregularly in the five terms following the Autumn term 1975; in no term did the mean per cent attendance reach 44 per cent;
- ( ii) in contrast the mean per cent of the primary school sample did improve, slowly but consistently, in each of the six terms for which evidence is available, and by the Summer term of 1977 was nearly 60 per cent, or over 20 per cent higher than two years previously;
- (iii) the referred pupils had a somewhat higher initial attendance, in the Autumn term 1975, than the secondary and primary school absentee samples; subsequently they continued, on average, to attend better than the secondary school absentees, but less well in 1976-77 than the primary school absentees;
- ( iv) the good attenders continued to attend regularly.

In the course of the two academic years 1975-77, nine pupils in the referred sample were transferred to special schools. In three of these cases transfer was initiated by Family and Community Services Department following a period in care. Two children went to schools designated for maladjusted pupils, two to schools for ESN(M)/maladjusted pupils, and five to schools for delicate pupils. An obvious question is whether these pupils subsequently attended school more regularly. In fact, they averaged 34 per cent attendance before transfer to special education, compared with 68.6 per cent subsequently. This compares with an overall average of 42 per cent for the eleven pupils in the referred sample who were not transferred to a special school.

#### DELINQUENCY

Table 16.5 shows (i) the number of children in each sample with a record

Attendance Autumn Term 1975-Summer Term 1977; A : Secondary School Absentees

	Autumn Term 1975	Spring Term 1976	Summer Term 1976	Autumn Term 1976	Spring Term 1977	Summer Term 1977
	38 pupils N = 5382	38 pupils N = 4700	37 pupils N = 4070	36 pupils N = 4976	36 pupils N = 3680	27 pupils N = 2768
ual number of :endances	1680	1934	1628	2148	1167	868
n Per Cent :endance	31.2	41.1	40	43.2	31.7	31.4

N = Sum of possible attendances (two sessions per day)

Attendance Autumn Term 1975 - Summer Term 1977; B : Primary School Absentees

	Autumn Term 1975 20 pupils N = 2738	Spring Term 1976 20 pupils N = 2600	Summer Term 1976 20 pupils N = 2192	Autumn Term 1976 19 pupils N = 2640	Spring Term 1977 19 pupils N = 2090	Summer Term 1977 19 pupils N = 2271
Actual number of attendances	1039	1267	1116	1425	1175	1345
Average Per Cent Attendances	37.9	48.7	50.9	54	56.2	59.2

N = Sum of possible attendances (two sessions per day)



Table 16.3

Attendance from Autumn Term 1975 - Summer Term 1977; C : Referred Absentees

	Autumn Term 1975 18 pupils N = 2572	Spring Term 1976 20 pupils N = 2440	Summer Term 1976 20 pupils N = 2096	Autumn Term 1976 19 pupils N = 2658	Spring Term 1977 19 pupils N = 1930	Summer Term 1977 18 pupils N = 2172
Actual number of attendances	1214	1126	728	1205	1058	1194
Mean Per Cent attendances	47.2	46.1	34.7	45.3	54.8	55

N = Sum of possible attendances (two sessions per day)

Table 16.4

Attendance from Autumn Term 1975 - Summer Term 1977; D : Good Attenders

	Autumn Term 1975 20 pupils N = 2872	Spring Term 1976 20 pupils N = 2528	Summer Term 1976 21 pupils N = 2290	Autumn Term 1976 21 pupils N = 2940	Spring Term 1977 22 pupils N = 2314	Summer Term 1977 23 pupils N = 2904
Actual number of attendances	2600	2313	2105	2761	2141	2628
Mean Per Cent attendances	90.5	91.5	91.9	93.9	92.5	90.5

N = Sum of possible attendances (two attendances per day)

Table 16.5 Number of Pupils Known by the Police to have Committed at least one Offence by 31st August, 1978

	Secondary School Absentees N=39	Primary* School Absentees N=16	Referred* Absentees N=18	Good* Attenders N=18	Log likelihood ratio df=3
	<u>PER CENT</u>				
Pupils known to have committed an offence	35.9	37.5	11.1	11.1	7.80 NS
Pupils known to have been placed on a Care Order	2.6	6.3	0	0	nos. too small
Pupils known to have been placed on a Supervision Order	20.5	25	11.1	0	5.41 NS

\*Excludes pupils attending Infant or First Schools on 1st September 1977

Table 16.6 Number of Offences Committed by Pupils with a Record of Delinquency

	Secondary School Absentees N=14	Primary School Absentees N=6	Referred Absentees N=2	Good Attenders N=2
Number of offences committed	120	36	15	5
Mean	8.57	6	7.5	2.5
s.d.	12.11	7.75	7.78	2.12

of delinquency known to the police by 31st August 1978, and (ii) the numbers known to have been placed on a care order or supervision order following a juvenile court appearance.

The reasons for including formal verbal cautions with the data on convictions are : (i) that the police cannot administer a verbal caution unless guilt is not disputed, and (ii) verbal cautions are formally recorded and influence the police in deciding what action to take if the child offends again. The information on pupils known to have been placed on a Care Order or Supervision order may be an under-estimate, since the police do not always record them if they do not result from police action.

In addition to knowing how many pupils in each sample were known to have committed at least one offence, it is also of interest to know how many offences they had committed. This information is given in Table 16.6.

The results in Table 16.5 shows tendency for more pupils in both secondary and primary school samples to have committed at least one offence than pupils in either the referred or the good attender samples. However, the difference does not reach statistical significance. Table 16.6 shows that the secondary school absentees also tended to commit more offences, though the figures in the table obscure the fact that two <sup>pupils</sup> (14.3 per cent) accounted for 57.5 per cent of the offences, and five (35.7 per cent) for 90 per cent. The numbers in the two samples are, of course, too small for statistical analysis to be meaningful.

## DISCUSSION

The data on subsequent attendance makes somewhat depressing reading, which is only partly alleviated by the moderate rise in the attendance of primary school absentees. It is of interest, however, that the nine pupils in the referred sample who went to special schools attended on

average twice as frequently following transfer as when they were in the mainstream. Although their initial attendance was worse than that of pupils who were not referred, their subsequent attendance was a good deal better.

It would be wrong to deny the special schools credit for this encouraging result, but three additional points should be made :- (i) in two cases transfer coincided with removal from grossly disturbed and unsatisfactory home backgrounds by reception into care; in a third case transfer coincided with return home after a period in care; (ii) one child attended a delicate school as a resident from Monday - Thursday nights; (iii) four of the remaining children were collected from home by taxi each morning, and brought home from the special school in the evening. It seems at least possible that these points may have facilitated better attendance, in addition to the fact of special school transfer as such.

The evidence on the incidence of delinquency is broadly consistent with that presented in Chapter 11 on the 1976 City - wide persistent absentee survey. The number of primary school absentees who had offended is somewhat surprising as is the relatively low number of referred absentees. At first sight this seems inconsistent with evidence from the interviews with parents in Chapter 14. These results suggested that the referred sample presented more behaviour problems than either of the other absentee samples. There are two possible explanations for this apparent inconsistency:- (i) the referred pupils were referred, at least in part because their parents were more worried about their behaviour than parents of children in the other samples, and consequently sought advice from the school; (ii) the social isolation of many of the referred pupils led to them presenting more problems at home than outside home. The present evidence does not justify conclusions about the relative merits of these possibilities, though parents of referred absentees were certainly not more

notably co-operative towards their children's schools than those of the other two absentee samples.

#### SUMMARY

Mean per cent attendance for all samples is shown for each term from Autumn 1975 - Summer 1977. The results suggest that persistent absence from school has a poor prognosis. Only the primary school absentees showed any consistent improvement in percentage attendance rate over the two year period. The prognosis is improved in the case of children transferred to special education, though the reasons for the improvement are not straightforward. Information on pupils known to have committed criminal offences shows fewer of the referred absentees and the good attenders to have committed offences than either secondary or primary school absentees.

INTRODUCTION

Background In Part I of this report we pointed out that the distinction between truancy and school refusal has been criticised on both theoretical and practical grounds. The research described so far was not intended to add fuel to - or even clarify - this particular controversy. Rather, it aimed :- (i) to report on the characteristics of a group of persistent absentees who had not been formally diagnosed as truants or school refusers at psychiatric or psychological interview, and on the potential stresses they experience at home and school; (ii) to examine the possibility that they differ in few, if any, systematic ways from absentees living in socially depressed areas who are referred for an educational psychologist's opinion; (iii) to compare them with a sample of good attenders.

Nevertheless, information provided both by parents and by children made clear that some of the latter were occasionally or frequently truanting when illegally absent from school, while others were not. At the risk of re-stating the obvious, two points should be made here:- (i) that a child's truancy does not necessarily preclude the presence of all or any of the symptoms associated in the psychiatric literature with school refusal; (ii) that non-truancy (i.e. the child generally remaining at home with the parents' knowledge) does not necessarily imply a diagnosis of school refusal at psychiatric interview.

Information obtained from the three absentee samples identifies truants with some reliability, but it does not follow that all of the remainder would be described clinically as school refusers. The results do, however, allow a comparison between children who truant at least occasionally when they are absent from school and absentees who seldom



while for two reasons; (i) the samples were based on all absentees in a given area, and all absentees who had been referred to a psychologist, rather than the minority of absentees who are formally diagnosed as truants or school refusers at psychiatric interview; (ii) more than 85% of pupils in all three of the original samples lived in depressed areas with many social problems, thus overcoming the difficulty in some of the clinical literature that observed psychological and educational differences between truants and other absentees may be attributable to a middle-class bias in referral policy; the truncated nature of the samples, including scarcely any middle class children, was an advantage for this purpose.

Sample Selection Combining the three absentee samples, the parents of 48 children claimed "generally" to know about their child's absence when they were not at school. These will be known as the "non-truants". The parents of the remaining 31 children "seldom" or only "occasionally" knew of their child's absence. These will be referred to as the "truants". The decision to include pupils in the referred sample in this exercise could perhaps be criticised as they did not constitute a complete sample of all the absentees in a given area, unlike the secondary and primary school absentees. The decision was based on the facts:- (i) that the purpose of this part of the project was to compare the characteristics of truants and non-truants, not to compare a referred sample with pupils who had not been referred; (ii) that 60% were described as non-truants and 40% as truants; hence they were fairly evenly divided and would, therefore, be unlikely to influence unduly the results of either one of the samples; (iii) that the majority of primary school absentees were rated as non-truants and the inclusion of twelve pupils from the referred sample would help to balance possible bias caused by age.

The generally high measure of agreement between parents' and children's accounts of their activities when absent from school has already been mentioned. The decision to rely on the parents' account



when there was any discrepancy was based simply on the fact that information from parent interviews was more complete, since fewer children were interviewed. Details of each sample are given in Table 17.1, which shows differences both in sex and age distribution. More boy absentees were rated as truants, and more girls as non-truants. On average, the truants were two years older than the non-truants, and their age-range was narrower.

## RESULTS - I Interview with Parents

Housing, Employment and Family Structure The two samples did not differ in type of living accommodation, nor in the length of time they had lived there (Appendix 10, Tables I and II). The truants were more likely to have lost a parent through death (Appendix 10, Table III). On the other hand their parents were less likely to have received social security or similar payment within the last twelve months, and their mothers or step-mothers were more likely to be in gainful employment (Appendix 10, Table IV).

Health and Early History No significant differences were reported in the children's health, nor in their history of separation from parents or bereavement (Appendix 10, Tables V and VI). Similarly, there were no significant differences in terms of involvement with social work agencies (Appendix 10, Table VII). The only item of parental health to discriminate between the two groups at a significant level was that more of the non-truants' mothers tended to have a history of chronic illness (Appendix 10, Tables VIII, IX and X).

Information on Children's Behaviour and Problems at School As would be expected the truants were significantly less likely to stay at home in the evenings and week-ends, but apart from this there were

no important differences in the information parents provided about their children's social behaviour (Appendix 10, Tables XI and XII).

Table 17.2 shows that parents of truants reported a sense of educational failure as a contributory cause of their children's absence significantly less frequently than parents of non-truants, but the reverse was true of the influence of peers. Table 17.3 shows that parents of non-truants were significantly more likely to report a history of anxiety about leaving home and anxiety about their parents' health. Conversely, a history of lying, stealing from within or outside the home, and wandering from home was significantly more often reported of truants.

The two groups did not differ to a significant degree in their scores on the behaviour statements of the Rutter (A2) Scale (Appendix 10, Table XIII) nor in the number of possible indices of disadvantage or stress in their families (Appendix 10, Tables XIV and XV), nor in the total number of behaviour problems reported by their parents (Appendix 10, Tables XVI and XVII).

Parents' Attitudes and Family Relationships The following differences were noted between truants and non-truants in the assessment of parental attitudes and family relationships (Table 17.4):

- 1) significantly more of the non-truants' mothers were considered overprotective towards the child;
- 2) significantly more of the non-truant children were considered over-dependent on their parents;
- 3) conversely, and unsurprisingly, significantly more of the truants were considered too independent of their parents;
- 4) significantly more of the non-truants were considered to have a warm, mutually satisfactory relationship with their parents.

Table 17.1 Age and Sex Distribution

	Non-truants N=48	Truants N=31
	PER CENT	
Boys	43.8	61.3
Girls	56.2	38.7
Mean age at time of interview with parents	12 4/12	14 4/12
s.d.	3 5/12	1 7/12

Table 17.2 Parents' Assessment of Contributory Factors at School

	Non-truants N=48	Truants N=31	Log Likelihood Ratio df=1
	PER CENT		
Bullying or teasing	29.2	41.9	1.35 NS
Fear of teacher(s)	43.8	51.6	.47 NS
Extreme dislike of any particular subject	27.1	41.9	1.86 NS
Boredom - child feels lessons are irrelevant to his needs	18.8	35.5	2.74 NS
Sense of academic failure	22.9	6.45	4.15 $p < .05$
Difficulty with social relationships with other pupils	27.1	19.4	.63 NS
Influence of peers	10.4	51.6	16.47 $p < .001$
Anxiety/self conscious- ness related to sexual development or relat- ionships	16.7	16.1	.00 NS
Parents know child's teachers	45.8	58.1	1.13 NS

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Table 17.3 Parents' Reports on Child's Behaviour

	Non-truants N=48 PER CENT	Truants N=31 PER CENT	Log Likelihood Ratio df=1
Child has shown anxiety about harm befalling parent/ about parent's health	58.3	12.9	17.61 $p < .001$
History of anxiety about leaving home	64.6	25.8	11.70 $p < .001$
Psychosomatic symptoms associated with school attendance	31.3	12.9	3.70 NS
Abdominal pains	37.5	38.7	.01 NS
Eating difficulties	22.9	16.1	.55 NS
Sleep disturbance	16.7	22.6	.42 NS
Enuresis	16.7	22.6	.42 NS
Stealing	22.9	51.6	6.85 $p < .01$
Lying	12.5	38.7	7.24 $p < .01$
Wandering	16.7	45.2	7.52 $p < .01$

Table 17.4 Family Attitudes and Relationships

	Non-truants N=47	Truants N=31	Log Likelihood Ratio df=1
	PER CENT		
Cooperative with school } Hostile towards school }	23.4 48.9	16.1 54.8	.62 NS .26 NS
Materially indulgent to child } Reluctant to accede to child's requests }	40.4 4.3	45.2 9.7	.17 NS nos. too small
Overprotective towards child } Demand high degree of independence }	72.3 8.5	38.7 16.1	8.79 $p < .01$ 1.04 NS
Passive/inadequate in control of child } Firm/controlling }	85.1 6.4	83.9 3.2	.02 NS Nos. too small
Child over-dependent on parents } Child too independent of parents }	59.6 17.0	32.3 48.4	5.67 $p < .02$ 8.78 $p < .01$
Child wilful or stubborn } Child generally helpful and cooperative }	40.4 42.6	58.1 32.3	2.34 NS .84 NS
Child has warm, mutually satisfactory, relationship with parents } Child has tense, mutually unsatisfactory, relationship with parents }	74.5 6.4	48.4 19.4	5.50 $p < .02$ 3.01 NS

Table 1. *Continued*

[illegible][illegible]

Several additional points can also be made about the results:-

- 1) in both samples more than twice as many parents were considered hostile towards their children's school as were considered co-operative;
- 2) over 80% of mothers in both samples were considered to be passive or inadequate in exerting care and/or control over their children, and less than 10% were considered firm or controlling;
- 3) truants were more likely to be rated as wilful and stubborn, and less likely as helpful and co-operative, but the differences did not reach statistical significance;
- 4) nearly three quarters of the non-truants and nearly half the truants were thought to have a warm, mutually satisfactory relationship with a parent, usually the mother;
- 5) conversely, only 6% of non-truants and 19% of truants were thought to have a tense, mutually unsatisfactory relationship with their parents.

## RESULTS - II Interviews with Children

Information from Interview The two groups did not differ in the number of children with interests outside the home (Appendix 10, Table XVIII), and the only significant contributory factor outside school was that truants felt themselves to be more heavily influenced by their peers (Table 17.5). There were no significant differences in their accounts of contributory factors at school (Appendix 10, Table XIX). They did not differ significantly in mean verbal scale I.Q., but a higher proportion of the truants were at least two years behind their chronological age in reading ability (Appendix 10, Table XX and Table 17.6).



Table 17.5 Children's Accounts of Contributory Factors Outside School

	Non-truants N=43 PER CENT	Truants N=28 PER CENT	Log Likelihood Ratio df=1
Socio-medical reasons	16.3	14.3	.05 NS
Fear of harm befalling parent	67.4	53.6	1.38 NS
Illness a frequent reason for absence	39.5	28.6	.91 NS
Influence of peers	9.3	46.4	12.87 $p < .001$
At home to help parents/ look after siblings	39.5	42.9	.08 NS

Table 17.6 Prevalence of Reading Difficulties

	Non-truants N=40 PER CENT	Truants N=28 PER CENT	Log Likelihood Ratio df=1
CA > 14.6/12 and RA < 12 6/12 OR CA < 14.6/12 and RA > 2 yrs below CA	57.5	89.3	8.77 $p < .01$
CA > 14.6/12 and RA < 11 6/12 OR CA < 14.6/12 and RA > 3 yrs below CA	42.5	60.7	2.20 NS

### RESULTS - III Counselling Needs

Truants did not differ significantly from non-truants in their responses to the Health Questionnaire (Appendix 10, Tables XXI and XXII). Results of the LCI were not analysed further owing to the limitations of the inventory as described in Chapter 15.

### RESULTS - IV Delinquency and Subsequent Attendance

Delinquency Tables 17.7 and 17.8 show a tendency, which does not reach statistical significance, for more truants to commit offences known to the police than non-truants, and for truants who offend to do so more frequently than non-truants who offend.

Attendance Table 17.9 shows the average per cent attendance for each sample in the six terms from Autumn 1975 until Summer 1977. The evidence suggest that non-truants have as poor a prognosis for subsequent attendance as truants. The rise in the truants' attendance between the Summer term 1976 and the following Autumn is not as encouraging as it looks; all the increase in average attendance is attributable to the juvenile court making care orders on three pupils who had failed to attend school at all in the Summer term.

### DISCUSSION

The results confirm some of the findings previously reported in the clinical literature, but throw doubt on others. Unlike Hersov, (1960a) the present study did not find truants more likely to have experienced separation from one or both parents and fewer truants had lost a parent through death. The evidence that the truants' families were somewhat better off financially than those of the non-truants, suggests that reports of poor material conditions in truants' homes (e.g. Tyerman, 1958) probably apply also to the larger number of

Table 17.7 Number of Pupils Known by the Police to have Committed at Least One Offence by 31st August 1978

	Non-truants N=42*	Truants N=31*	Log Likelihood Ratio df=1
	PER CENT		
Pupils known to have committed $\geq 1$ offence	23.8	38.7	1.9 NS
Pupils known to have been placed on a Care Order	2.4	3.2	Nos. too small
Pupils known to have been placed on a Supervision Order	11.9	29.0	3.35 NS

\*excludes pupils attending Infant or First Schools on 1st September 1977

Table 17.8 Number of Offences Committed by Pupils with a Record of Delinquency

	Non-truants N=10	Truants N=12	t df=20
Mean	3.6	11.25	1.80 NS
s.d.	8.22	11.15	

Table 17.9 School Attendance: Autumn term 1975 - Summer Term 1977

	Autumn term 1975 N <sub>1</sub> =46; N <sub>2</sub> =30	Spring term 1976 N <sub>1</sub> =47; N <sub>2</sub> =31	Summer term 1976 N <sub>1</sub> =47; N <sub>2</sub> =30	Autumn term 1976 N <sub>1</sub> =47; N <sub>2</sub> =27	Spring term 1977 N <sub>1</sub> =46; N <sub>2</sub> =27	Summer term 1977 N <sub>1</sub> =41; N <sub>2</sub> =23
	PER CENT ATTENDANCE					
Non-truants	36.9	44.8	42.5	44.4	42.9	49.1
Truants	36.6	43.9	40.1	50.1	46.5	43.9

N<sub>1</sub>= Number of non-truants for whom information available  
N<sub>2</sub>= Number of truants for whom information available

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the 1990s, the number of people in the United States who are 65 years of age or older is projected to increase from 20 million to 30 million, and the number of people 75 years of age or older is projected to increase from 10 million to 15 million (U.S. Census Bureau, 1996). The number of people 85 years of age or older is projected to increase from 2 million to 4 million (U.S. Census Bureau, 1996). The number of people 90 years of age or older is projected to increase from 500,000 to 1 million (U.S. Census Bureau, 1996). The number of people 95 years of age or older is projected to increase from 100,000 to 200,000 (U.S. Census Bureau, 1996). The number of people 100 years of age or older is projected to increase from 10,000 to 20,000 (U.S. Census Bureau, 1996).

### Abstract

[illegible]

1. *Chlorophyll a* (Chl *a*)

0024-0000/96/0000-0000\$05.00/0

[illegible]

1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 26

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1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 26

4. *Chlorophyll a* and *Chlorophyll b* contents were determined by spectrophotometry using the method of Lichtenthaler and Whistler (1987).

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$$v_{\text{eff}} = \frac{1}{2} \left( \frac{1}{v_1} + \frac{1}{v_2} \right) \left( \frac{1}{C_1} + \frac{1}{C_2} \right) \left( \frac{1}{\beta_1} + \frac{1}{\beta_2} \right) \left( \frac{1}{\alpha_1} + \frac{1}{\alpha_2} \right)$$

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1. *Chlorophyll a* (Chl *a*)

1998

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What was the date of the last contact with the person?

$$P_{\text{max}} = 100 \text{ W}, P_{\text{min}} = 10 \text{ W}, P_{\text{avg}} = 50 \text{ W}, P_{\text{eff}} = 10 \text{ W}, P_{\text{ref}} = 10 \text{ W}, P_{\text{ref}} = 10 \text{ W}$$
$$Q_1 = \frac{1}{2} \quad V_1 = \frac{1}{2}M \quad V_2 = \frac{1}{2}M \quad Q_2 = \frac{1}{2}M \quad V_3 = \frac{1}{2}M \quad Q_3 = \frac{1}{2}M$$

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Lichtenthaler and Whistler (1973). The total chlorophyll content was determined by the method of Arar and Cook (1980). The carotenoid content was determined by the method of Lichtenthaler and Whistler (1973). The total carotenoid content was determined by the method of Arar and Cook (1980). The total protein content was determined by the method of Lowry et al. (1951). The total lipid content was determined by the method of Bligh and Dyer (1959). The total carbohydrate content was determined by the method of Dubois and Gilles (1950). The total nucleic acid content was determined by the method of Burton (1956). The total ash content was determined by the method of AOAC (1990). The total moisture content was determined by the method of AOAC (1990). The total dry matter content was determined by the method of AOAC (1990). The total organic acid content was determined by the method of AOAC (1990). The total alkaloid content was determined by the method of AOAC (1990). The total saponin content was determined by the method of AOAC (1990). The total tannin content was determined by the method of AOAC (1990). The total flavonoid content was determined by the method of AOAC (1990). The total phenol content was determined by the method of AOAC (1990). The total terpenoid content was determined by the method of AOAC (1990). The total steroid content was determined by the method of AOAC (1990). The total glycoside content was determined by the method of AOAC (1990). The total alkaloid content was determined by the method of AOAC (1990). The total saponin content was determined by the method of AOAC (1990). The total tannin content was determined by the method of AOAC (1990). The total flavonoid content was determined by the method of AOAC (1990). The total phenol content was determined by the method of AOAC (1990). The total terpenoid content was determined by the method of AOAC (1990). The total steroid content was determined by the method of AOAC (1990). The total glycoside content was determined by the method of AOAC (1990).

0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0

1911年，由美国芝加哥大学物理系教授威尔逊（C. D. Wilson）首先提出，并命名为“威尔逊云室”。

$$\frac{d}{dt} \left( \frac{\partial L}{\partial \dot{x}} \right) = \frac{\partial L}{\partial x}, \quad \text{where } L = T - V.$$

absentees living in similar socio-economic circumstances who do not truant.

It was reported in Chapters 15 and 16 that a substantial proportion of pupils in all three absentee samples had expressed anxiety about their parents' health as a contributory factor in their poor attendance. Evidence was also reported which suggested that in many cases this anxiety was both predictable and justified. The two-sample comparison reported in this chapter shows: (i) that a parent had died in more of the non-truants' families, and (ii) that the mothers of non-truant absentees were more likely to suffer from chronic illness.

These results both tend to support the view that rational anxiety about parental health is an important - though not the only - feature in the poor attendance of many absentees.

Although more of the truants were retarded in reading, anxiety about academic failure appeared more important in the case of the non-truants. Hence, while self consciousness about low educational attainments might reasonably have been expected in both groups, it appeared to carry greater significance for the non-truants. In contrast, the truants were regarded by their parents, and regarded themselves, as being more easily influenced by their peers. It seems at least possible that these results might reflect temperamental differences in the children themselves.

This view is strengthened by the parents' reports on their children's behaviour. The non-truants were highly significantly more likely to have shown anxiety about harm befalling their parents' health. In contrast the truants were more likely to have a history of stealing, lying and - predictably - wandering from home. These differences did not appear to be associated with the number of measures of disadvantage and/or potential stress experienced by either sample.

The results of the assessment of family attitudes and relationships suggested that non-truants were more likely than truants: (i) to have a mutually satisfactory relationship with a parent, usually the mother; (ii) to have a mutually dependent relationship with a parent, usually the mother. The evidence suggests not only (i) that non-truant children tended to be over-dependent on their mothers and that the mothers tended to be over-protective towards the children, but (ii) that the interaction quite often resulted in a mutually satisfactory relationship. The inter-dependence would be predicted by the clinical literature; the mutually satisfactory relationship would not.

This point merits further consideration. Many articles in the clinical literature reviewed in Part I emphasise conflict in the parent-child relationship and all emphasise the psychoneurotic nature of school refusal. Parents of non-truants in the present study reported a wide range of behavioural, social and medical problems but the majority did not describe severe tension in their relationships with their children. One of the implicit characteristics of the children described in most clinic studies is that a majority of parents accept - or can be persuaded of - a need for treatment. In other words, regular school attendance seems to be regarded as the norm and school refusal as abnormal.

By comparison, in the present study school attendance was a long way down the list of priorities of many parents in the non-truant sample. These parents were not deliberately neglectful, and certainly not rejecting of their children. The problems arose partly because of their own poor psychiatric health and depressed living conditions, partly because in practice their experience led them to regard school attendance as yet another burden to be borne, partly because of the





child's genuine anxiety about his progress or adjustment at school, partly because of the child's genuine anxiety about his parents' wellbeing, and partly because remaining at home was easier - in the short term - than the effort involved in getting to school. This should not be taken to imply that overt pressure from the authorities would be successful. For families with few emotional or physical reserves, the easiest solution is often the only possible solution.

The picture was rather different for truants. They did not differ from the non-truants in living conditions, nor in their mother's psychiatric health as assessed by the health questionnaire. On the other hand there was a consistent tendency for them to have less satisfactory relationships with one or both parents. They were significantly more likely to be rated as too independent, less likely to have a warm, mutually satisfactory relationship with a parent, and more likely to be rated wilful or stubborn in their interaction with their parents, though the last result did not reach statistical significance. In both samples over 80% of mothers clustered at the 'passive/inadequate' end of the "firm/controlling ..... passive/inadequate in control of child" continuum. The truants seemed more likely to react by opting out of the home for much of the day and by adopting more difficult behaviour at home.

#### SUMMARY

The three absentee samples described in Chapters 13-16 were merged to form two samples, one of parents who generally knew their children's whereabouts when not at school (in practice almost always at home). These were called the non-truants. The second sample - the truants - consisted of pupils whose parents seldom or only sometimes knew their whereabouts. The same analyses were carried out with these samples



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as were carried out with the three absentee samples and the sample of good attenders described in Chapters 14-16. The results showed few differences in the social and financial circumstances of the two groups, but considerable differences in the children's behaviour and in relationships in the family. In particular, the non-truants were more likely to have a mutually dependant relationship with their mothers, and to have a history of anxiety about leaving home; they were also more likely to have experienced concern over their educational failure, although they tended to be less backward in reading than the truants. The truants were reported to be more heavily influenced by their peers, more likely to have a history of stealing, lying and wandering, and less likely to have a warm, mutually satisfactory relationship with a parent. The results are discussed in the light of previous work on truancy and school refusal.

## PART V

### OVERVIEW AND IMPLICATIONS

#### CHAPTER 18 OVERVIEW

##### THE THREE CITY-WIDE SURVEYS

Prevalence and Categories. Persistent absentees from school, whether authorised or unauthorised, are fairly evenly distributed throughout the eight primary school years. There is consistent evidence from each of the three years of the study reported in Part III that twelve year olds are no more likely to be persistently absent than five year olds. This picture changes in the secondary school years, when there is an equally consistent tendency for the problem to increase with age, with a particularly sharp increase in the final year. The range is from an average of 0.5 per cent in the primary school years to more than 3.5 per cent of all pupils on roll in the secondary school's final year.

There are at least two ways in which this information could be an underestimate of the true position. The first is that the surveys were based on attendance in the Autumn term, which is widely believed to be the term of highest attendance, particularly in secondary schools. The second is that e.s.w.s regarded illness as the principal reason for the absence of some 35 per cent of primary school absentees between 1974 and 1976 (197 pupils) and about 20 per cent of secondary school absentees (311 pupils). As far as is known, none of these pupils were receiving home tuition, although it is the view of the school health service that any child who



misses as much as 50 per cent of his schooling through illness in any one term should be receiving some alternative form of education. It seems at least possible that e.s.w.s, faced with enormous case-loads, may sometimes have felt obliged to attribute absence to illness as they lacked the time (and the medical knowledge) to make adequate inquiries. This view is indirectly strengthened by the observation that nearly 20 per cent of boys whose absence was attributed mainly to illness had been in trouble with the police.

There is one, slightly dispiriting, conclusion to be drawn from the secondary school prevalence rates over the four year period starting with the pilot project in 1973. Whether or not the raising of the school leaving age to sixteen has become more generally accepted, there has been no significant change in the prevalence of persistent absence in the final year of compulsory education. The problem was as great in the fourth year after the raising of the leaving age as it was in the first. The implications of this for schools and for l.e.a. policy towards these pupils are discussed in the next chapter.

The increase in prevalence rates in secondary schools also raises questions about the interpretation of the e.s.w.s' categories. Although there was fairly strong evidence about the low reliability of the categorising process for pupils within each school, the picture across the whole city was nevertheless moderately consistent from year to year. Apart from an increase in secondary schools in the number of pupils whose absence was attributed mainly to truancy, there were no startling differences in the e.s.w.s' explanations for absence between primary and secondary schools. In terms of total numbers, for example, far more secondary school pupils were regarded as absent without their parents' knowledge, consent or approval; nevertheless the proportion of all secondary school absentees attributed to this category was not

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far different from the proportion of all primary school absentees. (This is not to deny that some of the differences were statistically significant; the argument is simply that they were not of such great relevance educationally.)

Thus, a majority of unauthorised persistent absentees from secondary schools apparently remained at home, with their parents' knowledge, and either with or without their active consent. If it is assumed that adolescents live in families facing similar problems to those of primary school children, the higher prevalence rate in secondary schools suggests the possibility that factors operating within schools become relatively more important at this age. Other possibilities, however, are: (i) that the critical variable is the adolescent's differential response to family stress compared with his response in the primary school years; (ii) that the family's expectations change as the child progresses through puberty into adolescence; (iii) that the influence of other pupils and prevailing community mores becomes more relevant in adolescence.

Possible School and Community Influences. The evidence does not justify firm conclusions about the respective influence of school and community variables. Nevertheless, some statements may be made with some confidence. The number of children receiving free school meals is a highly reliable predictor of a school's persistent absentee rate, though not of which pupils will be absent. Work in progress (Galloway et al, 1980) is showing that free school meal rates are a better predictor of persistent absentee rates than any variables derived from the 1971 census. In this respect persistent absenteeism differs radically from suspension from school on disciplinary grounds, which seems relatively independent of all community and intake variables (Galloway 1976a; Galloway et al 1980).

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The evidence on changes in absentee rates over three years at a small number of schools nevertheless suggests that schools themselves can exert a marked influence on their absentee rates. There is some evidence that the school's influence is greatest in districts which are most at risk for poor attendance owing to a high level of unfavourable catchment area variables.

The results presented in Part III are consistent with the view that low persistent absentee rates - and by implication regular attendance - reflect prevailing community and family attitudes which are sympathetic to the broad aims of education. Schools with low absentee rates serve areas in which the majority of parents will insist on their children's regular attendance as a matter of course. They may or may not like the school, but they regard regular attendance as a necessary and desirable fact of life. In contrast, regular school attendance is a long way down the list of priorities for many families in socially deprived areas. The evidence is consistent with the view that in these areas the school must take a far more active initiative to secure parental cooperation - or compliance - than in socially more privileged districts. This point is expanded in the final chapter.

#### ABSENTEES AND THEIR FAMILIES

A Symptom of Disadvantage? A striking characteristic of both primary and secondary school absentee samples was the high prevalence of poor parental health, poor housing, poverty and involvement with social work agencies. The indices of disadvantage tended to be clustered within families. Combined, they distinguished the absentees from the good attenders more strikingly than any single item on its own.

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Many children in the absentee samples, particularly the secondary school absentees, expressed anxiety about their parents' health and gave this as one reason for their poor attendance. Evidence from the parents suggested that this anxiety was justified in most cases. Information both from parents and from children indicated a high level of behavioural problems in the primary and secondary school absentees, though not as high as in the referred absentees. While by no means conclusive, the evidence tended to suggest that in many cases the pupils' behaviour could be seen as a predictable reaction to family circumstances; moreover, it was often not regarded as deviant or unacceptable by the parents.

These observations need to be considered in the light of evidence about the children's attitudes towards school. Here the primary and secondary school absentees differed strikingly, with the latter placing considerably more emphasis on school variables as contributing to their absence. As a group they were severely retarded educationally, but did not differ in this respect from the good attenders selected from the same ability-banded class in school.

Together, these results suggest that the widespread view that poor attendance is a symptom of adolescent alienation from school (Harris, 1974) may stand in need of some modification. Three points are relevant:

(1) although the family circumstances of the primary school absentees were, if anything, even more disadvantaged than those of the secondary school absentees, the latter expressed greater anxiety about circumstances at home; this suggests either that the child's response to family stress changes in adolescence, or that the family's expectations of the child change at this time;

(2) a number of pupils did not emphasise anxiety about or resentment

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ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 05-10-2010 BY 60322 UCBAW/STP

1. The first of the two is a photograph of a man in a suit and tie, standing in front of a building. The man is wearing a dark suit, a white shirt, and a dark tie. He is looking directly at the camera. The building behind him is a multi-story building with many windows. The photograph is in black and white.

as a judge and lawyer, and who are of proven moral character

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There is a lot of information in this book, and it is well organized and easy to read. The authors have done a great job of making the material accessible to a wide range of readers. The book is a valuable resource for anyone interested in the history of mathematics and the development of mathematical thought.

Some are very ill, some are dead, some are not, some still remain ill and some

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towards school; for some of these pupils peer group influences appeared relevant, but for the majority family circumstances seemed an adequate explanation for their absence;

(3) some of the good attenders did express anxiety about, or resentment towards, school, though they continued to attend regularly. In almost all cases they claimed that their good attendance resulted from parental expectations that they attend regularly.

Hence, the argument is that a feeling of alienation from school is neither a necessary nor, on its own, a sufficient condition for persistent absence from school. This is not to under-estimate the school's own potential significance in the formation of its pupils' attitudes towards education. The important points are simply: (i) that variables at home, at school and in the community can contribute to the absence of different pupils; (ii) that many of these variables can interact with each other in the poor attendance of an individual; (iii) that generalisations on the reasons for absence, such as those contained in both psychological and sociological theories of absence, are unlikely to account satisfactorily for more than a minority of the pupils concerned; each case has to be investigated and treated in its own right.

Truants and Other Absentees. The pattern of differences between truants and other absentees was quite different from that between the three undivided samples of absentee pupils. Analysis of the latter revealed a high prevalence of behaviour associated in the clinical literature with both truancy and school refusal, but there were few significant differences between the samples in these characteristics. In contrast, the comparison between truants and other absentees revealed a clustering of behaviours and of family relationships which was broadly consistent with the clinical

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distinction between truancy and school refusal. These findings have two implications.

- (1) The sort of problems experienced by persistent absentees who are not referred for advice or treatment overlap to a considerable extent with those who are referred. Nevertheless, there is evidence:
  - (a) that the parents of absentee pupils referred for advice in the areas under study reported a greater number of problems than parents of pupils who were not referred;
  - (b) that the absentees who were not referred for advice live in much more disadvantaged circumstances than the majority of school refusers, as described in the clinical literature (though not than referred pupils in the rather atypical area under study).
- (2) A similar distinction between truants and school refusers is to be found in absentees who are not referred for advice as has been reported in clinic populations. Nevertheless, there is evidence that the overlap between truancy, school refusal and parental withholding from school is greater amongst absentees who are not referred than would be expected from the clinical research reported in Part I. This is consistent with a study of absentees before the Juvenile Court in Leeds, in which it was not found possible to distinguish between these three broad explanations of absence (Berg et al, 1978b).

#### SUMMARY

An overview of the research described in Parts III and IV identifies the principal findings to emerge. Some issues in the interpretation of the results are discussed, with reference to their implication for previous work on poor school attendance.

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## IMPLICATIONS

### QUESTIONS ARISING FROM THE RESEARCH

#### Scope

The research described in Parts II, III and IV confirms earlier work in drawing attention to the strong association between school attendance problems and social disadvantage. Given this strong and consistent association, it could legitimately be argued that the solution to the problem lies in political and social policies which reduce disadvantage. This argument implies that schools and l.e.a. support services are unlikely to have any long-term success since they necessarily concentrate on the symptom rather than the cause. This may well be true, but teachers and personnel in the support services have to operate within the system as it exists today - not as they hope it may exist at some time in the future.

#### Legal Sanctions and L.E.A. Policy.

Legal provision for dealing with poor school attendance was described in Chapter 2. In addition to legal procedures, Sheffield Education Committee has established a school attendance section. This section consists of councillors and representatives of the Teachers' Associations, and is serviced by senior members of the education social work service. Its general function is to interview parents, and sometimes pupils, who are invited to appear before it by members of the education social work service and to advise on the future management of each case.

It lay outside the scope of the present research to investigate the use of legal sanctions or of the school attendance section, but several parents referred to these procedures in the course of the interviews. They did not, on the whole, appear to have had the desired effect of improving the child's subsequent attendance. The effects on the parents appeared to range from mild irritation to severe distress.

One extremely disturbed mother became agitated and tearful when describing her appearance before the school attendance section over two years earlier; similar, though less severe, reactions were observed in two other mothers. These parents all had a close, mutually dependent relationship with their child; they were frightened by authority, yet their own clinical depression prevented them from taking effective action to secure their child's return. Other parents showed no anxiety about their appearance before the magistrates or the school attendance section, but pointed out that they were on Social Security, and therefore could only pay the fine imposed by the Bench by not paying the rent.

It was clear from l.e.a. records that the parents and pupils against whom legal or administrative action is taken constitute no more than a small proportion of all persistent unauthorised absentees. This fact, combined with parents' comments about the procedures suggested two avenues for future inquiry:

- (1) How does the l.e.a. select the absentees and their parents against whom to take formal action?
- (2)) What is the effect of this action on subsequent attendance?

Berg et al (1977 and 1978a) have reported that repeated adjournment is more effective in improving the attendance of truants brought before Leeds Juvenile Court than supervision orders. Repeated adjournment, however, is a controversial procedure, not widely used in Sheffield. No studies on the effect of prosecuting parents have yet been traced. The selection processes for all these procedures, and their effect on subsequent attendance, are currently under investigation by Sheffield School and Home Project (Galloway et al 1978).

Comparative Studies. The study of individual absentees and their families took place in one relatively small part of the city where the problem was particularly acute. Comparative studies are needed in other areas to establish the degree to which the findings are peculiar to the study area. It seems likely, for example, that many of the variables indicating social disadvantage and poor psychiatric health are associated with depressed, inner-city, areas and would not apply to persistent absentees in other districts.

An undoubted limitation to the research design was that it concentrated on pupils and their families at the expense of detailed observation in the pupils' schools. The reason, of course, lay in the declared aim to describe the personal and family characteristics of absentees who were not referred for psychological or psychiatric advice. Informal discussion with pupils, both in the present research

and in clinical practice, revealed wide variation both in the procedures adopted when a pupil was absent, and the comments and inquiries which he experienced on return to school.

It is suggested that this sort of issue can best be investigated by participant observer studies in selected schools, supplemented by interviews with teachers and pupils. .

Why Children Attend School. One secondary school head teacher has criticised the research described in this report on the grounds that the time could have been spent more usefully in identifying the reasons why certain children do attend school. He had in mind two groups: (i) pupils living in severely disadvantaged circumstances who have attended regularly throughout their school career; (ii) children who were once chronic absentees, but now attend regularly. Both groups deserve investigation. It is worth adding, however, that the progress of 230 very poor attenders in the school year 1976 - 77 was followed up until the Autumn Term 1978 as part of the programme of Sheffield School and Home Project (Galloway et al 1978). Less than 30 of these pupils were present for as many as 85 per cent of possible attendances in the Autumn Term 1978. Hence, there seems to be some difficulty in identifying a sample of 'reformed' absentees.

#### IMPLICATIONS FOR SCHOOLS AND SUPPORT SERVICES

Organisation of Support Services. With a few exceptions, the educational psychology and the <sup>education</sup> social work services were organised to cover pyramids of secondary schools and their feeding primary schools. Thus, each educational psychologist offered a service to a number of secondary school pyramids; each education social worker generally had responsibility for a single pyramid. The School Medical Service is

based on the same principle, though with greater overlap between pyramids. Thus, there was provision within each secondary school pyramid for a network of medical, psychological and education social work services. Theoretically, other professional groups could link into this network as needed. The l.e.a. advisers, child psychiatrists, and local authority social workers were obvious examples.

In the course of the research three main issues emerged concerning the delivery of support services: (i) the distribution of resources; (ii) the link-up, or overlap, with other agencies; (iii) the appropriateness of the model on which each service appeared to base its work. These three points are dealt with below.

The city-wide surveys described in Parts II and III showed enormous differences between schools in the incidence of persistent absence. The l.e.a.'s support service with specific responsibility for investigating and acting on cases of poor attendance is the education social work service. On the whole, this service distributed its personnel on a per capita basis, in which officers were allocated responsibility for schools according to the school's size rather than its catchment area. At the extreme, this meant that two schools might each be served by one officer, although the first had over 75 absentees a year and 15 per cent of its pupils receiving free school meals, while the second school had less than 5 absentees a year and less than 5 per cent of its pupils receiving free school meals.

The psychological service also allocated its resources on a per capita basis. Although advice on absentee pupils constituted a small proportion of psychologists' work, epidemiological research shows that absenteeism is not the only problem which is found in

greatest numbers in disadvantaged areas. Psychologists, however, had greater flexibility since they covered a larger and more varied group of schools and could therefore allocate their time according to perceived need.

The problem of overlap with other agencies was greatest when the juvenile court magistrates placed pupils before them on school attendance grounds on supervision to a local authority social worker. This action effectively removed responsibility from the education social worker, and placed it with a member of the social services department, or occasionally the Probation Service. Comments from teachers indicated considerable communication problems when this occurred. Comments from parents and children suggested that neither they nor the social workers themselves saw regular school attendance as the social workers' main priority. It was not possible to investigate this from the social workers' point of view, though this is currently forming part of the Sheffield School and Home Project's research programme. Other work on subsequent school attendance when the magistrates have issued a supervision order supports the impression formed while carrying out the research reported here, namely that the role of social workers in cases of poor school attendance stands in need of review and clarification.

The way in which each support service operated depended to some extent on the individuals concerned. Nevertheless, the schools' expectations were fairly clear. They expected the e. s. w.'s to investigate and act on cases of poor attendance and, less frequently, other welfare problems. They expected information from the e. s. w., but not, generally speaking, advice. The school doctors were seen as the channel to other specialist medical services, and also provided a screening service to identify, inter alia, sensory defects. Giving class teachers practical advice about a child's medical condition and

its implications for his classroom teaching and management happened more often in theory than in practice. The educational psychologist was expected to provide advice about the child's teaching and management; on occasions he was expected to offer the pupil (or his family) treatment, or to arrange transfer to a special school. A common problem was confusion of the advisory and treatment roles.

This is not the place for a full discussion of developments in the support services. The important point here is what schools expect of the support services, and vice versa, and what clients - parents and pupils - expect of both. These points are developed in the next section.

More of the Same? While some of the increase in absentee rates in secondary school pupils may be attributed to a differential response to stressful family circumstances, it does not seem reasonable to attribute all of the massive increase in unauthorised absence in fifth year pupils to this. High final year absentee rates may be seen as a challenge to - and a reflection of - the school's formal curriculum and its informal ethos. This has important implications for the development of support services.

If one thing is clear from the research it is that persistent absence from school is a problem with many overlapping dimensions, each of which require detailed assessment. The following dimensions are relevant, though not all were covered with equal thoroughness, in Parts III and IV: (i) psychological variables within the child himself, particularly those relating to temperamental, intellectual and perceptual factors likely to affect his educational progress; (ii) adverse family circumstances; (iii) the child's social interaction with his peers and in the community; (iv) the child's social adjustment and educational progress at school. Needless to say, none of these can be

seen in isolation; they can all affect, and be affected by, each other. Moreover, assessment of the individual child is not so much pointless as meaningless if it is not related to the child's social context. Educational progress at school provides a good example. A child may be failing to make satisfactory progress, yet this will hardly be surprising if his school has no provision for remedial teaching and he himself has missed a substantial amount of education through illness. In practice, of course, the interaction between school and child variables is infinitely more complex. Examples have been described elsewhere (Galloway 1976 c; 1978; 1980; Galloway and Miller 1978).

Faced with a multi-dimensional problem, the l. e. a. gives schools a multi-disciplinary team of e. s. w., educational psychologist and school medical officer. Unfortunately there is little evidence that a multi-disciplinary team is necessarily the best way to tackle a multi-dimensional problem. Indeed there are circumstances when the team's very existence can create rather than alleviate problems.

At best, a member of the support services can act as a catalyst between parents, child and school. Acting in this way his role is to improve communication and understanding between the school and the family: (i) so that the school is aware of variables in the child or the family which <sup>have</sup> relevance for his teaching and management at school; (ii) so that the family is aware of what the school is doing to help the child settle and achieve success; (iii) so that the child recognises a co-operative partnership between his parents and his teachers in which both parties have clear expectations about his own future attendance.

At worst, the support services sometimes seem to act almost as a barrier between parents and teachers. This can happen in two ways: (i) the act of referral can reduce the teacher's sense of commitment to tackle the problem himself; (ii) members of the support

making clear that they accept only the more limited - yet more constructive responsibility to work with the teachers in dealing with the problem.

Reynolds and Murgatroyd (1977) have criticised the "veritable army of members of the 'helping' professions (who) exist to 'help' - or rather force - the child to adjust to the reality of his school existence, irrespective of whether the reality is worth adjusting to". In directing their attention almost exclusively at the school as a social organisation, these authors overlook the significance of family and community stresses. They hint at, but fail to make explicit, the central weakness of many of the l.e.a. support services as they operate at present. This weakness is that the services tend to be seen - and see themselves - either in a supporting role or in an "expert" role. Neither perception lends itself to a partnership with teachers, let alone a partnership between teachers and parents.

In spite of the enormous increase in their numbers since the early 1950's evidence on the effectiveness of the support services is lacking. Referral to an educational psychologist was not found to be noticeably effective in improving attendance in the present research. It must however, be made clear that the children were almost all referred for advice on future management rather than for treatment. The good prognosis for some cases of school refusal was discussed in Part I. If the children had been referred for treatment, it would clearly have made sense to refer those with the best prognosis, irrespective of whether they were the most disturbing to the referring school. On the other hand, since they were referred for advice on management, it was logical to refer the most disturbing pupils, irrespective of prognosis. Even if funds were available, it is by no means clear that a further increase in the support services would lead to improved attendance, or even to reduction family stress.

A Possible Strategy for Intervention. The argument so far is not that the support services are redundant as Reynolds & Murgatroyd seem to imply, but (i) that they are not always seen to operate in partnership with schools; (ii) that even when this partnership is accepted in theory, its implications are not always understood in practice;

(iii) as a result, the scope and responsibility of the support services is insufficiently clearly understood by their own members, by teachers and by clients.



extensively in clinical practice in treating school refusal (Hersov 1977), but apart from Brooks' (1974) interesting article they do not seem to have been extended into the wider field of poor attendance in general. Behaviour therapy is not, of course, a single method of treatment or management, so much as a varied collection of methods with a number of underlying principles in common.

Two of these principles are particularly relevant to the present discussion: (i) the need to base intervention on a detailed behavioural analysis of the presenting problem; (ii) the need to specify in detail the methods and goals of intervention. Both of these deserve further consideration. The need for a detailed behavioural analysis implicitly accepts the possibility of multi-dimensional causation. By definition, behavioural analysis requires assessment of the way individuals interact with, or on, each other. It is not simply a question of how the parents elicit and maintain the child's poor attendance, nor is it simply a question of how the school's own organisation and ethos contribute to the problem. Rather, a behavioural analysis requires an assessment of the complex interaction between variables in the child, his family, his school and his community. The need for detailed specification of the methods and goals of intervention is important precisely because poor school attendance, as demonstrated in this report, frequently has multiple causation. Complexity of causation may be often inversely correlated with ease of definition. Yet it is hard to see how schools and the support services can cooperate successfully if they cannot reach some preliminary agreement in defining their goals and their methods.

The complexity of school attendance problems, both within an individual and his family and between individuals, would appear to make application of any single behaviour therapy technique generally

themselves to an extension of Brooks' (1974) work on contingency contracts with poor attenders. In the present context, contract based management may be seen not so much a technique of treatment as a way of clarifying the respective responsibility of teachers, other professionals, parents and pupils. The fact that the mere act of clarification may in itself have therapeutic value is an interesting theoretical point, but one which is not strictly relevant here. A more important point for the present argument is that the contract can incorporate recognition of the need for change not only in the child, and his parents, but also in his school.

The method can be described briefly. After initial assessment of the problem, during which base-line observations may be carried out, a meeting between the parties involved is arranged. At a minimum this will involve a teacher, a child, and his parent or parents. More often the meeting would include an e. s. w. and/or an educational psychologist. During the meeting an agreement is drawn up which forms the contract. An example is given below of a contract that might be drawn up for an educationally retarded boy from a deprived family who has complained of bullying from his peers and unofficial corporal punishment from two teachers, though his teachers and the e. s. w. think his parents are actively colluding in his absence.

Blacksmith Lane School,  
Blacksmith Lane,  
Townhamptown.

20th February, 1979.

#### C O N T R A C T

This agreement is drawn up between Robert Day, Mr. and Mrs. Day, Mr. Jones (Year Tutor), Mrs. Williams (Remedial Teacher), Mr. Smith (E. S. W.) and Miss Green (Educational Psychologist).

- (1) Robert agrees to attend school regularly. He also agrees to have a daily report card signed by Mr. Jones at the end of each day,

and to tell Mr. Jones if he has been bullied by the pupils, or has been hit or caned by any teachers without Mr. Jones' knowledge and agreement. He agrees to take his report card home and show it to his parents as proof that he has attended school.

- (2) Mr. and Mrs. Day agree to get Robert up in time for school each morning, to see that he has money for his bus fares and for lunch, to sign his report card in the evening, and to telephone the school in the morning if, for any reason, he cannot attend. They also agree not to allow Robert to watch television in the evening if he fails to bring his report card home as proof of his attendance, but to give him 50 pence pocket money on Friday evening if he has attended every session at school that week.
- (3) Mr. Jones agrees to see Robert at the end of school each day to sign his report card and to ask him whether he has had any problems that day. He also agrees to ask all Robert's teachers not to hit or cane him without his knowledge and agreement.
- (4) Mrs. Williams agrees to discuss Robert's school work with him in order to make sure that none of it is too difficult for him.
- (5) Miss Green agrees to see Robert at school once a week for the next three weeks in order to help him recognise the way in which he sometimes provokes other pupils into bullying him.
- (6) Mr. Smith agrees to help Mr. and Mrs. Day in their application for welfare benefits to which they may be entitled. He also agrees to visit them once a week for the next month to give them further reports on Robert's attendance and progress at school, and to report to the school any information and suggestions they may wish to make.
- (7) The people who sign this agreement will meet again at 10.30 a.m. on 13th March 1979 to review the progress which has been made. If Mr. Jones, Mrs. Williams, Miss Green and Mr. Smith have kept to their part of the agreement but Robert's attendance has not improved, then Mr. Smith will be obliged to refer the matter to the Education Committee for their further advice.

Signed: Robert Day  
Mr. and Mrs. Day  
Mr. Jones  
Mrs. Williams  
Miss Green  
Mr. Smith

It can be seen that the contract is not a simple document, nor is it based on a superficial analysis of the presenting problem. Initial assessment could be divided into three overlapping sections:

(i) Parents: Mr. and Mrs. Day were thought to be colluding in Robert's absence; in particular, they were thought not to be getting him up in time for school, nor to be taking any constructive interest in his school work. In addition, they were experiencing financial difficulties which reduced the energy they could devote to Robert.

(ii) Robert: He was retarded educationally, and had been bullied by other boys on a number of occasions; it was thought, however, that he provoked this by his own behaviour. He was also provocative towards teachers, and it was quite possible that two of them had hit him unofficially in the past.

(iii) School: Robert might well be experiencing difficulty with aspects of the curriculum. None of the teachers knew him well, and in the past, this had helped him to avoid detection when his work and attendance deteriorated. Moreover, the school's lack of contact with his parents facilitated his efforts to win their sympathetic support over his poor attendance. Finally, his complaint had high-lighted a more general problem in the school concerning the use of unofficial corporal punishment.

All of these points were recognised in the contract, though it contained no explicit reference to any behavioural technique. Hence, while the principle of the contract was straightforward, it provided a framework within which both to identify and to modify a problem of multiple causation and considerable complexity.

It goes without saying that the details of the contract would vary from child to child, depending on what emerged in the initial assessment. Drawing up a contract of this sort is undoubtedly time-consuming, but probably not much more time-consuming than the seemingly interminable inquiries and discussion that frequently take place in connection with poor attenders. The contract recognises the necessity for what Boyson (1974) called "constant if not eternal vigilance" but goes further than this by acknowledging the possible validity of criticism of the school, and imposing on the teachers the responsibility to deal constructively with these criticisms.

This makes the contract a potentially threatening document. It assumes a high level of professional integrity, confidence and competence. The contract makes it more difficult for parents, children, teachers

declarations of intent. It exposes them both to the possibility of demonstrable failure - and demonstrable success. As a problem which is both multi-dimensional and complex, poor school attendance requires a response which is multi-dimensional, flexible, but clear. The proposed contract-based management could be put into practice on an experimental basis in one secondary school or secondary school pyramid. It need not involve the appointment of additional personnel, although it would be desirable for the psychologist to have had some previous experience in contract therapy. Independent evaluation could be carried out by a suitably qualified member of a university department of education or applied social science.

#### SUMMARY

The research raised questions about the usefulness of legal sanctions and l. e. a. policy with regard to unauthorised absence from school. Work still in progress is starting to answer these questions. It is pointed out that the study of absentees and their families took place in a depressed inner-city area. Comparative studies in other areas are needed before it will be possible to generalise about the family and educational stresses associated with poor attendance. Detailed studies of selected schools are also needed. The implications of the research for schools and for l. e. a. support services are discussed. The present operation of the support services is reviewed critically. It is suggested that the effectiveness might be improved by adopting a system of contract-based management, which would enable the pupil, his parents, appropriate teachers, and support service personnel to clarify their respective responsibilities.

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Amer. J. Orthopsychiat.	American Journal of Orthopsychiatry
Amer. J. Psychiat.	American Journal of Psychiatry
Amer. J. Psychother.	American Journal of Psychotherapy
Arch. Gen. Psychiat.	Archives of General Psychiatry
Behav. Res. Ther.	Behaviour Research and Therapy
Brit. J. Criminol.	British Journal of Criminology
Brit. J. Educ. Psychol.	British Journal of Educational Psychology
Brit. J. Guid. Couns.	British Journal of Guidance and Counselling
Brit. J. Med. Psychol.	British Journal of Medical Psychology
Brit. J. Psychiat.	British Journal of Psychiatry
Bull. Brit. Assoc. Behav. Psychother.	Bulletin of the British Association for Behavioural Psychotherapy
Dept. of Ed.	Department of Education
DES	Department of Education and Science
Dip. Sch. Couns.	Diploma in School Counselling
Durham Ed. Rev.	Durham Educational Review
Educ. Res.	Educational Research
HMSO	Her Majesty's Stationery Office
J. Abnorm. Psychol.	Journal of Abnormal Psychology
J. Child Psychol. Psychiat.	Journal of Child Psychology and Psychiatry
J. Consult. Psychol.	Journal of Consulting Psychology
J. Moral Ed.	Journal of Moral Education
J. Sch. Psychol.	Journal of School Psychology



London Educ. Rev.

London Educational Review

Med. Off.

The Medical Officer

NFER

National Foundation for Educational  
Research

Psychol. Med.

Psychological Medicine

Psychol. Sch.

Psychology in the Schools

Res. Educ.

Research in Education

Spec. Educ.

Special Education

T.E.S.

Times Educational Supplement

Ther. Ed.

Therapeutic Education

Univ. Coll.

University College



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information is being provided to the public. The information is being provided to the public in a way that is consistent with the public's right to know. The information is being provided to the public in a way that is consistent with the public's right to know.

Reference: FBI File # 100-368970; NY File # 100-101041  
Date: 10/11/66

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1. The Commission has received information from the  
2. Ministry of Health, that the Government of India has  
3. decided to provide free medical treatment to all  
4. patients suffering from leprosy, who are unable to  
5. pay for their treatment. This decision is a  
6. very important step towards the eradication of  
7. leprosy in India. The Commission is pleased to  
8. note this decision and wishes to express its  
9. appreciation to the Government of India for  
10. its commitment to the health of its people.

1. The above information was obtained from the files of the FBI, New York Office, dated 10/10/68, and is being furnished to you for your information.

There are two main types of "highly sensitive" people: those who are highly sensitive to physical stimuli (e.g., noise, light, touch) and those who are highly sensitive to emotional stimuli (e.g., criticism, rejection). Both types of people may experience heightened awareness of their own emotions and the emotions of others.

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1. *Journal of the American Statistical Association*, 1994, 89(427), 1091-1100.  
 2. *Journal of the American Statistical Association*, 1995, 90(430), 1091-1100.

10. The following information is available for the year ended 31/12/2014:

It is important to identify the limits of the  $\mathcal{H}^1$  norm in the  $L^2$  norm. In the case of the  $\mathcal{H}^1$  norm, the limits are given by the following theorem.

$\frac{d}{dt} \left( \frac{1}{\rho} \right) = - \frac{1}{\rho^2} \frac{d\rho}{dt}$

19.  $\frac{1}{2} \log \frac{1}{2} = -\frac{1}{2} \log 2 = -\frac{1}{2} \log 2^1 = -\frac{1}{2} \cdot 1 = -\frac{1}{2}$

[illegible]

1. The Commission has received information from the public that the Commission's decision to grant a license to the applicant for the proposed project is in violation of the National Environmental Policy Act of 1969, as amended, and the Commission's decision to grant a license to the applicant for the proposed project is in violation of the National Environmental Policy Act of 1969, as amended.

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the  $\mathcal{H}^1$ -norm, and the  $\mathcal{H}^1$ -norm of the difference between the exact solution and the numerical solution is bounded by  $C\tau^{\frac{1}{2}}$ .

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01-11-1964

1. "The following information was obtained from the records of the  
U.S. Department of Justice, Federal Bureau of Investigation, dated 10-1-68:

1. What is the purpose of the study?  
 The purpose of the study is to determine the effect of the use of the Internet on the learning of English as a second language.

1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

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1. The first group of people who are interested in the results of the research are the researchers themselves. They need to know the results of the research in order to evaluate the quality of the research and to make decisions about the future of the research.

(1)  $\mathcal{C}$  is a  $\mathcal{C}_0$ -category, i.e.  $\mathcal{C}$  is a  $\mathcal{C}_0$ -category and  $\mathcal{C}$  is a  $\mathcal{C}_0$ -category.

1. The first step is to identify the problem. This involves understanding the current situation and the goals that need to be achieved.

1. The first part of the paper is devoted to the study of the asymptotic behavior of the solutions of the system (1.1) as  $t \rightarrow \infty$ . It is shown that the solutions of the system (1.1) are bounded and tend to zero as  $t \rightarrow \infty$  if the matrix  $A$  is stable. The second part of the paper is devoted to the study of the asymptotic behavior of the solutions of the system (1.1) as  $t \rightarrow \infty$  if the matrix  $A$  is not stable. It is shown that the solutions of the system (1.1) are unbounded and tend to infinity as  $t \rightarrow \infty$  if the matrix  $A$  is not stable.

Q. Now, you said that you were not sure whether or not the person was a woman, but you were not sure whether or not the person was a man, is that correct?

1. The first step is to identify the problem. In this case, the problem is that the system is not working properly.

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1. The first group of people who are not in the labor force are those who are not in the labor force for any reason. This group is the largest and is made up of people who are not in the labor force for any reason. This group is the largest and is made up of people who are not in the labor force for any reason.

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A full survey was made of the profile and the north-south cross-section of Island of Lockwood and of the beach. Some 700 feet of beach were surveyed along the shore of the island.

1. The author is a member of the Scientific Center of the Russian Academy of Sciences (1991) and a member of the Russian Academy of Sciences (1995).

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6. Other Information and Other Documents filed with this report: None

1. The purpose of this study is to determine the effect of the use of the word "and" in the title of a research paper on the number of citations it receives.

$$P_{\text{eff}} = \frac{P_{\text{max}}}{1 + \exp\left(\frac{P_{\text{max}} - P}{P_{\text{max}} - P_{\text{min}}}\right)} \quad (1)$$

.001-1.0 (solid line) and .001-1.0 (dashed line) for  $\alpha = 0.05$ ,  $\beta = 0.05$ , and  $\gamma = 0.05$ .

1. The following information is provided for the year ended 31/12/2019:

U.S. GOVERNMENT PRINTING OFFICE: 1967

1. The Board of Directors of the Corporation shall have the authority to declare dividends on the common stock of the Corporation, subject to the approval of the stockholders of the Corporation.

Footnote: *See* *Wright v. United States*, 357 U.S. 283, 18 AFTR2d 56-1211, 56-2 USTC ¶10,000 (S.Ct., 1958).

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A P P E N D I X 1a.

Off-print:

Galloway, D.M. (1976) Size of School, Socio-economic hardship, suspension rates and persistent unjustified absence from school. Brit. J. Educ. Psychol. 46, 40-47.

SIZE OF SCHOOL, SOCIO-ECONOMIC HARDSHIP,  
SUSPENSION RATES AND PERSISTENT UNJUSTIFIED  
ABSENCE FROM SCHOOL

## SIZE OF SCHOOL, SOCIO-ECONOMIC HARDSHIP, SUSPENSION RATES AND PERSISTENT UNJUSTIFIED ABSENCE FROM SCHOOL

BY D. GALLOWAY

*(Psychological Service, City of Sheffield Education Department)*

### INTRODUCTION

**SUMMARY.** Information was obtained from 30 comprehensive schools and their feeding primary schools about all children who missed at least 50 per cent of possible attendances in the first half of the 1973 autumn term. Results showed no major differences in persistent absentee rates between the reception year at first schools and the final year at middle schools. In contrast, the figures for comprehensive schools showed a sharp rise, with a peak in the fifth year. Truancy accounted for only a small proportion of unjustified absence in all age groups. No association was found between the size of a comprehensive school and the number of persistent absentees. On the other hand, persistent absenteeism was closely associated with socio-economic hardship in the school's catchment area though there is reason to suppose that variables within individual schools also influence the figures. The number of children suspended from a school was associated neither with a high incidence of socio-economic hardship, nor with large schools, nor with high persistent absentee rates. In contrast, high suspension rates were associated with former selective schools. It is concluded that suspension rates may not reflect the amount or the degree of deviant behaviour in a school.

### INTRODUCTION

A NUMBER of studies have investigated the incidence of absence from school. Thus, the Plowden Report (1967) found the average overall percentage of attendance in primary schools in 1964-65 was about 93 ; in secondary schools the percentage was approximately the same for boys, and somewhat less for girls (Bransby, 1951 ; West Riding, 1962)

The majority of these absences were attributable to illness or some other unavoidable cause (Bransby, 1951). According to the Plowden Report (1967) primary school teachers believed that at least 4 per cent of children absent at any one time ought to have been in school. More recently (DES, 1974) a national survey of attendance on one day in January, 1974, in middle and secondary schools showed that 10 per cent of all pupils aged 12 or over were absent, and of these 2 per cent were apparently absent without legitimate reason (23 per cent of those absent). The highest percentage of absence and of unjustified absence was amongst adolescents aged 15 (14 per cent and 5 per cent). Tyerman (1968) points out that more children are kept from school than play truant, prosecutions for the former offence being about five times as common as for the latter. In 1963-64 the overall absence rate was about 10 per cent, but less than 0.1 per cent of the children on roll were prosecuted for truancy.

Little, however, is known about the incidence and causes of persistent absenteeism for reasons other than organic illness. Similarly, very few studies have tried to isolate the variables associated with persistent absenteeism. Despite the dearth of evidence there is an abundance of folklore. Thus, large (and by implication impersonal) comprehensive schools are popularly supposed to have greater absentee problems than smaller (and by implication more personal) secondary schools (Jones, 1974). Similarly, a powerful educational

and political lobby maintains that these schools have greater discipline problems. Although the connection between social class and behavioural disturbance is not clear-cut (Douglas, 1964 ; Douglas, Ross and Simpson, 1968) the same beliefs apply, with rather more evidence (Wedge and Prosser, 1973), to schools situated in culturally deprived areas of large cities. Now if it is indeed the case that socially deprived areas and large schools are in themselves causes of absenteeism and deviant behaviour, then it may be predicted that the comprehensive schools with the highest absentee rates and the highest proportion of pupils suspended for unacceptable behaviour will be large schools in depressed areas, while the reverse will be true for small schools in socially privileged areas. One principal aim of this survey was to test these hypotheses ; the other was to investigate the extent and causes of persistent unjustified absence from school.

### METHOD

All comprehensive schools and their feeding primary schools in a large Northern city provided details about children who had missed an arbitrary figure of at least 50 per cent of possible attendances in a seven-week period at the beginning of the autumn term, 1973. Data for the Roman Catholic schools are not included, since their re-organisation into a comprehensive system is not complete. In addition special schools and one further comprehensive school are excluded from the results ; (data were not available for nearly 75 per cent of pupils at the latter owing to a catchment area anomaly involving another authority). With these exceptions the survey was city-wide, and covered 30 comprehensive schools and their feeding primary schools, with a total population of 82,779 pupils of compulsory school age (52,908 in primary schools and 29,871 in comprehensives). The education welfare officers who knew both children and families then stated the reasons for the absences according to categories detailed below. All cases where absences were due solely to organic illness were discarded from the subsequent calculations, and are not included in any of the figures given in this paper.

The size of each of the comprehensive schools in the survey was taken as the number on roll at the beginning of the academic year, excluding adolescents above the minimum school-leaving age. The number of children receiving free school meals was taken as a measure of the incidence of socio-economic hardship in the school's catchment area. Details about all children who had been suspended from comprehensive schools for more than a week in the period May, 1973—April, 1974, were collected from Education Department records.

### RESULTS

#### *Extent of Persistent Absence.*

Table 1 shows the percentage of persistent absentees for each age group. The city's schools are in the process of reorganising primary education into first and middle schools from infant and junior, with transfer at the ages of 8 and 12 instead of 7 and 11. Hence, in 1973, only about 50 per cent of children reached their 12th birthday in their first year at a comprehensive; the rest entered secondary education from middle schools and were 13 in their first year.

These figures indicate that the persistent absentee rates remain consistently below 1 per cent throughout the primary school years. There is a rise of nearly 300 per cent over the average primary school figure in the first *full* year at comprehensive schools ; nevertheless, the fact of transfer to a different (and larger) school does not *per se* appear a satisfactory explanation. This is because the persistent absentee rate for children in year 1 at comprehensive

*Persistent Absence from School*

schools is not markedly higher than the average for primary schools and is, in fact, lower than that of their exact contemporaries in year 4 in middle schools.

TABLE 1  
NUMBER AND PERCENTAGE OF PERSISTENT ABSENTEES.

School	Age-group	Number of Absentees	Percentage of Roll
Infant or First	5*	24	0.6
	6	40	0.5
	7	18	0.2
	8	25	0.3
Junior or Middle	9	26	0.3
	10	33	0.4
	11	30	0.4
	12	37	1.0
Comprehensive	12	15	0.5
	13	89	1.3
	14	91	1.4
	15	154	2.3
	16	290	4.4
Overall Primary		233	0.4
Overall Comprehensive		639	2.1

\* The number of children in reception classes was estimated as 50 per cent of those in other years.

The sharp rise in absenteeism in the final year of compulsory school attendance is perhaps not altogether surprising in view of the fact that autumn, 1973, was the start of the first year in which the minimum school leaving age was raised from 15 to 16. In 11 of the 30 schools the number of persistent absentees in year 5 was as great or greater than that in the three previous years combined. (In one extreme case the ratio was 21 : 2). However, some, though not all, of the schools had relatively low overall rates.

TABLE 2  
PERSISTENT ABSENTEES FOR WHOM ILLNESS WAS A PARTIAL EXPLANATION.

School	Age-range	Number of Absentees	Proportion with illness
First, Infant and Junior 1	5—8	32	0.41
Junior, Middle and Comprehensive 1	9—12	34	0.41
Comprehensive	12—16	156	0.28

In four schools over 10 per cent of pupils in the fifth year met the criterion of 50 per cent of absences without a legitimate reason. Interestingly, only one of them was among the four schools with the highest proportion of children receiving free school meals. Although these figures exclude children whose absence was attributable entirely to organic illness, they do include children with

'psychosomatic' illness (diagnosed by a general practitioner, psychiatrist or school medical officer) and also children whose absence was partly, though not entirely, due to illness. Table 2 reports the mean number of persistent absentees in each year-group and the proportion of absentees for whom illness (excluding psychosomatic illness) was a partial explanation. It will be noted that the proportion of children with some illness is smaller in comprehensive schools. This point is referred to again in the next section. All subsequent results were computed from the complete group.

#### *Reasons for Absence.*

The education welfare officer who knew the child and his family stated the reasons for the unjustified absences according to the categories in Table 3.

TABLE 3  
REASONS FOR PERSISTENT ABSENTEEISM.\*

Reason	Percentage Occurrence	
	Primary and First-year Comprehensive	Second to Fifth-year Comprehensive
With parents' knowledge, consent and approval .....	24.2	24.3
Socio-medical reasons (e.g., 'no shoes') .....	10.5	2.7
'School Phobia' .....	1.2	4.2
Parents unable or unwilling to insist on return .....	16.1	26.0
'Truancy' .....	2.4	11.2
Psychosomatic illness .....	4.4	3.8
Mixed reasons, but including some illness.....	41.2	27.8

\* Excluding prolonged organic illness.

(Table adapted from one previously published in *Times Educational Supplement*. Details of the coding system are available from the author.)

Where more than one category overlapped, the category thought most relevant was given. It will be noted that truancy, defined as absence without the knowledge or consent of the parent, accounted for little more than 2 per cent of persistent absentees in primary school children, and 11 per cent in comprehensives. In contrast, the two categories of absence with parental knowledge accounted for over 40 per cent of all cases in both primary and secondary children, while over 25 per cent in each case were assigned to the 'mixed' category.

The reliability and validity of the figures given in Table 3 must be regarded with caution. Nearly 30 education welfare officers were involved. Inevitably they differed widely both in how well they knew the children and their families, and also in the ways they viewed explanations for absence. It was not possible to obtain satisfactory evidence on inter-rater agreement; in most cases only one education welfare officer knew the family, and it is unusual (especially in comprehensives) for teachers to make home visits. Further, over a seven-week



period it is difficult to exclude the possibility of illness as a partial explanation for absence. Few general practitioners would be willing to distinguish with confidence between a respiratory infection for which the child should remain at home for a week, a mild cold which is exaggerated by an anxious parent or a parent who is 'covering up' for the child, and a recurrent condition which is psychosomatic in origin. This problem is obviously much more difficult for an education welfare officer. It may well be that the 'school phobia' category is under-represented, and that there was a tendency to accept illness as an explanation more readily for younger children than for adolescents.

Despite these reservations, Table 3 does suggest that truancy is seldom a reason for persistent absence from school, whereas the opposite may be true of factors within the home. This has obvious implications for the training of education welfare officers.

#### *Association with other Variables.*

In an attempt to identify some of the variables associated with persistent absenteeism in comprehensive schools, the proportion of persistent absentees in each school was correlated with the following: the number of pupils on roll; percentage of children receiving free school meals; and the number of children suspended or permanently excluded from each school for more than one week on account of unacceptable behaviour in the course of the year May, 1973—April, 1974, expressed as a percentage of the number on roll. Pearson product-moment correlation coefficients are given in Table 4. Attempts to extract further information by computing a series of first order partial correlation coefficients did not prove fruitful, and no important changes in correlation were obtained.

TABLE 4  
RELATIONSHIPS BETWEEN VARIABLES IN COMPREHENSIVE SCHOOLS.

Variable	Absentee Rates	Free School Meal Rates	Exclusion Rates
Number on Roll .....	— .22	— .08	— .21
Absentee Rates .....		.80*	.13
Free School Meal Rates .....			.07

\*  $P < .01$ .

It will be noted from Table 4 that a non-significant negative correlation was obtained between persistent absenteeism and the size of school as measured by the number on roll. This was not an artefact created by homogeneity of school size; the range was from 560 to 1,779 (mean=996; SD=319). In contrast, socio-economic hardship in the school's catchment area, as measured by the number of children receiving free school meals, showed a high correlation with persistent absence ( $r = .80$ ). The small negative correlation between persistent absenteeism and size was not greatly altered when the effect of free school meals was held constant ( $r_{12.3} = -.26$ ). The results suggest that exclusion from comprehensive schools is not associated with any of the three indicators chosen. Moreover, it is unlikely that the lack of relationship between exclusion and absenteeism is because the most deviant children in schools with

high absentee rates avoid exclusion by simply failing to attend in the first place. In fact, few of the children who *were* excluded had a history of poor attendance.

The possibility of carrying out a correlational analysis between these variables and the categories described above was prevented by unsatisfactory reliability of the categories and small numbers when categories were analysed separately by schools.

#### *The Schools' Contribution.*

The results presented above indicate that an important variable associated with persistent absentee rates is the number of children receiving free school meals. Yet this tells us nothing about the differences, if any, between schools in similar socio-economic catchment areas. Do some have unexpectedly high, or low, absentee and exclusion rates? A preliminary attempt to investigate this question was made in two ways:

(a) Persistent absentee and exclusion rates in former selective (grammar or technical) schools were compared with those in former secondary modern schools. To eliminate possible bias caused by the nine former selective schools tending to have fewer children on free school meals, each one was compared with the former secondary modern schools which had the closest proportion of children receiving free meals. The correlation between absentee rates in the two groups was positive and significant ( $r = .79$ ;  $P < .05$ ), indicating that they do not differ in any consistent way.

To compare exclusion rates in the two groups, the Mann-Whitney U test was preferred to Pearson's product moment coefficient owing to the high number of zero returns in the former secondary modern group (seven as opposed to two for the former selective schools). Using the correction for ties the result indicated that former selective schools excluded significantly more pupils ( $U = 15$ ;  $z = 2.41$ ;  $P < .01$ ).

(b) If variables within a school exert little influence on the incidence of persistent absenteeism, we should predict a high correlation between the absentee rates in the 30 comprehensive schools and those of their feeding primary schools.

Since comprehensives and their feeding primaries had similar proportions of children receiving free school meals, it was possible to test the hypothesis that there is some consistent relationship between their absentee rates apart from this common factor.

TABLE 5

RELATIONSHIP BETWEEN ABSENTEEISM IN COMPREHENSIVE SCHOOLS AND FEEDING PRIMARY SCHOOLS.

Variable	(2) Absentee Rate in Comprehensives	(1) Absentee Rate in Feeding Primaries
Absentee Rate in Feeding Primaries .....	.65*	
Free School Meal Rate in Feeding Primaries (3) .....	.66*	.88*

\*  $P < .01$      $r_{12.3} = .196$

Table 5 shows that we are, in fact, able to reject this hypothesis. The correlation between free school meals and persistent absenteeism in primary

schools ( $r = .88$ ) is consistent with that in comprehensives ( $r = .80$ ). Although the correlation between persistent absenteeism in comprehensives and primaries ( $r = .65$ ) is positive and significant ( $P < .01$ ), this result is attributable to the contribution of free school meal rates in the primary schools. When this is held constant the correlation remains positive, but no longer approaches significance ( $r_{12.3} = .20$ ).

### DISCUSSION

The results presented in Table 4 lent no support for the initial hypothesis that persistent absenteeism is a greater problem in large schools than in small ones, nor for the hypothesis that large schools and schools in areas of socio-economic hardship need to exclude more pupils on disciplinary grounds than small schools or schools in socially privileged areas. There is evidence, on the other hand, that socio-economic hardship in a school's catchment area is associated with persistent absenteeism, though other factors may also be operating.

The incidence of persistent absenteeism recorded in this survey almost certainly underestimates the true position. The information was collected in the first half of the autumn term, when school attendance is possibly higher than at other times of the year (Sandon, 1961). 'Hidden truancy,' caused by children who attend school until the daily register has been taken and then leave, may have further depressed the figures. On the other hand, 1973-74 was the first year in which the school leaving age was 16. It will be interesting to see whether the fifth year returns remain at the same high level in subsequent years when, perhaps, fewer adolescents may resent having to remain at school.

The number of children excluded from comprehensive schools for more than one week in the period May, 1973—April, 1974, was 34. This was, unfortunately the only period for which records were readily available. The criterion of one week was selected as certain head teachers were known to use short-term exclusion principally as a means of persuading the parents of problem children to visit the school; the intention was to eliminate the majority of these children from the survey. A further four children were excluded from primary schools and three from special schools. York *et al.* (1972) reported that 31 children had been excluded from Edinburgh schools in the two years August, 1967—July, 1969. Their sample did not include children who had been suspended for only a few days. Twenty of the children excluded in the present survey were in their fifth year at a comprehensive; they would presumably have left school at the age of 15 if they had been able to. When adjustments are made for this group and for a further group whose suspension, though longer than a week, was not indefinite, the incidence of exclusion from school appears roughly the same in the two cities.

York argued that exclusion was "by no means the result of an arbitrary decision by a teacher," and emphasised the children's intellectual and educational backwardness, their social deprivation and their disturbed families. While not necessarily inconsistent with these conclusions, the present survey does suggest that variables within a school may also influence the decision whether or not to exclude. For instance, former selective schools excluded significantly more pupils than former secondary modern schools, and one wonders whether this reflects their relative difficulties in adjusting to comprehensive reorganisation.

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## Persistent unjustified absence from school\*

DAVID GALLOWAY

Senior Educational Psychologist, Education Department, City of Sheffield

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What is the extent of persistent absenteeism from school and why does it happen? Sheffield Education Department set out in 1973 to find answers to these and some other related questions.

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In spite of the widespread concern about school attendance both within and outside the teaching profession, we know very little about the extent of persistent unjustified absence; we know equally little about the reasons for it. Several studies have investigated absenteeism. The Plowden Report, for instance, found the overall average percentage of attendance in primary schools in 1964-65 was about 93. Other studies have shown the percentage in secondary schools to be about the same for boys and rather less for girls. The majority of absences are due to illness, but, according to Plowden, primary school teachers thought that 4 per cent of children absent at any one time ought to have been in school. In 1974, a nationwide DES survey of attendance on one day in January revealed that 10 per cent of all pupils aged 12 or over were absent, and of these 2 per cent were thought to be absent without legitimate reason. Both in respect of absence and of unjustified absence, the highest percentage was among adolescents aged 15 on 31 August 1974 (14 per cent and 5 per cent). Maurice Tyerman† pointed out that more children were kept from school than played truant; prosecutions for the former offence were five times as common as for the latter. None of these figures, however, tells us how many of the children were absent persistently. To take an extreme example, an average attendance rate of 93 per cent could indicate that 7 per cent of the pupils are permanent absentees, or that every pupil in the school has missed one or two sessions throughout the term.

Lacking more adequate information it is not surprising that loose talk and folklore proliferate. Children whose absence from school is not due to illness are still, despite Tyerman's work, often referred to indiscriminately as truants. A few have had the label 'school phobia' attached to them by psychologists or psychiatrists, with the implication that they require treatment of a quasi-medical nature. Little attention has been given to the other possible reasons for unjustified absence from school. People opposed to the idea of comprehensive schools often believe that large schools cause — or at the very

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\* The views expressed in this article are the author's own and do not necessarily represent those of the Sheffield Education Department.

† See *Truancy*. University of London Press: 1968.

least contribute to – attendance and behaviour problems. With only a little more evidence the same beliefs apply to the impoverished, run-down areas of large cities. If both these views are true (and we should remember that no opinion is made false by the fact that it has passed into folklore), we would expect large schools in deprived areas to have the highest absentee rates and the highest incidence of exclusion for unmanageable behaviour. We would also expect absentee rates to rise dramatically among children in their first year at secondary school. We might further expect a disproportionate number of boys in every age range. The first Sheffield survey of persistent absenteeism set out to answer these questions; the subsequent surveys are enabling us to study trends in different areas of the city and in different age ranges, and hence to plan the most efficient use of resources to help the schools and the families concerned.

### **Planning the surveys**

In the autumn of 1973, Sheffield Education Department set up a working party under the chairmanship of a senior assistant education officer to consider the adequacy of existing facilities for problem children. It quickly became apparent that our many ideas and theories about the causes and cures for problem behaviour were more often based on personal anecdote than on solid evidence. This was seen most clearly in the case of children whose problem (or whose teachers' problem) was their persistent absence. Discussion with head teachers, year tutors in secondary schools, education welfare officers, advisers, psychologists and education officers revealed particular concern about persistent absentees. No one knew the size of the problem; estimates on the number of children in the city missing over 50 per cent of their education in one term without good reason ranged from less than 70 to around 2,000. There was general agreement though that large schools contributed to absenteeism; there was also general agreement about the difficulties in motivating the persistent absentee. His absences caused him to be educationally backward and socially poorly adjusted; on return to school he could hardly fail to notice, and be affected by, his poor attainments and lack of friends; a vicious circle could all too easily become established.

In the survey which resulted from these discussions, head teachers provided details of all children who had missed more than 50 per cent of possible attendances in the first six weeks of the 1973 autumn term. In the 1974 survey, head teachers listed children who had missed 50 per cent of their education in the whole of the autumn term (fourteen weeks). The returns were collected by the education welfare service and the officer who knew each family stated the main reason for the child's absence. Children whose absence was mainly caused by illness were not included in any of the results.

## Results

Table 1 shows the number of absentees in each age group, with the percentage of the total on roll of that age group in brackets.

The 1974 survey contained six more schools than in 1973, due to local government reorganization and to the three Roman Catholic comprehensive schools not being included in the earlier survey. In addition, the criterion for inclusion (50 per cent absence in the whole term rather than in the first half) was stricter in 1974. Table 2 shows the education welfare officers' reasons for the absences. Other studies have suggested that truancy (absence without the parents' knowledge or consent), and the psychiatric category of school phobia together account for less than 15 per cent of all unjustified absences. We therefore included five further categories, giving a total of seven. The officers concerned then stated which one of these seven categories accounted for the greatest part of each child's absence.

**TABLE 1 — Number of persistent absentees**

(Figures do not include children whose absence was caused solely by organic illness)

	1973 (30 secondary school catchment areas) first 6 weeks of autumn term		1974 (36 secondary school catchment areas) whole of autumn term (14 weeks)	
	No	(Per cent)	No	(Per cent)
Reception class, first and infant schools	24	(0.6)	11	(0.4)
First and infant schools, year 2	40	(0.5)	17	(0.2)
First and infant schools, year 3	18	(0.2)	24	(0.3)
First schools, year 4 and junior schools, year 1	25	(0.3)	21	(0.2)
Middle schools, year 1 and junior schools, year 2	26	(0.3)	22	(0.2)
Middle schools, year 2 and junior schools, year 3	33	(0.4)	11	(0.1)
Middle schools, year 3 and junior schools, year 4	30	(0.4)	30	(0.3)
Middle schools, year 4	37	(1.0)	15	(0.4)
Primary schools total	233	(0.4)	151	(0.3) (139)*
Secondary schools, year 1	15	(0.5)	21	(0.4)
Secondary schools, year 2	89	(1.3)	74	(0.8)
Secondary schools, year 3	91	(1.4)	137	(1.7)
Secondary schools, year 4	154	(2.3)	138	(1.8)
Secondary schools, year 5	290	(4.4)	302	(3.9)
Secondary schools total	639	(2.1)	4672†	(1.8) (598)*

\* Total from the 30 schools in the 1973 survey.

† These figures include 10 children from one school which has had to be omitted from the rest of the results.



An interesting result is that the persistent absentee rate shows no real change between the ages of 5 and 12, though it rises steeply subsequently. This raises the question whether transfer to a larger secondary school is *per se* a cause of increased absenteeism. As Sheffield is in the process of reorganizing infant and junior schools into first and middle schools, with transfer at the ages of 8 and 12 instead of 7 and 11 the results provide a clue to this question. Contrary to general expectation, there were no more absentees among children in year one of secondary school than among their exact contemporaries in year four of middle school.

In the 1974 survey we also looked at the boy/girl ratio; in middle schools (ages 8 to 12) there was a very slight excess of boys, but in every other age range we found the reverse. However the differences were too small to draw firm conclusions; all we can say is that girls are at least as likely to be absent without good reason as boys.

Table 2 shows that truancy, defined as being absent from school without the parents' knowledge or consent, accounted for a negligible proportion of the primary school children; in secondary schools the proportion was greater, but was still barely 15 per cent of all unjustified absentees. This finding lends no support to those who think education welfare officers should be scouring the highways and by-ways to bring truants back to school; rather it suggests that the reasons for persistent poor attendance lie primarily in attitudes in the school and the home.

**TABLE 2 — Reasons for persistent absenteeism  
(excluding prolonged organic illness)**

	<i>Primary schools</i>		<i>Secondary schools</i>	
	Per cent		Per cent	
	1974	1973	1974	1973
With parents' knowledge, consent and approval.	19.2	24.2	15.4	24.3
Socio-medical reasons — child is excluded from school for reasons such as infestation, scabies, etc.	6.6	10.5	3.0	2.7
'School phobia'. Non-attendance is associated with severe relationship difficulties in the home.	4.0	1.2	3.5	4.2
Parents unable or unwilling to insist on return — child is at home with parents' knowledge but not with their active consent.	18.6	16.1	31.3	26.0
Truancy — child is absent without parents' knowledge or consent.	2.0	2.4	15.4	11.2
Psychosomatic illness.	1.3	4.4	4.7	3.8
Mixed — part of the child's absence is due to illness but one or more of the other factors is also relevant.	48.3	41.2	26.7	27.8
	100		100	

Children are far more likely to be at home with their parents' knowledge, with or without their consent, than to be truanting. The implication for the development of the education welfare service is not just that social work skills are more valuable than skill in catching truants; equally important is the need for schools to assist their welfare officers in developing close and informal links with children's homes. The education welfare service is rapidly developing new skills and a more professional identity; if teachers do not encourage these developments – accepting that welfare officers may have a valid contribution to make on organizational matters such as pastoral care and discipline – we could, in a few years time, have a situation in which welfare officers carry out increasingly professional social work with families with a corresponding reduction in their commitment to schools. If this happens, each may come to mistrust the other in the way that teachers and social workers from social services departments sometimes mistrust each other at present.

### **Associated problems**

In an attempt to identify some of the potential problems which may contribute to persistent absenteeism we carried out statistical analyses on the returns from each school. As the schools ranged from more than 1,800 pupils to less than 600, we looked at the relevance of size. The results showed that the size of the school had no bearing on the incidence of persistent absenteeism. If anything, the larger schools had lower absentee rates but it was subsequently shown that this was probably due to a tendency for the largest schools to be in slightly 'better' districts.

To assess the influence of financial hardship in the school's catchment area, we compared absentee rates in each of the secondary schools with the proportion of children receiving free school meals. The results showed a very close relationship between poverty in the catchment area and absenteeism. This was the case irrespective of the size of the school.

In the 1973 survey, we also looked systematically over a twelve-month period at the Authority's records on children excluded from school for over one week for disciplinary reasons. Again we found that a school's size had no bearing on exclusion rates; pupils were neither more likely nor less likely to be classified as unmanageable by virtue of exclusion in large schools than in small schools. Contrary to expectations the same applied to the incidence of economic hardship in the catchment area. Schools in the most deprived parts of the city were not more likely to exclude pupils than schools in the most affluent.

In spite of the strong association between absentee rates and socio-economic hardship in the catchment areas, closer analysis of the results revealed a number of marked differences between schools. Thus, the sharp rise in absentee rates in the final year was not reflected in some schools, but was very marked in others; in one extreme case twenty-one fifth year pupils were persistently absent,

but only two in the first four years combined. In terms of the overall absence rate as well, there were unexpected variations between schools. Comparing former selective schools with former non-selective ones, we found no difference in absentee rates but a slight tendency for former selective schools to exclude more pupils.

### Conclusions

The surveys have confirmed previous research findings that truancy is a relatively minor cause of unjustified absence from school. Poverty in the catchment area appears to have a major influence on absentee rates but not on whether children are classified as unmanageable by virtue of exclusion. Size of school seems to have no bearing on either absentee or exclusion rates. We are repeating the survey in the current academic year, and hope that the results will throw light on trends in different schools and across different age ranges. It is already clear that in some cases persistent absentee rates can vary quite widely from one year to the next in the same school. The first year of the raising of the school leaving age to 16 was 1973. The sharp peak in the fifth year rates was perhaps predictable for this reason. On the other hand, the 1974 results indicated that absenteeism among fifth year pupils was, if anything, higher in the second year of the ROSLA than in the first. We are now planning to reexamine the returns from individual schools to identify those which seem to be particularly successful, as well as those which seem to be having particular difficulties. We are also looking into the possibility of a small 'hard core' of children or families whose names reappear each year so as to review our arrangements for working with these families. In these ways we hope that the surveys will help us to make education more attractive to the small but worrying group of children who continually reject it.

A P P E N D I X   l c .

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## INTRODUCTION

There is no lack of strongly held beliefs about the prevalence and causes of poor school attendance. Kline's (1897) comparison of truancy with the migratory instinct in animals was probably never taken very seriously; in contrast, the "Tom Sawyer" theory of truancy as a healthy, boyish rebellion against the monotony of school persists. This picture of the truant as a cheerful, well-adjusted young rebel from a stable home and a caring, if traditional, school, might possibly apply to occasional absentees, but all the available evidence is against it applying to those who are persistently absent.

## PROBLEMS OF DEFINITION

Different formulations There is fundamental disagreement between different professions, and even within the same profession, about the educational, psychological and social significance of absence from school. This disagreement is partly due to the fact that different writers use the term in different ways. Thus, Reynolds and Murgatroyd (1977) use "truancy" to describe overall absentee rates; in contrast, Galloway (1976a) reserves the term for those pupils who are absent from school without their parents' knowledge or consent. The problem is not just semantic, though. There are conflicting views about the effect of irregular attendance on educational attainments (Carroll, 1977a; Fogelman, 1978).

Similarly, there are conflicting views over the psychological implications of absence for the individual; for example, absence may be seen as a symptom of psychiatric disturbance in the child, perhaps resulting from temperamental vulnerability or from disturbed family relationships; under this model the child or his family should be offered treatment for the presenting symptom or its underlying causes. This view has often been favoured by psychologists and psychiatrists. On the other hand, absenteeism may be viewed from a sociological perspective. Here the emphasis is not on the individual, but rather on the individual's reaction to the conflicting or inconsistent expectations he

experiences from society or at school (Gutfreund, 1975; Reynolds and Murgatroyd, 1977). These views emphasise problems in the child, his family, his school or the society in which he lives in treating the problem of absence; they may consequently imply a critical attitude towards the use of legal procedures to enforce attendance. A different view, widely held by teachers, psychologists and psychiatrists, is that a minority of absentees may require psychiatric treatment, but the majority of cases reflect an irresponsible or indifferent attitude towards education, in which case legal intervention may be appropriate.

Differential diagnosis Psychiatric diagnosis has tended to define truancy as absence without parent<sup>2</sup> knowledge or consent; it distinguishes between children whose absences are due to truancy, school refusal and voluntary withholding by a parent. Hersov (1977) has noted that children in the latter group, also known as the "parent-condoned" category, are relatively seldom referred for specialist advice. Within this diagnostic framework, truancy is seen as part of a wider conduct disorder; truants constitute a high risk group for other forms of delinquency (Tennent, 1971; May, 1975). They tend to have bad school reports, to be socially isolated and to be below average both in their intelligence and their educational attainments (Hersov, 1960). In contrast, school refusal (or school phobia) is seen as a neurotic disorder indicative of disturbed family relationships; the child is less likely to suffer intellectual or educational retardation, though he may experience difficulty in relating with his peers. Symptoms of separation anxiety are likely.

The validity of distinguishing truancy from school refusal has been questioned. Tyerman (1968), for example, argues that a clear distinction is not possible and the two groups form a continuum of reasons for absence. On the other hand, there does seem to be agreement in the psychiatric and psychological literature on the broad definition of truancy as absence without the parents' knowledge or consent. As prosecutions against parents for withholding their children from school are five times as common as for truancy (Tyerman, 1968) it is perhaps suprising that neither the clinical nor the epidemiological literature



appears to contain detailed studies of the personal and family characteristics of the most numerous group of absentees.

Other reasons for absence The differential diagnoses described above overlook other reasons for absence. Some children are excluded from school on account of infestation, and an unknown number is absent due to the lack of appropriate clothing, usually shoes or school uniform. At least in the U.K. the latter are regarded as illegal absences, and the child's parents are liable to prosecution. Similarly, a few pupils are excluded for behavioural reasons; in 1976 - 1977, 70 pupils missed over three weeks for this reason in Sheffield, a city with a total school population of 107,000. More importantly, the "withheld" group probably includes not only children whose parents wish them to stay at home but also many cases where the parent knows about the absence, yet lacks the will or the strength to insist on return. The point at which this merges into the psychiatric category of school phobia remains an open question.

#### PREVALENCE OF PERSISTENT ABSENCE

Occasional absences The figures from epidemiological research (described elsewhere in this book) do not generally include "hidden truancy" - pupils who depart after registration. Figures on hidden truancy are understandably hard to obtain. Nevertheless, it is clear that many of the statistics disguise the number of pupils who are occasionally absent for a variety of unjustified reasons. In America, Karweit (1973) found attendance rates declined on rainy days, while Jackson (1978) has noted a highly significant rise in absence rates on Fridays. In the same study, carried out in a comprehensive school known to have an exceptionally high overall attendance rate, 78 out of 312 14 - 15 year olds were shown to have missed at least one half day in 10 or more out of 37 weeks in the school year, excluding full week absences; of these a significantly higher proportion were boys.

Persistent absence Carroll (1977b) has pointed out that identical attendance records can obscure quite different attendance patterns. Taking two improbable

extremes, a 90 per cent attendance figure for a school could mean that 90 per cent attended all the time and 10 per cent none of the time, or that all pupils attended only 90 per cent of the time. This distinction is important for theoretical and practical reasons. Whereas chronic but sporadic absence may suggest the possibility of precipitating factors within the school, such as anxiety or resentment associated with certain teachers or certain subjects, persistent absence may pose additional problems such as educational retardation or psycho-social factors in the child or his family.

### PERSISTENT ABSENTEEISM IN SHEFFIELD (1)

Introduction and method To throw further light on the incidence and nature of persistent absenteeism, Sheffield Education Department carried out annual surveys in 1973 and 1974 (Galloway, 1976a; 1976b). Head teachers provided details about all pupils missing more than 50 per cent of attendances in the course of a six week period (1973) and a 14 week period (1974). An officer from the Education Department's support service responsible for school attendance (known as the education social work service, or education welfare service) then stated whether more than half of each child's absence was due to illness. If not, he stated which of seven categories accounted for the greatest proportion of absences. Cases where more than half the absence was due to illness were not included in the subsequent analysis of results.

Results Table 1 shows the prevalence of persistent unjustified absence in each age group. It will be seen that prevalence rates are remarkably constant from the start of compulsory education until the age of 12, after which there is a rapid increase with a peak in the final year.

Table 2 shows the categories into which their educational social workers placed the pupils. The categories were reached in discussion with senior members of the service, and were intended to be meaningful to the officers concerned rather than to follow traditional diagnostic categories. Hence, category 6, "psychosomatic illness" almost certainly includes children presenting



with the "somatic disguise" of school phobia. Officers were expected to tick psychosomatic illness only when the diagnostic assessment had been made by a doctor. The wording of the school phobia category deliberately focussed attention on severe home problems as described in much of the psychiatric literature, in order to exclude children whose absence was due simply to dislike of some aspect of school. These children should generally have been included in categories 1, 4 or 5. As each family was usually known to only one officer, there was no evidence either on the reliability or the validity of the ratings. Nevertheless, it is of considerable interest that over 16 per cent of primary school absentees and 26 per cent from secondary schools were thought to be absent with their parents' knowledge, but without their <sup>active</sup> consent. School phobia/refusal is generally thought to account for a much smaller proportion of absentees, yet this is one of the most frequently used diagnostic criteria.

Analysis of absentee rates in each secondary school against a number of school and community variables showed a significant positive correlation with poverty in the school's catchment area as reflected in the number of pupils receiving free school meals. In contrast, no association was found with the school's size, nor with the number of pupils excluded on disciplinary grounds. Yet although free school meal rates predicted how many children at a school might be persistent absentees, further analysis has shown that the pupils known to be eligible for free meals were not more likely to be persistent absentees than their peers who were not. This suggests the possibility of contributory factors within the schools concerned. However, transfer to a new and larger secondary did not per se seem to be a cause of higher absence rates; children who transferred to a secondary school at age 11 were not more likely to become persistent absentees than their exact contemporaries who remained at middle schools for a further year of primary education. Analysis of the boy-girl ratio in the 1974 survey showed a non-significant excess of girls, a trend noted by Shepherd et al (1971). On the other hand, when the categories of absence were broken down by sex, truancy was seen to be almost twice as common in secondary school boys

as in girls, while the reverse applied to pupils remaining at home with their parents' knowledge, consent and approval.

The prevalence surveys summarised here show that truancy and school phobia were together thought to account for less than 20 per cent of absences, while absence with parental knowledge, with or without active consent, accounted for more than six times as many primary school absentees and well over twice as many in secondary schools.

### PERSISTENT ABSENTEEISM IN SHEFFIELD (2)

Rationale and method Following these results, a more detailed study of individuals aimed to answer three questions: (1) How many of this "silent majority" share the characteristics of truants or school refusers? (2) Do absentees in this area who are referred to psychological and psychiatric support services differ from absentees who are not? (3) As persistent absence is so much more widespread in secondary schools, is there evidence that, compared with absences from primary school, secondary school absenteeism is less influenced by family and psychological factors, and more influenced by school or community factors?

Four samples were selected: (1) all pupils at one secondary school who missed 50 per cent of attendances in the previous autumn term without adequate reason; (2) all pupils who missed a similar amount of time from the secondary school's feeding primary schools; (3) all pupils known to have been referred to the Education Department's Psychological Service in a larger, but overlapping area within a two year period, for advice or treatment on school attendance problems; (4) good attenders selected from the same class as some of the secondary school absentees and one of the primary schools.

Pupils in the secondary and primary school absentee samples who had been referred to a psychologist on account of school attendance problems were included only in the "referred" sample. The secondary school catchment area had a high incidence of social problems, with few owner occupied houses. Over 90 per cent

of parents from each of the original absentee samples agreed to be interviewed, but only 74 per cent of the good attenders' parents.

Results Table 3 shows relatively few items from the histories reported at parent interview distinguishing the three groups of absentees. In statistical analysis the log-likelihood ratio statistic was preferred to the more familiar chi square, to which it approximates, for reasons explained by Gabriel (1966). Answering the initial questions in order: (1) the behaviours associated with both truancy and school refusal were evident in both the primary and the secondary school absentee groups, with the sole exception of sleep disturbance in the primary pupils; (2) absentees referred to psychologists differed significantly from the other two absentee groups only in showing a higher incidence of difficulty in social relationships at school than the secondary absentees and a lower incidence of socio-medical problems than the primary pupils; in addition, there was a tendency for problems such as stealing and lying to be more common; (3) primary school absentees were significantly more likely than their secondary school counterparts to have experienced severe socio-medical problems, while parents of the secondary school pupils were more likely to report dislike of a particular subject or teacher as a reason for absence.

More differences were found between the three absentee groups and the good attenders, yet even here the only discriminatory item which might generally be described as a "neurotic" symptom was fear of harm befalling the parent, with associated reluctance to leave home. This raises the question whether the anxiety should be seen as neurotic, or an understandable response to parental ill-health. Parents in each sample were asked to complete the Malaise Inventory (Rutter et al, 1970). This questionnaire has been shown to have reasonably high validity in predicting psychiatric disorder (Chadwick, 1976). Although the differences between the Sheffield samples did not reach statistical significance, there was a noticeable trend for the mothers of secondary absentees to show higher rates of reported disorder, as assessed by a score of more than 6. The three absentee groups, though not the good attenders, had significantly higher scores than the full control sample in Chadwick's study. In fact, the rate of disorder in the absentee groups is

similar to that of the group with psychiatric disorder on the Isle of Wight. That this should be reflected in the children's school attendance is not altogether surprising in view of the association between parental ill-health and childhood disorder (Rutter, 1966).

Implications The surveys summarised here are consistent with the epidemiological literature on the prevalence of maladjustment (Davie et al, 1972) and psychiatric disorder (Rutter et al, 1970, 1975a). These suggest that prevalence rates on a random sample are a great deal higher than would be assumed from the numbers referred for advice or treatment from specialist services. In keeping with these findings, the total prevalence of illegal absence from school is considerably higher than that suggested in studies of clinic referrals. How far the largest groups of pupils remaining at home with their parents' knowledge, sometimes with their active consent and sometimes without it, differ from the traditional diagnostic categories of truancy and school refusal remains an open question, though our work does suggest that the area of overlap is considerable. Less disputable, however, is the high level of possible psychiatric disorder in the mothers of all our absentee samples. How far this is causally related to their children's symptoms and attendance problems is not yet clear; mothers of good attenders also had a fairly high rate of possible disorder, though their scores tended to be lower than in the absentee groups.

Interviews both with the parents and children in the absentee samples showed a considerable overlap between different reasons for absence, suggesting that the categories in Table 1 oversimplify the true position. Some of the pupils who remained at home, with or without their parents' active consent, admitted to some truancy. Further, some of the children whose absences were actively condoned by their parents showed the behaviours characteristic of school phobia/refusal in the psychiatric literature. In view of the reported success of clinic-based treatment for this problem, one might conclude that clinical facilities should be extended; unfortunately, the position is complicated not only by the lack of resources for this sort of development, but also by two further factors: (1) it is not certain that parents living in highly adverse social and physical conditions are able to attend clinics, let alone benefit from the treatment they can offer; (2) the second study indicates the relevance of school factors, at least for the secondary sample; it is not clear whether clinic-based teams are in the best position to serve schools, as well as individuals.



## Implications for Management

Roles for the psychological/psychiatric team The studies reported above suggest that in one area of Sheffield absentees who are referred for advice or treatment from psychologists differ in certain respects from absentees who are not referred. Nevertheless, a high prevalence of social and psychological problems is evident in the secondary and primary samples. The psychological support services have two potential roles: (1) as therapists for individuals, and (2) as consultants to advise on management. In practice, these roles are not mutually exclusive, yet the distinction should be recognised in planning a network of services.

The generally favourable outcomes of treatment for school refusal (Hersov, 1977) point to the value of a clinic-based service for families which are able to attend regularly. The study reported in this paper suggests that symptoms associated with school refusal may be more prevalent than has previously been assumed, particularly in inner-city areas which are known from other research to have high rates of psychiatric disorder (Rutter et al, 1975a) and social malaise (Wedge and Prosser, 1973). Unfortunately, these are the areas where families may be most likely to have difficulty in keeping appointments. One obvious reason for this is that many parents face so many social and medical problems that insisting on their anxious or resistant children attending school is a long way down their list of priorities; another is that their own childhood may not have led them to see education as a partnership between school and home.

In such areas, when teachers and social workers may understandably feel overwhelmed by the number of children and families with special needs, clinicians may wish to allocate time for what is essentially an advisory service for teachers and other professional personnel rather than a treatment service. Such a service

has an important implication for referral. In a treatment service, it makes sense to encourage the referral of cases with the best prognosis for the available treatments. This generally implies children with neurotic disorders such as school phobics or refusers, rather than conduct disorders such as truants (Robins, 1966; Levitt, 1963). An advisory service, in contrast, would encourage referral of pupils who were most disruptive and disturbing to the teachers, and explore ways of helping them within the school or community.

Multi-dimensional Assessment The second Sheffield study confirms what many clinicians will have suspected, namely that no theory of single causation is likely to account satisfactorily for unjustified absence from school. A child may be absent because he is embarrassed by his educational backwardness, frightened of a particular teacher, unskilled in social relationships with other children, worried about his parents' or siblings' health, worried about the disintegration of his home, anxious about his own physical development, (for example when puberty is delayed), easily led by more dominant or delinquent peers, and so on.

Similarly, Herzov's (1977) review of school refusal shows that this is probably "not a true clinical entity with a uniform aetiology, psychopathology, course, prognosis and treatment, but rather a collection of symptoms or a syndrome occurring against the background of a variety of psychiatric disorders". In other words, assessment should examine the possibility of social, educational, and psychological factors both within the child and the family.

How this is achieved in practice will depend on the organisation of local resources. Traditionally, child guidance or child psychiatric teams consist of psychiatrist, educational psychologist and psychiatric social worker. In principle this team is well placed to assess psychiatric, educational and social factors. The centralised clinic team has, however, come under considerable attack (Tizard, 1973; Loxley, 1974) and is being replaced in many areas by a more loosely knit network of services as proposed by the Court Committee on Child Health Services (DHSS, 1976).

In practice, it is as difficult to distinguish the relative contributions



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different potential causes in cases of poor school attendance as with any other presenting symptom. For two reasons this problem is particularly acute in assessing the significance of school variables: first, these are frequently misperceived by clients and second, schools which appear very similar to an outsider may provide quite different experiences for vulnerable children who attend them. Similarly, schools vary - quite understandably - in their ability to cater for the individual needs of a pupil who, from their point of view, may consistently have rejected everything they have offered in the past.

Community-based Assessment A model which is gaining favour in a number of local education authorities in England, is for the support services of school health, educational psychology and educational social work (also known as educational welfare) to base themselves on secondary school catchment areas. As the support service responsible for cases of poor attendance, educational social workers cooperate with teachers in preliminary investigations. Ideally, these include a home visit, generally from the educational social worker, to identify contributory problems at home, and an interview with the child about possible difficulties at school. Sometimes study of the attendance register shows a consistent pattern of absences, for example from certain subjects, or at the start of the week. When a pupil has frequent absences due to minor illness, advice is sought from the schools' visiting medical officer who may involve the educational psychologist or child psychiatrist if he thinks the illnesses may be symptomatic of other problems. Other children may be referred directly to the visiting educational psychologist or discussed informally with him at a weekly staff meeting on pupils' welfare.

A development in Liverpool has extended this approach. Each area has a social action team, headed by an "education guidance officer" whose job is to co-ordinate the efforts of all the available educational, social work and medical agencies to help both child and school (Brandon, 1974). Although the teams are based in the Education Department, it is hoped that they will be able to draw on

the skills of other personnel, and thus prevent overlap in service provision. It is not clear how far this has in fact been possible, and the emphasis seems to be somewhat heavily on the child's and family's problems rather than on contributory factors in school. Nevertheless, the social education team constitutes an interesting attempt to extend and co-ordinate the available resources for dealing with truancy and related problems.

The Scope and Limitations of "Clinical" Treatment Ever since Broadwin's classic paper (1932), school phobia (or school refusal) has attracted consistent attention from psychiatrists and psychologists. Numerous papers have described the syndrome and many different forms of treatment. Although truancy is widely agreed to be more widespread than school refusal, even when the term is restricted to children absent from school without their parents' knowledge or consent, its treatment appears to have received remarkably little attention from psychologists and psychiatrists; clinical studies are notable only for their absence. There are a number of possible reasons for this: (1) truancy is usually regarded as just one aspect of a more wide-ranging conduct disorder, while school refusal is often seen as the main expression of a neurotic disorder; (2) conduct disorders are less amenable to clinic-based treatments than neurotic disorders, and have a worse prognosis (Levitt, 1963; Robins, 1966); (3) truants and their families may be less likely to co-operate in clinic-based intervention than school refusers who are referred for treatment, perhaps owing to differences in social class (Hersov, 1960).

The first of these possibilities merits further discussion. While there is a detailed theoretical literature on school refusal, the same is not true of truancy or other forms of absenteeism. While clinicians are in general agreement about the neurotic nature of school refusal, they have differed on points of detail, for instance the relative significance of depression, separation anxiety and avoidance conditioning (Davidson, 1961; Chazan, 1962; Ross, 1972). The point is that the theoretical and diagnostic literature provides a number of conceptual



frameworks on which to base treatment programmes.

Studies reviewed by Yule (1977) suggest that approaches derived from behaviour therapy and modification have been successful in treating a variety of conduct problems, both in home and school settings. The common conceptual background to these studies is that treatment is based on a behavioural analysis which seeks to describe how the child and people in his environment interact with each other in creating or maintaining the presenting problem. This approach lends itself to the study and treatment of a problem in which there is often a complex interaction between family, environmental, temperamental and school variables. Viewed in this way, clinic treatments could have an important role in the treatment of the truants, but are not likely to be effective unless combined with other approaches which tackle the problem in its social context. A case history will illustrate this approach.

Case History - Albert Albert was referred at the age of 15 with a long history of truancy and delinquency. His offences were sometimes committed on his own, sometimes in company. He was of low average intelligence, severely retarded educationally, and had few friends. His parents were concerned about him, but his mother suffered from depression and his father worked long hours. His mother reported that her depression had started after the death, from acute leukaemia, of Albert's older sister, to whom he had been very close. This happened two months after he started his secondary education. Perhaps understandably, his parents were relieved, rather than concerned, that he showed no grief. In a family interview Albert astonished his parents by bursting into tears when asked if he had been close to his sister.

A provisional formulation saw Albert's initial truancy as a response to unresolved grief and associated anxiety about his mother's health. They were offered separate interviews using a modified version of the approach described by Yule (1977) for treating grief reaction. However, it was felt that Albert's present truancy was maintained by secondary factors, mainly his social isolation and educational retardation. This highlighted two problems in his school's

provision for pupil welfare: (1) that class teachers were encouraged to pass all "welfare" problems to the Head of Year (the teacher responsible for each age group) whose time was mainly spent investigating cases of disruptive behaviour; (2) the school currently had no remedial teaching facilities for 15 and 16 year olds. Arrangements were made to tackle the immediate problem by drawing up an individual time-table in co-operation with Albert; this enabled him to receive - at considerable administrative inconvenience - some remedial teaching, and an unusual number of woodwork and P.E. lessons - subjects which he enjoyed and were taught by teachers he liked. The broader issues were discussed in a series of meetings of senior staff, when future policy was under consideration.

#### School and Community Based Treatment

Treatment at school within ordinary classes Brooks (1974) has described the use of contingency contracts with truants. The use of contingency contracts lends itself to the assessment procedures suggested above, since the contract can be tailor-made to deal with problems arising in - or caused by - factors at home, at school or in the community. Brooks' contracts were drawn up by a school counsellor and involved a written contract between pupil, parent and school in which school attendance was reinforced by previously agreed rewards.

Brooks' reported improvement but his cases seem to have been relatively straightforward. It was not necessary for the contract to specify active intervention from the school, for example in teaching the pupil to read more fluently by providing an individualised remedial programme. Another approach is described by Boyson (1974). He appears to be in some doubt as to whether responsibility for truancy lies primarily with slack teachers, neglectful parents or subversive administrators, but describes his own approach as "regular if not eternal vigilance"; staff at his school made frequent spot checks for hidden truancy, with immediate phone calls to parents - at work if necessary - whenever any unexplained absence was discovered.



Whether this approach is seen as coercive or caring may depend on one's point of view. The same may be said of the role of school counsellors and teachers with positions of special responsibility for pastoral care. Reynolds and Murgatroyd (1977) have argued that these appointments exaggerate the influence of individual staff and underestimate the capacity of the school's internal organisation in generating its own problems. Counselling procedures have nevertheless been used both by teachers and by outside personnel in attempts to improve attendance. Some small-scale studies with truants have obtained results which justify cautious optimism, though

the follow-up periods were rather short. (Law, 1973; Sassi, 1973; Cain, 1974; Beaumont, 1976; Tumelty, 1976). A more wide-ranging action research project (Rose and Marshall, 1974) has suggested that attendance may be improved and delinquency reduced when counsellors or social workers are introduced into schools.

While the clinical literature on treatment has concentrated on school refusal, the few published descriptions of school-based treatment have concentrated on truancy. One of the few studies which focusses on poor attenders without discriminating truants from other absentees compared the efficacy of three behaviour modification procedures with elementary (primary) school children (Morgan, 1975). A combination of material rewards and social reinforcement from peers was found to be the most effective procedure, though the follow-up period was very short. In view of the complexity of reasons for illegal absence, it is doubtful whether the arbitrary application of behaviour modification techniques is justified, though they can certainly form part of a programme based on a careful assessment of the presenting problem (Galloway, 1977)

Special units in ordinary schools Special units for problem pupils could legitimately be described as the only current growth area in British education. Many of them cater inter alia for truants and school refusers. Teachers' opinions about basing these units in ordinary schools are divided. Some believe their primary focus should be on therapy, others on deterrence; while some emphasise the need to protect the conforming majority from undesirable influences (Lodge, 1977) others stress the therapeutic and rehabilitative function, and encourage

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social workers, psychologists and psychiatrists to participate in the overall planning and more immediate recommendations for individual children, (Jones, 1973; 1974). Some head teachers, however, oppose the introduction of any form of unit for absentees or disruptive pupils. Three reasons are commonly put forward: (1) the existence of such a unit "normalises" deviant behaviour in the eyes of pupils, and thus reduces the potential influences of group pressure from the conforming majority; (2) it is as unsound educationally to separate problem pupils from their peers as to cream off the academic elite into grammar schools; (3) the units reduce the commitment of class teachers and subject teachers to handle problems themselves, with consequent reluctance to co-operate in a pupil's return from the unit.

A growing number of head teachers appear to think these obstacles can be overcome. Following the early reports (Boxall, 1973; Jones, 1973, 1974; Labon, 1973) over 200 schools have established special groups (Berger and Mitchell, 1978). How many of these cater for truants as well as disruptive pupils is not known, nor is there yet any reliable body of information about their methods or their results.

Special units outside ordinary schools Parallelling the development of special units in ordinary schools has been a similar development in which units have been established to take "hard-core" cases from a number of different schools. Some of these cater primarily for delinquent or disruptive adolescents, but generally find that many of their clients have had school attendance problems. Others cater primarily for truants. No consensus has yet emerged regarding responsibility for these centres. Some are set up by the local education department and are run exclusively by teachers; others are set up by social work departments, with teachers seconded from the education department. In Scotland, provision of day units for truants has been encouraged by the Pack Report, in preference to residential provision (Scottish Education Department, 1977).

Rowan (1976) has noted that children are always accepted for outside units on the understanding that they remain on the register of their ordinary school, to



which it is hoped they will eventually return. Although they share the common aim of providing an effective alternative to orthodox schooling, they vary widely in their methods. The Islington Centre in London caters for truants referred by local secondary schools (Grunsell, 1978). Their relatively unstructured approach tolerates a wide range of disturbed behaviour within an accepting framework reminiscent of some of the pioneer workers for maladjusted children. The Hammersmith Teenage Project (MACRO, 1978) also caters for truants, though truancy is secondary to a history of delinquency as a criterion for admission. This project breaks new ground in the treatment of truants (and offenders) in England by employing as staff people who had themselves been in trouble as adolescents. Having similar backgrounds and problems to the project's youngsters, it was hoped that these workers would provide more acceptable identification figures and thus offer a model of successful emergence from an incipient criminal career.

The majority of special units and centres catering for truants appear to operate on relatively unstructured lines. Descriptive accounts are not hard to find, but evaluative studies are almost non-existent. One consistent trend from the small available literature is that successful return to school is seldom achieved. The Islington Centre and the Hammersmith Project had to dismiss this as impractical for most children. This may have been due to the disturbance in the pupils; alternatively, it may be attributable to the units providing so radical an alternative to conventional education that realistic pressure to return would have run counter to their practice and philosophy. A third possibility is that the schools themselves may have been less than enthusiastic about the return of their poor attenders. Follow-up studies on the subsequent careers of truants who have attended such centres, compared with truants who remained in conventional education, are urgently needed.

An exception to the general lack of success in returning pupils to school is the Hungerford Centre in London (Lane, 1977a, 1977b). The centre offers short-term treatment based on a contract between each child, the centre's staff and the referring school. Significantly, the referring school is involved in drawing

up the contract which can, when necessary, specify what the school should do to facilitate the pupil's return. The child is expected to keep to his contract and can see whether the centre and his school keep to theirs. Training and advice is offered to the ordinary school's teachers and the child is consciously taught how to cope with the situations that had previously led to confrontation or escape. The centre caters primarily for disruptive pupils, some of whom, nevertheless, have attendance problems. This would seem a logical and promising avenue for further research, particularly if pupils' families can also be involved in the contract.

### CONCLUSIONS

The efficacy of clinic-based treatment is not in doubt for many cases of acute school refusal associated with a neurotic disorder, it is not clear whether the same procedures will be effective when similar symptoms are associated with the severe social problems prevailing in the area of our study. The school-based team of educational psychologist, education social worker (or welfare officer) and specialist teachers should be able to carry out initial assessment, giving greater attention to the potential influence of school - positive or negative - than is possible for a clinic-based team. When appropriate the more specialised skills of psychiatrists and other casework or medical services are naturally available through normal referral channels.

Similar choices face educational administrators in allocating resources to the treatment of absenteeism: should they be channelled into special units which may provide an intensive treatment service for a small minority of absentees, usually hard-core truants, or should the available funds be allocated to encourage schools themselves to cater more successfully for their absentees? In this connection there is an urgent need for research into the progress of pupils admitted to special units, particularly those which are separate from ordinary schools. One of the few relatively consistent trends to emerge from the literature is that return to school is more often an ideal than a reality.

Study of persistent absence from school reveals a complex inter-relationship between factors in the school, the local community, the family and the child himself. Hence treatment of the individual, alone or with his family, has a good prognosis only when school and community factors appear insignificant as in some cases of school refusal, or their influence can be overcome in the course of treatment. No single approach - counselling, social workers in schools, special units within schools, special centres independent of schools - is likely to succeed unless based on the recognition that a solution to a many faceted problem will require close co-ordination and co-operation between schools and the various advisory, casework and treatment agencies.

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School	Age Group	1973		1974	
		No. of Absentees*	% of total on roll in each age group*	No. of Absentees*	% of total on roll in each age gp*
Infant or First	5	24	0.6	11	0.4
	6	40	0.5	17	0.2
	7	18	0.2	24	0.3
	8	25	0.3	21	0.2
Junior or Middle	9	26	0.3	22	0.2
	10	33	0.4	11	0.1
	11	30	0.4	30	0.3
	12	37	1.0	15	0.4
Primary Schools	Total	233	0.4	151 (139+)	0.3
Comprehensive	12	15	0.5	21	0.4
	13	89	1.3	74	0.8
	14	91	1.4	137	1.7
	15	154	2.3	138	1.8
	16	290	4.4	302	3.9
Secondary Schools	Total	639	2.1	672 (598+)	1.8

\* 1973: 6 weeks in the Autumn term; 30 secondary school catchment areas

1974: 14 weeks in the Autumn term; 36 secondary school catchment areas

+ Total from the 30 schools in 1973 survey



TABLE 2 Reasons for persistent absenteeism (excluding prolonged organic illness)

	Primary Schools		Secondary Schools	
	Per cent		Per cent	
	1973	1974	1973	1974
With parents' knowledge, consent and approval	24.2	19.2	24.3	15.4
Socio-medical reasons - child is excluded from school for reasons such as infestation, scabies etc.	10.5	6.6	2.7	3.0
'School phobia'. Non-attendance is associated with severe relationship difficulties in the home	1.2	4.0	4.2	3.5
Parents unable or unwilling to insist on return - child is at home with parents' knowledge but not with their active consent	16.1	18.6	26.0	31.3
Truancy - child is absent without parents' knowledge or consent	2.4	2.0	11.2	15.4
Psychosomatic illness	4.4	1.3	3.8	4.7
Mixed - part of the child's absence is due to illness but one or more of the other factors is also relevant	41.2	48.3	27.8	26.7
	100		100	

TABLE 3 Information Reported at Parent Interview

	S Secondary School Absentees (N=39)	P Primary School Absentees (N=20)	R Absentees Referred for Psychological Assessment (N=20)	G Good Attendees (N=23)	Overall log- likelihood- ratio. (d.f.=3)	Comparison of sub-groups (d.f.=3)+
all symptoms related with school absence	8	3	8	4	4.2 NS	
difficulties	6	5	5	4	1.2 NS	
emotional pains	18	7	5	3	8.4 ( $p < .05$ )	
disturbance	9	0	6	3	5.8 NS	
harm befalling	14	9	9	2	10.3 ( $p < .01$ )	Group P & G ( $p < .05$ )    Group R & G ( $p < .05$ )
social problems	8	3	4	1	3.9 NS	
social skills	11	6	10	2	9.6 ( $p < .05$ )	Group R & G ( $p < .05$ )
social contacts	5	4	9	2	10.0 ( $p < .05$ )	Group R & G ( $p < .05$ )
coming home late	10	5	7	3	3.0 NS	
bullying at school	10	9	8	7	2.7 NS	
teacher	26	2		5	24.0 ( $p < .001$ )	Group S & P    Group S & G ( $p < .001$ )

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of a particular	18	1	7	9	12.7 ( $p < .001$ )	Group S & P ( $p < .01$ )
f educational	6	2	5	4	NS	
lty in social nships at school	5	3	11	1	18.4 ( $p < .001$ )	Groups S & R    Group R & G ( $p < .01$ )    ( $p < .01$ )
about sex (e.g. , boy-girl nships)	7	1	5	4	3.5 NS	
ce of peers	11	3	7	7	2.4 NS	
edical problems nfestation)	11	14	3	1	25.8 ( $p < .001$ )	Group S & P    Group R & P    Group P & R ( $p < .05$ )    ( $p < .01$ )    ( $p < .001$ )
home to help look arents or siblings	17	3	2	1	17.3 ( $p < .001$ )	Group S & G ( $p < .01$ )
o other specialist s (e.g. social	18	7	14	2	19.7 ( $p < .001$ )	Group S & G    Group R & G ( $p < .02$ )    ( $p < .001$ )
en in Care	11	2	9	3	8.9 ( $p < .05$ )	
has met child's teachers	13	14	13	13	9.8 ( $p < .05$ )	

+ 3 d.f. were selected in order to control for the rise in the probability of a Type 1 error if the conventional procedure of ( $r - 1$ ) ( $k - 1$ ) is used when testing sub-groups. This matter is discussed fully in Gabriel (1966)



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APPENDIX 2

This section to be filled in by Education Welfare Officer after the form has been returned to Leopold Street.

If so, please tick one column for each child according to categories on attached sheet.

[illegible]

A P P E N D I X 3.

Persistent Absentee Survey 1976-77

Notes for Education Welfare Officers

Were more than  $\frac{1}{2}$  absences due to illness? Yes or No

If the answer is Yes ignore the rest of the form

- A. Absent with parent's knowledge, consent, approval. Kept at home to help in the home, look after younger siblings etc.
- B. Socio-medical reasons. Child is absent with parents' knowledge on account of not having shoes, clothes, etc. or excluded from school for socio-medical reasons such as infestations, scabies.
- C. "School phobia". Child refuses to leave home; severe relationship difficulties within the home.
- D. Parents unable or unwilling to insist on return. "Condoned absence" - child is frequently at home, theoretically against parents wishes, but parents are unable or unwilling to insist on return to school.
- E. Truancy. Child is absent without parents' knowledge or consent.
- F. Psychosomatic illness. Child is ill, but doctors, (G.P., S.M.O., psychiatrist, etc.) treat the illness as being psychological in origin.
- G. Mixed, but including some illness - part of the child's absence is due to illness but one or more of the other factors are also relevant.
- H. Absent because excluded or suspended from school.

Please tick ONE column only. As a general rule please tick the category which you think explains the greatest part of the child's absence. The only exception to this is the mixed category, which should be ticked if you think that more than two week's absence was due to illness.

Appendix 4 Table J. Number of pupils on roll (left cell) and number of persistent unjustified absentees (right cell) in primary schools.

	A G E G R O U P								Overall log likelihood ratio df = 7	Comparison between sub-groups df = 7
	5	6	7	8	9	10	11	12		
1974	13 2965	16 8614	23 8790	21 8751	21 8920	12 8763	27 8655	25 3749	29.01 P < .001	6 & 12 : 16.44 (P < .02) 10 & 12 : 22.27 (P < .01)
1975	8 3435	23 8347	13 8594	13 8671	15 8694	13 8901	18 8701	17 4135	13.46 P < .001	N S
1976	9 3209	27 8360	10 8304	12 8528	17 8657	16 8655	27 8801	23 4286	27.64 P < .001	7 & 12 : 17.50 (P < .02) 8 & 12 : 15.19 (P < .05)
Overall log likelihood ratio df = 2	2.22 NS	3.30 NS	5.13 NS	2.83 NS	.88 NS	.71 NS	2.34 NS	2.44 NS		

APPENDIX 4 Table II Number of Pupils on Roll (left cell) and Number of Persistent Unjustified Absentees (right cell) in Secondary Schools.

	AGE GROUP					Overall log likelihood ratio df=4	Comparison between sub-groups df=4
	12	13	14	15	16		
1974	11 4944	71 8795	139 8298	133 7804	298 7817	308.92 p<.001	See Appendix 4 Table III
1975	14 4713	70 8677	128 8608	173 8293	287 7762	283.16 p<.001	See Appendix 4 Table III
1976	7 4641	57 8819	95 8718	138 8834	299 8533	329.22 p<.001	See Appendix 4 Table III
Overall log likelihood ratio df=2	2.28 NS	2.08 NS	11.30 p<.01	6.97 p<.05	1.13 NS		
Comparison between sub-groups df=2			1974 and 1976 10.79 (p<.01)				

Appendix 4 Table III Log Likelihood Ratios and Significance Levels  
Comparison Between Sub-Groups from Appendix 4 Table II

	12 & 13	12 & 14	12 & 15	12 & 16	13 & 14	13 & 15	13 & 16	14 & 15	14 & 16	15 & 16
1974	21.29 .001	73.61 .001	74.33 .001	221.96 .001	26.88 .001	27.62 .001	182.01 .001	.02 NS	70.98 .001	66.32 .001
1975	14.36 .01	49.87 .001	85.59 .001	189.83 .001	17.91 .01	50.56 .001	170.33 .001	8.69 NS	82.11 .001	37.67 .001
1976	19.00 .001	45.15 .001	75.98 .001	211.04 .001	10.13 .05	31.92 .001	192.04 .001	7.52 NS	117.93 .001	68.13 .001

Free School Meals in Primary Schools (1974)\*

	Junior and Infant Schools N=29477	First and Middle Schools N=31476	log likelihood ratio
Free School Meals	2310	3522	199.4 p<.001

\* Figures include Nursery School pupils

APPENDIX 4 Table V. Number of Pupils on roll (left cell)  
and Number of Persistent Unjustified Absentees (right cell), combining  
twelve year olds in primary and secondary schools.

	<u>AGE GROUP</u>							Overall log likelihood ratio df=7	Comparison Between sub groups df=7
	5	6	7	8	9	10	11	12	
1974	2963 13	8614 16	8790 23	8751 21	8920 21	8768 12	8655 27	8693 36	19.2 p<.01 NS
1976	3209 9	8360 27	8304 10	8528 12	8655 17	8653 16	8801 27	8927 30	18.9 p<.01 NS

APPENDIX 4. Table VI. The prevalence of persistent absenteeism within families, including pupils whose absences were attributed mainly to illness; (numbers in brackets refer to percentage rates).

	1974	1975	1976
Number of families with 1 child in survey	890 (89.18)	804 (90.54)	775 (90.39)
Number of families with 2 children in survey	95 (9.52)	78 (8.78)	68 (7.93)
Number of families with 3 children in survey	9 (.90)	6 (.68)	13 (1.51)
Number of families with 4 children in survey	2 (.2)	0 (0)	2 (.23)
Number of families with 5 children in survey	2 (.2)	0 (0)	0 (0)
Number of families with $\geq 6$ children in survey	0 (0)	0 (0)	0 (0)
Total number of families involved	998	888	858

APPENDIX 4. Table VII. Number of families with children persistently absent from school, including pupils whose absences were attributed mainly to illness; (number in brackets refer to percentage rates).

No. of families with $\geq 1$ child in 1 survey	1968 (86.93)
No. of families with $\geq 1$ " " 2 "	241 (10.64)
No. of families with $\geq 1$ " " 3 "	55 (2.43)
Total number of families involved in all 3 surveys	2264



Appendix 4. Table VIII. Number of children recorded in three surveys, including pupils whose absences were attributed to illness; (numbers in brackets refer to percentage rates).

Number of children appearing in 1 survey only:	2345 (87.73)
Number of children appearing in 2 surveys:	271 (10.14)
Number of children appearing in 3 surveys:	57 ( 2.13)
Total number of children appearing in all 3 surveys	2673

Appendix 4. Table IX. Frequency of change of address in children recorded in more than one survey including pupils whose absences were attributed mainly to illness.

	With same address	With different addresses on each occasion	Percent of total who had changed addresses
Number of children appearing in 2 surveys	176	95	35.06
Number of children appearing in 3 surveys	55	2	3.51

Aged 5-11 assigned to each category.  
Analysis Over Three Years.

	1974 N=238	1975 N=148	1976 N=165	log likelihood ratio df = 2
Absent with parents' knowledge consent and approval	26	38	17	17.80 p<.001
Socio-medical reasons	8	5	11	2.81 NS
"School phobia" or psycho- somatic illness	8	6	4	.68 NS
Parents unable or unwilling to insist on return	22	28	37	14.77 p<.001
Truancy: absence without parents' knowledge or consent	2	0	1	numbers too small
Some illness but other factors also present	67	26	43	6.01 p<.05
Excluded or suspended from school	not included	0	0	numbers too small
Absence mainly due to illness	105	45	47	12.86 p<.01
Could not be rated	0	0	5	not appropriate

APPENDIX 5. Table 16. Number of Persistent Absentees Aged 12-15 assigned to each category. Analysis Over Three Years.

	1974 N= 526	1975 N=482	1976 N=404	log likelihood ratio df = 2
Absent with parents' knowledge consent and approval	57	82	81	16.34 p<.001
Socio-medical reasons	19	5	10	7.71 p<.05
"School phobia" or psychosomatic illness	33	31	19	1.48 NS
Parents unable or unwilling to insist on return	91	98	98	6.78 p<.05
Truancy: absence without parents' knowledge or consent	68	100	41	21.45 p<.001
Some illness but other factors also present	111	82	54	9.70 p<.01
Excluded or suspended from school	not included	4	2	numbers too small
Absence mainly due to illness	147	80	84	19.34 p<.001
Could not be rated	0	0	15	not appropriate

APPENDIX 5. Table 1c. Number of Persistent  
Absentees Aged 16 assigned to each category.  
Analysis Over Three Years.

	1974 N=361	1975 N=348	1976 N=388	log likelihood ratio df = 2
Absent with parents' knowledge consent and approval	45	55	80	9.20 p<.02
Socio-medical reasons	3	2	18	18.26 p<.001
"School phobia" or psychosomatic illness	21	11	15	3.21 NS
Parents unable or unwilling to insist on return	122	104	92	9.53 p<.01
Truancy: absence without parents' knowledge or consent	35	54	26	15.26 p<.001
Some illness but other factors also present	72	56	57	3.84 NS
Excluded or suspended from school	not included	3	3	numbers too small
Absence mainly due to illness	63	61	89	4.68 NS
Could not be rated	0	2	8	not appropriate

	1974			Log likelihood ratio df = 2
	Age 5-11 N=238	Age 12-15 N=526	Age 16 N=361	
Absent with parents' knowledge consent and approval	26	57	45	.62 NS
Socio-medical reasons	8	19	3	8.43 p<.02
"School phobia" or psychosomatic illness	8	33	21	3.07 NS
Parents unable or unwilling to insist on return	22	91	122	60.0 p<.001
Truancy: absence without parents' knowledge or consent	2	68	35	39.94 p<.001
Some illness but other factors also present	67	111	72	6.07 p<.05
Excluded or suspended from school	not included	not included	not included	
Absence mainly due to illness	105	147	63	49.98 p<.001
Could not be rated	0	0	0	not appropriate

	1975			Log likelihood ratio df = 2
	Age 5-11 N=148	Age 12-15 N=482	Age 16 N=348	
Absent with parents' knowledge, consent and approval	38	82	55	6.86 p<.05
Socio-medical reasons	5	5	2	5.50 NS
"School phobia" or psychosomatic illness	6	31	11	5.03 NS
Parents unable or unwilling to insist on return	28	98	104	12.06 p<.01
Truancy: absence without parents' knowledge or consent	0	100	54	54.47 p<.001
Illness but other factors also present	26	82	56	.20 NS
Excluded or suspended from school	0	4	3	numbers too small
Absence mainly due to illness	45	80	61	13.42 p<.01
Could not be rated	0	0	2	not appropriate

	1976				Log likelihood ratio df=2
	Age 5-11 N=165	Age 12-15 N=404	Age 16 N=388		
Absent with parents' know- ledge, consent and approval	17	81	80	10.21 p<.01	
Socio-medical reasons	11	10	18	5.76 NS	
"School phobia" or psychosomatic illness	4	19	15	1.75 NS	
Parents unable or unwilling to insist on return	37	98	92	.22 NS	
Truancy: absence without parents' knowledge or consent	1	41	26	22.41 p<.001	
Some illness but other factors also present	43	54	57	13.51 p<.01	
Excluded or suspended from school	0	2	3	numbers too small	
Absence mainly due to illness	47	84	89	3.80 NS	
Could not be rated	5	15	8	not appropriate	

	1974 - 1976 (N=551)		
	Boys N=280	Girls N=271	log likelihood ratio df=1
Absent with parents' knowledge, consent and approval	43	38	.20 NS
Socio-medical reasons	10	14	.84 NS
"School phobia" or psychosomatic illness	11	7	.80 NS
Parents unable or unwilling to insist on return	46	41	.18 NS
Truancy: absence without parents' knowledge or consent	3	0	numbers too small
Some illness also other factors present	66	70	.38 NS
Excluded or suspended from school	0	0	numbers too small
Absence mainly due to illness	98	99	.14 NS
Could not be rated	3	2	not appropriate



Table IIIb. Sex Distribution in each Category of  
Persistent Absentees Aged 12-15.

	1974 - 1976 (N=1412)		
	Boys N=645	Girls N=767	log likelihood ratio df = 1
Absent with parents' knowledge, consent and approval	76	144	13.26 p<.01
Socio-medical reasons	16	18	.03 NS
"School phobia" or psychosomatic illness	32	51	1.83 NS
Parents unable or unwilling to insist on return	133	154	.06 NS
Truancy: absence without parents knowledge or consent	139	70	43.11 p<.001
Some illness but other factors also present	106	141	.93 NS
Excluded or suspended from school	6	0	numbers too small
Absence mainly due to illness	130	181	2.43 NS
Could not be rated	7	8	not appropriate

Table 111c. Sex Distribution in each Category of  
Persistent Absentees Aged 16.

	1974 - 1976 (N=1097)		
	Boys N=470	Girls N=627	log likelihood ratio df = 1
Absent with parents' knowledge, consent and approval	69	111	1.80 NS
Socio-medical reasons	10	13	.004 NS
"School phobia" or psychosomatic illness	24	23	1.34 NS
Parents unable or unwilling to insist on return	148	170	2.49 NS
Truancy: absence without parents' knowledge or consent	73	42	22.13 p<.001
Some illness but other factors also present	72	113	1.41 NS
Excluded or suspended from school	2	4	numbers too small
Absence mainly due to illness	71	142	9.6 p<.01
Could not be rated	1	9	not appropriate

Appendix 6 Table I a Frequency of Absenteeism in 13 - 16 year olds at Schools with Absentee Rates above 1.5 per cent. A : 1974.

School	Total	13	14	15	16	Log Likelihood Ratio df = 3	Comparison between the sub-groups 15 and 16. df = 3
04	34	3	6	5	20	26.51 (*)	14.98 p < .01
05	16	1	2	3	10	15.83 (**)	6.62 NS
06	15	3	2	2	8	8.18 (††)	5.68 NS
07	39	1	8	8	22	35.57 (*)	10.94 p < .02
08	71	5	16	14	36	38.55 (*)	15.33 p < .01
11	55	10	28	11	6	26.09 (*)	1.76 NS
12	13	2	0	2	9	17.46 (**)	8.22 p < .05
14	53	10	13	7	23	14.12 (**)	12.39 p < .01
15	26	3	4	7	12	9.87 (†)	2.09 NS
16	31	1	4	9	17	26.75 (*)	4.30 NS
18	49	4	17	10	18	15.44 (**)	3.23 NS
22	31	7	7	7	10	1.12 (NS)	
23	45	5	10	14	16	9.00 (††)	.20 NS
24	20	5	5	2	8	5.06 (NS)	
26	20	5	2	2	11	13.95 (**)	9.92 p < .02
27	75	9	12	17	37	32.17 (*)	11.78 p < .01
29	42	5	6	13	18	14.50 (**)	1.28 NS
31	25	0	7	5	13	19.91 (*)	5.70 NS
33	26	1	6	4	15	22.65 (*)	10.52 p < .02

\* p < .001 † p < .02  
 \*\* p < .01 †† p < .05

Appendix 6 Table I b Frequency of Absenteeism in 13 - 16 year olds at Schools with Absentee Rates above 1.5 per cent. B : 1975.

School	Total	13	14	15	16	Log likelihood ratio df = 3	Comparison between the sub-groups 15 and 16 df = 3
04	10	0	3	3	4	numbers too small	
05	15	3	3	2	7	4.95 (NS)	
06	9	0	1	2	6	8.99 (††)	3.74 NS
07	29	3	5	8	13	10.46 (†)	1.88 NS
08	86	9	15	24	38	29.74 (*)	4.98 NS
11	93	15	24	29	25	6.30 (NS)	
12	8	1	2	1	4	numbers too small	
14	56	7	12	16	21	10.43 (†)	1.01 NS
15	21	2	4	5	10	8.70 (††)	2.63 NS
16	39	4	1	13	21	36.87 (*)	3.63 NS
18	41	6	9	15	11	5.62 (NS)	
22	11	1	3	2	5	4.30 (NS)	
23	105	9	22	22	52	49.79 (*)	19.19 p < .001
24	12	3	4	5	0	6.34 (NS)	
26	24	3	6	3	12	11.54 (**)	8.27 p < .02
27	34	2	9	6	17	19.62 (*)	8.20 p < .05
29	26	1	1	4	20	49.60 (*)	21.36 p < .001
31	28	2	3	8	15	20.31 (*)	3.66 NS
33	10	1	0	6	3	numbers too small	

\* p < .001 † p < .02  
 \*\* p < .01 †† p < .05



Appendix 6 Table I c Frequency of Absenteeism in 13 -16 year olds at schools with Absentee Rates above 1.5 per cent.  
C : 1976

School	Total	13	14	15	16	Log likelihood ratio df = 3	Comparison between the sub-groups 15 and 16 df = 3
04	16	3	3	3	7	3.72 (NS)	
05	14	0	7	3	4	7.17 (NS)	
06	14	4	1	4	5	4.02 (NS)	
07	35	5	5	8	17	13.92 (**)	5.13 NS
08	101	4	21	22	54	72.03 (*)	22.12 p < .001
11	84	12	19	0	53	104.09 (*)	94.25 p < .001
12	6	0	1	5	0	numbers too small	
14	37	5	5	9	18	15.52 (**)	4.79 NS
15	18	5	2	4	7	4.02 (NS)	
16	34	1	2	3	28	76.74 (*)	41.76 p < .001
18	46	3	8	10	25	30.66 (*)	10.64 p < .02
22	16	1	3	2	10	15.83 (**)	9.11 p < .05
23	85	9	13	22	41	37.30 (*)	9.21 p < .05
24	15	2	3	4	6	3.10 (NS)	
26	20	5	5	5	5	0.00 (NS)	
27	36	0	0	15	21	56.89 (*)	2.01 NS
29	16	3	1	3	9	11.68 (**)	4.97 NS
31	29	2	6	7	14	14.11 (**)	3.71 NS
33	15	3	1	0	11	24.94 (*)	19.04 p < .001

\* p < .001  
\*\* p < .01

Table Ia - School 18      Number of Persistent Absentees Allocated  
to the largest categories in 10 Secondary Schools with High Absentee  
Rates - I By School.

	1974 N=50	1975 N=41	1976 N=47	log likelihood ratio df=2
Absent with parents' know- ledge, consent and approval	1	4	0	numbers too small
Parents unable or unwilling to insist on return	17	8	17	3.51 NS
Truancy: Absence without parents' knowledge, or consent	8	0	0	11.86 ( $p < .01$ )
Mixed but including some illness	18	14	9	4.02 NS
Absence mainly due to illness	6	13	19	11.10 ( $p < .01$ )

Table Ib - School 11      Number of Persistent Absentees Allocated to  
the Largest Categories in 1974, 1975 and 1976 in 10 Secondary Schools  
with High Absentee Rates.

	1974 N=60	1975 N=96	1976 N=87	log likelihood ratio df=2
Absent with parents' know- ledge, consent and approval	14	36	6	26.48 ( $p < .001$ )
Parents unable or unwilling to insist on return	0	0	33	69.79 ( $p < .001$ )
Truancy: Absence without parents' knowledge or consent	17	44	5	42.02 ( $p < .001$ )
Mixed but including some illness	25	0	3	62.01 ( $p < .001$ )
Absence mainly due to illness	2	15	21	13.82 ( $p < .01$ )

Table Ic - School 07      Number of Persistent Absentees Allocated to the Largest Categories in 1974, 1975 and 1976 in 10 Secondary Schools with High Absentee Rates.

	1974 N=39	1975 N=80	1976 N=36	log likelihood ratio df=2
Absent with parents' knowledge, consent and approval	1	0	0	numbers too small
Parents unable or unwilling to insist on return	7	3	3	1.77 NS
Truancy: Absence without parents' knowledge or consent	0	0	1	numbers too small
Mixed but including some illness	27	24	18	6.94 p<.05
Absence mainly due to illness	2	3	14	15.90 p<.001

Table Id - School 04      Number of Persistent Absentees Allocated to the Largest Categories in 1974, 1975 and 1976 in 10 Secondary Schools with High Absentee Rates.

	1974 N=35	1975 N=10	1976 N=16	log likelihood ratio df=2
Absent with parents' knowledge, consent and approval	1	4	9	21.25 p<.001
Parents unable or unwilling to insist on return	4	3	1	numbers too small
Truancy: absence without parents' knowledge or consent	1	2	5	numbers too small
Mixed but including some illness	16	0	0	16.63 p<.001
Absence mainly due to illness	10	1	1	4.63 NS

Table 1e - School 14      Number of Persistent Absentees Allocated to the Largest Categories in 1974, 1975 and 1976 in 10 Secondary Schools with High Absentee Rates.

	1974 N=53	1975 N=57	1976 N=37	log likelihood ratio df=2
Absent with parents' knowledge, consent and approval	14	11	7	1.03 NS
Parents unable or unwilling to insist on return	7	5	8	3.04 NS
Truancy: Absence without Parents' knowledge or consent	8	16	9	2.86 NS
Mixed but including some illness	8	14	4	3.31 NS
Absence mainly due to illness	12	7	7	2.13 NS

Table If - School 27      Number of Persistent Absentees Allocated to the Largest Categories in 1974, 1975 and 1976 in 10 Secondary Schools with High Absentee Rates.

	1974 N=75	1975 N=34	1976 N=36	log likelihood ratio df=2
Absent with parents' knowledge, consent and approval	9	3	5	.46 NS
Parents unable or unwilling to insist on return	21	5	8	2.47 NS
Truancy: Absence without parents' knowledge or consent	13	6	6	.01 NS
Mixed but including some illness	13	6	6	.01 NS
Absence mainly due to illness	10	2	4	1.47 NS



Table Ig - School 23      Number of Persistent Absentees Allocated to the Largest Categories in 1974, 1975 and 1976 in 10 Secondary Schools with High Absentee Rates.

	1974 N=45	1975 N=106	1976 N=86	log likelihood ratio df=2
Absent with parents' knowledge, consent and approval	7	14	26	9.03 p<.02
Parents unable or unwilling to Insist on return	4	38	21	13.53 p<.01
Truancy: absence without parents' knowledge or consent	5	22	8	5.56 NS
Mixed but including some illness	10	18	0	24.00 p<.001
Absence mainly due to illness	15	9	23	17.31 p<.001

Table Ih - School 08      Number of Persistent Absentees Allocated to the Largest Categories in 1974, 1975 and 1976 in 10 Secondary Schools with High Absentee Rates.

	1974 N=71	1975 N=86	1976 N=101	log likelihood ratio df=2
Absent without parents' knowledge, consent and approval	6	10	48	46.34 p<.001
Parents unable or unwilling to insist on return	35	36	6	53.66 p<.001
Truancy: absence without parents' knowledge or consent	4	14	11	4.65 NS
Mixed but including some illness	10	2	13	9.93 p<.01
Absence mainly due to illness	12	19	15	1.69 NS

Table Ii - School 16      Number of Persistent Absentees Allocated to  
the Largest Categories in 1974, 1975 and 1976 in 10 Secondary Schools  
with High Absentee Rates.

	1974 N=31	1975 N=40	1976 N=35	log likelihood ratio df=2
Absent with parents' know- ledge, consent and approval	4	12	0	14.03 p<.001
Parents unable or unwilling to insist on return	2	2	6	3.46 NS
Truancy: Absence without parents' knowledge or consent	4	3	1	numbers too small
Mixed but including some illness	7	16	10	2.64 NS
Absence mainly due to illness	9	5	14	7.80 p<.05

Table Ij - School 29      Number of Persistent Absentees Allocated to  
the Largest Categories in 1974, 1975 and 1976 in 10 Secondary Schools  
with High Absentee Rates.

	1974 N=42	1975 N=26	1976 N=16	log likelihood ratio df=2
Absent with parents' know- ledge, consent and approval	1	1	9	25.36 p<.001
Parents unable or unwilling to insist on return	33	18	0	33.74 p<.001
Truancy: absence without parents' knowledge or consent	0	2	1	numbers too small
Mixed but including some illness	0	0	0	numbers too small
Absence mainly due to illness	7	5	6	2.82 NS

Appendix 7 Table IIa Number of Persistent Absentees Allocated to the Largest Categories in 10 Secondary Schools with High Absentee Rates By the Year 1974.

	18 N=50	11 N=60	07 N=39	04 N=35	14 N=53 S C H O O L	27 N=75	23 N=45	08 N=71	16 N=31	29 N=42	log likeliho ratio df=9
Absent with parents' know- ledge, consent and approval	1	14	1	1	14	9	7	6	4	1	36.19 p<.00
Parents unable or unwilling to insist on return	17	0	7	4	7	21	4	35	2	33	129.62 p<.00
Truancy: Absence without parents' knowledge or consent	8	17	0	1	8	13	5	4	4	0	36.10 p<.00
Mixed, but including some illness	18	25	27	16	8	13	10	10	7	0	82.15 p<.00
Absence mainly due to illness	6	2	2	10	12	10	15	12	9	7	31.77 p<.00

Appendix 7 Table IIb Number of Persistent Absentees Allocated to the Largest Categories in 10 Secondary Schools with High Absentee Rates By Year 1975.

	18 N=41	11 N=96	07 N=30	04 N=10	14 N=57	27 N=34	23 N=106	08 N=86	16 N=40	29 N=26	log likelihood ratio df=9
Absent with parents' knowledge, consent and approval	4	36	0	4	11	3	14	10	12	1	48.84 p<.001
Parents unable or unwilling to insist on return	8	0	3	3	5	5	38	36	2	18	117.78 p<.001
Truancy: Absence without parents' knowledge or consent	0	44	0	2	16	6	22	14	3	2	67.98 p<.001
Mixed, but including some illness	14	0	24	0	14	6	18	2	16	0	136.94 p<.001
Absence mainly due to illness	13	15	3	1	7	2	9	19	5	5	18.89 p<.05

Appendix 7 Table IIc Number of Persistent Absentees Allocated to the Largest Categories in 10 Secondary Schools with High Absentee Rates II By Year 1976.

	18 N=47	11 N=87	07 N=36	04 N=16	14 N=37	27 N=36	23 N=86	08 N=101	16 N=35	29 N=16	log likelihood ratio df=9
					S C H O O L S						
Absent with parents' knowledge, consent or approval	0	6	0	9	7	5	26	48	0	9	109.42 p<.001
Parents unable or unwilling to insist on return	17	33	3	1	8	8	21	6	6	0	54.81 p<.001
Truancy: absence without parents' knowledge or consent	0	5	1	5	9	6	8	11	1	1	29.24 p<.001
Mixed, but including some illness	9	3	18	0	4	6	0	13	10	0	73.14 p<.001
Absence mainly due to illness	19	21	14	1	7	4	23	15	14	6	28.15 p<.001

Date:

Child's Name:

Address

Informants:

1) Immediate Family, (state if not living with child).

Father:

Occupation

R.G. Class:

Mother:

Occupation  
and hours  
worked:

Siblings:

Age or Date  
of Birth:

School or  
Occupation:

2) Is this each parent's first marriage?

3) Accomodation: a) Type of house or flat:

b) Number of bedrooms:

4) How long has family been at present address?

5) If child is not living with natural parents what contact does he have with them?

6) Child's health record: (a) Accidents:

(b) Illnesses:

7) Major accidents or illness of siblings:

8) Parents' health record; (specify whether treated by G.P. or in hospital):

(a) Mother:

(b) Father:

9) Has child ever suffered bereavement of close relative (e.g. parent, grand-parent, sibling). Dates. How did he and other members of family react?

10) Is any social work agency involved with child?

11) Is any social work agency involved with other members of family?

12) (a) Are parents on social security?

(b) Have they been at any time in last 12 months?

13) Has child or sibling ever been in care?

Name:

Dates:

14) Were parents ever in care?

15) Have the following occurred in the past? Do they occur now?

In the past (specify)

No Mild Severe

Now

No Mild Severe

Eating problems.

Abdominal pains.

Sleep disturbance or fears.

Enuresis (night or day).

Stealing (from home or outside it).

Persistent lying.

Wandering from home.

Anxiety about separation from either parent.

Anxiety on part of parent about separation from child.

16) When did school attendance problems start?

17) When did other problems mentioned start?

18) Does child have any anxiety about sex (e.g. menstruation, changing for PE at school etc.).

19) What does child do in evenings and at week-ends?

20) (a) Does he have many friends of own age and sex?

(b) Has he brought them home in previous week.

21) (a) Has he got girl (boy) friend?

(b) Has he brought her home in the previous week?

22) Has child had any prolonged (more than 2 week) separation from either parent? Date and duration.

23) Does mother know where child is when not at school?

Generally

Sometimes

Seldom

- 24) Parents explanation for absence from school. Consider relative importance of:

Fear of bullying at school.

Fear of strict teacher.

Dislike of particular subject.

Sense of boredom, (lessons irrelevant to child's interests).

Sense of academic failure.

Anxiety re social relationships at school.

Socio-medical reasons.

Anxiety re sex (menstruation, public showers, boy-girl relationships etc.)

Fear of harm befalling parent.

Kept at home to help parents look after sibling etc.

Illness.

Influence of peers.

Other (specify):

- 25) Has child ever shown physical symptoms caused by anxiety about going to school? Please specify.

- 26) Information on parents' own education.

(a) Father: Grammar    Sec. Modern    Special    Age of leaving    Qualification

(b) Mother: Grammar    Sec. Modern.    Special    Age of leaving    Qualification

- 27) Was parents' attendance:    Good    Average    Poor

(a) Father

(b) Mother

- 28) Structured interview:

(a) Do parents know child's teachers? How well do they get on with them?

(b) Do parents tend to give in easily when child demands something?

(c) Do they worry about him a lot? Or encourage him to stand "on own 2 feet".

(d) Do they find it hard to take a firm line with him?

(e) Do they think he is too dependent for a child of his age?

(f) Is he often wilful or stubborn?



(g) Do they have warm/close relationship with child, or tense/difficult one?

29) Parents' views about what school could do to improve attendance?

30) Parents' views about what other agencies could do to improve attendance.

# HEALTH QUESTIONNAIRE

Please ring the correct answer

Completed by .....

For Office Use  
Only

1.	Do you often have backache?	Yes	No	
2.	Do you feel tired most of the time?	Yes	No	
3.	Do you often feel miserable or depressed?	Yes	No	
4.	Do you often have bad headaches?	Yes	No	
5.	Do you often get worried about things?	Yes	No	
6.	Do you usually have great difficulty in falling asleep or staying asleep?	Yes	No	
7.	Do you usually wake unnecessarily early in the morning?	Yes	No	
8.	Do you wear yourself out worrying about your health?	Yes	No	
9.	Do you often get into a violent rage?	Yes	No	
10.	Do people often annoy and irritate you?	Yes	No	
11.	Have you at times had a twitching of the face, head or shoulders?	Yes	No	
12.	Do you often suddenly become scared for no good reason?	Yes	No	
13.	Are you scared to be alone when there are no friends near you?	Yes	No	
14.	Are you easily upset or irritated?	Yes	No	
15.	Are you frightened of going out alone or meeting people?	Yes	No	
16.	Are you constantly keyed up and jittery?	Yes	No	
17.	Do you suffer from indigestion?	Yes	No	
18.	Do you often suffer from an upset stomach?	Yes	No	
19.	Is your appetite poor?	Yes	No	
20.	Does every little thing get on your nerves and wear you out?	Yes	No	
21.	Does your heart often race like mad?	Yes	No	
22.	Do you often have bad pains in your eyes?	Yes	No	
23.	Are you troubled with rheumatism or fibrositis?	Yes	No	

# SCALE A (2)

TO BE COMPLETED BY PARENTS

Name of Child ..... Boy/Girl ..... Date of Birth .....

Address ..... School .....

## HOW TO FILL IN THIS FORM

The questionnaire asks about various kinds of behaviour that many children show at some time. Please give the answers according to the way your child has been during the PAST 12 MONTHS.

## HEALTH PROBLEMS

Below is a list of minor health problems which most children have at some time. Please tell us how often each of these happens with your child by putting a cross in the correct box.

	Never	Occasionally, but not as often as once per week	At least once per week	FOR OFFICE USE ONLY
1. Complains of headaches .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Has stomach-ache or vomiting .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Asthma or attacks of wheezing .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Wets the bed or pants .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Soils or loses control of bowels .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Has temper tantrums (that is, complete loss of temper with shouting, angry movements, etc.) .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Had tears on arrival at school or refused to go into the building ..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Truants from school .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**FOR OFFICE  
USE ONLY**

11

7

7

7

☐ sometimes on own, sometimes with others

11



1

☐

4

☐

☐ other, please describe: .....

Below are a series of descriptions of behaviour often shown by children. After each statement are three columns—“Doesn’t Apply”, “Applies Somewhat”, and “Certainly Applies”. If your child definitely shows the behaviour described by the statement place a cross in the box under “Certainly Applies”. If he or she shows the behaviour described by the statement but to a lesser degree or less often, place a cross under “Applies Somewhat”. If, as far as you are aware, your child does not show the behaviour, place a cross under “Doesn’t Apply”.

Please put one cross against each statement.

STATEMENT	Doesn't Apply	Applies Somewhat	Certainly Applies	FOR OFFICE USE ONLY
1. Very restless, has difficulty staying seated for long .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Squirmy, fidgety child .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Often destroys own or others' property .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Frequently fights or is extremely quarrelsome with other children ..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Not much liked by other children .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Often worried, worries about many things .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Tends to be on own—rather solitary .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Irritable. Is quick to 'fly off the handle' .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Often appears miserable, unhappy, tearful or distressed .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Has twitches, mannerisms or tics of the face or body .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Frequently sucks thumb or finger .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Frequently bites nails or fingers .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Is often disobedient .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Cannot settle to anything for more than a few moments .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Tends to be fearful or afraid of new things or new situations ..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Fussy or over-particular child .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Often tells lies .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Bullies other children .. .. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ARE THERE ANY OTHER PROBLEMS?

Signature: Mr./Mrs. ....

THANK YOU VERY MUCH FOR YOUR HELP

Appendix 8 Table I Analysis of Informants at Interview with  
Parents (siblings counted once).

	Secondary School Absentees  N=38	Primary School Absentees  N=17	Referred Absentees  N=19	Good Attend- ers  N=22	Log lik- lihood ratio  df=3	Compar- ison of sub groups  df=3
	<u>PER CENT</u>					
Parent or parents alone	39.5	70.6	68.4	72.7	9.35 p<.05	NS
Parent or parents with child and/or siblings	60.5	29.4	31.6	27.3	9.35 p<.05	NS

Appendix 8 Table II Type of Housing (siblings counted once).

	Secondary School Absentees  N=38	Primary School Absentees  N=17	Referred Absentees  N=19	Good Attend- ers  N=22	Log lik- lihood ratio  df=3
	<u>PER CENT</u>				
High rise council flats or council flats built before 1920	34.2	58.8	42.1	36.4	3.13 NS
Semi-detached or terrace house on council est- ate built before 1950	63.2	41.2	42.1	50	3.50 NS
New council house (post 1950); owner occupied; privately rented	2.6	0	15.8	13.6	Nos. too small

• 1997 - 1998 - 1999 - 2000 - 2001 - 2002 - 2003 - 2004 - 2005 - 2006 - 2007 - 2008 - 2009 - 2010 - 2011 - 2012 - 2013 - 2014 - 2015 - 2016 - 2017 - 2018 - 2019 - 2020 - 2021 - 2022 - 2023 - 2024 - 2025 - 2026 - 2027 - 2028 - 2029 - 2030 - 2031 - 2032 - 2033 - 2034 - 2035 - 2036 - 2037 - 2038 - 2039 - 2040 - 2041 - 2042 - 2043 - 2044 - 2045 - 2046 - 2047 - 2048 - 2049 - 2050 - 2051 - 2052 - 2053 - 2054 - 2055 - 2056 - 2057 - 2058 - 2059 - 2060 - 2061 - 2062 - 2063 - 2064 - 2065 - 2066 - 2067 - 2068 - 2069 - 2070 - 2071 - 2072 - 2073 - 2074 - 2075 - 2076 - 2077 - 2078 - 2079 - 2080 - 2081 - 2082 - 2083 - 2084 - 2085 - 2086 - 2087 - 2088 - 2089 - 2090 - 2091 - 2092 - 2093 - 2094 - 2095 - 2096 - 2097 - 2098 - 2099 - 2100 - 2101 - 2102 - 2103 - 2104 - 2105 - 2106 - 2107 - 2108 - 2109 - 2110 - 2111 - 2112 - 2113 - 2114 - 2115 - 2116 - 2117 - 2118 - 2119 - 2120 - 2121 - 2122 - 2123 - 2124 - 2125 - 2126 - 2127 - 2128 - 2129 - 2130 - 2131 - 2132 - 2133 - 2134 - 2135 - 2136 - 2137 - 2138 - 2139 - 2140 - 2141 - 2142 - 2143 - 2144 - 2145 - 2146 - 2147 - 2148 - 2149 - 2150 - 2151 - 2152 - 2153 - 2154 - 2155 - 2156 - 2157 - 2158 - 2159 - 2160 - 2161 - 2162 - 2163 - 2164 - 2165 - 2166 - 2167 - 2168 - 2169 - 2170 - 2171 - 2172 - 2173 - 2174 - 2175 - 2176 - 2177 - 2178 - 2179 - 2180 - 2181 - 2182 - 2183 - 2184 - 2185 - 2186 - 2187 - 2188 - 2189 - 2190 - 2191 - 2192 - 2193 - 2194 - 2195 - 2196 - 2197 - 2198 - 2199 - 2200 - 2201 - 2202 - 2203 - 2204 - 2205 - 2206 - 2207 - 2208 - 2209 - 2210 - 2211 - 2212 - 2213 - 2214 - 2215 - 2216 - 2217 - 2218 - 2219 - 2220 - 2221 - 2222 - 2223 - 2224 - 2225 - 2226 - 2227 - 2228 - 2229 - 2230 - 2231 - 2232 - 2233 - 2234 - 2235 - 2236 - 2237 - 2238 - 2239 - 2240 - 2241 - 2242 - 2243 - 2244 - 2245 - 2246 - 2247 - 2248 - 2249 - 2250 - 2251 - 2252 - 2253 - 2254 - 2255 - 2256 - 2257 - 2258 - 2259 - 2260 - 2261 - 2262 - 2263 - 2264 - 2265 - 2266 - 2267 - 2268 - 2269 - 2270 - 2271 - 2272 - 2273 - 2274 - 2275 - 2276 - 2277 - 2278 - 2279 - 2280 - 2281 - 2282 - 2283 - 2284 - 2285 - 2286 - 2287 - 2288 - 2289 - 2290 - 2291 - 2292 - 2293 - 2294 - 2295 - 2296 - 2297 - 2298 - 2299 - 2300 - 2301 - 2302 - 2303 - 2304 - 2305 - 2306 - 2307 - 2308 - 2309 - 2310 - 2311 - 2312 - 2313 - 2314 - 2315 - 2316 - 2317 - 2318 - 2319 - 2320 - 2321 - 2322 - 2323 - 2324 - 2325 - 2326 - 2327 - 2328 - 2329 - 2330 - 2331 - 2332 - 2333 - 2334 - 2335 - 2336 - 2337 - 2338 - 2339 - 2340 - 2341 - 2342 - 2343 - 2344 - 2345 - 2346 - 2347 - 2348 - 2349 - 2350 - 2351 - 2352 - 2353 - 2354 - 2355 - 2356 - 2357 - 2358 - 2359 - 2360 - 2361 - 2362 - 2363 - 2364 - 2365 - 2366 - 2367 - 2368 - <

[illegible]
$$\begin{array}{llllll} \text{A} = \frac{1}{2} \begin{pmatrix} 1 & 0 \\ 0 & 1 \end{pmatrix} & \text{B} = \frac{1}{2} \begin{pmatrix} 1 & 0 \\ 0 & -1 \end{pmatrix} & \text{C} = \frac{1}{2} \begin{pmatrix} 0 & 1 \\ 1 & 0 \end{pmatrix} & \text{D} = \frac{1}{2} \begin{pmatrix} 0 & -1 \\ 1 & 0 \end{pmatrix} & \text{E} = \frac{1}{2} \begin{pmatrix} 1 & 0 \\ 0 & 0 \end{pmatrix} & \text{F} = \frac{1}{2} \begin{pmatrix} 0 & 1 \\ 0 & 0 \end{pmatrix} \end{array}$$

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RF-C	1.00	10.75	1.00	1.00	Other countries
RF-C					1990-2000
RF-C					1990-2000

Second, the two parties have agreed to a 10-year moratorium on the use of nuclear weapons.

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$$Z=1, \quad \text{CH}_2=1, \quad \text{CH}=1, \quad \text{CH}_3=1, \quad \text{CH}_2\text{OH}=1$$

2. 3. 4. 5.

Appendix 8 Table III Length of Time at Present Address.

	Secondary School Absentees N=38	Primary School Absentees N=17	Referred Absentees N=19	Good Attendees N=22	Log like- lihood ratio df=3
	<u>PER CENT</u>				
≥ 4 years at present address	68.4	64.7	73.7	63.6	.56 NS

Appendix 8 Table IV Information on Family Size and Structure.

	Secondary School Absentees N=38	Primary School Absentees N=17	Referred Absentees N=19	Good Attendees N=22	Log like- lihood ratio df=3	Compar- ison of sub- groups df=3
	<u>PER CENT</u>					
One or both parents dead	15.8	11.8	5.3	4.5	2.72 NS	
Parents sep- arated or divorced	21.1	41.2	31.6	22.7	2.72 NS	
Child not living with both parents*	38.5	55	45	26.1	4.03 NS	
Oldest, youngest or only child*	30.8	50	45	69.6	9.11 p<.05	Sec & GA 8.96 p<.05
≥ 4 children in family	73.7	82.4	68.4	50	5.41 NS	
≥ 3 children per bedroom	21.1	35.3	15.8	4.5	6.76 NS	

\* N=39,20,20,23



Appendix 8 Table V Medical History of Children and Siblings as  
Reported at Interview with Parents.

	Secondary School Absentees N=39	Primary School Absentees N=20	Referred Absentees N=20	Good Attendees N=23	Log like- lihood ratio df=3
	<u>PER CENT</u>				
Child with history of chronic illness	35.9	20	50	21.7	5.67 NS
Child with history of serious illness or accident	17.9	15	20	34.8	3.01 NS
Child with chronic illness and/ or history of serious illness or accident	48.7	30	60	56.5	4.48 NS
≥1 sibling with history of chronic illness	30.8	25	30	8.7	4.94 NS
≥1 sibling with history of serious illness or accident	41.0	25	20	39.1	3.75 NS
≥1 sibling with chronic illness and/ or history of serious illness or accident	53.8	45	40	43.5	1.28 NS

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 175. CELL \_\_\_\_\_  
 176. PAGER \_\_\_\_\_  
 177. FAX \_\_\_\_\_  
 178. TELETYPE \_\_\_\_\_  
 179. TELEFAX \_\_\_\_\_  
 180. EMAIL \_\_\_\_\_  
 181. WEB \_\_\_\_\_  
 182. MOBILE \_\_\_\_\_  
 183. HOME \_\_\_\_\_  
 184. WORK \_\_\_\_\_  
 185. CELL \_\_\_\_\_  
 186. PAGER \_\_\_\_\_  
 187. FAX \_\_\_\_\_  
 188. TELETYPE \_\_\_\_\_  
 189. TELEFAX \_\_\_\_\_  
 190. EMAIL \_\_\_\_\_  
 191. WEB \_\_\_\_\_  
 192. MOBILE \_\_\_\_\_  
 193. HOME \_\_\_\_\_  
 194. WORK \_\_\_\_\_  
 195. CELL \_\_\_\_\_  
 196. PAGER \_\_\_\_\_  
 197. FAX \_\_\_\_\_  
 198. TELETYPE \_\_\_\_\_  
 199. TELEFAX \_\_\_\_\_  
 200. EMAIL \_\_\_\_\_  
 201. WEB \_\_\_\_\_  
 202. MOBILE \_\_\_\_\_  
 203. HOME \_\_\_\_\_  
 204. WORK \_\_\_\_\_  
 205. CELL \_\_\_\_\_  
 206. PAGER \_\_\_\_\_  
 207. FAX \_\_\_\_\_  
 208. TELETYPE \_\_\_\_\_  
 209. TELEFAX \_\_\_\_\_  
 210. EMAIL \_\_\_\_\_  
 211. WEB \_\_\_\_\_  
 212. MOBILE \_\_\_\_\_  
 213. HOME \_\_\_\_\_  
 214. WORK \_\_\_\_\_  
 215. CELL \_\_\_\_\_  
 216. PAGER \_\_\_\_\_  
 217. FAX \_\_\_\_\_  
 218. TELETYPE \_\_\_\_\_  
 219. TELEFAX \_\_\_\_\_  
 220. EMAIL \_\_\_\_\_  
 221. WEB \_\_\_\_\_  
 222. MOBILE \_\_\_\_\_  
 223. HOME \_\_\_\_\_  
 224. WORK \_\_\_\_\_  
 225. CELL \_\_\_\_\_  
 226. PAGER \_\_\_\_\_

DATE	TIME	LOCATION	WIND	SEA	TEMP	WIND	SEA	TEMP	WIND	SEA	TEMP
10/10/1964	10:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	11:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	12:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	13:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	14:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	15:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	16:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	17:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	18:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	19:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	20:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	21:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	22:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	23:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	00:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	01:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	02:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	03:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	04:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	05:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	06:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	07:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	08:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	09:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	10:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	11:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	12:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	13:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	14:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	15:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	16:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	17:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	18:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	19:00	1000	10	10	10	10	10	10	10	10	10
10/10/1964	20:00	1000									

Appendix 8 Table VI Parents' Medical Histories Reported in Interview

	Secondary School Absentees  N=38	Primary School Absentees  N=17	Referred Absentees  N=19	Good Attendees  N=22	Log like- lihood ratio  df=3	Compar- ison between sub- groups  df=3
	<u>PER CENT</u>					
Mother with history of chronic illness	39.5	64.7	63.2	50	4.71 NS	
Father with history of chronic illness	36.8	29.4	52.6	22.7	5.89 NS	
Both par- ents with history of chronic illness	21.1	23.5	42.1	4.5	9.20 p<.05	Ref & GA 9.16 p<.05
Mother with history of severe ill- ness or accident	21.1	5.9	10.5	18.2	2.84 NS	
Father with history of severe ill- ness or accident	23.7	11.8	5.3	22.7	5.12 NS	
Both par- ents with history of severe ill- ness or accident	5.3	0	0	9.1	Nos. too small	

Irritate you:						NS	
Have you at times had a twitching of the face, head or shoulders	22.2	31.3	16.7	5.3	4.74	NS	
Do you often suddenly become scared for no good reason?	16.7	25	22.2	10.5	1.56	NS	
Are you scared to be alone when there are no friends near you?	19.4	31.3	5.6	5.3	6.56	NS	
Are you easily upset or irritated?	52.8	43.8	44.4	42.1	.78	NS	
Are you frightened of going out alone or meeting people?	22.2	25	5.6	10.5	4.09	NS	
Are you constantly keyed up or jittery?	11.1	31.3	11.1	0	Nos. too small		
Do you suffer from indigestion?	22.2	25	27.8	15.8	.86	NS	
Do you often suffer from an upset stomach?	22.2	37.5	11.1	21	3.42	NS	
Is your appetite poor?	22.2	37.5	11.1	5.3	7.11	NS	
Does every little thing get on your nerves and wear you out?	36.1	31.3	22.2	10.5	4.94	NS	
Does your heart often race like mad?	22.2	31.3	27.8	26.3	.53	NS	
Do you often have bad pains in your eyes?	25	18.8	11.1	0	6.31	NS	
Are you troubled with rheumatism or fibrositis?	25	18.8	11.1	10.5	2.57	NS	

10.1 2

to be of the first	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the second	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the third	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the fourth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the fifth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the sixth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the seventh	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the eighth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the ninth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the tenth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3

to be of the first	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the second	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the third	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the fourth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the fifth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the sixth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the seventh	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the eighth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the ninth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3
to be of the tenth	20.3	30.3	40.3	50.3	60.3	70.3	80.3	90.3	100.3

Appendix 8      Table VIII

Parents' Assessment of their own Attendance at School

	Secondary School Absentees	Primary School Absentees P E R	Referred Absentees C E N T	Good Attendees	log likelihood ratio df=3
Fathers reporting good attendance*	78.6	50	66.7	83.3	5.12 NS
Fathers reporting average or poor attendance*	21.4	50	33.3	16.7	5.12 NS
Mothers reporting good attendance+	66.7	62.5	76.5	70	.86 NS
Mothers reporting average or poor attendance+	33.3	37.5	23.5	30	.86 NS

\* N=28, 14, 15, 18

+ N=36, 16, 17, 20



Appendix 8 Table IX

Parents' Secondary Education

	Secondary School Absentees	Primary School Absentees P E R C E N T	Referred Absentees P E R C E N T	Good Attendees	log likelihood ratio df=3
Father attended: Secondary Modern School	81.8	75	86.7	75	1.06 NS
" " Grammar or Technical School	6.1	0	13.3	5	.94 NS
" " Special or Approved School	3.0	18.7	0	5	3.54 NS
" " Other	9.1	6.3	0	15	.99 NS
Mother attended: Secondary Modern School	82.3	86.7	76.5	85.7	.74 NS
" " Grammar or Technical School	0	0	5.9	0	.43 NS
" " Special or Approved School	11.8	13.3	11.7	0	1.11 NS
" " Other	5.9	0	5.9	14.3	1.31 NS

\* N = 33, 16, 15, 20

+ N = 34, 15, 17, 21

Appendix 8 Table X

Parental Reports on Children's Social Relationships

	Secondary School Absentees	Primary School Absentees	Referred Absentees	Good Attendees	log likelihood ratio df=3	Comparison between sub-groups df=3
	P E R C E N T					
Friend has called at home in previous week*	67.6	70	36.8	82.6	10.05 p<.02	ref. GA 9.56 p<.05
Generally stays in the home at evening and weekends**	28.2	15.0	50	30.4	6.0 NS	
Has girl/boy friend+	33.3	N/A	6.7	27.8	4.8 NS	
Specific hobbies mentioned/member- ship of Youth Club or other youth organisations+	20.5	N/A	13.3	38.9	3.3 NS	

\*N = 37, 20, 19, 23 (excludes children in care at time of interview)

\*\*N = 39, 20, 20, 23

+N = 39, 15, 18 (children of secondary school age only) (df = 2 in statistical analysis)



Appendix 8 Table XI

Parents' Information about Child's Whereabouts when Absent from School

Secondary School Absentees N=39	Primary School Absentees N=20 P E R C E N T	Referred Absentees N=20 C E N T	Good Attenders N=23	log likelihood ratio df=3	Comparison between sub-groups df=3
Parent generally knows child's whereabouts when absent from school	51.3	60	N/A	4.85 NS	
Parent has felt anxiety about child leaving home in the morning	41	30	26	2.29 NS	
Illness a frequent reason for absence	17.9	35	4.3	11.14 p<.01	Pr & GA 9.0 p<.05
Child needed at home to help parents/look after siblings	43.6	10	4.3	17.33 p<.001	Sec & GA 13.05 p<.01

irritable - quick to cry over the handle.	25.6	15	27.8	13.0	2.40 NS	
often appears miserable, unhappy, tearful or distressed.	5.1	5	16.7	0	numbers too small	
as twitches, mannerisms or tics of the face or body.	10.3	15	22.2	8.7	1.92 NS	
requently sucks thumb or finger	38.5	20	27.8	26.1	2.51 NS	
requently bites nails or fingers.	43.6	65	66.7	34.8	6.67 NS	
s often disobedient	30.8	35	27.8	30.4	.24 NS	
an't settle to anything for more than a few moments.	38.5	40	44.4	30.4	.92 NS	
tends to be fearful or afraid of new things or new situations.	28.2	40	44.4	47.8	2.92 NS	
ussy or over-particular child	33.3	45	66.7	17.4	11.47 p<.01	NS
often tells lies	12.8	15	22.2	4.3	3.20 NS	
bullies other children						

Appendix 8 Table XIII Measures of Disadvantage and/or Potential  
Stress from Social Histories

- 1) Live in high-rise or tenement flat, or older-type estate of semi-detached council houses.
- 2) >> 3 children per bedroom.
- 3) >> 4 children in family.
- 4) Not living with both parents.
- 5) Child has history of chronic illness.
- 6) Child has history of severe illness or accident.
- 7) >> 1 sibling has history of chronic illness.
- 8) >> 1 sibling has history of severe illness or accident.
- 9) Mother has history of chronic illness.
- 10) Mother has history of severe illness or accident.
- 11) Father has history of chronic illness.
- 12) Father has history of severe illness or accident.
- 13) Bereavement of close relative.
- 14) Child has been/is in Care.
- 15) >> sibling has been/is in Care.
- 16) Parents are on Social Security/have been within last 12 months.
- 17) >> 2 weeks' separation from Mother.
- 18) >> 2 weeks' separation from Father.
- 19) History of "socio-medical" problems.

Instructions to the Government of the United States  
Department of the Interior

- (1) To obtain the best results in the management of the public lands, the following principles should be observed:
- (2) The public lands should be managed for the benefit of the people of the United States.
- (3) The public lands should be managed for the benefit of the people of the United States.
- (4) The public lands should be managed for the benefit of the people of the United States.
- (5) The public lands should be managed for the benefit of the people of the United States.
- (6) The public lands should be managed for the benefit of the people of the United States.
- (7) The public lands should be managed for the benefit of the people of the United States.
- (8) The public lands should be managed for the benefit of the people of the United States.
- (9) The public lands should be managed for the benefit of the people of the United States.
- (10) The public lands should be managed for the benefit of the people of the United States.
- (11) The public lands should be managed for the benefit of the people of the United States.
- (12) The public lands should be managed for the benefit of the people of the United States.
- (13) The public lands should be managed for the benefit of the people of the United States.
- (14) The public lands should be managed for the benefit of the people of the United States.
- (15) The public lands should be managed for the benefit of the people of the United States.
- (16) The public lands should be managed for the benefit of the people of the United States.
- (17) The public lands should be managed for the benefit of the people of the United States.
- (18) The public lands should be managed for the benefit of the people of the United States.
- (19) The public lands should be managed for the benefit of the people of the United States.



Appendix 8 Table XIV Frequency of Measures of Disadvantage and/or Potential Stress

	Secondary School Absentees N = 39	Primary School Absentees N = 20 PER CENT	Referred Absentees N = 20	Good Attenders N = 23	Log likelihood ratio df = 3	Comparison between sub-groups. df = 3
0 - 4 items	12.8	5	15	56.5	20.15 p < .001	GA & Sec. 13.34 p < .01 GA & Pr. 14.83 p < .001 GA & Ref. 8.36 p < .05
5 - 8 items	48.7	55	20	34.8	6.91 NS	
≥ 9 items	38.5	40	65	8.7	16.32 p < .001	Ref. & GA 16.13 p < .001

Appendix 8 Table XV Frequency of Behaviour Problems Reported by Parents

	Secondary School Absentees N = 39	Primary School Absentees N = 20 PER CENT	Referred Absentees N = 18	Good Attenders N = 23	Log likelihood ratio df = 3	Comparison between sub-groups. df = 3
0 - 5 items	35.9	45	22.2	69.6	10.88 p < .02	GA & Ref. 9.48 p < .05
6 - 10 items	56.4	50	27.8	21.7	9.56 p < .05	NS
≥ 11 items	7.7	5	50	8.7	16.91 p < .001	Ref. & Sec. 12.56 p < .01 Ref. & Pr. 7.91 p < .05 Ref. & GA 9.14 p < .05



Date:

Name:

Date of Birth:

C.A.:

Address:

School:

Test Results

WISC VS ..... (.....subtests); PS ..... (..... subtests);

FS ..... OR Ravens ..... percentile

Crichton Vocabulary .....

Schonell R.A.:

M.P.C.L.

Health Questionnaire

Further Investigations needs owing to learning or cognitive problems .....

Further Investigations needed owing to personality or relationship  
problems .....

Child's explanation of activities during day when not in school.

Child's explanation of activities at weekends and in evenings.

Child's explanation for absence from school:

Consider relevance as seen by child of:

Fear of bullying at school

Fear of strict teacher

Dislike of particular subject

Sense of boredom - lessons irrelevant to child's interests

Sense of academic failure

Anxiety re social relationships at school

Socio-medical reasons

Anxiety re sex (e.g. menstruation, public showers, boy-girl relationships etc.)

Fear of harm befalling parent

Kept at home to help parents look after siblings etc.

Illness

Influence of peers

Other (specify)

Physical appearance, size etc.

Other comments

Needs and wants help with his problems							
Thinks and feels like me							
Worst quality (elicit)							
Ideal self							
Misses lot of school							
Expelled from school							
Unhappy at home							
Clever at school							
Plenty of friends							





D.G.L. INVENTORY - REVISED FORM 1975

Name ..... School .....

Age ..... Years ..... Months. Male/Female .....

This inventory consists of a number of statements with which you may or may not agree.

If you agree with a statement, put a tick in the box marked AGREE.

If you disagree, put a tick in the box marked DISAGREE.

Thus, if you agree with the first statement shown below (i.e. if you do like going out) please tick as shown:-

	AGREE	DISAGREE
I like going out	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Again, if you disagree with the statement, please tick as shown:-

	AGREE	DISAGREE
I don't like school holidays	<input type="checkbox"/>	<input checked="" type="checkbox"/>

PLEASE TRY TO PUT A TICK FOR EVERY STATEMENT

1. I don't often lose patience with friends
2. I get most of my fun outside home
3. I never bother with what my classmates say
4. My friends are not very important to me
5. I feel that teachers ignore me
6. I do not have many headaches
7. I like spending a lot of time with my family
8. I like all teachers very much.
9. I enjoy making decisions
10. Sometimes I find it difficult to hear what is being said
11. I seldom feel tired
12. I don't mind being noticed in class
13. Family outings are often boring
14. I find that teachers are reasonable
15. I get on well with most of our form.
16. I always get what I want
17. I don't often feel angry
18. I enjoy going out with my family
19. I often lose my temper for no reason at all
20. I wish I could leave school


21. I always do what I am told	<input type="checkbox"/>	<input type="checkbox"/>
22. I usually agree with my friends	<input type="checkbox"/>	<input type="checkbox"/>
23. Teachers are always picking on me	<input type="checkbox"/>	<input type="checkbox"/>
24. My eyes often ache at the end of the day	<input type="checkbox"/>	<input type="checkbox"/>
25. I never tell a lie	<input type="checkbox"/>	<input type="checkbox"/>
26. My parents are not very understanding	<input type="checkbox"/>	<input type="checkbox"/>
27. I don't mind talking to persons of the opposite sex	<input type="checkbox"/>	<input type="checkbox"/>
28. Teachers are generally quite helpful	<input type="checkbox"/>	<input type="checkbox"/>
29. Children in our neighbourhood annoy me	<input type="checkbox"/>	<input type="checkbox"/>
30. I usually understand what is taught in class	<input type="checkbox"/>	<input type="checkbox"/>
31. Teachers never find fault with my work	<input type="checkbox"/>	<input type="checkbox"/>
32. There are many people I cannot 'stand'	<input type="checkbox"/>	<input type="checkbox"/>
33. I like talking to my parents	<input type="checkbox"/>	<input type="checkbox"/>
34. I don't find it easy to say what I think	<input type="checkbox"/>	<input type="checkbox"/>
35. I enjoy going out with my friends	<input type="checkbox"/>	<input type="checkbox"/>
36. I have missed a lot at school through illness	<input type="checkbox"/>	<input type="checkbox"/>
37. I like only one or two special friends	<input type="checkbox"/>	<input type="checkbox"/>
38. Teachers do not understand me	<input type="checkbox"/>	<input type="checkbox"/>
39. I look forward to arriving home each evening	<input type="checkbox"/>	<input type="checkbox"/>
40. I have many friends	<input type="checkbox"/>	<input type="checkbox"/>
41. I often worry about what others think of me	<input type="checkbox"/>	<input type="checkbox"/>

AGREE

DISAGREE

42. I never feel tired.

☐
☐

43. Members of my family often annoy me

☐
☐

44. I get on well with my teachers

☐
☐

45. I do not like speaking out in a crowd

☐
☐

46. I get a lot of small aches and pains

☐
☐



Lewis' Counselling Inventory: Part II

Optional Supplementary Questionnaire

1. Have the items that you have marked on the Inventory given a correct picture of any difficulties that you have? .....
2. Add any further points you may wish in order to complete the picture  
.....  
.....  
.....  
.....
3. What problems are troubling you most? Write about two or three of these, if you care to. Put the most pressing difficulty first.  
.....  
.....  
.....  
.....  
.....  
.....  
.....
4. Would you like to spend more time in school trying to do something about some of your difficulties? .....
5. Would you like to talk to someone about some of your difficulties?  
.....
6. Who do you think might be able to help you either in school or out of school (i.e. parents, classmates, teachers, relatives other than parents, doctor, clergyman, education welfare officer, social worker etc.)  
.....
7. What do you think that your school could do to help you with the difficulties, if any, that you have listed?  
.....  
.....  
.....  
.....  
.....  
.....

Good reason?					NS	
Are you scared to be alone when there are no friends near you?	11.8	7.7	5.9	Nos. too small		
Are you easily upset or irritated?	61.8	23.1	23.5	9.89 p<.01	NS	
Are you frightened of going out alone or meeting people?	11.8	0	5.9	Nos. too small		
Are you constantly keyed up and jittery?	8.8	7.7	11.8	Nos. too small		
Do you suffer from indigestion?	14.7	15.4	11.8	Nos. too small		
Do you often suffer from an upset stomach?	44.1	38.5	0	12.48 p<.01	Sec & GA 12.13 p<.01	
Is your appetite poor?	17.6	23.1	17.6	.19 NS		
Does every little thing get on your nerves and wear you out?	17.6	7.7	0	Nos. too small		
Does your heart often race like mad?	23.5	7.7	5.9	3.72 NS		
Do you often have bad pains in your eyes?	20.6	23.1	5.9	2.51 NS		
Are you troubled with rheumatism or fibrositis?	0	7.7	0	Nos. too small		



Appendix 9 Table II Unacceptable Scores on L.C.I. Lie Scale.

	Secondary School Absentees	Primary School Absentees	Referred Absentees	Good Attendees	Log like- lihood ratio	Compar- ison between sub- groups
	N=30	N=17	N=17	N=17	df=3	df=3
Lie Scale Score $\geq 16$	16.7	<u>PER CENT</u> 35.3		5.9	11.8	5.55 NS

Appendix 9 Table III Pupils Scoring  $>1$  s.d. Above the Mean in Each Area of the L.C.I. on Brock's (1975) Norms.

	Secondary School Absentees	Referred Absentees	Good Attendees	Log like- lihood ratio	Compar- ison between sub- groups
	N=25	N=16	N=15	df=2	df=2
Relation- ships with teachers	24	25	13.3	.86 NS	
Relation- ships with family	0	0	20	Nos. too small	
Irritabil- ity	12	0	26.7	Nos. too small	
Social confidence	8	31.3	0	Nos. too small	
Relation- ship with peers	28	43.8	6.7	6.16 $p < .05$	Ref & GA 6.13 $p < .05$
Health	40	43.8	20	2.40 NS	
Total Score	8	20	6.7	Nos. too small	



1. The first part of the document is a list of names and addresses. The names are: John Doe, Jane Smith, and Bob Johnson. The addresses are: 123 Main St, 456 Elm St, and 789 Oak St.

2. The second part of the document is a list of names and addresses. The names are: Alice Brown, Charlie Green, and David White. The addresses are: 101 Main St, 202 Elm St, and 303 Oak St.

3. The third part of the document is a list of names and addresses. The names are: Emily Black, Frank Gray, and Grace Hall. The addresses are: 404 Main St, 505 Elm St, and 606 Oak St.

4. The fourth part of the document is a list of names and addresses. The names are: Henry King, Irene Lee, and Jack Miller. The addresses are: 707 Main St, 808 Elm St, and 909 Oak St.

5. The fifth part of the document is a list of names and addresses. The names are: Karen Wilson, Larry Young, and Mary Zane. The addresses are: 1010 Main St, 1011 Elm St, and 1012 Oak St.

NAME	ADDRESS	CITY	STATE	ZIP
John Doe	123 Main St	New York	NY	10001
Jane Smith	456 Elm St	Los Angeles	CA	90001
Bob Johnson	789 Oak St	Chicago	IL	60601
Alice Brown	101 Main St	San Francisco	CA	94101
Charlie Green	202 Elm St	Seattle	WA	98101
David White	303 Oak St	Portland	OR	97201
Emily Black	404 Main St	Denver	CO	80201
Frank Gray	505 Elm St	Phoenix	AZ	85001
Grace Hall	606 Oak St	San Diego	CA	92101
Henry King	707 Main St	San Jose	CA	95101
Irene Lee	808 Elm St	San Antonio	TX	78201
Jack Miller	909 Oak St	San Marcos	CA	92101
Karen Wilson	1010 Main St	San Luis Obispo	CA	93401
Larry Young	1011 Elm St	San Bernardino	CA	92401
Mary Zane	1012 Oak St	San Clemente	CA	92671

Appendix 9 Table IV Pupils Scoring Above the Mean in Each Area of the L.C.I. on Brock's (1975) Norms.

	Secondary School Absentees  N=25	Referred Absentees  N=16	Good Attendees  N=15	Log like- lihood ratio  df=2	Compar- ison between sub-groups  df=2
	<u>PER CENT</u>				
Relation- ships with teachers	44	37.5	20	2.52 NS	
Relation- ships with family	12	18.8	46.7	6.17 $p < .05$	NS
Irritab- ility	24	12.5	26.7	1.86 NS	
Social confidence	40	43.8	6.7	7.40 $p < .05$	Ref & GA 6.13 $p < .05$ Sec & GA 6.06 $p < .05$
Relation- ship with peers	44	62.5	40	1.90	
Health	68	56.3	66.7	.63 NS	
Total	36	43.8	40	.25 NS	

Appendix 10 Table I Type of Housing

	Non-truants N=44*	Truants N=30	Log Likelihood Ratio df=1
	PER CENT		
High rise council flats or council flats built before 1920	36.4	50	1.36 NS
Semi-detached or terraced house on council estate built before 1950	59.1	43.3	1.78 NS
New council house (post 1950); owner-occupied, privately rented	4.5	6.7	Nos. too small

\*Siblings counted once

Appendix 10 Table II Length of Time at Present Address

	Non-truants N=44 PER CENT	Truants N=30	Log Likelihood Ratio df=1
≥ 4 years at present address	68.2	70	.03 NS

Appendix 10 Table III Information on Family Size and Structure

	Non-truants N=44 PER CENT	Truants N=30	Log Likelihood Ratio df=1
One or both parents dead	18.2	3.3	4.29 p<.05
Parents separated or divorced	25	33.3	.60 NS
Child not living with both parents*	45.8	41.9	.12 NS
Oldest, youngest or only child*	43.8	33.3	1.06 NS
≥ 4 children in family	70.5	80	.87 NS
≥ 3 children per bedroom	22.7	23.3	.00 NS

\*N=48, 31



Appendix 10 Table IV Parental Employment

	Non-truants N=44 PER CENT	Truants N=30 PER CENT	Log Likelihood Ratio df=1
Neither parent in current employment	61.4	40	3.29 NS
Parents have received social security in last 12 months	79.5	56.7	4.43 p<.05
Mother or step-mother in employment*	23.8	46.7	4.10 p<.05
Father or step-father alive and unemployed or not supporting family+	68.4	55.2	1.23 NS

\*N= 42,30

+N= 38,29

Appendix 10 Table V Medical History of Children and Siblings as Reported at Interview with Parents

	Non-truants N=48 PER CENT	Truants N=31 PER CENT	Log Likelihood Ratio df=1
Child with history of chronic illness	33.3	38.7	.24 NS
Child with history of serious illness or accident	18.8	16.1	.09 NS
Child with history of chronic illness and/or history of serious illness or accident	45.8	48.4	.05 NS
≥1 sibling with history of chronic illness	29.2	29	.00 NS
≥1 sibling with history of serious illness or accident	29.2	35.5	.35 NS
≥1 sibling with history of chronic illness and/or history of serious illness or accident	45.8	51.6	.25 NS

Income Statement for the Year Ended December 31, 1967

Balance Sheet as of December 31, 1967

Assets

Current Assets

Fixed Assets

Liabilities

Income Statement for the Year Ended December 31, 1967

Income Statement for the Year Ended December 31, 1967

Balance Sheet as of December 31, 1967

Assets

Current Assets

Fixed Assets

Liabilities

Equity

Income Statement for the Year Ended December 31, 1967

Balance Sheet as of December 31, 1967

Appendix 10 Table VI History of Separation from Parents and of Bereavements

	Non-truants N=48 PER CENT	Truants N=31 PER CENT	Log Likelihood Ratio df=1
History of >2 weeks' separation from mother	35.4	54.8	2.90 NS
History of >2 weeks' separation from father	56.3	67.7	1.06 NS
History of >2 weeks' separation from both parents	33.3	48.4	1.78 NS
≥1 bereavement of close relative	50	45.2	.18 NS

Appendix 10 Table VII Involvement with Social Work Agencies and Incidence of Socio-Medical Problems

	Non-truants N=48 PER CENT	Truants N=31 PER CENT	Log Likelihood Ratio df=1
Social work agency currently involved with child	41.7	61.3	2.92 NS
Child has been in Care	27.1	29.0	.04 NS
Social work agency currently involved with others in family	58.3	58.1	.01 NS
≥1 sibling has been or is in Care	27.1	35.5	.62 NS
≥1 parent in Care, living away from home, at boarding school as child*	15.9	22.6	.81 NS
History of "socio-medical" problems	41.7	25.8	2.12 NS

\*N = 44,30

[illegible]

1. *Phragmites* (common)

[illegible][illegible]

Table 1. *Salmonella* serotypes and their associated diseases

1008-1010 1011-1012 1013-1014 1015-1016 1017-1018 1019-1020 1021-1022 1023-1024 1025-1026 1027-1028 1029-1030 1031-1032 1033-1034 1035-1036 1037-1038 1039-1040 1041-1042 1043-1044 1045-1046 1047-1048 1049-1050 1051-1052 1053-1054 1055-1056 1057-1058 1059-1060 1061-1062 1063-1064 1065-1066 1067-1068 1069-1070 1071-1072 1073-1074 1075-1076 1077-1078 1079-1080 1081-1082 1083-1084 1085-1086 1087-1088 1089-1090 1091-1092 1093-1094 1095-1096 1097-1098 1099-1100 1101-1102 1103-1104 1105-1106 1107-1108 1109-1110 1111-1112 1113-1114 1115-1116 1117-1118 1119-1120 1121-1122 1123-1124 1125-1126 1127-1128 1129-1130 1131-1132 1133-1134 1135-1136 1137-1138 1139-1140 1141-1142 1143-1144 1145-1146 1147-1148 1149-1150 1151-1152 1153-1154 1155-1156 1157-1158 1159-1160 1161-1162 1163-1164 1165-1166 1167-1168 1169-1170 1171-1172 1173-1174 1175-1176 1177-1178 1179-1180 1181-1182 1183-1184 1185-1186 1187-1188 1189-1190 1191-1192 1193-1194 1195-1196 1197-1198 1199-1200 1201-1202 1203-1204 1205-1206 1207-1208 1209-1210 1211-1212 1213-1214 1215-1216 1217-1218 1219-1220 1221-1222 1223-1224 1225-1226 1227-1228 1229-1230 1231-1232 1233-1234 1235-1236 1237-1238 1239-1240 1241-1242 1243-1244 1245-1246 1247-1248 1249-1250 1251-1252 1253-1254 1255-1256 1257-1258 1259-1260 1261-1262 1263-1264 1265-1266 1267-1268 1269-1270 1271-1272 1273-1274 1275-1276 1277-1278 1279-1280 1281-1282 1283-1284 1285-1286 1287-1288 1289-1290 1291-1292 1293-1294 1295-1296 1297-1298 1299-1300 1301-1302 1303-1304 1305-1306 1307-1308 1309-1310 1311-1312 1313-1314 1315-1316 1317-1318 1319-1320 1321-1322 1323-1324 1325-1326 1327-1328 1329-1330 1331-1332 1333-1334 1335-1336 1337-1338 1339-1340 1341-1342 1343-1344 1345-1346 1347-1348 1349-1350 1351-1352 1353-1354 1355-1356 1357-1358 1359-1360 1361-1362 1363-1364 1365-1366 1367-1368 1369-1370 1371-1372 1373-1374 1375-1376 1377-1378 1379-1380 1381-1382 1383-1384 1385-1386 1387-1388 1389-1390 1391-1392 1393-1394 1395-1396 1397-1398 1399-1400 1401-1402 1403-1404 1405-1406 1407-1408 1409-1410 1411-1412 1413-1414 1415-1416 1417-1418 1419-1420 1421-1422 1423-1424 1425-1426 1427-1428 1429-1430 1431-1432 1433-1434 1435-1436 1437-1438 1439-1440 1441-1442 1443-1444 1445-1446 1447-1448 1449-1450 1451-1452 1453-1454 1455-1456 1457-1458 1459-1460 1461-1462 1463-1464 1465-1466 1467-1468 1469-1470 1471-1472 1473-1474 1475-1476 1477-1478 1479-1480 1481-1482 1483-1484 1485-1486 1487-1488 1489-1490 1491-1492 1493-1494 1495-1496 1497-1498 1499-1500 1501-1502 1503-1504 1505-1506 1507-1508 1509-1510 1511-1512 1513-1514 1515-1516 1517-1518 1519-1520 1521-1522 1523-1524 1525-1526 1527-1528 1529-1530 1531-1532 1533-1534 1535-1536 1537-1538 1539-1540 1541-1542 1543-1544 1545-1546 1547-1548 1549-1550 1551-1552 1553-1554 1555-1556 1557-1558 1559-1560 1561-1562 1563-1564 1565-1566 1567-1568 1569-1570 1571-1572 1573-1574 1575-1576 1577-1578 1579-1580 1581-1582 1583-1584 1585-1586 1587-1588 1589-1590 1591-1592 1593-1594 1595-1596 1597-1598 1599-1600 1601-1602 1603-1604 1605-1606 1607-1608 1609-1610 1611-1612 1613-1614 1615-1616 1617-1618 1619-1620 1621-1622 1623-1624 1625-1626 1627-1628 1629-1630 1631-1632 1633-1634 1635-1636 1637-1638 1639-1640 1641-1642 1643-1644 1645-1646 1647-1648 1649-1650 1651-1652 1653-1654 1655-1656 1657-1658 1659-1660 1661-1662 1663-1664 1665-1666 1667-1668 1669-1670 1671-1672 1673-1674 1675-1676 1677-1678 1679-1680 1681-1682 1683-1684 1685-1686 1687-1688 1689-1690 1691-1692 1693-1694 1695-1696 1697-1698 1699-1700 1701-1702 1703-1704 1705-1706 1707-1708 1709-1710 1711-1712 1713-1714 1715-1716 1717-1718 1719-1720 1721-1722 1723-1724 1725-1726 1727-1728 1729-1730 1731-1732 1733-1734 1735-1736 1737-1738 1739-1740 1741-1742 1743-1744 1745-1746 1747-1748 1749-1750 1751-1752 1753-1754 1755-1756 1757-1758 1759-1760 1761-1762 1763-1764 1765-1766 1767-1768 1769-1770 1771-1772 1773-1774 1775-1776 1777-1778 1779-1780 1781-1782 1783-1784 1785-1786 1787-1788 1789-1790 1791-1792 1793-1794 1795-1796 1797-1798 1799-1800 1801-1802 1803-1804 1805-1806 1807-1808 1809-1810 1811-1812 1813-1814 1815-1816 1817-1818 1819-1820 1821-1822 1823-1824 1825-1826 1827

1. The Bureau has info. that on or about 11/10/61, a letter was received from the Bureau of the Federal Bureau of Investigation, Washington, D.C., dated 11/10/61, and captioned as above.

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1. The first step is to identify the problem. In this case, the problem is that the company is not meeting its sales targets. The reasons for this could be many, such as poor marketing, lack of product differentiation, or competition from other companies.



Appendix 10 Table VIII Parents' Medical Histories Reported in Interview

	Non-truants N=44	Truants N=30	Log Likelihood Ratio df=1
	PER CENT		
Mother with history of chronic illness	63.6	33.3	6.66 p<.01
Father with history of chronic illness	43.2	33.3	.73 NS
Both parents with history of chronic illness	34.1	16.7	2.86 NS
Mother with history of severe illness or accident	15.9	10	.55 NS
Father with history of severe illness or accident	18.2	13.3	.31 NS
Both parents with history of severe illness or accident	2.3	3.3	Numbers too small

Appendix 10 Table IX Number of Mothers Scoring Above Criterion on Health Questionnaire

	Non-truants N=42	Truants N=28	Log Likelihood Ratio df=1
	PER CENT		
Score $\geq$ 7 on Health Questionnaire	57.1	50	.35 NS

Appendix 10 Table X Mothers' Mean Score on Health Questionnaire

	Non-truants N=42	Truants N=28	t
Mean Score	7.5	6.68	.80 NS
s.d.	4.1	4.3	

Appendix 10 Table XI Parents' Reports on Children's Social Behaviour

	Non-truants	Truants	Log Likelihood Ratio df=1
	PER CENT		
Friend has called at home in previous week*	62.5	57.1	.21 NS
Generally stays in the house in evenings and weekends+	41.7	12.9	7.98 p<.01
Has girl/boy friend**	21.9	25.9	.13 NS
Specific hobbies mentioned/ membership of youth club or other youth organisation**	9.4	25.9	2.88 NS

\* N=48, 28 (excludes children in Care at time of interview)

+ N=48, 31

\*\* N=32, 27 (children of secondary age only)

Appendix 10 Table XII Parents' Information About Child's Absence

	Non-Truants N=48	Truants N=31	Log Likelihood Ratio df=1
	PER CENT		
Parent has felt anxiety about child leaving home in the morning	35.4	32.3	.08 NS
Illness a frequent reason for absence	35.4	16.1	3.67 NS
Child needed at home to help parents/look after siblings	33.3	19.4	1.89 NS

Appendix 10 Table XIII Mean Scores on "Behaviour Statement" Section  
of Rutter (A2) Scale

	Non-truants N=47	Truants N=30	t df=75
Mean Score	7.72	8.77	.81 NS
s.d.	5.5	5.5	

Appendix 10 Table XIV Mean Number of Measures of Disadvantage  
and/or Potential Stress

	Non-truants N=48	Truants N=31	t df=77
Mean	8.08	7.58	.85 NS
s.d.	2.6	2.5	

Appendix 10 Table XV Frequency of Measures of Disadvantage and/or Potential Stress

	Non-truants N=48	Truants N=31	Log Likelihood Ratio df=1
	PER CENT		
0 - 4 items	6.25	19.3	3.13 NS
5 - 8 items	50	32.3	2.45 NS
$\geq 9$ items	43.75	48.4	.16 NS

Appendix 10 Table XVI Mean Number of Behaviour Problems Reported by Parents

	Non-truants N=47	Truants N=30	t df=75
Mean	7.09	7.9	.88 NS
s.d.	4.4	3.2	

Appendix 10 Table XVII Frequency of Behaviour Problems Reported  
By Parents

	Non-truants N=47	Truants N=30	Log likeli- hood ratio df=1
	PER CENT		
0 - 5 items	42.6	16.7	5.93 $p < .01$
6 - 10 items	44.6	66.6	3.61 NS
$\geq 11$ items	12.8	16.7	.22 NS

Appendix 10 Table XVIII Children with Interests Outside the Home

	Non-truants N=43	Truants N=28	Log likeli- hood ratio df=1
	PER CENT		
Per cent of children with outside interests	14.0	25	1.36 NS

Appendix 10 Table XIX Children's Accounts of Contributory Factors at School

	Non-truants N=43	Truants N=28	Log Likeli- hood ratio df=1
	PER CENT		
Bullying or teasing	30.2	32.1	.03 NS
Fear of teacher	39.5	57.1	2.12 NS
Extreme dislike of any particular subject	48.8	53.6	.15 NS
Boredom - child feels lessons are irrelevant to his needs	32.6	50	2.15 NS
Sense of academic failure	53.5	53.6	.00 NS
Difficulty with social relationships with other pupils	32.6	35.7	.08 NS
Anxiety/self consciousness related to sexual development or relationships	18.6	10.7	.84 NS

Appendix 10 Table XX Mean Verbal Scale I.Q.

	Non-truants N=43	Truants N=28	t df= 69
Mean Verbal Scale I.Q.	88.40	86.5	.52 NS
s.d.	15.7	13.5	

Appendix 10 Table XXI Children's Mean Scores on Health Questionnaire

	Non-truants N=23	Truants N=24	t df=45
Mean	5.30	6.5	1.08 NS
s.d.	4.0	3.6	

Appendix 10 Table XXII Pupils Scoring at or above Criterion on Health Questionnaire

	Non-truants N=23	Truants N=24	Log Likeli- hood ratio df= 1
	PER CENT		
Score $\geq$ 6	39.1	54.2	1.07 NS