

May 24, 2021

Committee on Education and Cultural Affairs
100 State House Station
Augusta, ME 04333

Support for LD 1373

Dear Chairman Langley, Chairperson Kornfield, and members of the Committee on Education and Cultural Affairs,

Hello, my name is Guy Stephens. I am the founder and executive director of the [Alliance Against Seclusion and Restraint](http://www.endseclusion.org) (AASR). AASR is a community of over 13,000 parents, advocates, self-advocates, teachers, school administrators, paraprofessionals, attorneys, and other related professionals working together to influence change in the way children are supported in schools. 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, and other abusive practices are eliminated from schools across the nation. I am writing to you today to express our support for LD 1373.

Restraint and seclusion are crisis management strategies used in many schools across the state of Maine. Physical restraint is exactly what it sounds like, a personal physical restriction that immobilizes or reduces the ability of a student to move his or her torso, arms, legs, or head freely. Seclusion is the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving. These interventions are dangerous and have led to serious injuries and even death in students, teachers, and staff.

According to federal guidance restraint and/or seclusion should never be used except in situations where a child's behavior poses an imminent danger of serious physical harm to self or others. Restraint and seclusion should be avoided to the greatest extent possible without endangering the safety of students and staff. The important wording here is "serious physical harm", these measures are not intended merely for unsafe situations, noncompliance, or minor behaviors, but rather to situations that could result in death or serious bodily injury. As such based on federal guidance restraint and seclusion should be exceedingly rare. However, it has been found that restraint and seclusion are occurring far more frequently in schools across the state of Maine and often not limited to situations that involve imminent serious physical harm.

The practices of restraint and seclusion disproportionately impact children with disabilities, minorities, and boys. It is the youngest children that are most frequently secluded and restrained, many of these children as young as 5, 6, and 7 years old. One must accept that these young and often disabled children are exhibiting behaviors that are so dangerous that they could lead to death or serious bodily injury.

The use of restraint and seclusion leads to significant trauma in students, teachers, and staff. Using restraint and seclusion increases the chance of injury and even death. These crisis management techniques are intended to be measures of last resort for a good reason, they are dangerous and many injuries occur in staff who are using these techniques even when appropriately trained.

Seclusion is a form of solitary confinement and **should never be used on children**. It is neither educational nor is it therapeutic. While children are often placed in seclusion cells by poorly informed or misguided educators under the belief that somehow putting a child (often disabled) in a room against their will and not letting them out will help the child to regulate - it will not. Children need the help of a well-regulated adult when they become dysregulated, as they often lack the developmental capacity to do so on their own. Children are likely to become more dysregulated when confined to a seclusion room and often urinate or defecate in response to traumatic stress. Nothing is calming about being forced into a seclusion room against your will. The use of seclusion must be banned without exception.

Maine also needs to prohibit the use of any form of restraint that can cause positional asphyxia, including prone and supine restraint. While school staff sometimes believe that restraint can be done safely and that they need restraint and seclusion as “tools” to keep themselves safe this is a myth. The data supports that the use of restraint and seclusion increases the chance of injury to teachers and staff. When you hear stories of staff being injured, it is most likely to occur while the staff is attempting to restrain a child. Anytime we have children and staff in fight or flight mode we increase the likelihood of injuries to everyone. We must work to minimize the use of any restraint techniques, and prohibit prone and supine restraint which have resulted in the death of many children in schools across the nation.

We have been aware that Maine has very high rates of restraint and seclusion use particularly in some nonpublic schools including the Margaret Murphy Center for Children. Recently Representative Lyman was quoted in a news story stating that

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“restraint and seclusion are not punitive acts. Rather these tools offer support for students struggling in school with emotional and or behavioral control”. To suggest that restraint and seclusion are tools that offer support to students is very misleading and inaccurate. Restraint and seclusion are intended as crisis management interventions only to be used in life and death situations. The truth is they are outdated crisis management approaches that can lead to trauma, injuries, and death to students, teachers, and staff.

We all want safer schools. No one wants to see a student, teacher, or staff member injured or worse. We recognize that people choose to work in education because they want to help children. No one wants to restrain or seclude a child. Why then does it continue to happen? Change is hard, even for schools, but sometimes it is necessary. However, sometimes schools, like the Margaret Murphy Center for Children, are resistant to change. Often the schools that are the most resistant are those that serve the most vulnerable children. They can't imagine that there is a better way. They insist that you don't understand the children they serve, that restraint and seclusion are necessary they are not. I have seen many schools that serve similar student that are restraint and seclusion free.

There are far better ways to work with children that avoid the need for crisis management. Our schools should be moving towards neurodevelopmentally informed, trauma-sensitive, biologically respectful, relationship-based ways of understanding, and supporting all children. Unfortunately, many schools, left to their own devices, continue to mistreat children within their charge. I would be happy to chat with any members of the committee about alternatives and what has been successful in other states.

We can make schools in Maine safer for children and staff while reducing and eliminating the use of restraint and seclusion, but we need your help. Please support LD 1373 and let us know if we can assist in any way possible.

Respectfully,



Guy Stephens
Founder and Executive Director
Alliance Against Seclusion and Restraint