

August 4, 2021

Katonah-Lewisboro School District
Board of Education
PO Box 387
Katonah, New York 10536

President Schiff, Vice-President Hadlock and members of the Board of Education,

I am writing to you today on behalf of the [Alliance Against Seclusion and Restraint](#) (AASR). AASR is a community of over 14,000 parents, self-advocates, teachers, school administrators, paraprofessionals, attorneys, related service providers, and others working together to influence change in the way we support children who may exhibit behaviors of concern. The mission of AASR is to educate the public and to connect people who are dedicated to changing minds, laws, policies, and practices so that restraint, seclusion, suspension, expulsion, corporal punishment, and other abusive practices are eliminated from schools across the nation and beyond. Our vision is safer schools for students, teachers, and staff.

We know that school discipline is discriminatory, this is well documented. We know that disabled, Black, and brown students are disproportionately subjected to restraint, seclusion, suspension, expulsion, and corporal punishment. We know this from the examination of The United States Department of Education's Office of [Civil Rights Data Collection](#) (CRDC), an effort that has been collecting biennial data since 1968. Recently, the Government Accountability Office (GAO) released a [report](#) in which they analyzed CRDC discipline data from the 2013-14 school year. This report confirmed that Black students, boys, and students with disabilities were disproportionately disciplined "regardless of the type of disciplinary action, level of school poverty, or type of public school attended." The impact of this pattern is that young, disabled, Black, and brown children are being pushed down the [school-to-prison pipeline](#).

It is our understanding that the Katonah-Lewisboro School District Special Needs Advocacy Group has been actively advocating for a change in policy and procedure after an autistic 13-year-old child was restrained 33 times over two months without any parental notification. Several parents of special needs children have begun to speak up about the practices in your school district. We have heard accounts that have included putting young children in the bathroom as a “punishment for bad behavior,” unexplained bruising, throwing a young child into a wall, and a chokehold being used on a student. The children impacted, consistent with the data, are children with autism including several non-speaking children. The use of restraint and seclusion can lead to trauma and injury to students, teachers, and staff. Sadly children have even died being restrained and secluded.

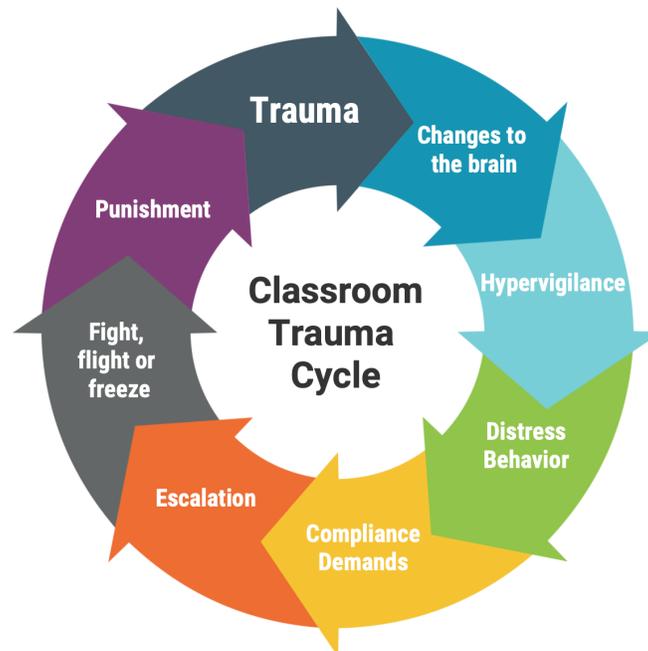
In 2012 The United States Department of Education released a guidance document titled [Restraint and Seclusion: Resource Document](#). This document included fifteen principles that the Department of Education believes states, local school districts, preschool, elementary, and secondary schools, parents, and other stakeholders should consider as the framework for when states, localities, and districts develop and implement policies and procedures related to restraint and seclusion to ensure that any use of restraint or seclusion in schools does not occur, except when there is a threat of imminent danger of serious physical harm to the student or others, and occurs in a manner that protects the safety of all children and adults at school. While not perfect the guidance was thoughtful and deliberate. The guidance set a high bar for the use of restraint and seclusion, the guidance made it clear that restraint and seclusion should not be used except for situations that involve an imminent danger of serious physical harm. Serious physical harm has a legal definition, which is the same as the definition for serious bodily injury, see below.

As defined at 18 U.S.C. 1365(h)(3), the term serious bodily injury means bodily injury that involves:

1. A substantial risk of death;
2. Extreme physical pain;
3. Protracted and obvious disfigurement; or

4. Protracted loss or impairment of the function of a bodily member, organ, or mental faculty.

Was the young autistic student who was restrained 33 times over a 2 month period posing a life or death threat? Do young children being secluded in the bathroom pose a life or death danger? Despite the high bar for using restraint and seclusion provided in federal guidance, children in your school district are routinely restrained and secluded for noncompliance, disrespect, minor behaviors, property damage, and for convenience of the staff. In our experience, in the vast majority of instances where restraint and seclusion are used in schools across the nation, the imminent danger of serious physical harm standard is not being met. While the guidance is clear that restraint or seclusion should never be used as punishment or discipline it is clearly what happens to young, disabled, Black, and brown children resulting in a clear violation of civil and human rights. Furthermore, the use of seclusion and restraint can be an adverse childhood experience, which can cause a traumatized child to be hypervigilant. Hypervigilance may result in additional behaviors of concern and can actually create a cycle leading to more restraint and seclusion.



In 2016 the Department of Education's Office of Civil Rights published a Dear Colleague Letter titled [Restraint and Seclusion of Students with Disabilities](#). This guidance addressed the circumstances under which the use of restraint or seclusion can violate Section 504 and Title II. The letter supports the previous guidance and indicates that restraint and seclusion should only be used in situations that involve imminent serious physical harm. Further, the letter indicates that OCR would likely not find the repeated use of restraint and seclusion to be a justified response where alternative methods also could prevent imminent danger to self or others. Based on the OCR guidance it seems clear that the Katonah-Lewisboro School District is violating the civil rights of children.

The Katonah-Lewisboro School District can and must do better. Today, many schools across the nation are dependent on classical behaviorism to control and manipulate behavior. Although reward and consequence models of addressing behaviors are failing many children they are widely used. The focus on surface behavior and the use of outdated, compliance-based methods continue to fail our students who most need help. Over the past forty years, there has been a tremendous increase in the knowledge base about the brain, nervous system, human development, and behavior. This includes an understanding of the role toxic stress and trauma (ACES) have on the structure of the developing brain and brain functioning. State-dependent functioning, the polyvagal theory, bottom-up versus top-down learning and control, and the differences between intentional behaviors and stress behaviors (flight, fight, freeze) are all part of this new understanding.

It is [time for Katonah-Lewisboro School District to shift to approaches](#) that are relationship-based, trauma-informed, neuroscience-aligned, developmentally appropriate, individualized, biologically respectful, and collaborative to support all children in schools across the nation. The solutions that will improve the educational system and improve outcomes for students are the same solutions that will eliminate restraint and seclusion in your schools. We recommend several approaches to better support all children including:

Collaborative and Proactive Solutions: [Collaborative & Proactive Solutions](#) (CPS) is the evidence-based model of care that helps caregivers focus on identifying the problems that are causing concerning behaviors in kids and solving those problems collaboratively and proactively. The model is a departure from approaches emphasizing the use of consequences to modify concerning behaviors.

Applied Education Neuroscience: The [Applied Educational Neuroscience certificate](#) program is specifically designed to meet the needs of educators, social workers, and counselors who work beside children and adolescents that are experiencing adversity and trauma. The certificate is intended to provide graduate and post-graduate students with an opportunity to become acquainted with the theoretical and empirical literature of educational neuroscience, trauma, and brain development as it relates to behaviors, relationships, and academic acquisition.

The Neurosequential Model: The [Neurosequential Model](#) is a developmentally informed, biologically respectful approach to working with at-risk children. The Neurosequential Model is not a specific therapeutic technique or intervention; it is a way to organize a child's history and current functioning. The goal of this approach is to structure assessment of a child, the articulation of the primary problems, identification of key strengths, and the application of interventions (educational, enrichment, and therapeutic) in a way that will help family, educators, therapists, and related professionals best meet the needs of the child.

Beyond Behaviors: [Beyond Behaviors](#) highlights effective neuroscience-based tools to transform childhood behaviors. Time-out rooms, behavior chart consequences, and other methods that focus on correcting behaviors aren't working for the simple reason that they don't take into consideration the reasons underlying behavioral challenges: the child's individual differences and the state of the child's nervous system. Each child has a unique background, different strengths and challenges, and different points in their development. They require customized plans, rooted in science, that are specific to their needs.

Low Arousal: The [low arousal](#) approach enables professionals, educators, and family members to deal with and manage challenging behaviors. The approach empowers the individual or team to focus on the ‘person’ in the situation, identify causes and use proven low arousal skills to reduce the aggression. This approach acknowledges that stress is an ever-present part of the lives of people with autism, and asks how we can best manage crises where the individuals may be experiencing ‘meltdown’.

Ukeru: [Ukeru](#) is a trauma-informed crisis management intervention that has successfully reduced and eliminated the use of restraint and seclusion in many schools across the nation. It is a trauma-informed approach that ensures a thorough understanding of the neurological, biological, psychological, and social effects of trauma and violence on an individual. Ukeru training is just the starting point; creating an environment of Comfort vs. Control requires a true cultural shift within a school, organization, or other behavioral health settings.

The Katonah-Lewisboro School District can and should do better for your students, teachers, and staff. We appreciate your attention to the critical issue. I would be happy to speak with the Board of Education further if that would be helpful.

Respectfully,



Guy Stephens
Founder and Executive Director
Alliance Against Seclusion and Restraint