

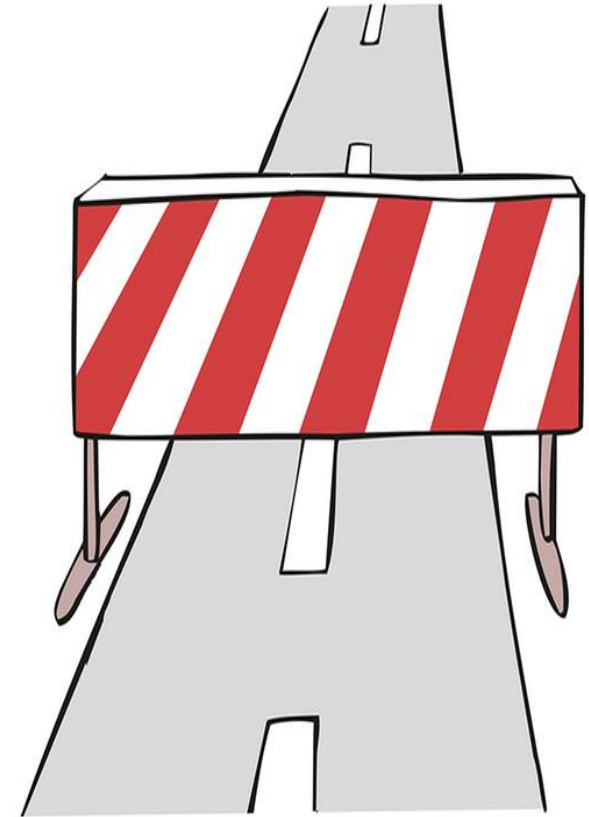
Bridging the gap: Fostering transitions for youth with severe absenteeism

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Agenda

1. School Attendance Problems (SAPs) in Essen, Germany: Barriers to treatment access & within the treatment process
2. Systems level: Establishment of effective pathways & structures for SAPs
3. Treatment level: Implementation of adaptive interventions & smooth transitions
4. Summary & future directions

1. School Attendance Problems (SAPs) in Essen, Germany: Barriers to treatment access & within the treatment process

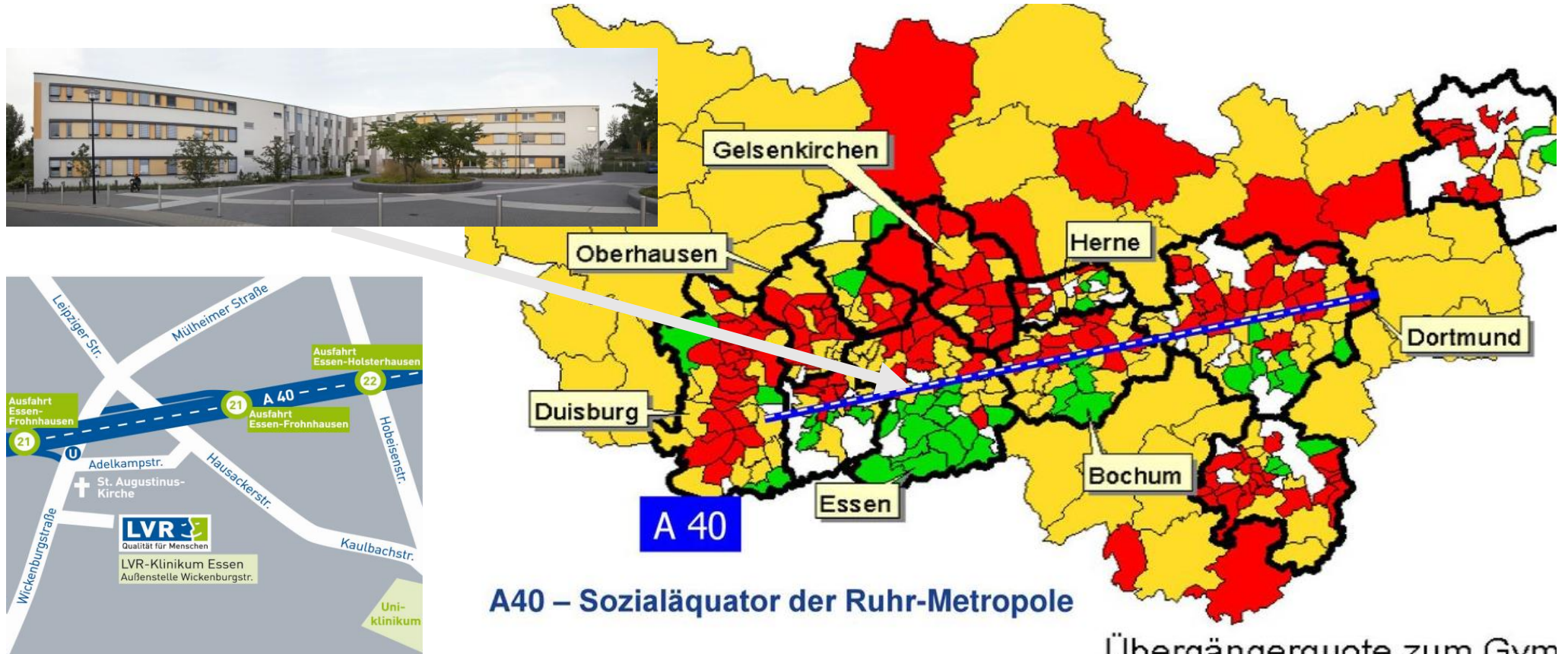


Essen, Germany

- Part of the “Ruhrgebiet”, the largest urban area in Germany
- “Deindustrialization”: Many communities with high unemployment rates, social problems, poverty,...



Highway A40: The “social equator” of the Ruhrgebiet



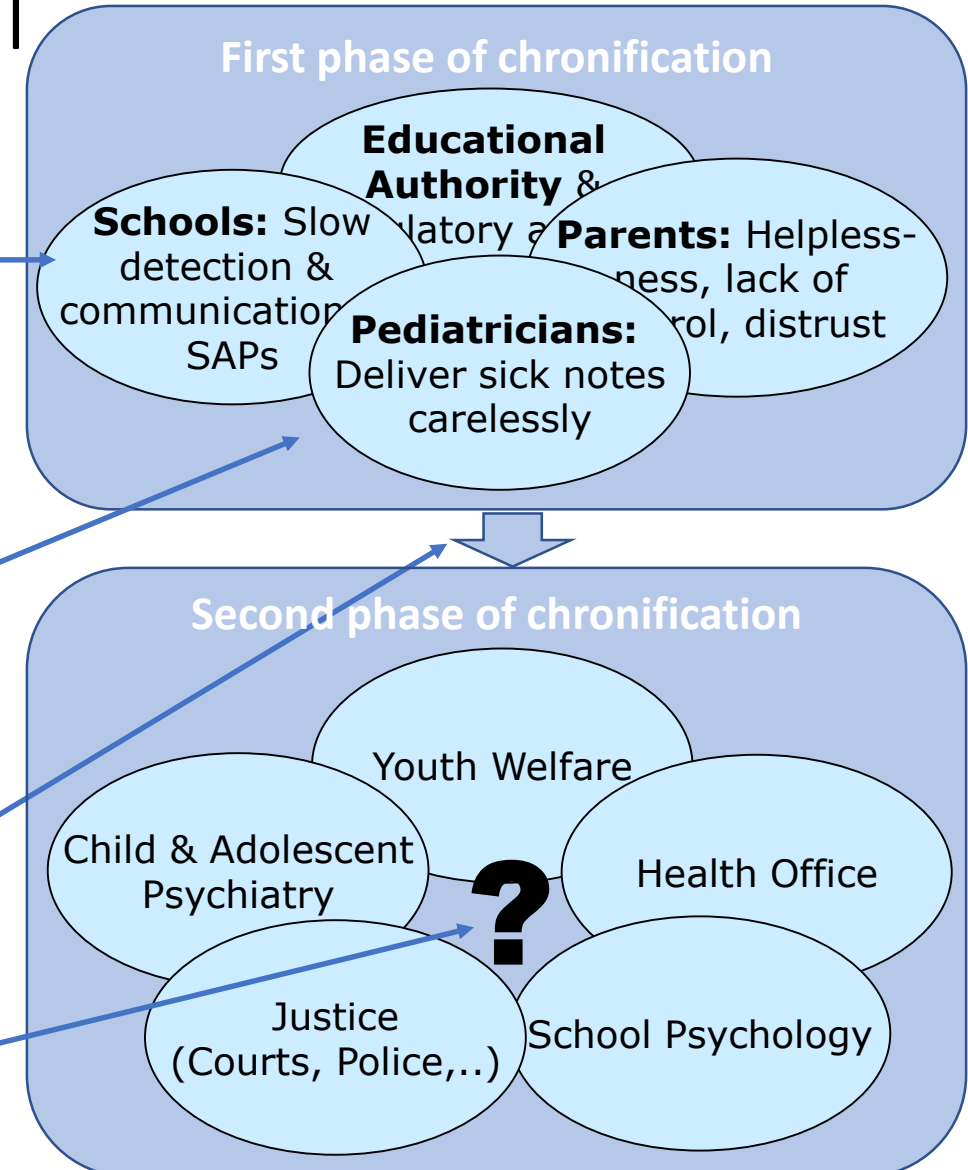
Barriers to treatment: Systems level

- School dropout in Essen 2017: 8,7% (Germany: 6,9%, Caritas, 2019)
- “Hard to reach” families with limited resources, schools with high numbers of socially disadvantaged youth

- Lack of information about excused SAPs
- Educational Authority & Regulatory Agency: Slow processing of regulatory offense procedures

- Late detection of SAPs and initiation of contact to the youth/health care system

- Responsibilities unclear: SAP=issue for schools? Youth welfare? Psychiatry? SAP as a “hot potato”



Barriers within the treatment: Outpatients

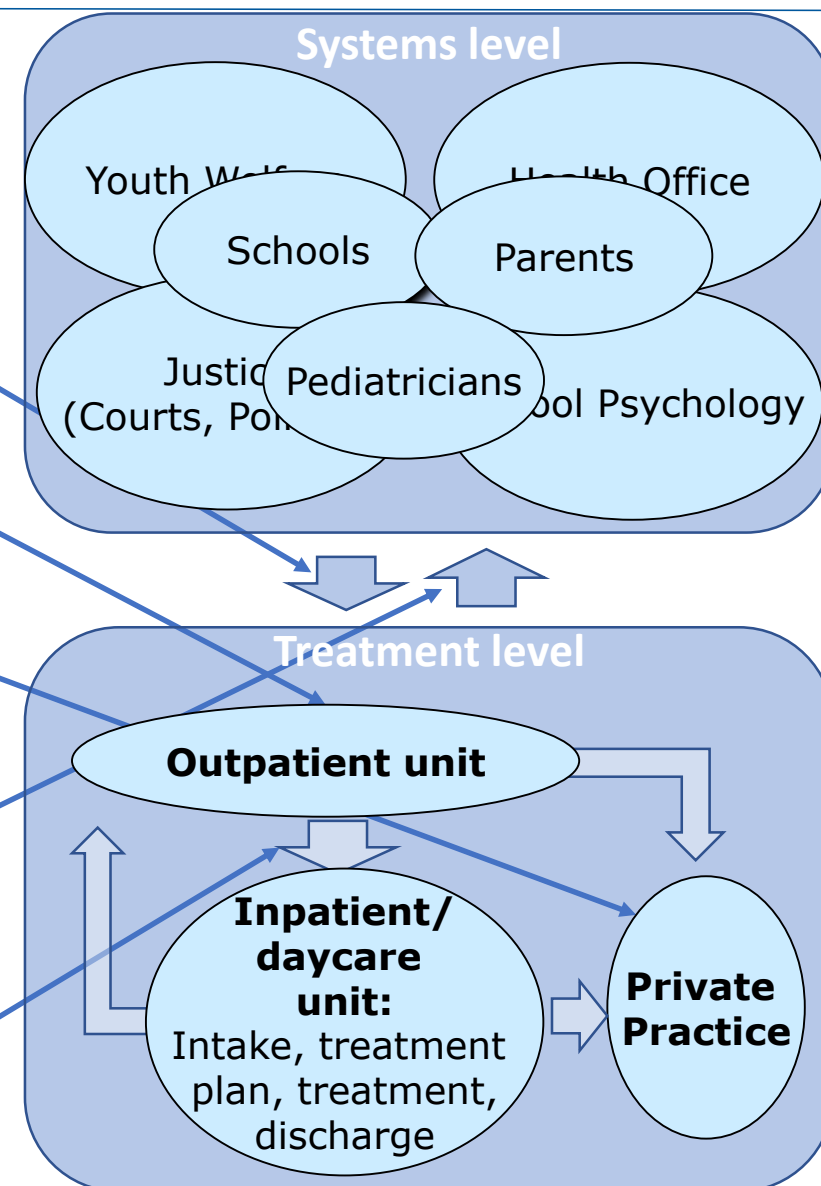
Waiting time for the first contact: 6-8 weeks

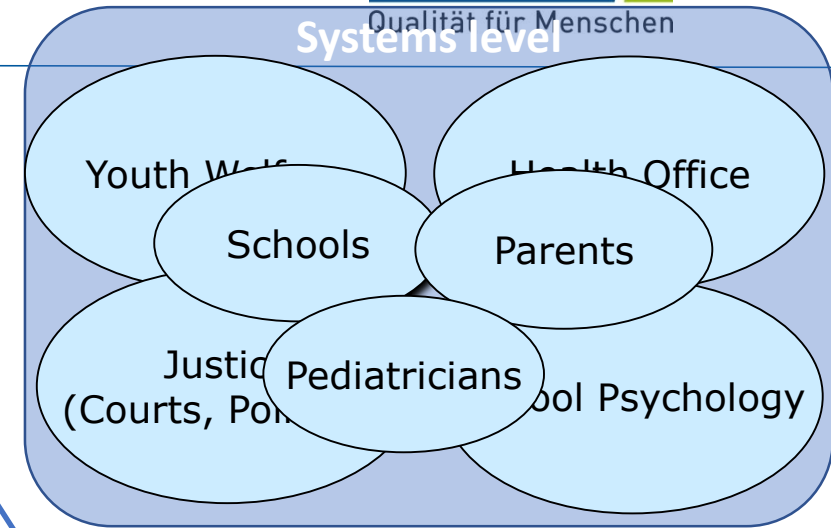
Limited own resources for outpatient treatment

Waiting time for treatment in private practice: up to 6 months

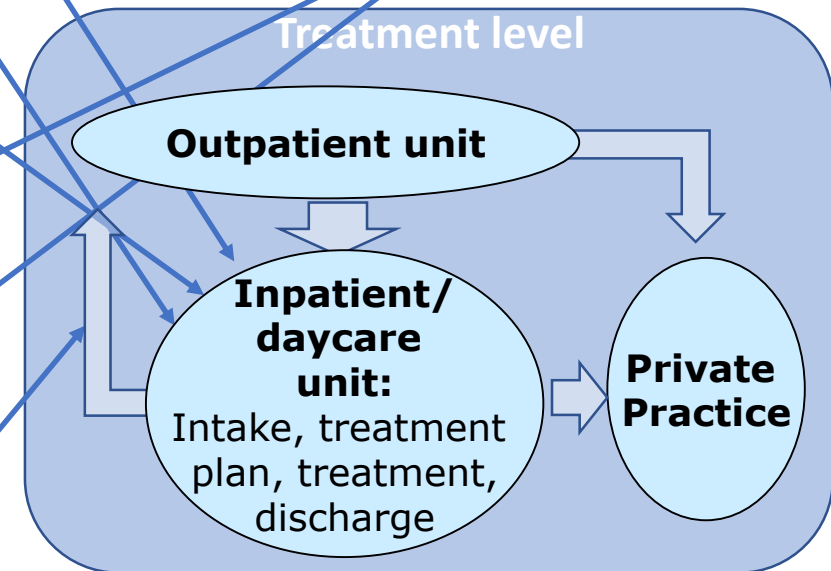
Long waiting time for the parallel implementation of non-psychiatric interventions

Waiting time between first contact and intake: 2-4 months, in the meantime only limited support





Treatment level



Barriers within the treatment: Daycare & inpatients

Intake fails: Patients afraid of the ward or not motivated

Treatment abortion: Incompliance, homesickness, mismatch between patients' expectations and treatment plan

Not enough treatment modules for the whole SAP spectrum

Not enough preparation: school re-entry fails

Non-psychiatric interventions for post-treatment not implemented at discharge

Discontinuity (new outpatient therapist); waiting time until first contact: 6-8 weeks

2. Systems level: Establishment of effective pathways & structures for SAPs



Municipal advisory board for SAPs

- Members: Youth Welfare, School & Community Administration, School Psychology, Child & Adolescent Psychiatry,...
- Development of a guideline for SAPs, available at <https://www.essen.de/schulvermeidung>
- Information for schools & educational authority: Monitoring of SA, early reactions to SAPs, fast processing of regulatory offense procedures
- SAP-specific pathways through the youth/health care system are explained
- SAP-workshops for teachers & pediatricians: Psychosomatic complaints, sick notes,...

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Essener Leitfaden zum Umgang mit schulvermeidendem Verhalten

Der folgende Leitfaden zum Umgang mit schulvermeidendem Verhalten richtet sich in erster Linie an die pädagogischen Fachkräfte der Essener Schulen. Im Mittelteil erhalten Sie einen Überblick über die wichtigsten Aspekte und Handlungsschritte eines erfolgreichen schulinternen Umgangs mit Schulvermeidung. In der rechten Spalte finden Sie Ansprech- und Unterstützungspartner für Schulen sowie Materialvorlagen für Ihre Dokumentation, ergänzt mit konkreten Tipps.

1. Wie kommt es dazu?

Ursachen und aufrechterhaltende Bedingungen

Für schulvermeidendes Verhalten gibt es in der Regel nicht die eine Ursache. Meist führt das Zusammenwirken schulischer, familiärer und individueller Risikofaktoren zum Entstehen und oft auch zur Aufrechterhaltung dieses Verhaltens.

- Eine Handreichung zu **schulischen Faktoren** und Tipps für den schulischen Umgang finden Sie [hier \(pdf, 974 kB\)](#).
- Zu typischen **familiären Risikofaktoren** für schulvermeidendes Verhalten erfahren Sie [hier \(pdf, 29 kB\)](#) mehr.
- Über die unterschiedlichen Formen von schulvermeidendem Verhalten und begünstigende **psychische Faktoren** erhalten Sie [hier \(pdf, 925 kB\)](#) weitere Informationen.

2. Worauf ist zu achten?

Hauptwirkfaktoren im Umgang mit Schulvermeidung

Generell gelten als Hauptwirkfaktoren im Umgang mit Schulvermeidung:

- wohlwollende Grundhaltung
- frühzeitiges Erkennen der Schulvermeidung
- sofortige Rückmeldungen an Schüler/Eltern über Fehlzeiten
- zeitnahes klärendes Gespräch mit Schüler/Eltern über Ursachen und Maßnahmen
- schnelle, frühe Interventionen
- verbindliche Beziehungen, das heißt "am Ball bleiben"
- individuell abgestimmtes Fordern und Fördern

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Bildung macht Zukunft

Auf einen Blick:



[Ansprechpartner / weitere Unterstützung](#)

Material:

[Das Beratungsgespräch \(pdf, 849 kB\)](#)

Runderlass:

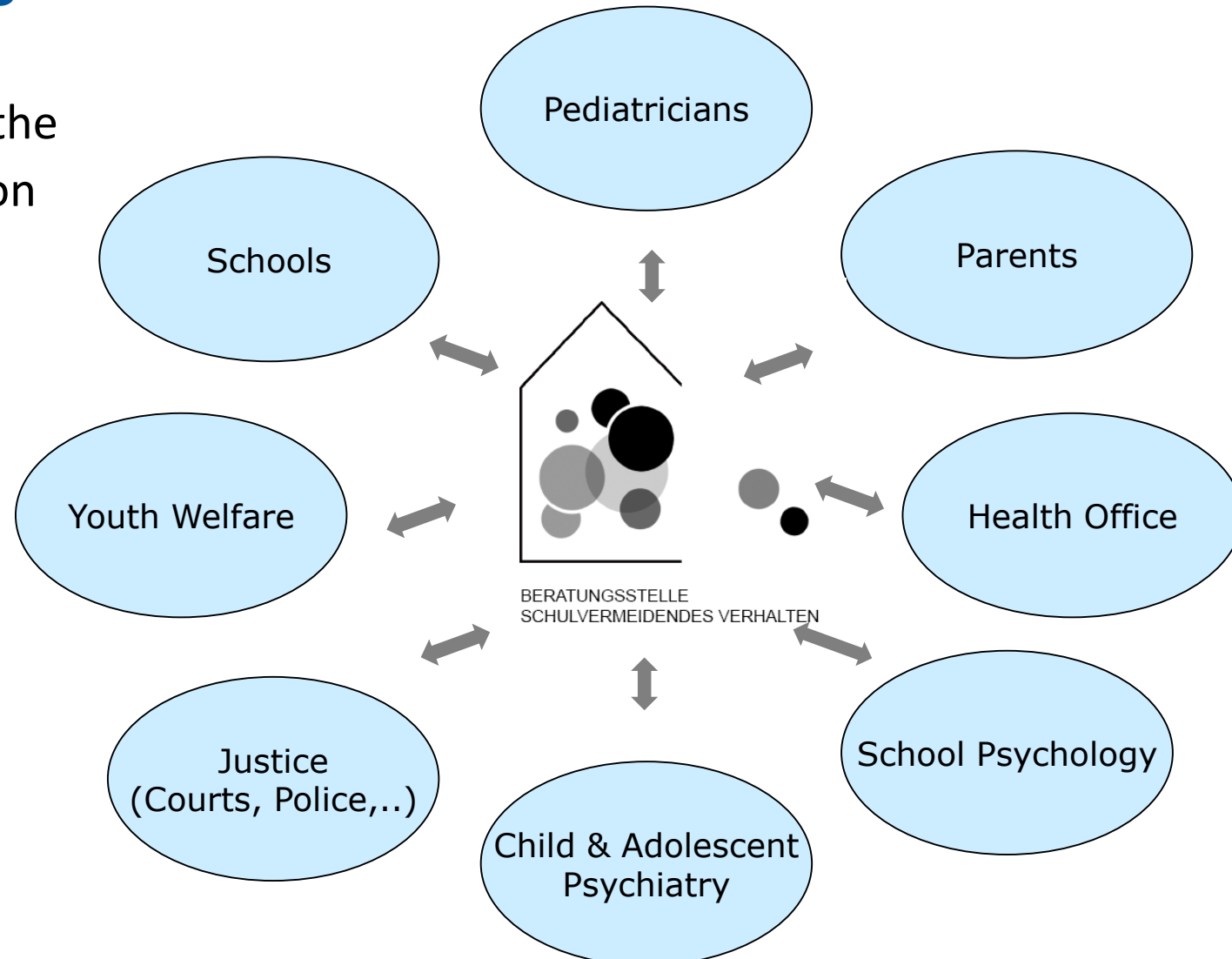
[Überwachung der Schulpflicht \(pdf, 87 kB\)](#)

weitere Informationen:

- [Leitfaden Bielefeld](#)
- [Leitfaden Herne](#)
- [Leitfaden Oberhausen](#)
- [Leitfaden Hessen](#)
- [Leitfaden Düsseldorf](#)

Counselling center for SAPs

- Tasks: Clearing; paving the way through the youth/health care system; harm reduction
- Therapist, pedagogue, teacher...
 - explore SAP-relevant factors
 - develop an "action plan" & first steps towards resumption of regular school attendance
 - nominate a case manager/institution according to the nature of the SAP
 - support the transition to the case manager/institution



3. Treatment level: Implementation of adaptive interventions & smooth transitions

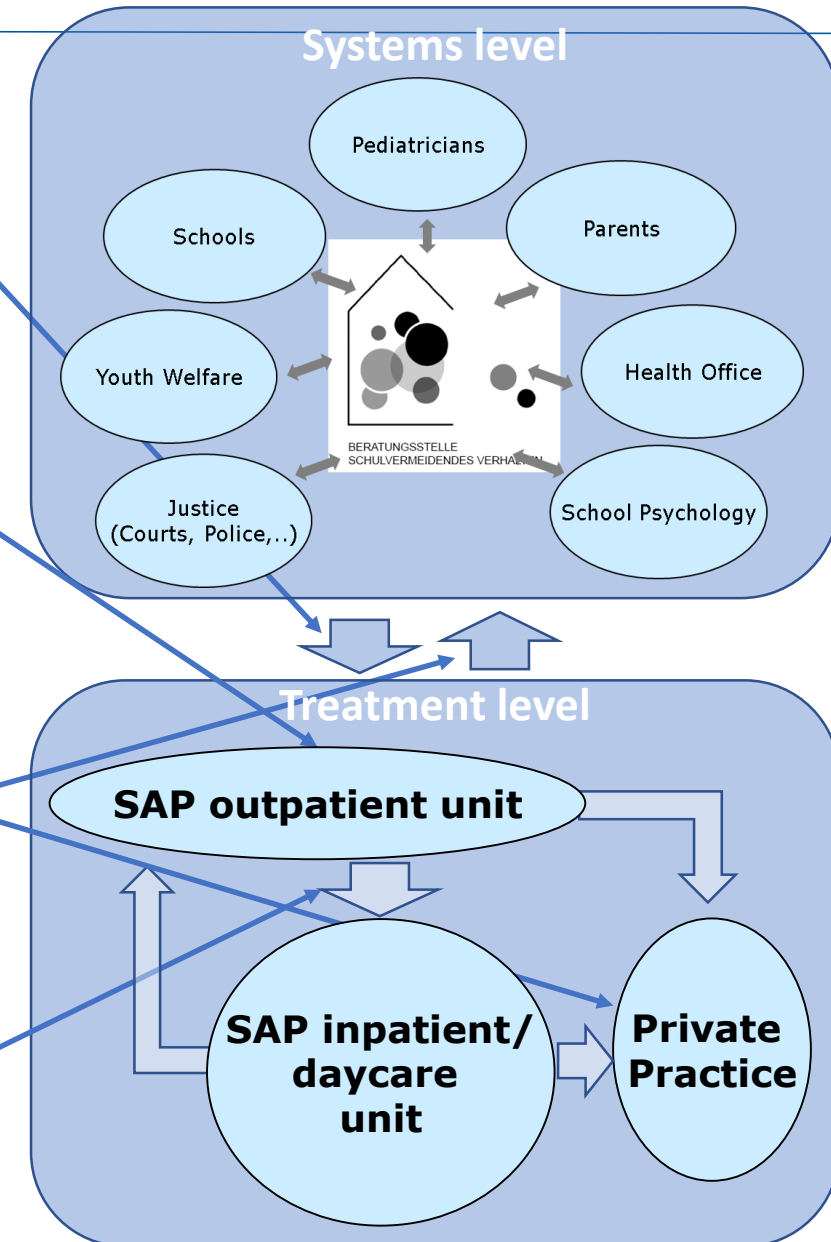


Specialized SAP outpatient unit (Knollmann et al., 2009)

- First contact 2-4 weeks after referral
- Psychiatric exploration & SAP-specific psychological testing
- Psychoeducation & counselling: Monitoring of school attendance, contingency management,...
- Treatment framework, e.g. Plan A: Gradual resumption of school attendance; Plan B: Inpatient treatment
- Initiation of non-psychiatric interventions
- Cooperation with private practice: Reduced waiting time

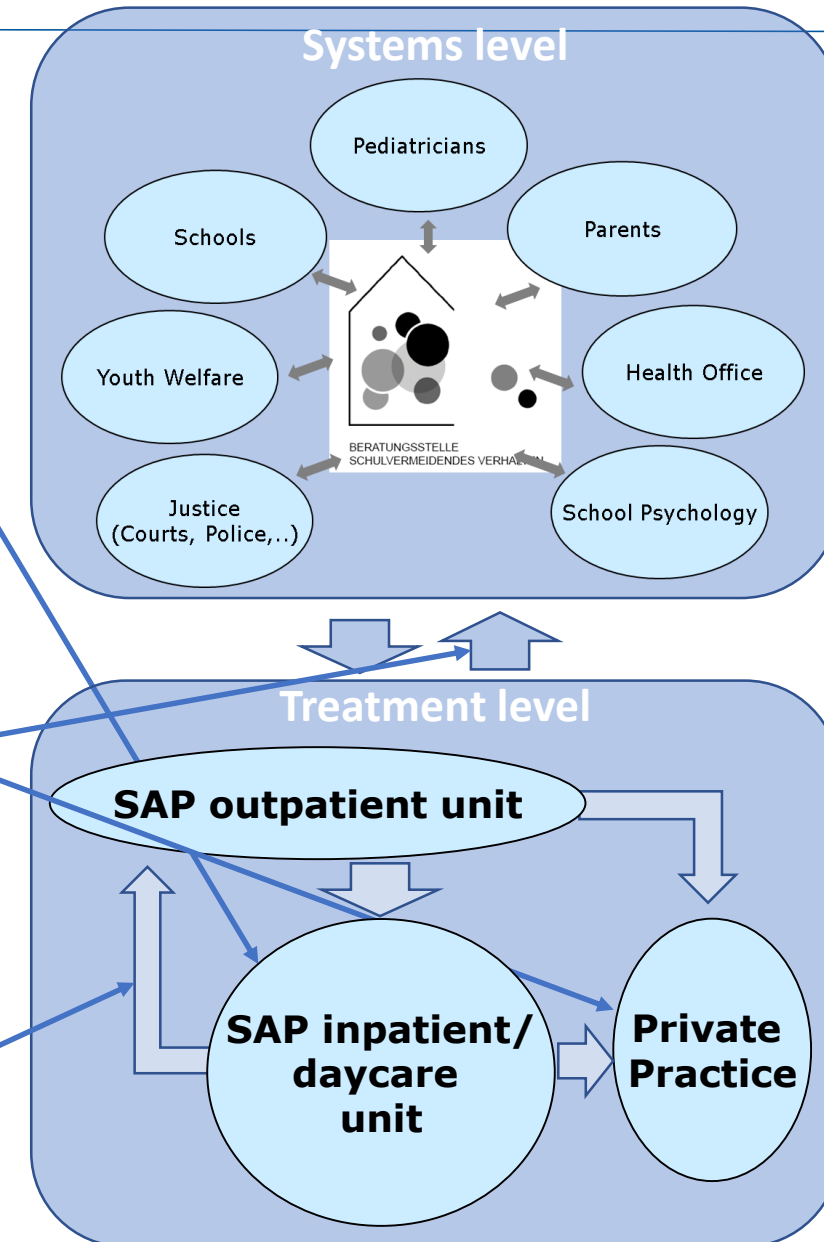
Until intake or during outpatient treatment:

- Hospital school
- Outreach team: Everyday structure and activities, accompaniment to school, preparation for intake



Specialized daycare & inpatient unit for SAPs

- Intake: Standardized management of separation anxiety
 - Development of a joint problem model and treatment plan
 - SAP-specific, multi-modular, & multi-professional treatment manual, including motivational interviewing (Reissner et al., 2019)
-
- Cooperation with network partners (e.g., youth welfare), installation of post-treatment support
 - Preparation & implementation of gradual reintegration into school
-
- Follow-up-contacts: Relapse prevention, booster sessions
 - Support from the outreach team if necessary
 - Hospital school until the transition to new school if necessary



Hospital school: Ruhrlandschule



Modular Manual for youth with SAPs & psychiatric disorders

- Developed during EU-funded project “Integration of youth and young adults into school and work”
- Multi-professional modules for SAP- “syndromes”: Interventions on the “problem”-level
- RCT: Effective increasement of SA, but only superior to TAU regarding reduction of depressive symptoms (Reissner et al., 2015)

MT Modules: Indications, Structure, and Content

Cognitive Be
Indications
Frequency/Se

Content

Family Coun
Indications
Frequency/Se
Content

School Coun
Indications
Frequency/Se
Content

Psychoeduc
Indications
Frequency/Setting
Content



All youth participate in at least three sessions.

After three obligatory sessions, participation in nine additional sessions is voluntary; Group setting.

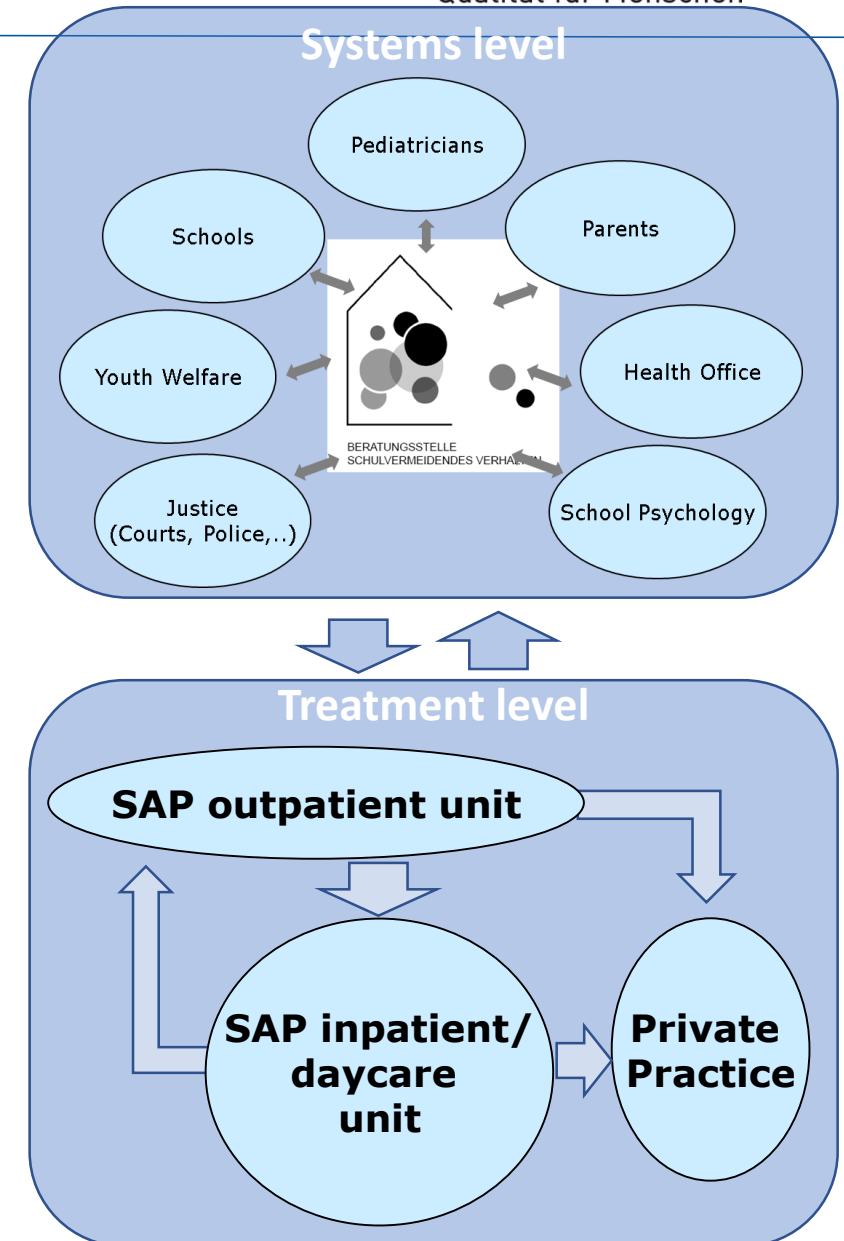
Physical training blended with team-building, enhancing self-efficacy, social support, motivational self-talk, mindfulness.

4. Summary & future directions



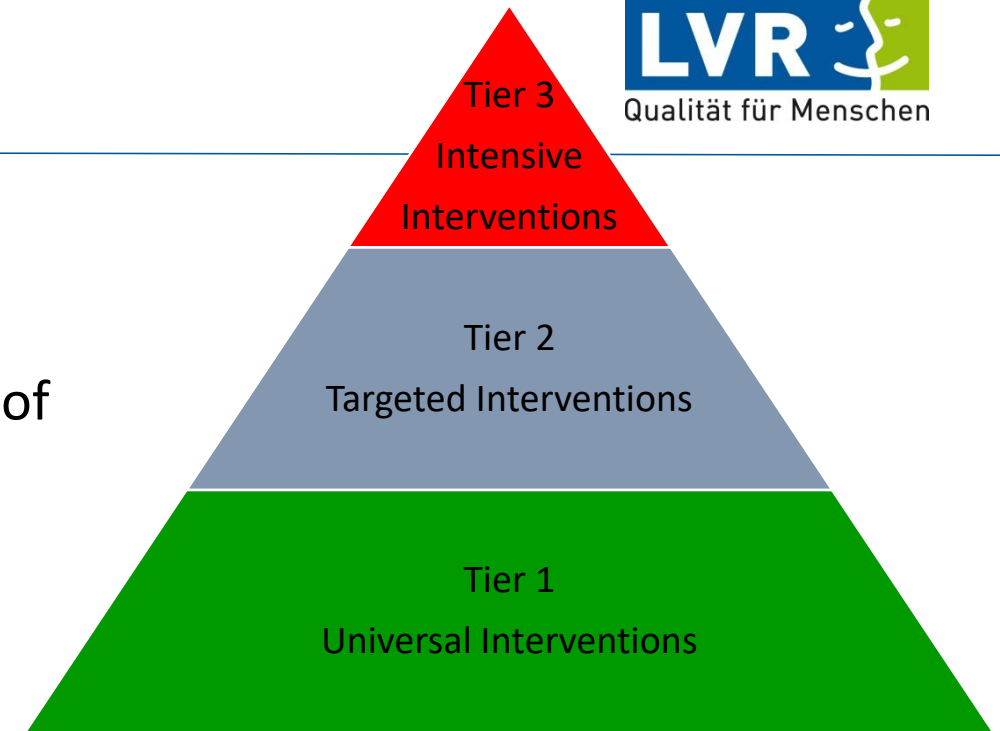
Summary

- Youth with SAPs are prone to system-immanent chronification and disorder-immanent treatment abortion
- SAPs need local solutions, involving all relevant actors
- **Systems level:**
 - Increased awareness of SAPs
 - Defined pathways & clear responsibilities
 - Cooperation between all systems involved
- **Treatment level:**
 - SAP-specific interventions and structures
 - Measures against treatment abortion
 - Prompt transitions & personal continuity
 - Multi-modular & multi-professional approach



Perspectives

- **Implementation of School Attendance Teams:**
 - Early detection of emerging SAPs using the Inventory of School Attendance Problems (ISAP, Knollmann et al., 2019)
 - Adaption of the treatment modules for school-based tier 2 interventions
- **Implementation of inpatient schema therapy:**
 - Further reduction of treatment abortion
 - Fostering therapy compliance and effectiveness for youth with “complicated” SAPs
- **Cooperation across borders:**
 - Comparing SAPs in border regions in the Netherlands and in Germany



(Kearney & Graczyk, *Child and Youth Care Forum*, 2014)

Before or in school/school time...	Applies to me				That's why I miss school/attending school is hard for me			
	Never	Some-times	Often	Most of the times	Never	Some-times	Often	Most of the times
...I feel sad.	0	1	2	3	0	1	2	3
...I'm afraid that I might have to say something in front of the whole class.	0	1	2	3	0	1	2	3
...I feel unhappy because I only have a few friends at school.	0	1	2	3	0	1	2	3

Thank you for
your attention!