



# School Nurses' Role in Combating Chronic Absenteeism

School attendance affects a student's academic achievement. Current data suggests that about one in three children miss more than a month of school for various physical, social, economic, environmental, and health reasons (Balfanz & Byrnes, 2012). Chronic absenteeism is commonly understood as missing 10% or more school days, which generally equates to missing at least a month of school (Balfanz & Byrnes, 2012). School nurses, important members of the school team, address chronic absenteeism.

## School Nurses Reduce Chronic Absenteeism by:

- Outreaching to students/families to meet their individual needs;
- Helping student/family access to needed physical or mental healthcare providers;
- Ensuring students feel safe at school;
- Providing student and family support during the school day;
- Advocating for school-wide approach to addressing chronic absenteeism;
- Encouraging utilization of reporting systems for better data collection;
- Conducting parent/caregiver and student classes on health topics; and
- Addressing chronic tardiness, early dismissals, and class absence; in addition to chronic absenteeism.

## Examples from the Field: School Nurses' Impact on Chronic Absenteeism

### Outreach

**Samara**, a school nurse in a high school, reviews a list of incoming 9<sup>th</sup> graders each year. Every student is assigned a weighted score that reflects 37 risk factors. Her goal is to individually meet with all students who are identified as homeless/transitional housing; all students having Individualized Education Plans; and the top 50 academically at-risk students with health barriers to learning. During these meetings, Samara works with the family to sign the student up for the school-based health center, arrange appointments with a mental healthcare therapist, make vision and dental referrals, or problem-solve other issues. By reaching out to students at risk, Samara found students not attending school due to homelessness, depression, or anxiety issues; for example, one student was avoiding a gang he was trying to leave. Once Samara identified the root concerns, she worked with the students and their families to connect them with the support needed. She also worked with a recent kidney transplant patient by setting up home/hospital instruction to maintain a connection with the school during the recovery to make the transition back to school easier.

### Team Approach

**Terri**, a school nurse in an elementary school, is a member of the Attendance Committee. She works with the administrators, counselor, family support worker, reading intervention teacher, and others to outreach to students missing school. She is made aware of students who are chronically absent and,

therefore, outreaches to the parents with whom she expresses concern and develops a plan of action with them. Teri monitors these children checking in with them daily and providing small incentives to show support to students and family.

### Addressing Social Determinants

**Donna**, a school nurse in a high school, is also a member of the Attendance Committee. She outreached to a student who had missed weeks of school learning that the student had juvenile arthritis, was unable to afford her medication, and had difficulty being on time for the morning bus. If she missed the bus, she had no other transportation to school because of her single mother's work schedule. Donna worked with the school to provide appropriate accommodations, helped the student and her mother obtain the necessary medical treatment and medications, and assisted in developing a plan when the student missed the bus. These efforts resulted in the student returning to class.

### Family Support

**Kathleen**, a school nurse responsible for multiple schools, works with the school counselors who alert her when students are continually absent. The school nurse then contacts the parents/caregivers. She has also made home visits to get to the root of the individual problem. Often, she learns the absences are due to undiagnosed or under-treated asthma. She provides education classes to caregivers (parents, guardian, grandparents, and older siblings) explaining common signs of asthma and helps facilitate a healthcare provider visit or health insurance to cover medications, if necessary. Whenever possible, she conducts individual counseling sessions when parents come to the school to pick up their student. In addition, she educates the school community via the school newsletter and holds parent education classes at school on topics of keeping healthy. Success rates include one student who went from 85 days absent to 25 or fewer in subsequent years. Another student, once properly diagnosed and treated for asthma, had almost no absences. More importantly, once students had medications in the school, the students increasingly remained in class; the parents/guardians remained at work; and the early dismissal rate decreased as well.

### Policy Enforcement

School nurses in a rural district participated in a district-wide, state-run program. First, policies regarding attendance were evaluated, changed, and enforced. School nurses tracked health office visits using the existing statewide data system and followed up with children who were absent for health reasons. Through these combined efforts, the average daily attendance rate increased from 88% to 96% within a year, and the number of students with a known health condition and six or more absences decreased by nearly 50% in just two years. For certain students, the most influential change has come from the new policy that the school nurse must clear students before they are allowed to leave school early.

**School nurses** are key members of the education team and leaders of school health who keep students healthy, safe, and ready to learn.

### **References**

Balfanz, R., & Byrnes, V. (2012). *The importance of being there: A report on absenteeism in the nation's public schools*. Johns Hopkins University Center for Social Organization of Schools. Baltimore, MD.