STOP HURTING KIDS:

Restraint and Seclusion in BC Schools - Survey Results and Recommendations

November 2013
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Issued November 21, 2013 by Inclusion BC and the Family Support Institute of BC.

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KEY DEFINITIONS

Restraint

The use of physical procedures by one or more individuals or mechanical devices to limit freedom of movement. Example: Holding an individual in an immobile position for a time.

Seclusion

Placement in an isolated area for an extended time and prevention from leaving the area. "Example: Placing an individual in a locked room or closet, or where a person of authority blocks exiting this room. Other terms used may include:

- isolation
- **time out
- alone time
- quiet time
- taking a break
- sensory break
- exclusion
- personal office time

***not to be confused with "time-out", which is a situation where a student is removed from access to the reinforcement for behaviour that exists in that environment.

It is generally accepted that brief physical intervention used to interrupt an immediate and serious danger to the child or others may be called for in the case of a safety emergency. This is different from the ongoing use of restraint as punishment or in the guise of treatment for a child's disability or behaviour. Frequent use of emergency restraint is an indication that program revision is needed, even if the program is considered positive.

SUMMARY

"To keep our son safe, we removed him from school three years ago."
– Survey participant

This is a statement that should never be heard about British Columbia's public school system. As organizations that work to support people with developmental disabilities, children and youth with special needs and their families in British Columbia, we are frequently contacted with parents' concerns about their children's access to truly inclusive public education. A recurring issue that has emerged, time and again, has been the use of restraint and seclusion on students attending school in our province.

All students deserve to be treated with respect and dignity. The families who reported incidents of restraint and seclusion also reported that such practices are traumatizing and caused long-lasting physical and emotional harm to the students who were subjected to them.

A growing campaign to end restraint and seclusion in the United States, "Stop Hurting Kids," notes that "for too long students … have been at risk of restraint and seclusion techniques that have been proven to hold no educational or therapeutic value, despite evidence-based, positive alternatives."

In order to gain a broader view of the experiences of students across the province with restraint and seclusion, our organizations created a web-based survey to collect the experiences of parents and guardians. The survey was anonymous and open to responses from June 6 – July 19, 2013.

The survey required all participants to affirm that they are the parent or guardian of a child subjected to restraint or seclusion. Approximately 200 parents or guardians participated in the survey; while approximately 300 people began the survey, respondents who did not self-identify as parents and guardians were excluded from the survey.

For the purposes of clarity, definitions of restraint and seclusion were provided to respondents at the beginning of the survey. A total of 51 multiple-choice questions were asked. Where "other" was chosen as a response to a question, room was provided for comments. Responding to each question was voluntary and some respondents did not answer all questions.

The results of the survey, and the number of experiences related, indicate a systemic problem with the use of restraint and seclusion in British Columbia schools. They also indicate that restraint and seclusion severely damages the

"For too long students … have been at risk of restraint and seclusion techniques that have been proven to hold no educational or therapeutic value, despite evidence-based, positive alternatives."

- *Stop Hurting Kids stophurtingkids.com*

"This was all 5 years ago and they turned him into something unrecognizable."

- *Survey respondent*

educational environment, access to inclusive education, and physical and emotional health and well-being of students subjected to these practices.

Fuller details on the survey responses are elaborated below. Key findings include:

- 65 participants stated their children had been restrained, and 100 stated their children had been secluded, in school.
- Nearly half of all respondents to the questions on restraint reported physical injury or obvious signs of physical pain during restraint; more than three-quarters reported emotional trauma.
- 10% of recipients said that their child had been secluded for longer than three hours, while 20% reported seclusion on a daily basis.
- 80% of respondents reported they raised concerns about restraint and were unsatisfied with the response.
- 49 children were removed from public school by their parent as a result of these practices.

In all cases, the survey found that parents and guardians frequently learned about restraint and seclusion not from the school itself, but from other observers. Verbal communication is a common challenge for children and youth with special needs, and many could not learn about the restraint and seclusion directly from their children. 72% of parents or guardians whose children were restrained reported that they received the information from someone other than the school. Over half (58) of the parents or guardians whose children were secluded learned about it from someone other than the school.

We are deeply concerned that the stories that have come forward through this survey are only the tip of the iceberg and that restraint and seclusion are being used on many more children in British Columbia schools.

The information was collected by Inclusion BC and Family Support Institute in a self-reporting, web-based survey conducted by two community-based organizations in a one-month period in the summer. Thus, most parents in BC were never reached by the survey. This survey is intended as a platform for further research and data collection. Even one report of restraint and seclusion is too many – these survey results call for a serious response at all levels.

Restraint and seclusion do not simply impact the child who is restrained or secluded. All children are likely to feel less safe in schools where they have witnessed restraint and seclusion used with other students.

Schools have a responsibility to protect students from bullying and harassment; restraint and seclusion is, in many ways, a form of bullying that comes not from fellow students but is sanctioned by the school system itself.

Key Recommendations

Restraint and seclusion are unacceptable practices that must come to an end in BC schools. The experiences of students and families recorded in the survey results are unacceptable, and even criminal. Parents' and guardians' stories of their children's experiences, reported in the survey, indicate that there is a systemic problem with seclusion and restraint in British Columbia schools. This is not a matter of momentary crisis intervention but a recurring practice that violates students' right to access an inclusive public education.

Currently, in British Columbia, there is no requirement to document or report incidents of restraint or seclusion, and no provincial regulation of these practices. There are a handful of school district policies and training programs on Positive Behaviour Support, but even those few districts with policies only address restraints – none address the use of seclusion. The BC Ministry of Health, in its 2012 "Secure Rooms and Seclusion Standards and Guidelines: A Literature and Evidence Review," addresses the issue of seclusion within designated health facilities in BC. The authors write:

"Internationally, seclusion is understood as a violation of human rights (see for example, the 2006 United Nations Convention on the Rights of Persons with Disabilities). Standards forthcoming in the European Union recommend alternatives to traditional seclusion practice in order to avoid the negative impacts of isolation and emphasize engagement..."

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- *BC Ministry of Health, 2012 "Secure Rooms and Seclusion Standards and Guidelines: A Literature and Evidence Review"*

What is needed:

- **Informed parents and guardians and transparency.**
- **Legislation/ministerial order prohibiting the use of restraint and seclusion**. Inclusion BC and the Family Support Institute will approach the Ministry of Education with the goal to develop:
  1. a requirement that all forms of restraint and seclusion are documented and reported to the Ministry of Education and
  2. a regulation against the use of restraint and seclusion in all BC schools.
- **Requirements for school districts to prepare policies against the use of restraint and seclusion.**
- **Better understanding of positive behaviour supports by teachers, support staff, principals, district administrators, and oversight.**
- **Skilled educators who can de-escalate a conflict with a student.**

"The foundation of any discussion about the use of restraint and seclusion is that every effort should be made to structure environments and provide supports so that restraint and seclusion are unnecessary."

- *US Department of Education, 2012*

BACKGROUND

Historically, restraint and seclusion were used in institutional settings in order to manage large numbers of people. There was, and is, no evidence that the use of restraint and seclusion has any therapeutic value in reducing unwanted behaviour.

In the United States, the Department of Education collected each State's statutes, regulations, policies, and guidelines regarding the use of restraint and seclusion and posted the results on the Department's website. The Department also began the process to require reporting of the total number of students subjected to restraint or seclusion and the total number of times that restraint or seclusion occurred.

The US Department of Education produced a resource document on Restraint and Seclusion in 2012. The opening paragraph reads, ***"The foundation of any discussion about the use of restraint and seclusion is that every effort should be made to structure environments and provide supports so that restraint and seclusion are unnecessary."***

An examination of school records in the US covering a 19-year span identified several hundred cases of alleged abuse, including deaths related to restraint and seclusion of children in schools. This report also pointed to the problem of untrained or poorly trained staff.

In British Columbia, there is no requirement to document or report incidents of restraint or seclusion, and no provincial regulation of these practices. While our survey was not aimed at students with disabilities, it should be noted that the results point to a disproportionate use of restraint and seclusion with this group of children.

Seclusion room at New Westminster Secondary School, New Westminster, BC. Photo contributed.

SURVEY RESULTS

The following information are key points from the survey.

- Approximately **200** parents or legal guardians completed the survey from all areas of the province
- While approximately **300** people began the survey, respondents who did not self-identify as parents or legal guardians were excluded from the survey.
- Twice as many of the students were male than female

Nearly half of all *respondents reported physical injury or obvious signs of physical pain occurred during restraint.*

QUESTIONS ON RESTRAINT

An average of 65 responded to all questions on the use of restraint.

- Age distribution of children subjected to restraint:

  5-10 years -41
  11-13 years-14
  14-19 years-4
  All of the above-12

41 children ages 5-10 *were reported restrained in this survey.*

- Forms of restraint reported included:
  - seated hold
  - vertical hold
  - prone and supine holds
  - wheelchair straps around legs and seatbelt
  - wrestling hold with pressure
  - teacher held him down-"he was only 7 years old"
  - holding wrists by one person and being physically pushed into a room by another individual
  - teacher using body to keep the student in a corner and not letting him pass
  - grabbed on arms and held. Received scratches and bruising
  - dragged by the wrists
  - physically pushed into a room
  - chair pushed up against (child's) legs of the chair he was in, one adult on each side
  - star hold performed by 3 adults to an 8 year old
  - twisting arms behind the back of a student by two adults
  - being yelled at while forcibly held in a chair
  - lights out, alone in room, door closed

Restraint methods included: *prone and supine holds; wrestling holds with pressure; being dragged by the wrists; being physically pushed into a room.*

72% reported that they learned about the restraint of their child through someone other than the school.

80% of respondents said that they raised concerns about the restraint and were not satisfied with the response.

More than three quarters of restrained children experienced emotional trauma, and nearly half of all respondents reported physical injury or obvious physical pain.

- Half of the respondents reported the use of **prolonged physical isolation** as a form of physical restraint, for example being forced to stay in a locked lunch room without supervision.

- The primary educational settings where children are restrained include:
    - resource rooms
    - closets
    - isolation rooms
    - stairwells and hallways
    - principals or vice principals office
    - sensory rooms
    - therapy rooms
    - classrooms

- The majority reported duration of restraint as between **5-30 minutes** followed by **1-3 hours**

- Special education assistants were reported as being the most common individual to participate in or be aware of the restraint, followed by special education teacher, resource teacher then school administrators (principal/vice principals)

- **Nearly half of all** respondents reported physical injury or obvious signs of physical pain occurred during restraint

- **More than three quarters** reported emotional trauma

- Approximately one third of respondents said that they were rarely informed by the school principal, vice principal, teacher or education assistant and almost never in writing **(96%).**

- **72%** reported that they received the information through someone other than the school. For example, one parent found an anonymous note on their car, others happened to walk into the school while the restraint was occurring.

- Most respondents did not consent to the use of restraint.- **64%**

- **80%** of respondents said that they raised concerns about the restraint and were not satisfied with the response.

- When asked whether or not the child has a behaviour support plan at the school **56%** responded yes.

QUESTIONS ON SECLUSION

- An average of **100** responded to questions on seclusion
- **Most (84%)**reported that the child was physically prevented from leaving by an authority figure and **many** reported that the door was locked

  "Sent out alone, unsupervised for others to see and feel full humiliation"

  "Not permitted to go with his group to a weekly out of school dance class because he was too "slow" getting ready"

  "It was in a certain area of the resource room, surrounded on all sides by furniture"

  "Taken to a resource room and told to stay there or there would be punishment for leaving. She was left alone in this room at the age of 7. In the classroom this child and two other special needs children had their desk placed at the back of the classroom. In a corner."

  "Cardboard carrel built around him"

  "A closed door is a locked door to the child"

- Reported duration of seclusion

  5-30 minutes – 25%
  30 min-1 hr – 22%
  1-3 hours – 16%
  More than 3 hours – 10%

- **20%** report this as a daily occurrence with **56%** reporting once in a while, happened only once, not this year or not sure **due to lack of documentation**.

- An astounding **79%** of respondents reported emotional trauma and 18% reported physical injury or pain.

Other adverse reactions:

"The room had a phone, so he dialed 911"

"She has not learned to be around others and included amongst peers"

"The room had a phone, so he dialed 911."

- *Survey respondent*

"Humiliation, breaking his spirit, created anger, resistance, not wanting to be at school or near the teacher-fear"

"Ostracized by peers, grades fell dramatically. Also started coming home in the middle of the day, extreme behaviour changes due to being overwhelmed, and we as his parents were never informed by the school of the seclusion"

"My daughter would be quite upset with her time outside as it was extended too long and in terrible weather and there has been a lot of crying when dropping off at school and picking her up"

"Acting out; loneliness; sadness; losing friendships and social skills; forgotten by previous children for birthday"

"Self harm"

"Emotional trauma that caused anxiety which led to an increase in seizures"

"Increased school aversion, hopelessness, depression, decreasing self confidence and self worth, ...targeting of parents"

"Head banging, hitting herself"

"Few to no social opportunities, no chance to build self-esteem, no chance to build resilience, no chance for peers to see his strengths, no feeling of being valued in his community; no reason to participate in grad as he knows no one and they don't know him; little to no chance to build conversation skills/cooperation"

49 children in this survey were removed from the public school system by their families due to restraint and seclusion.

"I had enough. I removed him in March."

- *Survey respondent*

- A high number **(60)** said they were rarely or never informed by the school principal, vice principal, teacher or education assistant and almost never in writing **(95).**
- **58** reported they received the information through someone other than the school.
- Most respondents did not consent to seclusion – **80%**
- **68%** raised concerns about the seclusion and **92%** were not satisfied with the response.
- The survey asked whether the respondent, because of restraint or seclusion has removed a child from school. **47%** of those who answered this question responded yes, indicating that **49** children were removed from the public school system due to restraint and seclusion.
- Individuals were invited to contact Karen De Long at Inclusion BC if they wished to share their story. **9** families did contact the office.

A QUESTION OF HUMAN RIGHTS

Restraint and seclusion is a human rights issue. Canada ratified the UN Convention on the Rights of Persons with Disabilities in March 2010, and the UN Convention on the Rights of the Child in 1991. The use of restraint and seclusion directly invokes these Conventions, and violates the rights of children and of persons with disabilities upheld within the Conventions.

UN Convention on the Rights of Persons with Disabilities: Ratified by Canada in March 2010

Article 1-Purpose

The purpose of the present Convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.

Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.

Article 4- General Obligations

1. States Parties undertake to ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability. To this end, States Parties undertake:

   (a)To adopt all appropriate legislative, administrative and other measures for the implementation of the rights recognized in the present Convention;

   (b) To take all appropriate measures, including legislation, to modify or abolish existing laws, regulations, customs and practices that constitute discrimination against persons with disabilities;

Article 16-Freedom from exploitation, violence and abuse

2. In order to prevent the occurrence of all forms of exploitation, violence and abuse, States Parties shall ensure that all facilities and programmes designed to serve persons with disabilities are effectively monitored by independent authorities.

5. States Parties shall put in place effective legislation and policies, including women and child-focused legislation and policies, to ensure that instances of exploitation, violence and abuse against persons with disabilities are identified, investigated and, where appropriate, prosecuted.

Every person with disabilities has a right to respect for his or her physical and mental integrity on an equal basis with others.

- *UN Convention on the Rights of Persons with Disabilities*

States Parties shall ensure that…effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.

- *UN Convention on the Rights of Persons with Disabilities*

Article 17-Protecting the Integrity of the person

Every person with disabilities has a right to respect for his or her physical and mental integrity on an equal basis with others.

Article 24-Education

1. States Parties shall ensure an inclusive education system at all levels and lifelong learning directed to:

   (a) The full development of human potential and sense of dignity and self-worth, and the strengthening of respect for human rights, fundamental freedoms and human diversity;

3. In realizing this right, States Parties shall ensure that:

   (e) Effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.

Article 31-Statistics and data collection

1. States Parties undertake to collect appropriate information, including statistical and research data, to enable them to formulate and implement policies to give effect to the present Convention.

United Nations Convention on the Rights of the Child
Ratified by Canada in 1991

The Preamble

- recalls the basic principles of the United Nations and specific provisions to certain relevant human rights treaties and proclamations such as the Universal Declaration of Human Rights;
- reaffirms the fact that children, because of their vulnerability, need special care and protection; and,
- places special emphasis on the primary caring and protective responsibility of the family, the need for legal and other protection of the child, the importance of respect for the cultural values of the child's community, and the vital role of international co-operation in achieving the realisation of children's rights.

Article 2 - Non-discrimination

The Convention applies to all children, whatever their race, religion or abilities; whatever they think or say, whatever type of family they come from. It doesn't matter where children live, what language they speak, what their parents do, whether they are boys or girls, what their culture is, whether they have a

disability or whether they are rich or poor. No child should be treated unfairly on any basis.

Article 19 - Protection from abuse and neglect

The State has an obligation to protect children from all forms of abuse and neglect, to provide support to those who have been abused and to investigate instances of abuse.

Article 23 - Children with disabilities

Children who have any kind of disability have the right to special care and support, as well as all the rights in the Convention, so that they can live full and independent lives.

Article 28 - Education

The child has the right to education; the State has a duty to make primary education compulsory and free to all; to take measures to develop different forms of secondary education and to make this accessible to all children. School discipline should be administered in a manner consistent with the child's human dignity.

Article 29 - Aims of education

Education should be directed at developing the child's personality and talents; preparing the child for active life as an adult; fostering respect for basic human rights; developing respect for the child's own cultural and national values and those of others; and developing respect for the natural environment.

Article 39 - Rehabilitation of child victims

Children who have been neglected, abused or exploited should receive special help to physically and psychologically recover and reintegrate into society. Particular attention should be paid to restoring the health, self-respect and dignity of the child.

Taken from FACT SHEET: A summary of the rights under the Convention on the Rights of the Child-unicef.

Seclusion room at New Westminster Secondary School, New Westminster, BC. Photo contributed.

School discipline should be administered in a manner consistent with the child's human dignity.

- *UN Convention on the Rights of the Child*

RESOURCES

Inclusion BC – inclusionbc.org

Inclusion BC, formerly the BC Association for Community Living, is a provincial federation working with partners to build community and to enhance the lives of children and youth with special needs, adults with developmental disabilities, and their families by supporting abilities, promoting action and advancing rights, responsibilities and social justice.

Family Support Institute – familysupportbc.com

The Family Support Institute was founded in 1986 in response to the request and need of families of people with disabilities for an independent organization that would "strengthen families faced with the extraordinary circumstances that come with having a family member who has a disability." Believing that families are the best resources available to support one another, FSI organizes training for local parents as volunteers in communities across BC to be regional resource parents.

TASH – tash.org

The focus of TASH is supporting those people with significant disabilities and support needs who are most at risk for being excluded from society; perceived by traditional service systems as most challenging; most likely to have their rights abridged; most likely to be at risk for living, working, playing and learning in segregated environments; least likely to have the tools and opportunities necessary to advocate on their behalf; and are most likely to need ongoing, individualized supports to participate in inclusive communities and enjoy a quality of life similar to that available to all people.

Stop Hurting Kids - stophurtingkids.com (Inclusion BC has become a partner in this campaign).

Stop Hurting Kids is the national US campaign to end restraint and seclusion abuse in schools. It was developed to combat abusive practices that can lead to physical injury, trauma and death. For too long students across the U.S. have been at risk of restraint and seclusion techniques that have been proven to hold no educational or therapeutic value, despite evidence-based, positive alternatives.

http://stophurtingkids.com/the-film/

Dr. Pat Mirenda

Pat Mirenda is a Professor in the Department of Educational and Counselling Psychology and Special Education at the University of British Columbia , where she has been on faculty since 1996. She is also a Board Certified Behavior Analyst (BCBA). In 2004, Dr. Mirenda received the Killiam Faculty Teaching Prize in the Faculty of Education at UBC and was named a Fellow of the American Speech-Language-Hearing Association. In 2008, she was named a Fellow of The International Society for Augmentative and Alternative Communication. In 2009, she became Director of The Centre for Interdisciplinary Research and Collaboration in Autism (CIRCA) at UBC.

Functional Assessment and Positive Behaviour Support
http://faculty.educ.ubc.ca/pmirenda/fapbs.html
http://faculty.educ.ubc.ca/pmirenda/publications.html#pbs

Dr. Vianne Timmons

Education: BA, English and Psychology, University of Sackville (1979); BEd, Special Education, Acadia University (1980); MEd, Special Education, Gonzaga University (1983); PhD, Education Psychology, University of Calgary (1993)

Dr. Timmons grew up in Newfoundland and Labrador and spent her early teaching career in Alberta and British Columbia. She moved to Atlantic Canada in 1992 to join St. Francis Xavier University, where she was the chair of the Education Department. In 1996, she joined the Faculty of Education at the University of Prince Edward Island, and became Vice-President, Academic Development in 2001 - a position she held until she joined the University of Regina as the President and Vice-Chancellor.

During the course of her career, Dr. Timmons has authored or edited nine books, written more than a dozen book chapters, and authored more than 40 peer-reviewed articles in leading academic journals. She has been either the principal investigator or a co-investigator on more than 30 funded research projects, and has presented more than 150 invited lectures about her work.

Dr. Timmons has authored or coauthored:

Inclusive Education across Cultures: Crossing Boundaries, Sharing Ideas by Mithu Alur and Vianne Timmons (May 12 2009)

The Challenges of Student Diversity in Canadian Schools: Essays on Building a Better Future for Exceptional Students

Exploring Inclusive Educational Practices Through Professional Inquiry
Gordon L. Porter, Déirdre Smith (Eds.)
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