

# Profiles of School Refusal among Neurodivergent Youth

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# Background

## School refusal

- Verbal refusal
- Physical refusal
- Distress and/or difficulty attending school

## May result in

- Tardiness
- Partial absences
- Complete absences
- Or none of the above

# Prevalence of School Refusal

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- ~35% of non-autistic youth
- >50% of autistic youth
- Even greater risk of school refusal in autistic youth *with ADHD*
  - Parent report of school refusal significantly increases to ~68%



# Correlates of School Refusal

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- School refusal has been identified as a precursor for absenteeism
- Associated with
  - Mental health concerns (e.g., anxiety, depression)
  - Sleep changes/disturbances
  - Physical health concerns (e.g., headaches, heart palpitations)
  - Various 'at-home' factors (e.g., SES, marital status of parents, etc.)
- In neurodivergent youth, specifically
  - Bullying
  - Individualized Education Plan (IEP)-related services (i.e., behavior support plans & 1:1 aide)
  - Externalizing behaviors

## Current Study

***Primary Aim:*** Examine school refusal profiles among youth across a spectrum of neurodivergence

***Hypothesis:*** Multiple profiles of youth varying in both neurodivergence, and school refusal will emerge



# Methods

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- N = 508 ( $n_{U.S.} = 481$ ;  $n_{International} = 27$ ) parents of neurodiverse children
- Youth:
  - 6.0 - 17.8 years old ( $M = 11.55$ ;  $SD = 3.45$ )
  - White, non-Hispanic (67%), Male (69%)
  - Public School (70%)
- Parents:
  - 20 – 71 years old ( $M = 40.59$ ,  $SD = 8.49$ )
  - White, non-Hispanic (85%), Women (95%)

# Measures & Variables

## Social Responsiveness Scale, Second Edition (SRS-2)

- Autism-related traits

## Vanderbilt ADHD Diagnostic Parent Rating Scale (VADPRS)

- ADHD-related traits
- Internalizing symptoms

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- Externalizing behaviors
- Academic and social support needs

## Assessment of Bullying Experiences (ABE)

- Frequency of bullying experiences

## GO4KIDDS Brief Adaptive Scale

- Social communication support needs
- Self-care support needs

## Demographic Questionnaire

- **School refusal frequency**
- Time spent in general education

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- If they receive IEP-related services/# of services
- School setting
- Range of other descriptors (e.g., age, race, SES, parental marital/employment status, etc.)
- School refusal reasons



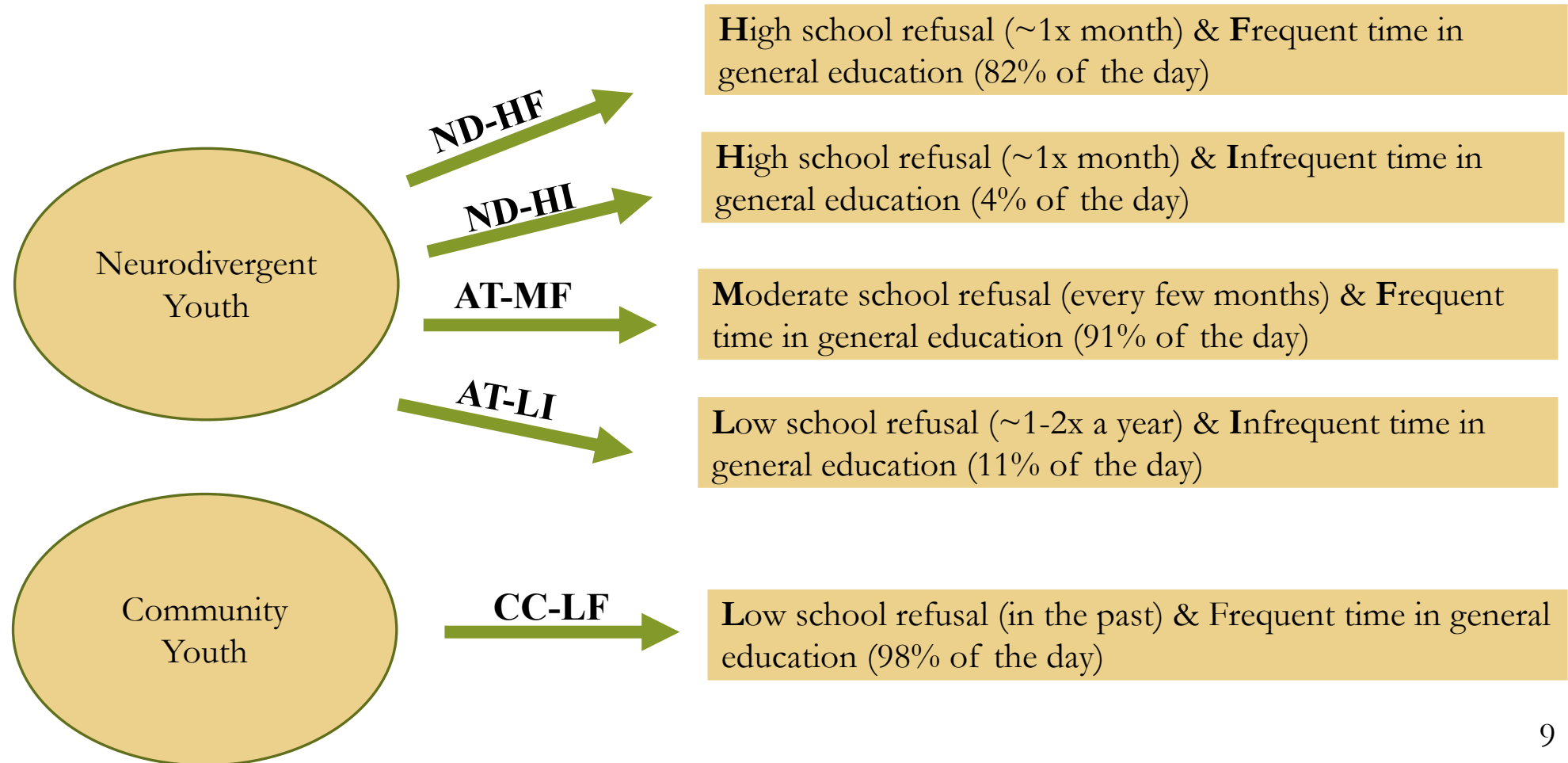
# Data Analytic Plan

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- Latent Profile Analysis (LPA)
  - Identifies subpopulations or ‘latent profiles’ based on response patterns of observed profiles
  - Strong exploratory approach
  - Both categorical *and* continuous variables
- Post Hoc Analyses
  - Further differentiation of profiles
  - Scheffe’s adjustment was used for multiple comparisons.



# Results - 5 Profiles Identified



# Results – School Factors

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- **Support Needs**
  - ND-HI & ND-HF had higher academic, self-care, and social support needs compared to each of the other profiles ( $t$ 's > 3.09, adj.  $p$ 's ≤ .05)
- **Bullying Victimization**
  - ND-HF experienced more bullying victimization compared to the other profiles ( $t$ 's ≥ 3.23, adj.  $p$ 's ≤ .035)
    - ND-HI & AT-MF youth experienced significantly more bullying than AT-LI or CC-LF youth ( $t$ 's ≥ 4.75, adj.  $p$ 's < .001)



# Results – Behavioral Profiles

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- **Internalizing Symptoms**
  - ND-HF & ND-HI had internalizing symptoms at or above screening cutoffs
    - More than AT-LI or CC-LF youth (Int:  $t_s \geq 5.81$ , adj.  $p$ 's < .001), which did not differ
  - AT-MF youth had internalizing symptoms below screening cutoffs
    - More than AT-LI or CC-LF ( $t_s \geq 3.87$ , adj.  $p$ 's  $\geq .005$ )
- **Externalizing Behaviors**
  - ND-HF & ND-HI had externalizing behaviors at or above screening cutoffs
    - More than AT-LI or CC-LF youth (Ext:  $t_s \geq 7.10$ , adj.  $p$ 's < .001), which did not differ
  - AT-MF youth had externalizing symptoms below screening cutoffs, that did *not differ* from AT-LI or CC-LF ( $t_s < |1.95|$ ; adj.  $p$ 's  $\geq .228$ )

# Discussion & Implications

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- Consistent with previous findings, ND youth with more ADHD-related traits are more likely to engage in higher rates of school refusal
- ND youth with high school refusal were also more likely to have more autism and ADHD related traits, greater internalizing and externalizing symptoms, most academic, self-care, and social support needs, and a higher frequency of bullying victimization
- Findings may highlight the need to look beyond just clinical thresholds or diagnostic classifications when determining risk for school refusal
- Further, no profile emerged that was comprised of only international youth, and international youth were distributed fairly evenly across all 5-classes



# Limitations

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- All measures were collected online via parent-report
- Prevalence rates of school refusal and bullying within this sample may not reflect the broader community or neurodivergent populations

# Future Directions

- Findings provide important insight into the profiles of ND youth at-risk to engage in more school refusal
- Identify these youth may allow for earlier intervention and prevention measures to take place
- Next steps:
  - Consider how different reasons for school refusal interface with the support needs of ND youth
  - Incorporate multimethod assessment to protect against bias (e.g., child-, teacher-, observational)





# Questions & Thanks

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- Questions?

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