

HB Bill 1318-support
House Education Committee
Tuesday, January 19, 2021

Chairman Owens and Members of the House Education Committee.

My name is Donene Feist and I am the Executive Director for Family Voices of ND. Family Voices of ND is the Family to Family Health Information Center in ND

I am before you in support of House bill 1318, a bill to adopt seclusion and restraint policy for school districts.

Our work includes working with families who have children and youth with disabilities, chronic health conditions and special needs. We also work with professionals in educating the overall health needs of persons with disabilities. Each year we receive calls from both parents and professionals regarding seclusion and restraint issues for a child. We have seen pictures of bruises, teachers in tears, parents horrified, and children traumatized.

Our staff has worked with many families whose children have been a victim of seclusion and restraint but no story more poignant than a family one of our FVND staff had worked with a family in ND that had moved here from another state, living in rural ND. There had been multiple incident reports of their youth with a disability on seclusion and restraint, along with bullying issues at school. This had been going on for over a year. Parents had been seeking help everywhere but were told it was in the hands of the local school. No help was to be found. After a year or so of torment, this youth decided life was too tough and committed suicide. The trauma was so severe on the mother, when she returned to her home in another state, she also committed suicide. Left was a father searching for answers. This should not be happening to anyone.

Every Human Services system; hospitals, mental health facilities, residential treatment facilities, juvenile justice and senior services facilities are controlled by federal legislation that seriously limits seclusion and restraint to emergency and imminent situations , EXCEPT in the public-school system. **According to the Education Department data, 122,000 students across the country were subject to restraint and seclusion during the 2015-2016 academic year. 71% of those restrained and 66% of those secluded were in special education.(U.S. Department of Education January 2019).**

Main points:

- Both restraint and seclusion are dangerous practices. By nature, they involve physical contact between a staff member and student. A result that may end up in students and teachers getting hurt. We need to protect both staff and students.
- There is a myth that restraint and seclusion are necessary to keep our schools safer. **In fact, many schools that report they have eliminated the use of seclusion and restraint, have reported significant declines in worker's compensation claims. (U.S. Department of Education, July 2018.)**
- For Behavior Management, restraint and seclusion can cause more harm than good. The physical confrontation, the being secluded in many times a small room alone, traumatizes the student, but also can traumatize school personnel, and other children watching or witness to an incident. There is evidence **(National Child Traumatic Stress Network)** that students as well as staff have an enhanced "flight- fright" response. It is noted that a "flight-fight" response is not a willful choice but is triggered biologically in the stressed person.
- Impact on a child's developing brain is both short and long term. The ACES study (Adverse Childhood Experiences) shows both long- and short-term effects include; **(US Department of Justice and Education, 2018)**

1. Social and health problems
2. Depression
3. Alcoholism
4. Drug use

5. Chronic disease
6. Suicide
7. Involvement within a Justice System

- Behavior is a form of communication. The behaviors children display is often a manifestation of a disability. Most children who have communication deficits can learn and develop communication strategies, which in turn can diminish the behavioral (communication) issues. Supports and Services are needed to accomplish this. ***We need to think intervention not punishment.*** The need for seclusion and restraint is a result of insufficient investment in prevention.

On a personal note, one of my very close relatives was a victim of seclusion and restraint as a youngster. The long term PTSD effects of his experience from school seclusion and restraint are haunting. He has experienced every one of the ACE Study long term effects listed above. Talented, bright, over-achiever who continues to battle PTSD today. If only, he had been treated differently. He talks about the many times he was labeled the bad kid, the good for nothing kid, the kid that his teachers were embarrassed of, held down and couldn't breathe. Defenseless, scared and no one to help him. He talks about every time there was an incident they would look to him as being the guilty party. He became the scape-goat. Can you imagine living your entire life thinking you were not good enough? Many years later, he still has those same thoughts. That no one cares, no one sees the potential. We can do better, we need to stop this madness.

Let's work together and invest with the commitment of supports and services.

I thank you for your time and consideration for House Bill 1318.

Donene Feist

Family Voices Director

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