

# ***Using a Multi-Tiered System of Support to Dismantle the Wicked Problem of Chronic Absenteeism Among Black School-Aged Youth***

**Kashera Guy Robinson**

**Auburn University**

*Chronic absenteeism is a pervasive social issue in the United States that disproportionately affects Black youth, who face higher rates of poverty, systemic inequality, and Adverse Childhood Experiences (ACEs). This manuscript examines the "wicked problem" of absenteeism through an ecological lens, critiquing the deficit-based, punitive models often employed by schools that fail to address root causes such as historical trauma and socioeconomic barriers. Instead, the author proposes the adoption of a Multi-Tiered System of Support (MTSS) framework as a culturally responsive, trauma-informed intervention strategy. Through the use of a case vignette, the article illustrates the practical application of MTSS across three tiers—universal support, targeted intervention, and intensive individualized care—to dismantle barriers to attendance. The work argues for a paradigm shift from policing to public health models, emphasizing the necessity of collaboration between researchers and practitioners to foster resilience and improve educational outcomes for Black students.*

**Keywords:** *chronic absenteeism, Black youth, Multi-Tiered System of Support (MTSS), trauma-informed care, Adverse Childhood Experiences (ACEs)*

## **Introduction**

The phenomenon of children being absent from school is a major social problem in modern society. During the 2015-16 school year, it was estimated that more than seven million children (16% of the student population), missed 15 or more days from school (U.S. Department of Education, 2019), making them chronically absent. Studies have shown that over the course of their lifetimes, students who are chronically absent from school are at greater risk of experiencing a myriad of challenges including substance use disorders, mental health problems, and social-economic difficulties (Kearney, 2008, as cited in Keppens & Spruyt, 2020). Additional compounding factors that impact attendance include individual student well-being, school environment, family dynamics, neighborhood conditions, and poverty (Childs & Lofton, 2021). Among American youth identified as chronically absent, Black youth have the third highest rate (20.5%) compared to Pacific Islander youth, who have the second highest rate (22.6%), and Native American youth, who have the highest rate (26%) of absenteeism (U.S. Department of Education, 2019). Minoritized youth drop out of school at higher rates than Asian and White students: Black youth at 6.5%, Latino youth at 8.2%, and Native American youth at 11% (Ginder et al., 2018, as cited in Mireles-Rios, et al., 2020). Students who drop out of school are more likely to be at greater risk for lessened overall lifetime outcomes including lower earning potential, poor health, higher rates of criminal activity and incarceration, and greater reliance on public aid programs (U.S. Department of Education, 2011).

The terminology used to describe the phenomenon of children being excessively absent from school varies and is referenced in the professional literature in a number of ways including but not limited to: truancy (Hendricks et al, 2010), school refusal (Elsherbiny, 2017), unexcused or prolonged absenteeism (Hagborg et al., 2018), school attendance problems (Kearney, 2019; Lomholt et al., 2020), chronic absenteeism (McNeely et al., 2019),

chronic school absenteeism (Stempel et al, 2017), chronic school refusal (Strombeck et al, 2021), school refusal youth (Dembo et al., 2012), and even persistent school non-attendance (Tobias, 2019). In this manuscript, the term “chronic absenteeism” is used throughout to denote both the adverse impact of missed school days as well as the reminder that, like chronic illness, chronic absenteeism is a result of a confluence of complex social and personal factors, including historical trauma and structural inequality, that results in students’ chronic absence from school.

Chronically absent youth are a public health concern because they are more likely than their peers in school to experience school failure (Keppens & Spruyt, 2020). Perhaps because of such significant trauma exposure, youth of color are more likely to be exposed to behavioral health risk factors, including substance abuse and mental illness (Pumariega et al., 2022). For example, one study found that childhood substance abuse and conduct disorders were linked to trauma and school dropout; moreover, the likelihood for these conditions was greater among African American and Latino participants in comparison to non-Latino White participants (Pumariega et al., 2022). In another survey, 9% of Black youth reported experiencing an episode of major depression within the past year but of that group, less than half of respondents (40%) indicated receiving any type of treatment (Klisz-Hulbert, 2020). Based on these combined findings, it can be inferred that many of these same youth deal with the issue of chronic absenteeism because of experiences with personal and/or familial mental health difficulties. These students are also more likely to experience mental health difficulties and to exhibit antisocial behaviors that often lead to contact with the criminal justice system (Mazorelle et al, 2017). One report shows that approximately 21% of high schools do not have a school counselor; however, Latin American, Asian American, and African American students, the majority of students attending schools without a counselor, are more likely to have a sworn law enforcement officer on duty than a school counselor in these schools (U.S. Department of Education, 2016, as cited in Kearney et al., 2022). One implication of this finding is that underserved youth of color are more likely to be policed than to receive mental health support. Consequently, making greater access to school-based mental health services for this population of youth should be a priority (DeFosset et al, 2017).

## **Literature Review**

### **Contextual Factors Contributing to Chronic Absenteeism**

The intersectionality of transgenerational trauma and poverty experienced by Black youth living in the United States, significantly contributes to the wicked problem of chronic absenteeism within this segment of the student population. A wicked problem is defined as:

A problem, usually social or cultural, that is challenging or impossible to solve either because not enough is understood about the problem, the number of stakeholders involved, the number of varying opinions, the economic burden, or the impact of these problems with other problems. (Plymouth State University, 2023, para. 1)

According to the National Center for Education Statistics (NCES, 2022), 30.2% of K-12 students residing in the U.S. attend schools in urban areas. Many of the areas where these students live also house some of the largest school districts in the country and have some of the highest rates of absenteeism and dropout in the nation. Black communities on average are three times more impoverished than White communities (DeNavas-Walt &

Proctor, 2014, as cited in Blitz et al., 2020). Minoritized students are more likely to be enrolled in high poverty schools (Kearney et al., 2022). The overwhelming majority of students enrolled in urban school districts with high rates of chronic absenteeism are of Black and Latin American descent (NCES, 2022). This reality in part, has been perpetuated in urban communities as a result of federal policies such as redlining (Rothstein, 2017). Redlining was a practice that confined Black residents to certain areas of the community for purchasing and renting homes otherwise deemed as “risky investments” for White buyers, and where property values were subsequently lower in value (Jackson, 2021). In turn, this meant that Black students were relegated to schools with limited resources and higher poverty rates, rates as high as 45% among students attending predominantly Black schools in resource-poor areas (NCES, 2022).

Schools in high poverty areas are more likely to have poorer school climates and difficulty recruiting and retaining teachers whose racial and socioeconomic backgrounds are like those of the students they teach (Kearney et al., 2022). When students live in segregated communities stricken with poverty and despair, where schools are old and dilapidated, and where instruction and disciplinary procedures are given by teachers and administrators who they believe do not care about them, they are more likely to have lower test scores, less likely to attend school, and more likely to drop out altogether (Blitz et al., 2020). Poor schooling is a major factor related to why young Black adults transitioning into the job market are more likely to have difficulty obtaining full-time employment, even with a high school diploma, when compared to their White peers (Smerillo et al., 2018). Students who live in impoverished, underfunded school districts are less likely to have access to school supplies, engaging curricula, and exposure to enriching after-school programs and extracurricular activities (Chang, 2017, as cited in Kearney et al., 2022).

Statistics show that chronically absent Black students frequently miss days because of personal and family concerns, mental health challenges, school-related difficulties, racism, community violence, disenfranchised grief, and because of social justice concerns (Hong et al., 2020; Dutil, 2019). These factors are deeply connected to historical traumas. Childhood traumas, also referred to in professional literature as Adverse Childhood Experiences (ACEs), can be defined as, “traumatic events in childhood related to abuse, neglect, and household dysfunction” (Stempel et al., 2017, p. 838). By some estimates, 48% of children experience at least one ACE at some point during their childhood (Stempel et al., 2017). ACEs occur in a child’s life as a result of maltreatment and include acts to which the child is exposed, including physical, emotional, and sexual abuse and/or neglect, or parental-related factors like death, divorce, imprisonment, abandonment, mental illness, substance abuse, or domestic violence (Stempel et al., 2017). Being a victim of bullying, peer rejection, poverty, and community violence are additional factors that have recently been included when assessing events that traumatically impact a child’s life (Finkelhor et al., 2015). Research shows that exposure to traumatic events disproportionately impacts minority youth. Some of these experiences include historic and generational traumas, experiences with discrimination, family violence, and exposure to community violence (Pumariega et al., 2022).

Black youth as a sub-group have higher rates of ACEs exposure in comparison to their peers representing other races. (Pumariega et al., 2022). One study reported that exposure to recent violence was commonplace for 57% of African American youth surveyed, in comparison to 43% of Latino youth and 33% of White youth (Pumariega et al., 2022). Black youth, in fact, have higher rates of incarcerated parents, are more likely to be robbed, assaulted or threatened in their home communities, and along with Latin American youth, are more likely to experience disenfranchised grief resulting from the death of a peer, when

compared to youth from other racial groups (Dutil, 2019). Other studies have found higher rates of psychopathology and lower rates of academic performance among minority children who experienced previous trauma (Pumariega et al., 2022). Despite these realities, there is still a lack of literature that adequately “addresses traumatic and disenfranchised grief of Black and Latinx students” (Dutil, 2019, p. 80).

Often, Black students who are chronically absent from school hail from impoverished, single-parent headed households where they have been exposed to a greater number of ACEs than their White peers (Maguire-Jack et al., as cited in Kearney et al., 2022). These children often hail from families where ACEs exposure is intergenerational, long-lasting, and very often, more severe than that of their White peers (Ford et al, 2019, as cited in Kearney et al., 2022). In fact, youth with four or more ACEs were found to be at increased risk for higher rates of school absenteeism (Bellis et al as cited in Kearney, 2022). To help compensate for insufficient family income for example, some chronically absent students work outside the home or provide childcare for their siblings so that family members can work (Allison & Attisha, 2019, as cited in Kearney et al., 2022).

These reasons and many others support the need for researchers and clinicians to collaborate to create effective, research-based interventions that can be used long-term in work with chronically absent youth who often hail from traumatic family backgrounds. Chronically absent students are more likely to fall behind in school in comparison to students with more regular attendance. In fact, national data shows that the chances of high school students dropping out of school increases by 20 percentage points for every week they miss school (Mireles-Rios, et al., 2020). Given the scope and severity of chronic absenteeism, the search for solutions should be equally urgent.

### **Gaps in the research to practice pipeline**

School districts around the nation are highly concerned with the issue of chronic absenteeism. However, there are major gaps between the research evidence and practice, or the research-to-practice pipeline, to reduce or even eliminate chronic absenteeism (Green, 2008). School officials are often stumped regarding how to effectively address the issue of chronic absenteeism, as no single intervention has emerged as perfect in the fight against the problem (Keppens & Spruyt, 2020). Current research suggests that youth who are chronically absent benefit most from school-based interventions (Keppens & Spruyt, 2020). Yet, many times, practitioners are disconnected from the evidence-based approaches provided for them to implement by researchers whose scientific findings are sometimes confusing or unrealistic in real-world settings. Practitioners believe they know their clients best and what their needs are (Green, 2008). Researchers, in contrast, believe that they are the “experts” and because they have done scientific research and subsequently published about a problem, practitioners should not question their expertise, but simply implement their findings into practice (Green, 2008). More collaboration between researchers and practitioners is needed to successfully implement research-based practice to meaningfully address the significant social problem of chronic absenteeism.

### **Rationale to Address the Literature Gap**

Black families are less likely than other racial groups to voluntarily seek the services of organizations that will assist them in securing physical health and mental health services for their chronically absent children (Logan & Burdick-Will, 2017). For this reason, school staff and legal authorities who are usually first to recognize problems with students’ attendance,

need culturally responsive training to learn more about how historical traumas like racism and poverty unique to this group of students, continue to impact them (Blitz et al, 2020). The National Center for School Mental Health (NCSMH) reported that youth are six times more likely to complete evidenced-based treatment if it is offered at their school than if offered in a community-based setting (2019). As a result, additional training on how to best connect with marginalized, minority student populations and their caregivers, should also be provided for educators and those working in supportive roles in schools through incorporation into trainings like new teacher orientation and staff in-services. When students feel safe and believe that the adults charged with their care are trustworthy and genuinely concerned about their welfare, lasting relationships are developed and interventions more easily initiated (Blitz et al, 2020).

### **The Multi-Tiered System of Support Model**

Based on what is known about the need for culturally responsive, trust-building approaches to supporting students who experience chronic absenteeism, the Multi-Tiered System of Support (MTSS) framework is one method that shows promise as a leading approach in helping to combat the wicked problem of chronic absenteeism. Use of the MTSS framework is an ideal intervention because strategies are implemented on an ascending continuum where they can be selected and implemented based on individual student need (Chang et al., 2018, as cited in Kearney et al., 2022). The three-tiered MTSS framework is explained as follows:

**Tier 1** is located at the bottom of the pyramid and is the place where primary interventions occur. Interventions at this level are more broadly focused and typically used with most of the student population who have less severe needs (Kearney & Graczyk, 2020). Students served at Tier 1 generally comprise 80% of a school's population (Attendance Works, 2022) and remain here unless more intensive needs present.

**Tier 2** is the next level of ascension on the MTSS Pyramid of Interventions. Students served on Tier 2 require more support than what was provided at Tier 1. Chronically absent youth are identified at Tier 2 because they have typically missed 10%–19% of the school year (Attendance Works, 2022).

**Tier 3** is located on the highest point of the pyramid and is where students with the most severe attendance needs are served. Tier 3 students have missed 20% or more of the school year (Attendance Works, 2022); in urban schools, this percentage is sometimes even higher (Childs & Lofton, 2021).

While MTSS is based on sound evidence (Kearney & Graczyk, 2020), the school-based implementation of MTSS tends to focus on punishment rather than public health. This penchant to punish youth, rather than to remove barriers to full participation in school, represents a deficit model rooted in our nation's longstanding history of racism. In this deficit model, interventions are punitive and lack empirical evidence to support their use. Appropriate utilization of the MTSS framework in contrast, is strengths-based, trauma-informed, and uses evidence-based approaches to promote change (Kearney & Graczyk, 2020). Interventions selected for chronically absent youth should be evidenced-based and consider the six guiding principles of trauma informed care: safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment/voice and choice, and cultural, historical, and gender issues (Centers for Disease Control, 2020). If a trauma-informed approach is considered when working with chronically absent youth, school

personnel would ask, “What happened to you that has caused you to be absent?” rather than, “What’s wrong with you that you can’t make it to school like everyone else?” the approach more commonly used. The following case vignette is an example of one student’s story.

### **Case vignette**

Hannah Brown is a 15-year-old Black female currently enrolled in eighth grade at a large, public middle school in an urban community. She was referred to speak with the school social worker by one of her teachers because she is frequently absent from school. By the start of the second semester, Hannah had accumulated 20 unexcused absences. Upon speaking with the student to learn more about her absences, the school social worker discovered that Hannah sometimes misses school to stay home to care for her five-year old brother. Ironically, Hannah’s mother works at a neighboring primary school as a custodian. Although the primary school where her mother is employed has a free, on-site pre-kindergarten program, she was unable to get her son enrolled because his name was not selected in the district’s pre-kindergarten lottery. Hannah’s mother, Jennette Brown, is a single parent who works long hours to financially support herself and her five children. As a result of her work hours and limited income, Ms. Brown is often left with the decision of leaving her childcare burden on Hannah when other options are unavailable. Hannah, like so many other chronically absent youths, unfortunately, has been parentified by poverty.

The school’s standard deficit response to this type of case is as follows:

#### **Tier 1: The Base of the Pyramid**

- Ms. Brown receives a copy of the district’s student handbook at the start of the school year during the open house. If she is unable to attend, one is sent home with each of her enrolled students during the first week of school.
- There is an attendance agreement in the handbook that parents are asked to sign and return to the school before September 5<sup>th</sup>.
- The signature signifies that they have read and understand the state’s attendance law and the district’s attendance procedures and agree to adhere to them in lieu of possible legal prosecution.

#### **Tier II**

- A letter is mailed to Ms. Brown from the middle school informing her that Hannah has amassed five unexcused absences. Ms. Brown is invited to the middle school for a meeting with the attendance team to come up with strategies to reverse the trend.

#### **Tier III**

- Since Ms. Brown did not attend the attendance meeting and because Hannah has amassed between 10–18 unexcused absences, per school board policy, the school social worker is now required to file a truancy petition with the juvenile court.

### **Practice Advance**

#### **Using MTSS to Implement Evidence-Based Interventions**

Although the professional literature is largely silent on the use of effective, long-term interventions in work with Black youth who are chronically absent, culturally responsive, trauma-informed therapies that are implemented based on student need show promising results. Schools are primarily using a deficit model in current work with chronically absent youth. Thus, the primary goal of this manuscript is to build a convincing case for school

leadership at both the local school level (*micro*) and the district level (*mezzo*) to begin to earnestly support the use of evidence-based, trauma-informed interventions that are individualized to accommodate students' needs at the appropriate tier. If the MTSS framework were applied using a trauma-informed, public health approach (Kearney & Graczyk, 2020), Hannah's chronic absenteeism would potentially be addressed as follows:

### **Tier 1**

- A "Welcome to our School" open house night is held on a designed night for each school level (primary/elementary, middle, and high) at each school in the district. Enrolled families are encouraged to attend the event via advertisements broadcast over social media, local radio, and television stations. Emails, telephone blasts, and flyers are also sent to parents.
- The district-wide event occurs between 5:00 p.m. and 7:00 p.m. on a night specifically designated for each school level; this consideration was made to accommodate working families and those who have multiple students enrolled at different grade levels throughout the district.
- School administrators, teachers, and support staff (including bus drivers, custodians, and cafeteria workers) greet students and families in a celebratory way as they enter each school.
- School staff are dressed similarly (i.e., school colors, school athletic jerseys, etc.) to instill school pride into new students and promote unity among staff.
- The school social worker has solicited support for the event by asking the school's Parent Teacher Student Association (PTSA), local restaurants and vendors, and other organizations in the community to donate food items, door prizes, and a variety of tangible goods for families to enjoy at the event.
- A short program is held at the beginning of the event to share important information from staff representing various departments within the school (i.e., special education, social work, athletics, etc.).
- After the presentation, families are encouraged to visit their children's teachers and a row of tables hosting information about various support departments and programs at the school, including monthly food giveaways, after-school tutoring, and athletic programs.

### **Tier 2**

After all students and their families have been offered care, support, and respect from school personnel, there is fertile ground for interventions to support students experiencing the pain of chronic absenteeism. Returning to the case example, Hannah has missed ten unexcused days from school. Consequently, the school social worker scheduled a meeting with her to assess what the contributing factors could potentially be in relation to her absences.

At this point in the MTSS implementation process, an assessment should be done, and a Tier II intervention must be created and tailored to address the needs of the individual student in distress, while maintaining consistent standards of trauma-informed care (e.g., establishing safety; trustworthiness; confidentiality; voice and choice, etc.). In this case scenario, Hannah was noticeably reluctant to speak with the school social worker, so the social worker first reassured Hannah that she was not in trouble. The social worker went on to explain that she understood that students and their families are going through difficult times and in fact when she was a teen, her own family had been evicted from their home due

to non-payment of rent. The school social worker told Hannah that she was aware that everybody has a story and that nobody's life or reasons for missing school were the same. The social worker reassured Hannah that what they discussed was not something that would be shared with her friends and other adults in the building unless there was some important reason to inform the adults. Hannah's talk with the social worker seemed to ease her discomfort and after a while, she told the social worker that her mother was a single parent of five children. Since Hannah was the oldest girl, she was often left with many of the household and childcare responsibilities because her mother worked long hours outside the home to financially support the family. Since her mother was unable to get her youngest brother into the pre-kindergarten program at the primary school where she worked and could not afford to pay for a private program, Hannah often had to stay home with her brother if the alternate provider was unavailable.

Based on this information obtained in the data collection process, the school social worker's next steps were to:

- Schedule a one-on-one meeting with Ms. Brown (Hannah's mother).
- Work to obtain information about childcare vouchers for needy families so that Hannah's mother would have access to adequate childcare.
- Assist Ms. Brown with the completion of her application for the state's childcare assistance program.
- Sign Hannah up for after school tutoring and school sponsored transportation to take her home afterward.
- Enroll Hannah in an after-school girls' mentoring group held at the school on the days that she was not being tutored to provide her with an opportunity to connect with her peers in a positive, structured setting.

### **Tier 3**

The data collection showed that at the start of the second semester, Hannah's overall attendance had improved slightly; however, she had still missed additional days. Given her ongoing attendance challenges, it was time to move to Tier III strategies. The school social worker contacted Ms. Brown and disclosed that Hannah was failing all her classes. Based on their discussion, the following data was collected during the meeting:

- A treatment team meeting was held with Ms. Brown, the school social worker, the attendance secretary, the Student Support Team Chairperson, all six of Hannah's teachers, the 8<sup>th</sup> grade school counselor, the 8<sup>th</sup> grade assistant principal, and the coordinator of the after-school mentoring program.
- Ms. Brown disclosed that she had not heard any news about the status of her childcare voucher application. The school social worker agreed to contact a former colleague working at the childcare assistance agency to see if she could provide any updates related to Ms. Brown's approval.

Once the school social worker learned that Ms. Brown's application had been approved:

- Ms. Brown was provided with the contact information of the case worker assigned to her childcare voucher case.
- Ms. Brown was able to use her newly approved voucher to enroll her young son into a private pre-kindergarten program in her local area.

In the subsequent weeks following her brother's enrollment, Hannah's attendance improved significantly. She was able to stay after school for the tutoring program and her grades in each of her classes began to improve. The school social worker checked in with Ms. Brown bi-weekly to provide her with updates on Hannah's progress. She informed Ms. Brown that Hannah's teachers and the attendance team would continue to monitor her grades and her attendance to ensure that she was not regressing in either area. The school social worker also told Ms. Brown that she would meet with Hannah weekly for individual sessions to monitor her personal and academic progress.

Moving through the three tiers with increasing levels of support instead of punishment increases the likelihood that students like Hannah will be able to move from chronically absent to stable, successful students. Through data collection, the school social worker is also able to help assess the family's needs and subsequently evaluate whether or not the interventions utilized helped the student and her family as they did in this case.

Chronic absenteeism is a wicked problem that impacts every aspect of society, not just the students who are chronically absent from school. When students are absent from school, the district misses out on needed state and federal funding contingent upon attendance and retention rates (Reyes, 2020 as cited in Childs & Lofton, 2021). When students are chronically absent, they face the possibility of failing their classes and not being promoted at the conclusion of the school year. Once they are one grade level or more behind their same-aged peers, it is nearly impossible to graduate, enter college, trade school, or secure a better paying job that at minimum, requires a high school diploma.

### **Ensuring Success with MTSS**

School social workers are change agents; therefore, it is our social and ethical responsibility to ensure that the next generation of adults is adequately prepared to lead our world. Since education is the great equalizer, providing every student with a quality education is one way to ensure that our graduates have the ability to begin their adult lives on as equal a playing field as possible. If these students are monitored regularly and receive prolonged exposure to evidenced-based, trauma-informed interventions implemented by caring professionals utilizing the MTSS framework with fidelity, promising outcomes are likely. If we want to witness attendance rates improve among Black youth who are chronically absent, social workers must first return to the basic principles that undergird our work with this population of youth and their families. As human services professionals, we know anecdotally that when students' basic needs are not met (i.e. transportation, housing, safe neighborhoods, food, childcare, etc.), they are less likely to attend school. The sometimes-fractured research to practice pipeline can be strengthened if more collaborative work is done by social work researchers in the academy and social worker practitioners providing direct services in urban schools and communities with chronically absent students and their families. If done effectively, current attendance rates will undoubtedly begin to improve.

As members of the school community and as concerned citizens, we know what has not worked; now is the time to seek viable, empirically sound, culturally responsive solutions that will provide real results. Interventions designed to address the issue of chronic absenteeism in work with chronically absent youth must be systemic and consider the multifaceted causes that contribute to this wicked problem, including neighborhood and socioeconomic factors generally beyond a student's control (Childs & Lofton, 2021).

In order for this practice advance to be effective however, school-based administrative professionals, district level leaders, and even support staff in community-based organizations

(i.e. juvenile court, child welfare, mental health) will have to revise their thinking and stop viewing attendance issues exclusively as an individual problem (deficit paradigm) and begin to consider the role that ecological factors play in contributing to this social problem (Lyon & Cotler, 2009, as cited in Melvin et al., 2019). Future social policy should support an anti-deficit model where the systemic reasons students miss school are deemed to be more important points of focus than the belief that chronically absent students and their families are menacing members of society who simply refuse to adhere to societal rules (Childs & Lofton, 2021). Klisz-Hulbert (2020) issued a critical call for additional funding to address mental health disparities in work with Black youth. If this call is answered, the wicked problem of chronic absenteeism would inevitably be impacted, even if indirectly.

## Conclusion

Proper use of the MTSS framework (public health model) instead of more commonly used punitive approaches (deficit model) however, will first require decision-makers and leaders in K-12 education to decolonize their own personal and professional viewpoints and methodologies, including the way they deal with and respond to chronically absent Black students. If these same interventions that have proven to be effective in work with chronically absent Black youth are expanded for use with children representing other racial groups who have been exposed to ACEs and who are residing in underserved communities, the potential for better outcomes will expand along with attendance rates.

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## AUTHOR

Dr. Kashera Guy Robinson is the Director of Field Education and Clinical Assistant Professor of Social Work at Auburn University at Montgomery.

All comments and queries about this article should be addressed to [krobin55@aum.edu](mailto:krobin55@aum.edu).