

2024-2025 School Absences

HENRY COUNTY, OHIO



Introduction

Being absent from school is an issue that affects students' academic performance, social development, and overall well-being. Understanding the patterns and reasons behind student absences can help educators, parents, and community members address these challenges more effectively. This report provides a breakdown of school absences for the 2024-2025 school year. Through this report, we aim to identify trends, uncover underlying issues, and provide recommendations to reduce student absences for the upcoming school year.

School Absence Program

Since the 2018-2019 school year, Henry County Health Department (HCHD) has been requesting school absence data from the following Henry County Schools:

- Holgate Elementary, Middle, and High School
- Liberty Center Elementary, Middle, and High School
- Napoleon Elementary, Junior, and High School
- Patrick Henry Elementary, Middle, and High School
- St. Augustine Catholic School
- St. John Lutheran School
- St. Paul Lutheran School

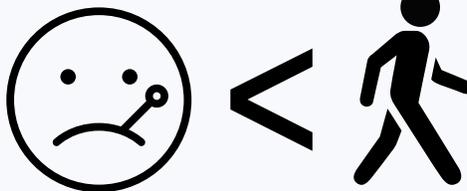
Data requested from these schools consists of enrollment numbers, number of students who called in sick, number of students who were sent home sick, and the number of absences caused by each of the following groups (group examples located on page 2).

- Illness: **General**, **Respiratory**, **Gastrointestinal (GI)**, **Ear, Nose, Throat (ENT)**, **Rash**, **Neurological**
- Miscellaneous: **Mental Health**, **Appointments**, **Surgery/Post-op**, **Lice**, **Other**, **Unknown**

Key Takeaways

4.5x

General illness absences increased **4.5x** from last year

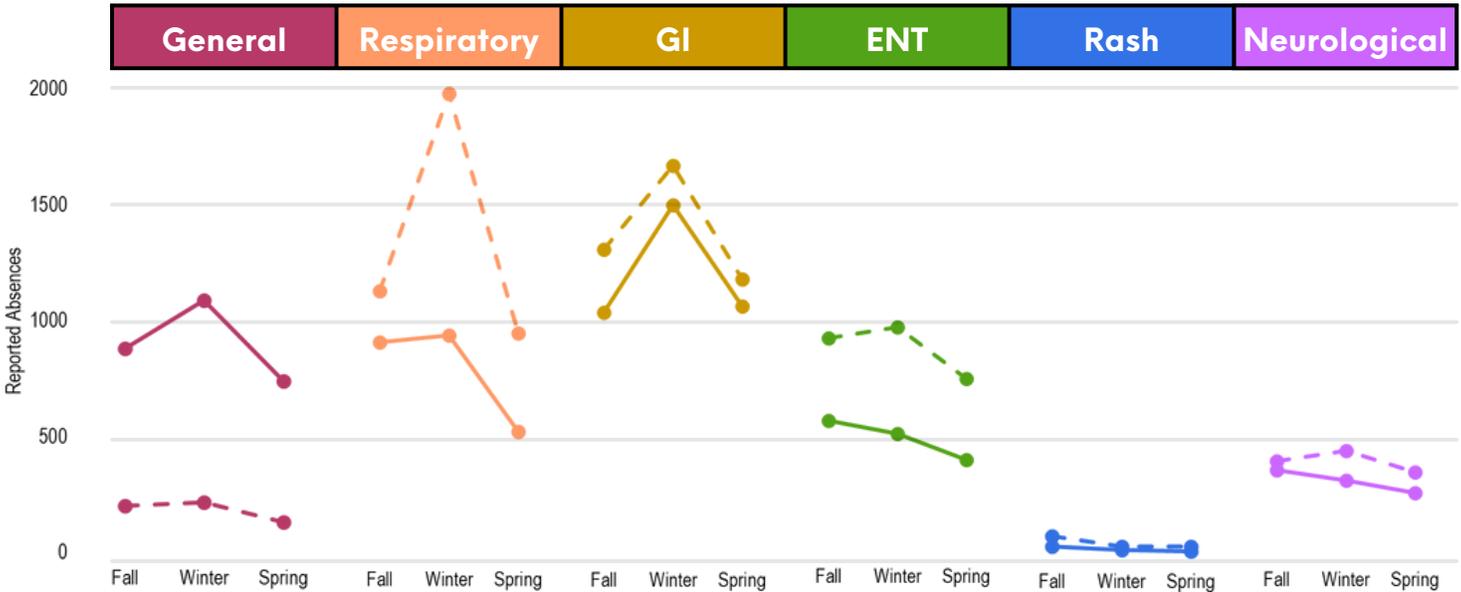


Non-illness related absences were reported more than illness related absences



Most reported reason for absence was **Unknown**

General was the only illness related absence category to increase from last year



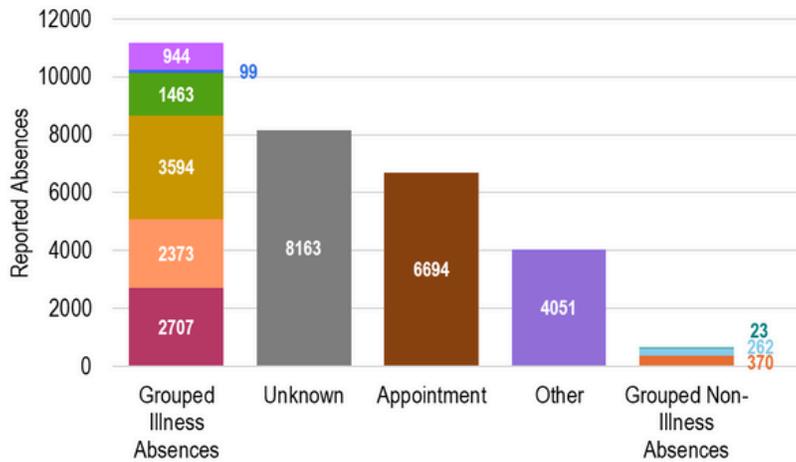
Key	
23-24	-----
24-25	—————
Fall:	Sep, Oct, Nov
Winter:	Dec, Jan, Feb
Spring:	Mar, Apr, May

Illness Related Absence Examples	
General: Fever, Asthma, Allergies, Body aches, Fatigue	Ear, Nose, Throat (ENT): Earache, Swollen glands, Tonsillitis, Pink eye, Sore throat
Respiratory: Cough, Cold, Runny nose, Body aches	Rash: Rash, Hives, Skin Infection
Gastrointestinal (GI): Stomach pain, Nausea, Diarrhea, Vomiting	Neurological: Headache, Dizziness, Lightheadedness, Stiff neck, Passed out

Note: Each absence is for a single day per student. For example, a student who is absent two days of school will account for two absences.

When looking at illness related absences for the 24-25 school year a distinct pattern is observed. A winter peak is seen for the three most reported categories (**general**, **respiratory**, and **GI**). Meanwhile, the other three categories (**ENT**, **rash**, **neurological**) started off with high absences in the fall but decreased throughout the remainder of the school year. Additionally, when comparing these trends with the dashed 23-24 school year lines, nearly all six categories had an overall drop in reported absences. With these drops, both the **respiratory** and **ENT** categories had significant drops, while the **GI**, **rash**, and **neurological** categories only had slight declines. The only exception to this was **general** which had a large jump in reported absences which will be discussed more later in this report.

More non-illness related absences were reported than illness related absences

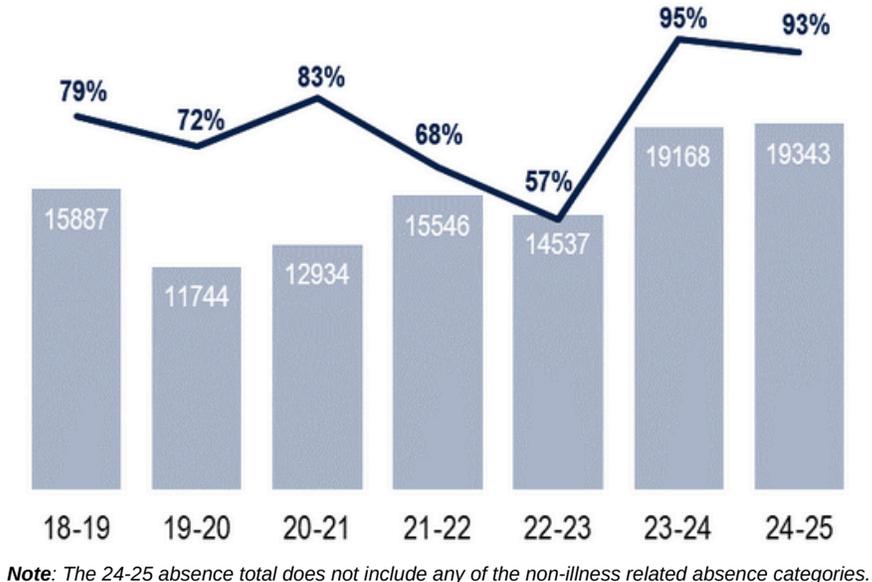


Additionally, non-illness related absence categories were added for the 24-25 school year. These categories included reasons for absence that don't fit into any of the illness related categories such as **appointments**, **lice**, **mental health**, **surgery/post-op recovery**, and **other**. The **appointments** and **other** categories were responsible for more absences than any of the illness categories. With this being the first school year where this data was collected, it is challenging to interpret whether these totals are high or low. Moving forward, this data will become more useful as trends can be identified.

Non-Illness Related Absences	
Unknown	Lice
Appointment	Mental Health
Other	Surgery/Post-Op Recovery

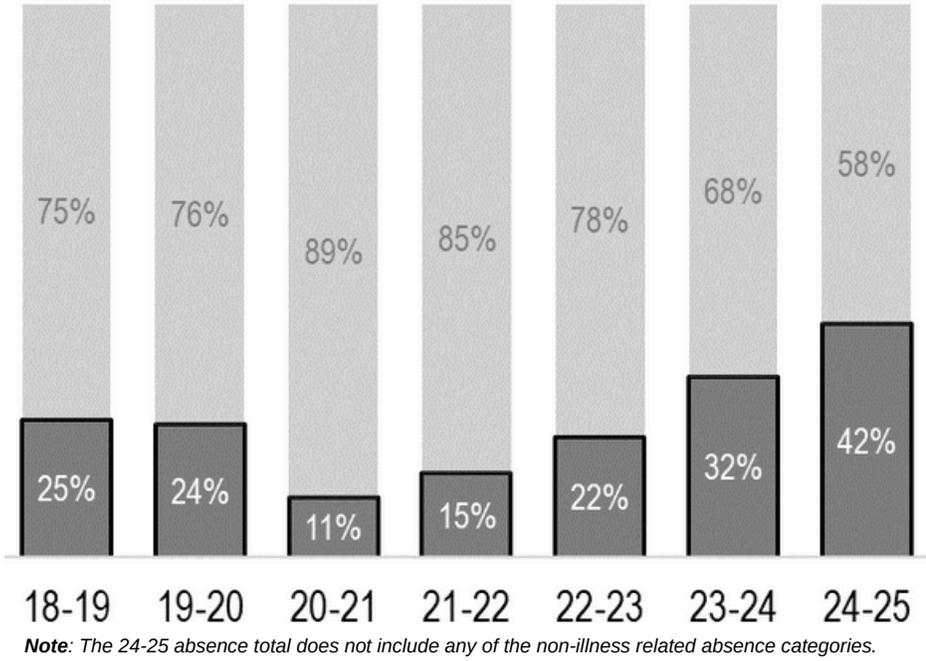
The chart to the right compares two distinct areas of data. The **pale blue bars** reflect the total number of reported absences for Henry County schools for each school year. While the **darker blue line** shows the response rate or the percentage of responses received for each school year. This allows for better interpretation on the accuracy of the true total number of absences within Henry County. For example, the spike in reported absences seen for the 23-24 and 24-25 school year does not appear to be due to a major increase in students being absent, but actually because there was an over 40% increase in the response rate from the 22-23 and 23-24 school years.

The 24-25 school year had more reported absences than any previous year



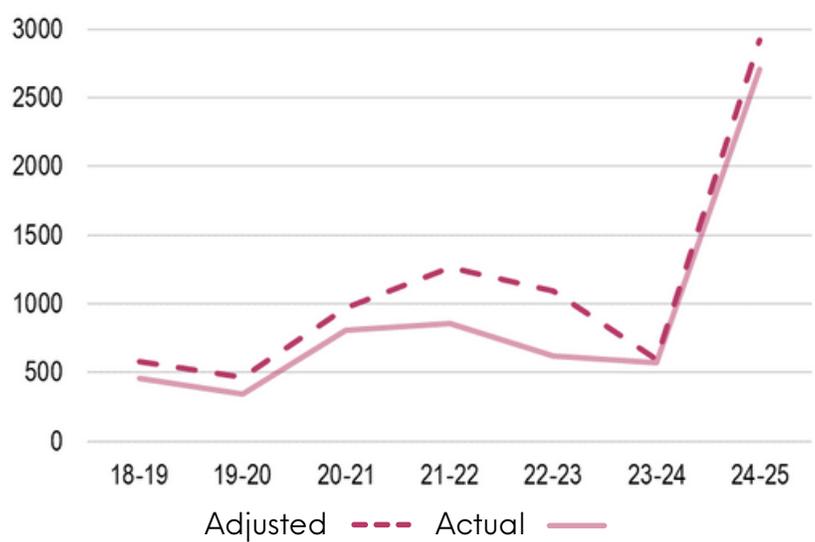
42% of all absences for the 24-25 school year were unknown

The chart to the left highlights the percentage of absences due to unknown reasons. The dark gray bars contain the percentage of absences due to an **unknown** reason. Since the 20-21 school year, the percentage of absences that are for an unknown reason has been increasing. 11% of absences for the 20-21 school year were due to unknown causes, while the 24-25 school year reached a high at 42% of absences. Unknown absences provide less specificity on the cause making it more difficult to analyze the overall data. One of the recommendations from last year’s school absence report was to adjust the surveillance program to see if we can decrease the amount of reported unknown absences. As a result, non-illness related categories were incorporated with the intent that these would decrease the amount of absences reported as unknown. While the non-illness related categories provide added insight into school absences adding the categories did not decrease the number unknown absences being reported.



General illness related absences had over a 4.5x increase from last year

When examining the numbers for general illness absences, a very big change is observed, especially in the last school year. The graph to the right shows two lines: the actual total of reported general absences (Solid) and the adjusted total of general absences (Dashed). The adjusted numbers help in comparing years more fairly as they consider how many schools sent in their data each year. Even with these adjusted numbers, the 24-25 school year still had a huge and unusual jump in general illness absences going from about 600 absences in the year before to nearly 3,000!



This big increase likely occurred because of changes made to the survey. For example, for the 23-24 school year, symptoms such as fever, body aches, and fatigue were added to the examples for general symptoms. This made the general illness category much wider, so more common sicknesses were put into this group. Also, the general symptoms question was moved to be much earlier in the survey for the 24-25 school year, becoming the very first symptom listed. When a question is asked sooner, it is more likely that this category will be filled out completely than later in the survey.

Beyond these survey changes, other things might also be playing a part in this dramatic increase. Such as, families and schools might be more careful about keeping sick children home, even with mild symptoms compared to previous years. This increased caution, along with better overall tracking by schools, could also contribute to the higher reported numbers for general illness.

Recommendations

The analysis of school absence data for the 24-25 school year reveals several important trends that call for specific attention and action moving forward.

- **Respiratory** absences dropped significantly, while **GI** absences remained quite similar to last school year. Schools should continue promoting proper hand hygiene and cough etiquette to minimize the spread of both illness categories. While the drop in **respiratory** absences is positive, close monitoring of both categories moving forwards will be important.
- The **unknown** category was the top reason for absences again, despite new non-illness categories being added. This will be monitored by HCHD throughout the 25-26 school year and adjustments will be made with input from school personnel with the main goal being improved data quality by reducing the number of reduce unknown absences reported.
- Finally, the **general** illness absences saw an unexpected jump this year. While survey changes likely played a big role by broadening the category and making it easier to select, close monitoring is still vital. HCHD will adjust where this option is in the survey and monitor throughout the 25-26 school year to determine if more specific options or clearer guidance is needed for the **general** category.