

Addressing Education Isolation



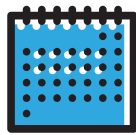
The issue

COVID-19 highlighted the significant impact that education gaps and lack of access to peers has on the current generation of Australian children.^{1,2} However, there is a growing cohort of children who miss school as a result of chronic physical or mental health disorders that are still being overlooked. The scale of these effects and the consequences faced by students, families, and education systems through schools, are critical and cannot be disregarded any longer.



**Up to 30% or
~1.2 million**

school students across Australia may be facing an illness **serious enough to affect their education and attendance**^{3,4} with 14% having a mental disorder.⁵



**~70,000
students**

face chronic school absence because of a physical illness alone^{6,7} with estimates finding that **40% of these children are missing at least 12 or more months of school.**⁸



An Australian study published in 2021 found

“children hospitalised with a chronic condition underperform academically across literacy and numeracy domains at each grade” and are 3x more likely to fall behind.⁹

The pandemic increased the number of children missing school long term,^{10,11,12} and at a time of severe teacher shortages and stress, it is critical education systems take action to mitigate serious risks by finding proven and practical solutions to keep our most vulnerable children connected to school.¹³

Policy impacts

Despite equity and inclusion being enshrined by Australian law, the Disability Standards for Education and ministerial declarations, there is no clear policy or guidelines for schools to provide support for students with serious illness to access their classes while they are isolated at home or in hospital.

In fact, ~70% of students with serious illness may not have an individual education plan from their school.¹⁴ Non-compliance with the law and a gap in support continue because of a blind spot in which schools fail to connect illness with the Disability Standards for Education to trigger action.¹⁵ Wellbeing suffers.

This problem was validated by the pandemic's restriction on all children's access to school, children's mental health, parents' anxiety, and increasing pressure on principals and teachers. Previously, it was unseen, partly because our students who are absent through serious illness are often overlooked by most data collection or even explicitly excluded.¹⁶ This is now a frontier issue.

Economic and social impacts

This issue crosses state and territory borders and health and education systems. There is “no safe threshold for absence” from school. A child who misses more than 10 school days per semester, or has less than 90% attendance, pays penalties in academic and mental health outcomes.^{17,18,19}

For example, these students face increased risk of academic failure, social isolation, poor mental health, school non-completion and lower career attainment.^{20,21,22,23,24,25,26,27} Lack of support also has economic and social consequences for students' families and places burden on mothers who typically carry the load as carers and home educators.²⁸ The issue increases teacher workload.

This education challenge also has a ripple effect on our economy. The lifetime costs of lost productivity from incomplete education amounts to nearly \$1 million per student,²⁹ putting the price tag of inaction into the billions, undoing sizable investments in healthcare, and overstretching existing education, social, financial, and mental health services.

COVID-19 impacts

Variants of COVID-19 have increased chronic school absence for students and teachers alike. Recently, [some schools have returned to remote learning and temporary mask mandates](#) with staff absence rates of 20% (compounding teacher shortages). [Rising school refusal](#), retention at home of [medically vulnerable kids](#) and [long COVID](#) are factors. The removal or inconsistent application of remote learning options across school jurisdictions is creating inequality in access. A strategy for continuity of education while reducing teacher workload is needed.^{30,31}

The opportunity

Strongly linked to long-term prospects, continuity of education through school connection helps nurture sick children's resilience and their identity as learners, and eases deep anxiety about school absence and belonging.^{32,33,34} Despite their illness, these students want to join their peers and learning.

The innovative Seen&Heard initiative is a practical, turnkey solution that provides chronically absent children with interactive access to their classrooms where teachers can “teach once”. Since 2017, it's been tested and data-proven across Australia and backed by extensive media coverage signalling widespread public appeal.

Policy outcomes

Now is the time for Australian education systems to match legislation and technology with clear policy:

- 1 Make ‘students with a health condition’ a priority equity cohort in National School Reforms
- 2 Enhance the school/system evidence base through improved data (e.g., NCCD, ABS, schools)
- 3 Mandate and publish school responsibility to offer classroom telepresence during absence
- 4 Set, train and monitor practice standards for schools, hospitals, and support at home
- 5 Adopt a national ‘health condition’ absence code; set absence thresholds to trigger support.³⁵

In the lead up to the 2022 Federal election, MissingSchool's advocacy triggered identification of a policy pathway to implement **Policy Outcome 5**. Department of Education commenced the process.

Economic and social outcomes

For each additional year of schooling a person completes, their future income rises by about 9-10%.³⁶ Supporting this cohort of students with technology for school connection for an average of just one year has the effect of extending cohort lifetime earnings by over \$9 billion nationally.

Taking into account broader social benefits, additional taxes paid, lower welfare payments, costs of healthcare, social stability and decreased stress on education, social and health systems, the effects on productivity are even greater.³⁷ Then add returns on historical investments in healthcare and treatments.

COVID-19 outcomes

While COVID-19 has put enormous pressure on our health and education systems, it presents an opportunity to make a fundamental change: one that will quickly enable many children facing serious illness to access the same opportunities as their healthy peers and be supported by their teachers and schools through teach-once technologies and services that reduce burden.

Given the palpable pressure COVID-19 has put on families and educators across Australia, health and education sentiment, and the need for physical and mental safety in schools, taking action now is timely and puts attention on much-needed benefits to children, families, teachers and the community.

What can be done right now?

With hardworking options that address the heart of the issue, Australian education systems can improve education and wellbeing outcomes for sick students across Australia who are facing severe school absence. This will increase peer connections, amplify educator responses and wellbeing, reduce burden on families, and inspire people with a new model of care worth billions in productivity gains.

In precedence, state governments implemented specific measures and invested taxpayer funds into fixing educational disadvantage triggered in vulnerable cohorts by the pandemic public health crisis.

There is a similar need for ongoing solutions and practical, socially and economically beneficial alternatives for students with medical and mental conditions needing an equal chance at educational attainment and wellbeing. We can't leave them behind.

Why MissingSchool?

Established in 2012, MissingSchool is a not-for-profit dedicated to raising awareness of the health and educational impacts faced by children who miss school because of critical or chronic illness and treatment – e.g., arthritis, cancer, cystic fibrosis, injury, mental illness and rare diseases. Since 2018, MissingSchool has led innovations and reconnected an estimated 5,940 classmates through robots, and -2,575 teachers have been trained or observing.

MissingSchool supports children who miss school, their families and their teachers through awareness, resources, capacity building, activating technology and significant research. When all students are at school, and learning can continue remotely, a sick student can still access their classroom during absence as the Disability Standards for Education expect. Students can dial in to class, be seen and heard and take their lessons in real-time. Enabling continuous connection to school supports safe relationships, eases anxiety, increases participation, helps learning and attainment, and maintains school attendance.³⁸ Teachers can teach once.

Across Australia, MissingSchool partners with people in families and schools through thousands of interactions, trains teachers, conducts surveys and long-form interviews, and curates critical evidence to guide action (over 5,000 data points drawn). Schools totalling 12,800 teachers and 112,097 students have hosted our technology with all state and territory education systems engaging in the process. MissingSchool has engaged with a national network of hospital schools and service systems to address chronic absence for students experiencing a medical and mental health crisis – Australian education system support will take this to business as usual.³⁹

Sources

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