



Family Position Statement on Restraint/Seclusion Prevention

Families of Massachusetts are advocating for safer treatment and educational services for our children so they can learn, heal and develop resiliency. We are doing this because treatment settings, schools, and other services for children ("services") continue to use restraint and seclusion - which are violent, dangerous practices. We established these goals with the hope that, together, we can eventually eliminate these harmful procedures:

Goal #1

Restraint and seclusion must be prevented because they are high-risk, dehumanizing, traumatizing events for children, staff and families – whether they are involved directly or indirectly.

Restraint and seclusion place children and staff at significant risk for physical and emotional injury. They also cause children and families to feel powerless and negatively impact the relationships between staff members and those they serve. Restraint and seclusion are reactive procedures – not proactive interventions. They meet crisis with crisis, violence with violence, and they do not teach effective skills to manage conflict and difficulty in order to thrive at home, at school, or in the community.

Here are three things that families can do to help prevent, reduce and strive to eliminate restraint and seclusion in your child's service:

- Read your child's individualized educational program (IEP) or treatment/service plan and ensure that restraint or seclusion are not written into the plan.
- Read the service's policy on restraint and seclusion. You do not have to consent to these practices being used with your child.
- Refer to the resources below and become educated about the harmful effects of restraint and seclusion.

Goal #2

Helpful, pragmatic steps must be taken to prevent restraint and seclusion use. Positive interventions can empower children, families, and staff members to feel more hopeful and effective in managing behavioral challenges. Families and staff members need the same tools: a) training on trauma-informed, strength-based, sensory-oriented approaches to self-soothing and self-calming; and b) techniques on how to help children learn and practice these skills wherever they are.

Here are three things that families can do to advocate for more collaborative and respectful care in your child's service:

- Talk to your child's service and see if they will work collaboratively with you. Learn about SAMHSA's Building Bridges Initiative (BBI) – a national effort to promote youth-guided, family-driven practice where families work in partnership with providers to transform services.
- Get involved! Become an advocate, contact local advocacy agencies, join your local school district's Special Education Advisory Council, and find ways to become active at your child's service.
- Write letters to the leadership of your child's service and explain the importance of using sensory-based interventions and positive behavioral supports to prevent and reduce restraint and seclusion use.

Goal #3

All services should adopt and practice essential values to prevent restraint and seclusion. Important values that reflect good care and service are: safety, teamwork, family-guided practice, communication, honesty, responsibility, and mutual respect.

Here are three ways that families can help transform the value system in your child's service:

- Learn about the philosophy of your child's service. Ask for the written materials that describe their approach to those they serve. Review their restraint and seclusion policies and practices and their plans to prevent and reduce their use.
- Find out if your child's service has a quality improvement committee to address restraint and seclusion use and if family members may join. If not, advocate for families to be included on these committees. If these committees do not exist, start one!
- Urge your child's service to become familiar with the Six Core Strategies© (6CS) to prevent conflict/violence and the use of seclusion and restraint. This evidence-based practice has been used successfully across service settings with people of all ages.

This position statement was developed by Massachusetts' families with the help of the Parent Professional Advocacy League (PPAL), an organization of parents and professionals who advocate on behalf of children with mental, emotional or behavioral health needs and their families, and with the support of the Massachusetts Department of Mental Health. However, the result is our own and does not necessarily reflect the official position of any organization. The process to develop this declaration began in 2011 and continued for many months. It involved extensive dialogue with families across the state whose perspectives were solicited at different forums. All who participated in this work had children who experienced restraint and seclusion or were exposed to these practices in mental health, child welfare, juvenile justice or school services. The collective perspectives and opinions of these families resulted in this position statement. We are indebted to the contribution of all who participated and hope this helps families and services work together and continually strive to prevent and reduce the use of restraint and seclusion wherever children are served.

Resources:

www.ndrn.org/issues/abuse-and-neglect/restraint-and-seclusion.html

www.mass.gov/dmh/rsri

www2.ed.gov/policy/seclusion/index.html

www.buildingbridges4youth.org

www.cwla.org

www.nami.org/youth

www.nasmhpd.org

www.ppal.net

www.samhsa.gov

www.tash.org



Massachusetts Department of Mental Health

"Please- stop and think before you use restraint and seclusion. It is hurtful! When you hurt a child, you also hurt their family. Help give a child new skills, not new fears."



"Laying hands on my child only solves the staff's problem in the moment- but teach me and my child how to work through the challenge and you give us skills to last a lifetime."

