

Eliminating Seclusion From our schools

What is seclusion?

Seclusion means the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving.

This is not a simple timeout or break for a student. Seclusion is intended as a measure of last resort, that in many states should only be used in an emergency situation when it is necessary to protect a student or other person from imminent, serious, physical harm after other less intrusive, nonphysical interventions have failed or been determined inappropriate. The phrase “imminent, serious, physical harm” means something very specific, it is a situation that could result in death or serious bodily injury.

Why prohibit seclusion?

- 1) The use of **seclusion is dangerous to students, teachers, and staff**. When we are talking about seclusion we are talking about the involuntary confinement of a student, alone in a room or area where he or she is prevented egress. The student is being confined against their will, as a result secluding a child often necessitates the need to use physical force and restraint to transport the child. The Government Accountability Office (GAO) testified that they had found “hundreds of cases of alleged abuse and death related to the use of these methods on school children.”
- 2) **Seclusion leads to trauma** in students, teachers, and staff. The United States Department of Education provided guidance that said “A school’s use of restraint or seclusion may have a traumatic impact on a student, such that even if she were never again restrained or secluded, she might nevertheless have new academic or behavioral difficulties that, if not addressed promptly, could constitute a denial of FAPE. That traumatizing effect could manifest itself in new behaviors, impaired concentration or attention in class, or increased absences.”
- 3) There is **no evidence that seclusion is effective in reducing challenging behavior**. In fact, according to the United States Department of Education, there continues to be no evidence that using restraint or seclusion is effective in reducing the occurrence of the problem behaviors that frequently precipitate the use of such techniques. Students will likely continue to engage in problem behavior, as restraint and seclusion procedures do not include strategies to teach the student prosocial alternative behaviors and the use of isolation exacerbates behavioral problems.
- 4) The overuse of **seclusion is an indicator that schools are not appropriately meeting challenging behaviors** in the classroom upstream from the aversive measures. Challenging behaviors are not being well managed in the classroom, which is leading to escalating behaviors. As the behaviors escalate and demands are placed on a child that

they are unable to meet, aversive reactive solutions becomes the only option. We need to do better preventing escalations in the first place, which requires positive proactive approaches.

- 5) The use of **seclusion is a potential violation of civil rights**. Data from the Civil Rights Data Collection (CRDC) illustrate that students with disabilities (those served by IDEA) are treated far more harshly than their peers without disabilities. Data tells us that seclusion and restraint are disproportionately used on children with disabilities, minorities, and boys. The Office of Civil Rights actively reviews civil rights complaints, which can lead to investigations of local education agencies.
- 6) **Five states have banned the use of seclusion** this includes Georgia, Hawaii, Nevada, Pennsylvania, and Texas. In the State of Maryland, several counties including Anne Arundel, Wicomico, and Prince George's counties have banned the use of seclusion. Georgia public schools outlawed the practice of placing students in solitary confinement, six years after a Hall County boy's schoolhouse hanging. If entire states and counties can successfully ban the practice we can as well. If we don't have seclusion rooms we will find a better way to work with children.
- 7) The **use of restraint and seclusion leads to loss of money and time by local education agencies** (LEA). Specifically, the use of seclusion and restraint leads to increased workman's compensation claims, lost time and employee turnover. Grafton Integrated Health moved from the use of seclusion and restraint in 2004 and since then have saved \$16 million by reducing staff turnover, lowering workman compensation claims and preventing loss time. Additionally, the overuse of seclusion and restraint often leads to high non-public placement costs.
- 8) It is likely that the Federal Government will re-introduce the *Keeping All Students Safe Act* which would **ban the use of seclusion**. The legislation would make it illegal for schools that receive taxpayer dollars to seclude children. In early 2019 the U.S. Department of Education announced it is launching a wide-ranging initiative to "address the possible inappropriate use of restraint and seclusion". According to the most recent Education Department data, 122,000 students across the country were subject to restraint or seclusion during the 2015-2016 academic year.
- 9) There are **trauma-informed alternatives to seclusion**. One alternative is Ukeru developed by Grafton Health Network. Ukeru is a safe, comforting and restraint-free crisis management technique developed by and for behavioral health caregivers and educators. Named for the Japanese word for "receive," this award-winning program helps people engage, sense, and feel, and then respond to what someone is trying to communicate through their actions. Ukeru has helped behavioral health providers and schools reduce the use of restraint, seclusion, and injury.
- 10) A total **ban of seclusion is the right thing to do** and we should take action. Seclusion is a practice with no educational value. It causes significant trauma in its victims and has lead to serious injury, death, and even suicide. There are better ways to address challenging behaviors and prevent or eliminate the need for seclusion and restraint. The United Nations Committee on the Rights of the Child (UNCRC) stated that it is clear

that seclusion violates a child's right to be free from degrading treatment or punishment. We can and should prohibit the use of seclusion.

How do we eliminate seclusion?

We simply do it! We follow the lead of the other states and counties that have already banned seclusion and we do it. If we eliminate it as an option we can and will find better ways to work with children who may exhibit challenging behaviors.

Early childhood interventions

Strong early childhood interventions prepare children to be more successful in the classroom. This may include intensive early intervention for building language, social, academic, and self-help/daily living skills. It is well understood that a child's healthy social-emotional development is a function of the stability, security, and consistency of trusting, affectionate relationships that are developed during the child's years as an infant and toddler.

Better strategies for challenging behavior

When challenging behaviors are not being well managed in the classroom, it leads to escalating behaviors. As a child's behaviors begin to escalate both the child and the adult can become less flexible, this can lead to a situation in which reactive solutions become the only option. We need to do better preventing escalations in the first place, which may require new and different approaches such as a collaborative and proactive model.

Restorative Practices

Restorative Practices empower schools to build a community where all students, staff, and families feel connected and valued within the school building. If a situation occurs where harm is done, schools can also use Restorative Practices to address behavior in a way that holds students accountable for repairing the harm while still providing them with an honorable path back into the school community.

Crisis Management

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