Truancy programmes increase school attendance, but better programmes and evidence are needed.

Truancy has serious immediate and far-reaching consequences for youth, families, schools and communities. Truancy intervention programs aim to mitigate such problems using different modalities to increase student attendance. This review examines the effect of truancy interventions on chronically truant students’ school attendance. On average, truant students who participated in a truancy intervention attended school 4.7 more days than students who did not.

What did the review study?
Truancy is a commonly recognized problem. Many governments have put in anti-truancy policies and spent large amounts to tackle the issue. At best, truancy rates have remained stable and often risen. Truancy intervention programs target increased school attendance.

Truancy intervention programs are diverse; they target many different types of risk factors and use a variety of methods for intervening. Interventions may target individual risk factors, such as school anxiety or phobia, low self-esteem, social skills, and medical conditions; family factors, such as communication and parental support, discipline and contingency management, parental involvement, and communication with the school; and school factors, such as school climate, attendance policies, relationships between teachers and students, and bullying. Some interventions target multiple risk factors across all three levels. The methods used can range from a one-day workshop for students and parents to a year-long multi-component program including counselling, tutoring, and case management.

What studies are included?
Included studies assess truancy interventions using randomized controlled designs (RCT), quasi-experimental design (QED) and pre-post test design (SGPP). This review includes interventions aimed at increasing attendance with students in primary or secondary schools, with a focus on

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What is the aim of this review?
This Campbell systematic review examines the effect of interventions on school attendance to inform policy, practice and research. The review summarise findings from 28 studies conducted in the United States, Canada, United Kingdom and Australia.
those students who had attendance problems at the time of the study. Twenty-eight studies consisting of 1,725 student participants were included in the review, and 16 of those were included in the meta-analysis.

What are the main results in this review?
Overall, truancy intervention programs are effective. There is a significant overall positive and moderate mean effect of intervention on attendance, which increases attendance by 4.7 days per student by the end of the intervention. Studies did not measure longer-term outcomes, so we do not know if these gains in attendance continue after the intervention ends.

There was no significant difference in the effectiveness of different delivery channels (e.g. school, court or community-based), different modalities (e.g., individual, family, group, or multimodal), or different lengths of time (e.g., one day versus a school year). Contrary to popular belief and recommendations for best practices in truancy reduction found in the existing literature, collaborative programs and multimodal interventions do not produce greater effects on attendance than other types of programs. However, small sample sizes and substantial variation between studies suggest caution is needed in interpreting and applying these findings. There are shortcomings in the literature, notably the lack of inclusion of minority students.

What do the findings in this review mean?
Overall, truant students benefit from interventions targeting attendance behaviours, thus it is important and worthwhile to intervene with truant youth. Chronic truant students increase school attendance by on average 4.7 days per student. Given that no one intervention program stands out as more effective than others do, schools can intervene using the resources they have. Despite the significant improvements in attendance by students who received one of the interventions in this review, their attendance remained below acceptable levels, thus we need to continue to improve these interventions and outcomes.

A stronger evidence base is needed to understand the variations in study findings. In addition, there should be a central repository of effective, and just as importantly ineffective, interventions.