

Migraine in Schools

the
migraine
trust

Contents

Summary	3
Migraine in children.....	4
How should migraine be managed in schools?	5
Is migraine a disability?.....	7
What are reasonable adjustments?	8
How can I get support for my child in school?	9
What is an Individual Healthcare Plan?	9
Is a migraine diagnosis needed in order to receive support?.....	11
School absence due to migraine	11
When and how to make a formal complaint.....	12
Further information and support.....	13



The Migraine Trust offers free information and support for everyone affected by migraine.

Contact our helpline on **0808 802 0066** (Mon-Fri 10am-4pm) or through our contact form and LiveChat service at migrainetrust.org/support.

You can also email us at info@migrainetrust.org.

Summary

Children and young people who have occasional migraine attacks may find their condition has little impact on their lives at school. However, those who have frequent and severe attacks may need support to limit the impact on their education.

Schools should put in place reasonable adjustments to support a child with migraine to ensure that they do not fall behind on their education. If migraine is having a negative impact on a child at school, parents or carers can ask teachers and other school staff to support the child. An Individual Healthcare Plan should be developed that outlines the specific medical needs and support the child requires while under school supervision.

Our 'Migraine in schools' toolkit provides information and guidance for parents or carers of children and young people with migraine.

Migraine in children



Migraine in children often presents differently to adults. In children:

- the headache tends to affect the whole head, or temples and forehead rather than being focussed on one side
- abdominal pain, nausea, upset stomach and vomiting can be common, and may happen without a headache. Abdominal migraine affects 4% of children
- attacks are often shorter
- the headache can come on very suddenly.

It can also be quite common for children to get migraine in a regular pattern, either weekly or monthly. In children migraine tends to affect boys and girls equally, however, after puberty a lot of boys find their migraine attacks stop (whereas in girls migraine is more prevalent after puberty).

As migraine in children is often accompanied by vomiting (being sick), it can be wrongly identified as another health problem, e.g. a vomiting or stomach bug. This can cause a child with migraine to miss more school than needed due to the 48 hour recovery period required after contagious illnesses. Migraine affects different children in different ways. Migraine can affect a child's education, so it is important that migraine is identified in children who have it, and that they are helped to manage their condition.

How should migraine be managed in schools?

Frequent and prolonged migraine can impact a child's quality of life and seriously affect their attendance and performance in school. A child with severe attacks will require additional support to limit the impact on their education.

The Children and Families Act 2014 puts the duty on maintained schools and academies in England to support children who have a medical condition. The Equality Act 2010 protects children with a disability and requires schools to make reasonable adjustments to support them to ensure that they are not put at a major disadvantage. The support required will be dependent on a child's needs, how migraine affects them, and the school's policies.

The law for each UK nation is different and is detailed below:



England

The 'Supporting pupils at school with medical conditions' guidance sets out the practical steps schools should take to support children with medical conditions, such as making sure they have an Individual Healthcare Plan (IHP) in place, and appropriate training and support for school staff. The guidance requires schools to have a clear policy on medicine administration and a policy that identifies collaborative working arrangements between all professionals involved in the care of a child, to make sure that the needs of pupils with medical conditions are met effectively. Schools have a duty to make sure that children are all equally able to access and enjoy the same opportunities at school.

School governing bodies are responsible for ensuring that arrangements are in place to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented.

School staff do not have a duty to administer medicines to pupils unless this is written in their contract. Any staff members designated to administer medicines must be trained and the school must ensure that proper procedures are in place and followed.

Academies for over 16-19-year-olds and independent schools are excluded from this guidance. For more information visit: [gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3](https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3).



Wales

The 'Supporting learners with healthcare needs' guidance for Wales sets out similar support as England for meeting the needs of children and young people within an educational system. This statutory guidance provides advice for school governing bodies and local authorities on supporting pupils with healthcare needs. It stresses the importance of putting the learner at the centre of decision making, and collaboration between education and health professionals when developing a support plan for a child.

More information is available via: gov.wales/supporting-learners-healthcare-needs-1.

Scotland

In Scotland, the 'Supporting children and young people with healthcare needs in schools' provides guidance for NHS boards, education authorities and schools to develop a clear policy on meeting the health care needs of pupils and the administration of medicines in schools. The guidance also recognises the importance of a healthcare plan for children with medical needs in school in identifying the level and type of support that is needed at school.

More information is available at: gov.scot/publications/supporting-children-young-people-healthcare-needs-schools/.

The guidance does not cover maintained nursery schools, 16–19 academies and independent schools. Children attending academies for over 16s and independent schools are covered under the Equality Act 2010.

Northern Ireland

'Supporting pupils with medication needs' in Northern Ireland is government guidance that helps schools to form their own medicines policies and procedures to ensure that pupils with medication needs receive appropriate care and support in school. The guidance is for all schools and other educational settings in Northern Ireland.

More information is available at: education-ni.gov.uk.

Is migraine a disability?

The Equality Act ('the Act') defines disability as:

- a physical or mental impairment which has a substantial and long-term (more than 12 months) adverse effect on your ability to carry out normal day-to-day activities.

Normal day-to-day activities are activities that children do on a regular or daily basis such as reading and writing, holding a conversation, using the telephone, watching TV, walking and travelling by various forms of transport and taking part in social activities.

If a child's migraine recurs over 12 months or more, and negatively impacts their ability to carry out their normal day-to-day activities, under the Act they may be classed as 'disabled'. The severity and frequency of the attacks and the impact this has on the child will need to be taken into consideration.

Establishing whether a child with migraine has a negative impact on their normal day-to-day activities can be complicated. Keeping a migraine diary can help to keep track of their symptoms, number of migraine days and the impact on school, homework and other activities. Many children with migraine will experience a serious enough impact on their daily lives for them to meet the definition of being disabled under the Act. A letter from your child's GP or healthcare specialist can also be useful in determining this.

Northern Ireland has its own range of anti-discrimination laws that protect people in education from unlawful discrimination and victimisation on the basis of disability. For more information visit: equalityni.org.



What are reasonable adjustments?

The Act says that schools must make reasonable adjustments for children with a disability to remove barriers to their education and enable disabled pupils to access and enjoy the same opportunities at school as any other child.

There are many common adjustments that schools can make to support a child with migraine such as:

- Support to catch up on work missed
- Materials to work at home if possible
- Extra time in examinations including tests
- Examinations taken in an alternative room if light is a trigger
- Adjustments to attendance policies
- Time off for medical appointments
- Reduced timetable
- Adjust seating position to near a window to access natural light or dim the lights above their desk
- Administration of medicines.



Reasonable adjustments can be set out in a child's healthcare plan. If a child's migraine meets the definition of disability under the Act. The legal duty to consider reasonable adjustments applies to all schools, regardless of whether they are publicly or privately funded, but what is actually provided will vary between settings and individuals.

What is deemed to be a reasonable adjustment may also depend on the individual's circumstances, but would usually include adjustments such as educational support, access to medication, allowing regular food intake, access to a quiet dark room, arranging seating in class, flexible arrangements for exams and coursework, ventilation, and awareness-raising activities among teachers and pupils. The adjustments that can be made will differ between schools as these can be dependent on resources, staffing and facilities.

How can I get support for my child in school?

If migraine is having a negative impact on your child at school, you can ask your child's teachers and wider school staff to support your child to make sure that they receive the right support.

- You should tell your child's school in writing about their migraine condition.
- You should provide details about how their migraine impacts them, any known migraine triggers and the support needed, including medication, and what to do when an attack occurs.
- You may also wish to provide your child's school with any supporting documents from your child healthcare team.
- You can also ask for a meeting with the school and for your child to be present if appropriate. Where applicable, involve teaching assistants or a school nurse. At the meeting, ask for an agreed plan to address the impact of migraine to ensure the child is supported going forward. The plan should take the form of an Individual Healthcare Plan. It may be helpful to give the school a copy of the child's medical report.



What is an Individual Healthcare Plan?

An Individual Healthcare Plan (IHP) is an agreement between parents or carers, a child's school and health professionals. It identifies specific medical needs and the support a child requires while under school supervision.

The purpose of an IHP is to detail a child's specific condition, the support they require, when this is needed, and who is going to provide it. It also ensures that the school effectively supports pupils with medical conditions. It is good practice for an IHP to be put in place for all children whose migraine significantly impacts on their education. If your child's migraine is impacting on them in school, you can speak to your child's headteacher about developing a healthcare plan.

Your child's IHP should specify the staff responsible for writing the care plan, providing support, any training needs and who will cover them when they are unavailable. The plan should set out a review date and be signed by a parent or carer, child (if appropriate or applicable) and relevant school staff. The IHP should be shared with relevant staff involved in providing support to your child. It is important that the support given reflects the fluctuating and episodic nature of the migraine condition.

It should also be reviewed regularly and updated if your child's situation changes.

Ask your child's school for a follow-up meeting or agree the best way to maintain contact if there are concerns. It is recommended to discuss the plan with your child so they are aware of what is in the plan and what support they should be receiving. It can also be reassuring for your child to know that a plan is in place and relevant staff are aware of their condition.





A child's IHP should include the following information:

- An explanation of their migraine and symptoms
- Triggers
- Medication
- What to do if a child has a migraine attack
- School absences
- Support to catch up on work missed
- When to give medicine
- When and who to contact (parent/carer)
- Types of suitable adjustments
- Arrangements for school trips and other school activities outside the normal timetable
- Staff that are to be made aware of a child's migraine and their responsibility
- Names of the health professionals managing the child's migraine
- Details of staff training and needs
- Emergency contacts
- Family circumstances that a school should be informed of
- Date for reviewing the plan
- Any other relevant information about the child's migraine.

An individual healthcare plan template is available to download from The Health Conditions in Schools Alliance at: medicalconditionsatschool.org.uk

If you find that having an IHP is not enough, you can consider an educational healthcare plan (EHCP) which requires an assessment by the local authority for pupils who need further support. EHCP plans identify educational, health and social needs and set out the additional support to meet those needs.

The process for an EHCP is explained on GOV.UK:

gov.uk/children-with-special-educational-needs/extra-SEN-help

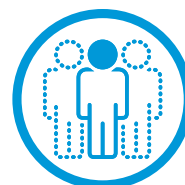
Is a migraine diagnosis needed to receive support?

The government guidance on supporting pupils with a medical condition states that schools do not need to have a formal diagnosis from a doctor before they start to provide support for a child. If your child's condition is unclear, your child's headteacher has the discretion to decide what support is most suitable for them using the medical information supplied to the school at the time. It is important that the headteacher liaises with you and your child and does not ignore medical evidence or opinion.

School absence due to migraine

The *'supporting pupils at school with medical conditions'* guidance states that your child should not be penalised for missing school if this is due to their medical condition. If your child is attending a medical appointment, you should get authorisation from the school in advance so that you avoid being fined or prosecuted for your child's absence. If your child is too ill to attend school, you should notify your child's school as early as possible.

Your local authority must make sure that your child receives as normal an education as possible if they are likely to be absent from school for more than 15 school days. Your child's school can contact the relevant local authority to arrange options for a child. There is more information from the relevant local authority at: [gov.uk/illness-child-education](https://www.gov.uk/illness-child-education).



When and how to make a formal complaint:

If you are not happy with your child's school or feel that your child is not getting the right support, you can ask to see the school's complaints policy and submit a written complaint following the school's complaints procedure.

You can:



- Complain to the school governing body: if a concern is not resolved by the school, you can escalate this by submitting a written complaint to the board of governors in accordance with the school's complaints procedure. If the matter is of a medical nature it may help to copy your child's doctor into the letter.
- Contact the responsible body: you can contact the body responsible for your child's school if the complaint is not successful. This may be the education authority or diocesan body. Further complaints can also be made to the Department for Education if you feel that the school is acting unreasonably. Further information is available at: [gov.uk](https://www.gov.uk).
- Mediation and tribunals for discrimination claims: if you feel that your child has been discriminated against due to their migraine condition, and this has not been resolved using the complaints procedure, you can consider using a mediation service or submit a claim to the relevant tribunal.

Seek legal advice before starting mediation. Litigation can be lengthy, expensive, and draining for the people involved. In England, you or your child can submit a disability discrimination claim before the First Tier Tribunal. In Scotland cases can be filed at the Additional Support Needs Tribunal and in Wales claims against schools are heard by the SEN Tribunal for Wales.

More information is available at: equalityhumanrights.com. Northern Ireland has a special tribunal called SENDIST (The Special Educational Needs and Disability Tribunal) which deals with disability claims against schools. More information is available via: justice-ni.gov.uk.

Further information and support

The Migraine Trust - we have a wide range of information on migraine in children and young people.

migrainetrust.org/migraine-in-children-and-young-people

Child Law Advice - legal advice and information on family, child and education law affecting children and families. Tel: 0300 330 5485.

childlawadvice.org.uk

Citizens Advice - information and advice on a range of issues, including disability discrimination in schools.

citizensadvice.org.uk

Department of Education (Northern Ireland) - information and guidance for pupils and schools in Northern Ireland.

education-ni.gov.uk

Equalities Advisory & Support Service - advice and support on issues relating to equality and human rights in England, Scotland and Wales. Freephone: 0808 800 0082

equalityadvisoryservice.com

Equality Commission for Northern Ireland - general information and advice about equality legislation in Northern Ireland. Tel: 02890 500 600

equalityni.org

Equality and Human Rights Commission - expert information, advice and support on discrimination and human rights issues and the Equality Act 2010.

equalityhumanrights.com

Gov.scot - general information about government services in Scotland, including information for pupils and education providers.


gov.scot

Gov.uk - general information about government services in the UK, including disability rights information for children with disability.

gov.uk

Gov.wales - information on government regulations and rights of children and young people living in Wales.

gov.wales



IPSEA - independent provider of special educational needs and disability advice.
ipsea.org.uk

nidirect - government services and information in Northern Ireland.
nidirect.gov.uk

Please note that this list is for information purposes only. The inclusion of any organisation in this list does not constitute a recommendation or endorsement by The Migraine Trust.

About The Migraine Trust

The Migraine Trust is dedicated to helping people affected by migraine. We are the only UK migraine charity providing information and support, campaigning for awareness and change, and funding and promoting research.

Visit our website to subscribe to email updates and news, access migraine information and to learn more about The Migraine Trust including our support services, research and events.

 migrainetrust.org

 Helpline **0808 802 0066**

Have you found this information helpful, or is there anything missing? Let us know by following the QR code to complete our feedback survey. You can also email any feedback to: feedback@migrainetrust.org



This information has been written by The Migraine Trust Information and Support Services team and reviewed by our reviewer panel.

Our information has been awarded the PIF TICK quality mark for trustworthy health information.

Last updated: May 2026
Version: TK03_2026_v1