

# *Recent Changes in State Policies and Legislation Regarding Restraint or Seclusion*

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**ABSTRACT:** *In this article, we describe and evaluate the extent to which recent changes to state-level policy are related to seclusion and restraint in schools and detail what components of comprehensive restraint and seclusion policy are indicated. We examined state policy documents and coded them for the presence of specific characteristics related to prevention of problem behavior, intervention, and reporting. Results indicate a clear consensus that restraint and seclusion procedures should be used only as a last resort in the case of emergency and not as a punitive measure. Additional policy trends include recommendations for the use of positive behavior supports and the use of de-escalation strategies. Some debate exists about the use of time limits and limitations on specific techniques, such as prone restraints.*

**T**he enactment of the Individuals with Disabilities Education Act (IDEA) brought a requirement to serve students with disabilities in the least restrictive environment. One implication of this requirement is the increased inclusion of students with significant behavioral issues in general education settings, rather than in self-contained programs or psychiatric hospitals. The use of restraint and seclusion procedures to manage significant behavioral issues has moved with these students into the school setting (Ryan & Peterson, 2004). Significant safety issues and abuse cases have prompted a concerted effort by advocacy groups to regulate the use of these procedures in the school setting. With only limited federal guidance, states have been asked to update or develop legislation or

policy regulating the use of seclusion and restraint in the school setting (Council of Parent Attorneys and Advocates, 2009; Duncan, 2009; National Disability Rights Network, 2009).

*Significant safety issues and abuse cases have prompted a concerted effort by advocacy groups to regulate the use of restraints and seclusion in the school setting.*

The purpose of this article is (a) to evaluate the extent to which state-level policies have recently changed in regulating the use of seclusion or restraint procedures, and (b) to detail what components of comprehensive restraint and seclusion policy are indicated. We describe common trends in state policy changes and the extent

to which those trends match recently proposed federal legislation.

#### BACKGROUND INFORMATION

Many personnel have used physical restraint with children in clinical settings since the 1950s, and in law-enforcement and psychiatric institutions with adults before then. Whereas the use of seclusion or restraint by most psychiatric and law enforcement agencies is strictly regulated, most school districts do not provide such regulations (Ryan & Peterson, 2004). In 1998, an investigation by the *Hartford Courant* (Weiss, 1998) revealed 142 deaths related to the use of restraint over a 10-year period; 33% of these deaths were caused by asphyxia. In May of 2009, a Government Accountability Office (GAO) report indicated the difficulty in obtaining an accurate count of deaths related to seclusion or restraint because of a lack of systematic data reporting. The GAO committee, however, received descriptions of hundreds of deaths between 1990 and 2009 related to restraint. The GAO report indicated that many personnel used seclusion and restraint as disciplinary tactics, rather than as emergency safety measures and that personnel used these practices disproportionately on children with disabilities.

Also in 2009, the Council of Parent Attorneys and Advocates (COPPA) released a report titled *Unsafe in the Schoolhouse: Abuse of Children with Disabilities*. This report provided a summary of survey results in which 185 incidents of abuse were reported as involving the use of restraint, seclusion, or aversive techniques. Results indicated that 64.4% of reported abuse cases involved restraint, 58.3% involved seclusion, and 30% involved aversive procedures. The majority of these incidents (68%) involved students with autism or Asperger's syndrome, and 27% involved students with attention deficit disorder.

Amid growing concerns, in part triggered by the results of these reports, Ryan, Robbins, Peterson, and Rozalski (2009) and the U.S. Department of Education conducted a review of state regulations and policy and found that 19 states had no statewide regulations in place. In addition, U.S. Secretary of Education Arne Duncan (2009) sent a letter to chief state school officers asking for

a review and update of legislation and policies related to restraint and seclusion.

At the time of this writing, federal legislation has been introduced but not passed in both the U.S. House of Representatives and the U.S. Senate. This legislation would provide important guidance for states. Proposed legislation would limit the use of physical restraint to emergency situations only and eliminate the use of seclusion and mechanical or chemical restraint. Requirements for (a) staff training, (b) continuous face-to-face monitoring of the restrained student, (c) parental notification, and (d) debriefing are included in the proposed legislation. In addition, funding would be available to increase states' capacity to collect and analyze data, as well as implement schoolwide positive behavior supports.

A 2010 update to the *School Is not Supposed to Hurt* report documented limited changes to state policy documents and slow responses by states (National Disability Rights Network, 2010). In this article, we provide a description of recent changes to state policy documents as a result of the growing pressure to regulate restraint and seclusion procedures in schools, and we document trends in state policy in relation to available research and proposed federal legislation.

#### RESEARCH QUESTIONS

We address two specific research questions:

1. To what extent have states made changes to legislation or policy related to seclusion or restraint in the school setting, in response to the request from the U.S. Department of Education?
2. What elements of comprehensive restraint and seclusion policy are present in related state-level policy or legislation?

#### METHODS

##### SAMPLE

To determine the extent to which states have made changes and to characterize the components of state restraint and seclusion policies, we collected and reviewed the policy or legislative docu-

ments from all 50 states and Washington, D.C. We did not include U.S. territories.

#### SEARCH PROCEDURES

Search procedures began with a review of the *Summary of Seclusion and Restraint Statutes, Regulations, Policies and Guidance, by State and Territory: Information as Reported to the Regional Comprehensive Centers and Gathered from Other Sources* (U.S. Department of Education, 2010, which was compiled in 2010 and updated in 2011 by the U.S. Department of Education and verified by the states. The document contains links to current policy or legislative documents, as well as notes about any current revisions to state statutes that were in process. For the purposes of this research, we reviewed policies and legislative documents that were included in the U.S. Department of Education Summary. Whenever possible, we discussed policies and procedures for restraint and seclusion separately.

#### CODING PROCEDURES

Initially, we separated states into three categories: (a) with relevant legislation, (b) with relevant policy or guidance documents, and (c) with no school-based guidance or legislation. Next, we compared current policy documents with results from the review by Ryan et al. (2009). For states with policy or legislative documents enacted after Secretary Duncan's 2009 letter to chief state school officers, which contained updates based on this comparison, we coded them as changed or updated. Moreover, we recorded the existence of a comprehensive technical assistance document for the state, as well as the presence of legislative or policy language allowing the use of aversive techniques.

To describe the extent to which state documents included elements of comprehensive restraint and seclusion policy, we coded each state document for the presence of specific characteristics related to prevention, intervention, and reporting.

We coded specific elements as "L" if legislation addressed the element, "P" if policy addressed the element, and zero if the element was not present. We coded preventative elements for (a) recommendations for schoolwide positive be-

havioral interventions and supports (SW-PBIS), (b) a behavior plan based on functional behavior assessment (FBA), and (c) staff training in de-escalation techniques.

Intervention characteristics included specific guidance regarding (a) time limits, (b) limitations on specific practices or settings, (c) application of the policy to all students, and (d) relief from seclusion or restraint for toilet and food as needed.

Reporting characteristics included procedures for (a) reporting to parents, (b) reporting to the state, (c) team debrief, and (d) student debrief. Table 1 lists and defines key terms.

## RESULTS

### RESEARCH QUESTION 1

Since the 2010 U.S. Department of Education review, 30 states have updated or added legislation or policy statements (Figure 1).

### RESEARCH QUESTION 2

Currently, 33 states have legislative or regulatory documents related to seclusion and restraint in schools, and 15 states have policy or guidance documents (Figure 1). Across these legislative or policy documents, we found four general trends. First, preventative techniques were suggested (Figure 2): (a) de-escalation training, (b) FBA, and (c) SW-PBIS.

Second, limitations were placed on specific procedures (Figure 3): (a) time duration, (b) prone restraints, and (c) restraint or seclusion for the purposes of punishment.

Third, reporting requirements to parents and state were defined (Figure 4). Finally, requirements for debriefing with staff and students were indicated (Figure 5).

For a list of specific states included in each of these categories, readers may contact the lead author. In general and across states, concern about student safety has increased, and schools are expected to reduce or eliminate the use of seclusion and restraint procedures, except as a last resort, emergency procedure.

**TABLE 1**  
*Definition of Key Terms*

<i>Term</i>	<i>Definition</i>
Legislation or Regulation	A proposed or enacted group of laws and the supporting regulations describing the implementation of the law.
Policy or Guidance	Statements or documents that set out the state views and expectations related to school district responsibilities and duties
Seclusion	The isolation of a student in a room, enclosure, or space that is (a) locked; or (b) unlocked and the student is prevented from leaving. ( <a href="http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:">http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:</a> )
Physical Restraint	Personal restriction that immobilizes or reduces the ability of an individual to move the individual's arms, legs, body, or head freely. Such term does not include a physical escort, mechanical restraint, or chemical restraint. ( <a href="http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:">http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:</a> )
Chemical Restraint	A drug or medication used on a student to control behavior or restrict freedom of movement that is not (a) prescribed by a licensed physician, or other qualified health professional acting under the scope of the professional's authority under State law, for the standard treatment of a student's medical or psychiatric condition; and (b) administered as prescribed by the licensed physician or other qualified health professional acting under the scope of the professional's authority under State law. ( <a href="http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:">http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:</a> )
Mechanical Restraint	(A) has the meaning given the term in section 595(d)(1) of the Public Health Service Act (42 U.S.C. 290jj(d)(1)), except that the meaning shall be applied by substituting 'student's' for 'resident's'; and (B) does not mean devices used by trained school personnel, or used by a student, for the specific and approved therapeutic or safety purposes for which such devices were designed and, if applicable, prescribed, including— (i) restraints for medical immobilization; (ii) adaptive devices or mechanical supports used to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; or (iii) vehicle safety restraints when used as intended during the transport of a student in a moving vehicle. ( <a href="http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:">http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:</a> )
Physical Escort	Means the temporary touching or holding of the hand, wrist, arm, shoulder, waist, hip, or back for the purpose of inducing a student to move to a safe location. ( <a href="http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:">http://thomas.loc.gov/cgi-bin/query/F?c112:1:./temp/-c112SkXQxk:e897:</a> )
Time Out From Reinforcement	Temporarily removing a child's access to a reinforcing environment or setting for a specific time duration contingent on inappropriate behavior. The child is not prevented from leaving or secluded.
Comprehensive Technical Assistance Document	A document describing in detail the expectations and procedures related the use of seclusion and restraint in public schools. Comprehensive documents include: <ul style="list-style-type: none"> <li>• Operational definitions of terms,</li> <li>• Descriptions of preventative techniques,</li> <li>• Description of required training elements,</li> <li>• Clear description of situations that warrant the use of restraint or seclusion (i.e., emergency situations)</li> <li>• Description of specific procedures which are allowed or prohibited including timelines</li> <li>• Description of reporting requirements and oversight procedures</li> <li>• Description of follow up procedures (i.e., team or student debrief)</li> </ul>

*continues*

**TABLE 1.** *Continued.*

<i>Term</i>	<i>Definition</i>
Schoolwide Positive Behavior Interventions and Supports (SW-PBIS)	“A decision making framework that guides selection, integration, and implementation of the best evidence-based academic and behavioral practices for improving important academic and behavior outcomes for all students.” ( <a href="http://www.pbis.org">http://www.pbis.org</a> )
Prone Restraint	A method of physical restraint where the student’s is secured in a face down position
Aversive Techniques	Techniques intended to cause pain or discomfort to students and when used as punishment for inappropriate behavior
Emergency	A serious, unexpected, and dangerous situation requiring immediate action in order to protect the safety of students and staff
De-escalation Training	Training provided to staff that includes strategies intended to calm a situation or prevent a crisis from developing further.
Functional Behavior Assessment (FBA)	A systematic process of assessment designed to identify the underlying function or purpose for a behavior. This information is then used to develop a specific and focused intervention plan.
Debrief	A structured conversation held after a crisis event occurs during which the event is reviewed for compliance to policy and/or information is collected which may be used to plan for preventing future crisis situations.

*TRENDS IN STATE POLICY*

*Technical Assistance.* Eight states provide districts comprehensive technical assistance documents (Figure 1). In addition to clearly stating the regulations or policies of the state, these documents explicitly define and give examples of the appropriate procedures related to prevention of emergency situations, use of specific seclusion and restraint, and specific reporting and debriefing. These technical assistance documents are typically written in practitioner-friendly language. Five states (Florida, Georgia, Maryland, Nebraska, and Oregon) use a question-and-answer format to clarify expectations. Kansas’ documents include worksheets to guide teachers and teams through decisionmaking processes.

*Schoolwide Positive Behavior Support.* The prevention of problem behaviors is an emphasis in most states, and 31 states have a requirement or a recommendation that school districts implement SW-PBIS as a framework to prevent problem behaviors and reduce the need for restraint or seclusion. Although three additional states do not include recommendations for SW-PBIS in seclusion and restraint policy, statewide efforts are in place to implement SW-PBIS generally. This

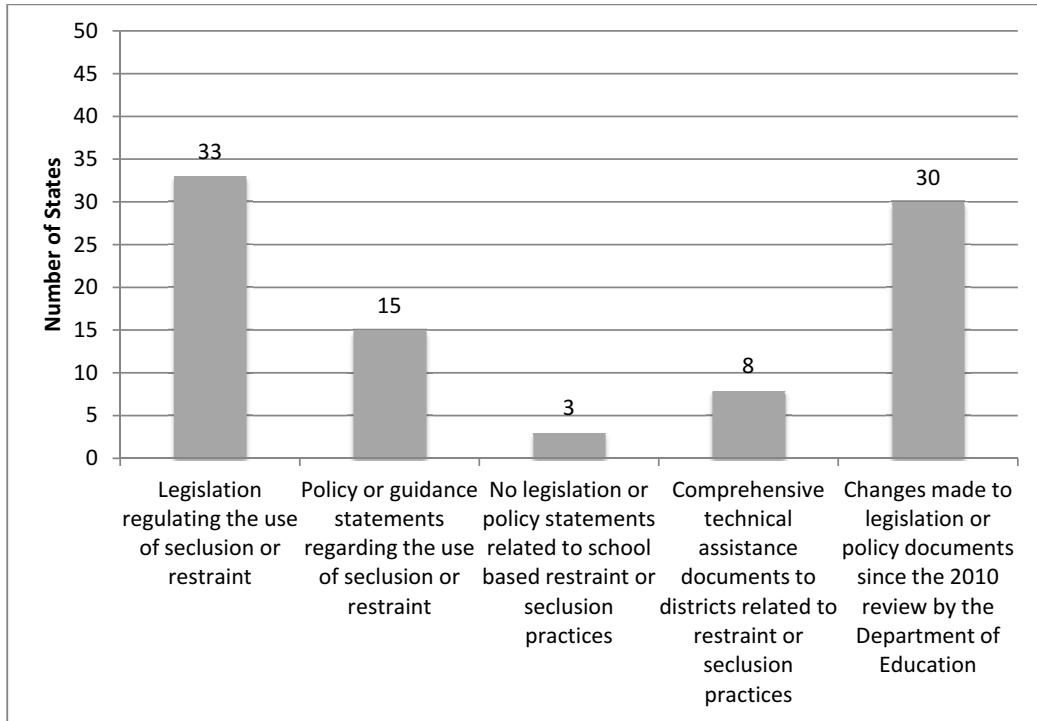
trend aligns with the proposed federal support for expanding the implementation of SW-PBIS.

*The prevention of problem behaviors is an emphasis in most states, and 31 states have a requirement or a recommendation that school districts implement SW-PBIS.*

*Time Limits.* Twenty-one states have attempted to define a specific limit for time duration when using seclusion or restraint. The general consensus across state policy documents is that restraint or seclusion procedures should be terminated as soon as the student is able to be safe or the emergency has passed. When specified, duration time limits range from “just minutes” to 24 hr; most states, however, limit the use of either seclusion or restraint from 30 min to 1 hr with a requirement for administrative approval for continuation of the procedures. Six states (Alabama, Arkansas, Hawaii, Michigan, Tennessee, and Wisconsin) differentiate time limits by student age, with shorter limits for younger students. New Hampshire specifically declined to define a duration time limit because of the tendency for a defined maximum in policy to

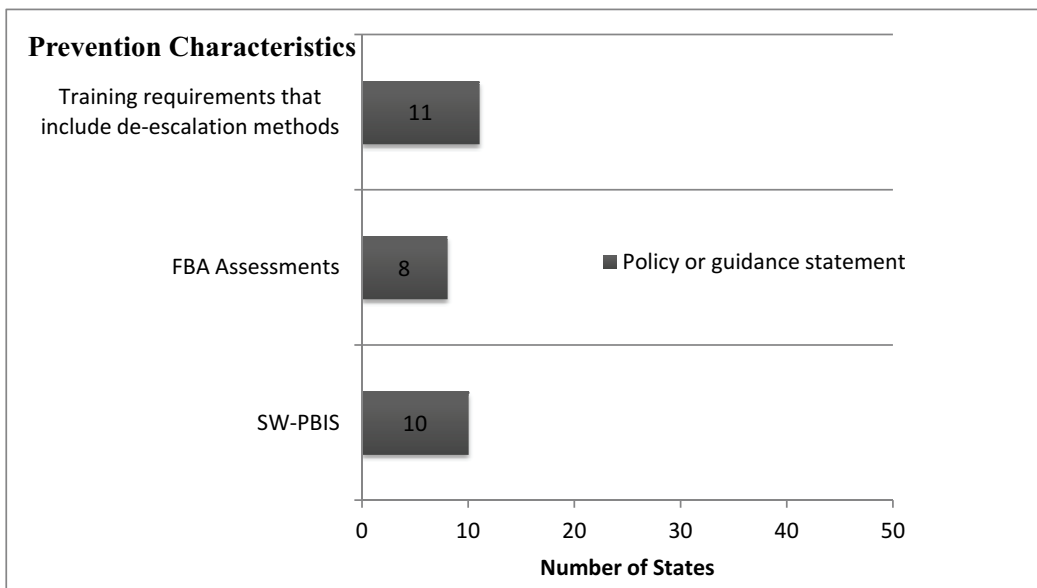
**FIGURE 1**

*Current Legislation or Policy Status*



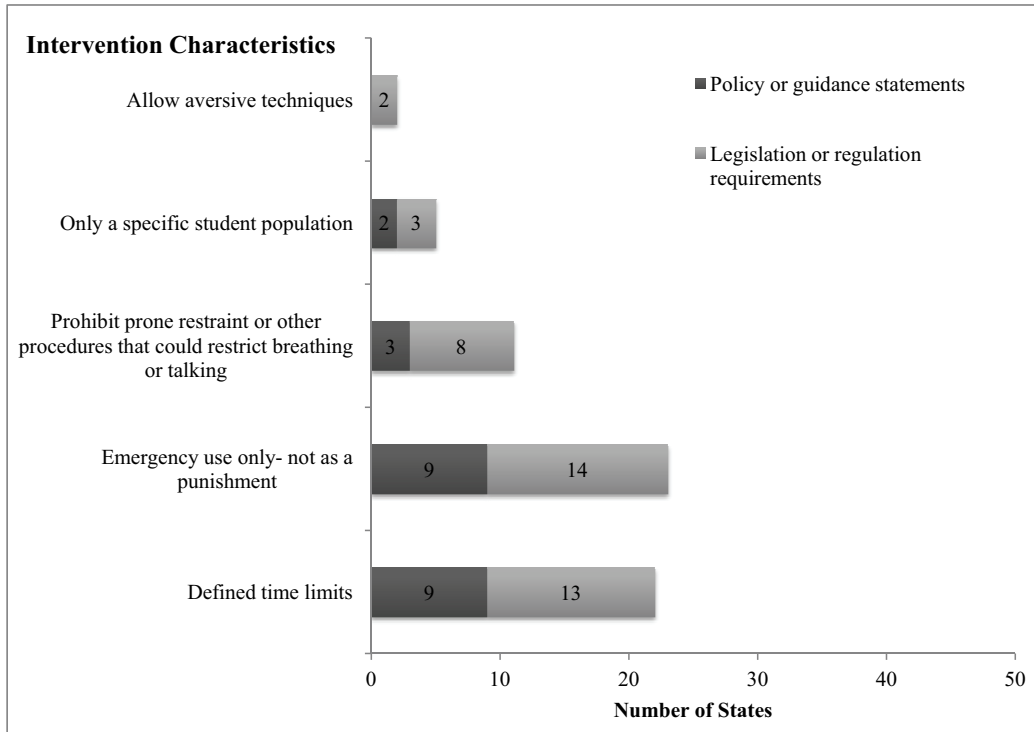
**FIGURE 2**

*Prevention Characteristic*

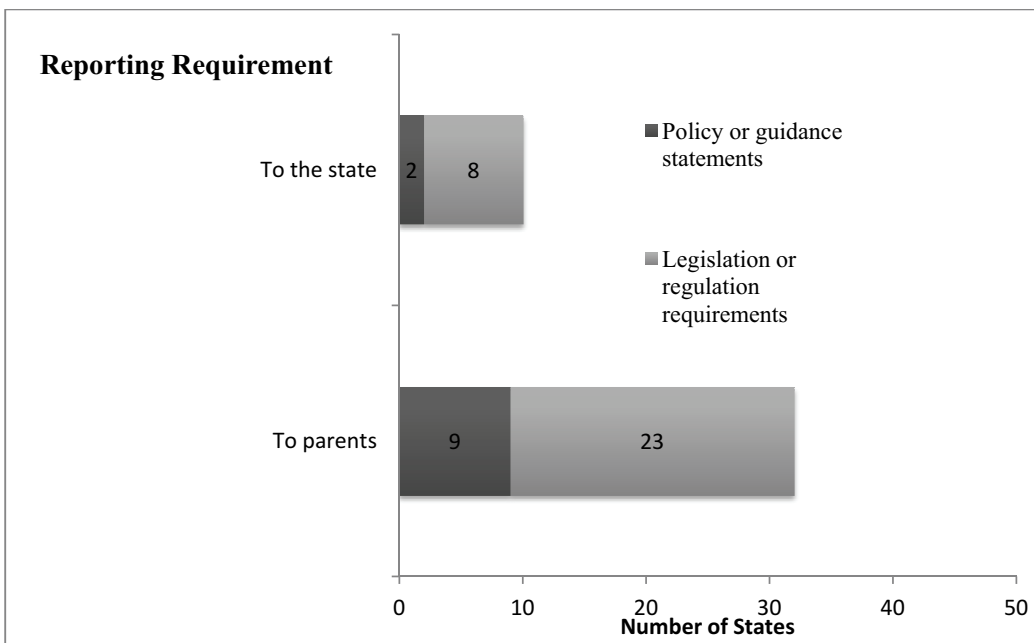


*Note.* FBA = functional behavior assessment; SW-PBIS = schoolwide positive behavioral interventions and supports.

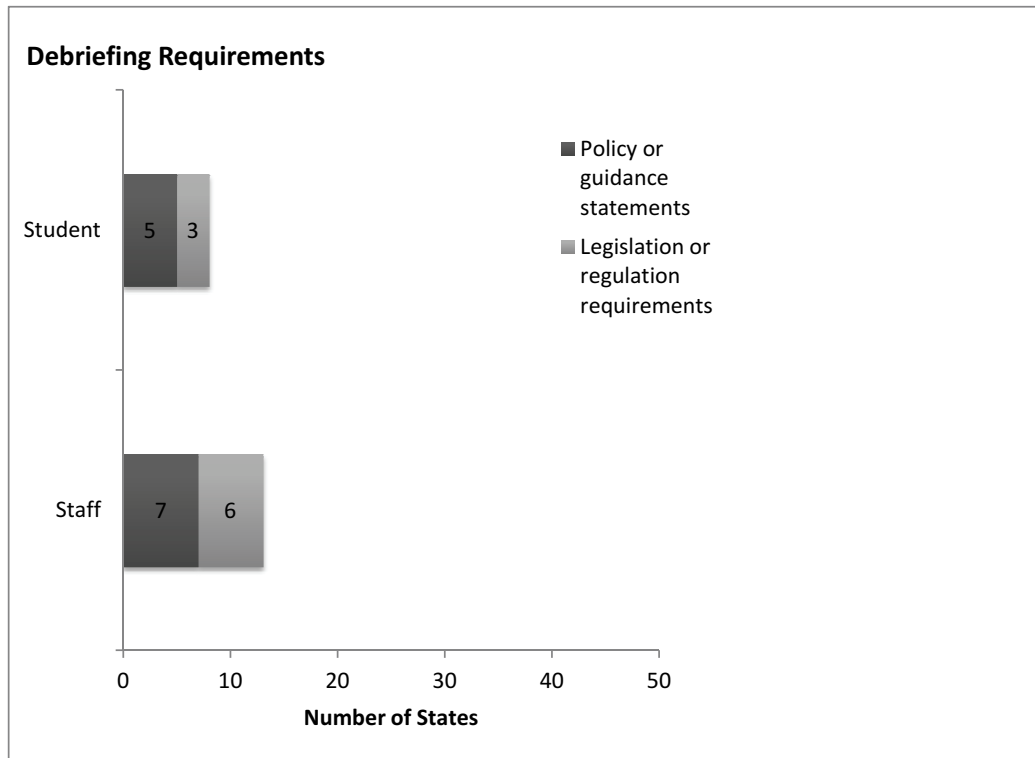
**FIGURE 3**  
*Intervention Characteristics*



**FIGURE 4**  
*Reporting Requirements*



**FIGURE 5**  
*Debriefing Requirements*



become the standard minimum in practice. In addition to defining time limits, Michigan requires a change of staff if seclusion exceeds the stated time limit, and Illinois limits repeated restraints within a 3-hr time period.

*Prone Restraints.* Prone restraints have come under intensive scrutiny as a result of the GAO report. Currently, 11 states have legislation or policy in place that prohibits or severely limits the use of prone restraints in schools, and eight states have banned the procedure completely. Only Illinois and Massachusetts allow its use when school employees have been specifically trained. Vermont allows the use of prone restraints only when student size makes other restraint procedures unsafe. Proposed federal legislation does not limit specific procedures—as long as the procedures do not limit the student’s ability to communicate or compromise the students health—but does address safety concerns by requiring continuous face-to-face monitoring.

*Reporting Procedures.* Thirty-two states have outlined procedures for requiring parental notifi-

cation, in most cases verbally, by the end of the school day and in writing within 1–3 days. In addition, 10 states require districts to report the use of restraint and seclusion procedures to the state. The timelines for reports ranged from within 3 days to annually. Pennsylvania policy, for example, requires annual reporting through a web-based system. Although Nebraska does not currently have a requirement for reporting to the state, their technical assistance document suggests school districts be prepared to do so in the near future. Proposed federal legislation would make grant money available to expand states’ capacity to collect and analyze data about the use of seclusion or restraint procedures.

**DISCUSSION**

The purpose of this article is to describe the features and changes that states have made to seclusion and restraint legislation and policies as of the spring of 2011 when this review was conducted. In general, most states have established or revised



their legislative and policy documents to ensure greater alignment with federal expectations and specificity and accountability at the local levels. Issues and procedures related to aversive procedures, prone restraint in particular, have been delineated. In addition, an emphasis on prevention and a differentiation between intervention and crisis/emergency situations have increased. Finally, states have enhanced procedures for reporting and debriefing.

More specifically, since the U.S. Department of Education review in 2010 30 states have updated or added regulations or policies in response to the 2009 request from Arne Duncan, the U.S. Secretary of Education. Twenty-three out of 30 current state policy documents indicate that these procedures should be used only as a last resort in the case of emergency and not as a punitive measure. In addition, we found that 31 states made recommendations for the use of SW-PBIS or equivalent and requirements for training that includes the use of de-escalation strategies. Discussion and debate seem to exist among states about the use of specific duration time limits and limitations on specific techniques, such as prone restraints. Although variable in duration length, 22 states have specified implementation time limits. Eleven states with recent policy updates have prohibited or restricted the use of prone restraints in response to safety concerns.

The findings and summaries related to this study should be considered in the context of a few limitations. First, this review was based on a search and examination of state websites and, as such, may not represent all policies and procedures related to restraint and seclusion that might be maintained elsewhere (e.g., state archives and registrar). Second, new or pending legislation or policy additions or changes may not have been posted and available at the state level because of time constraints associated with vetting requirements, posting technologies, posting requirements, and so forth. Third, the search methodology only included examination of web-based written documents and information. Actual implementation, enforcement, and evaluation of state-level legislation and policy for use of restraint and seclusion were not examined or evaluated. Fourth, because the federal and state governments generally are addressing restraint

and seclusion together, the findings from our review do not differentiate or highlight policies and procedures for restraint and seclusion, separately. Finally, because of the intentional descriptive nature of this project, inter-scorer agreement checks were not conducted, and, as such, the interpretive nature of the findings should be considered when reviewing our findings and implications.

## RECOMMENDATIONS

Given the preceding limitations, we consider our findings as underestimates of actual state efforts. Nonetheless, we believe these state policy trends provide insight into how states are interpreting, addressing, and evaluating concerns about restraint and seclusion, as well as suggestions and requirements related to these issues. Although states are responding with more specific and comprehensive policies, our findings reveal great variation in specificity, priority, and coverage of such policies. Our findings suggest that federal technical assistance and guidance are justified to assist states in establishing best practice policies. Such federal guidance can assist states in the adoption, use, restrictions, monitoring, and evaluation of restraint and seclusion procedures. As such, we present several recommendations related to policy development or revision, procedural implementation, accounting and reporting, personnel preparation, and data-based decisionmaking and evaluation.

*Federal Guidance.* State policies vary in content, and at the time of this review a number of states did not have policies or legislation regulating the use of seclusion or restraint. At a minimum, federal legislation is needed requiring states to enact comprehensive legislation regulating the use of seclusion and restraint so that students across the United States are protected (Council of Parent Attorneys and Advocates, 2009; National Disability Rights Network, 2009). Moreover, technical assistance from the federal government should include specific examples and comprehensive recommendations related to preventative strategies and specific procedural guidelines related to seclusion or restraint, reporting, and debriefing.

When restraint and seclusion are being considered together generally under the same policy umbrella, we recommend that each be defined, de-

scribed, and addressed separately with respect to use, restrictions, and safeguards. Relatedly, a clear distinction should be made between planned constructive treatment and intervention and crisis and emergency procedures. More specifically, terms, such as *time out*, *restraint*, *seclusion*, *exclusion*, *crisis*, *emergency*, *debriefing*, and *punishment*, must be clearly defined. For example, although *time out* and *seclusion* are sometimes used interchangeably, *time out* is a documented behavioral intervention (e.g., planned brief removal of a student from a reinforcing activity after certain specified misbehavior that is associated with a decreased likelihood of that misbehavior occurring in the future). *Time out* is not a crisis or emergency response.

*Time Limits.* Specifically, guidance related to the duration and specific restraint procedures, such as prone restraints and seclusion is needed. Some authors suggest that the (a) duration of seclusion or restraint procedures should be brief; for example, 5—15 min (Fabiano et al., 2004; Kapalka & Bryk, 2007; Hobbs, Forehand, & Murray, 1978), and (b) contingent release from seclusion (e.g., student needs to be quiet for last minute or specified time period) may not lead to better outcomes (Donaldson & Vollmer, 2011; Erford, 1999). The research supporting these suggestions, however, needs to be extended and replicated before related policy is developed. In addition, as indicated previously, time limit considerations for restraint should be addressed separately from seclusion, and in the context of resolving crisis and emergency conditions.

*State-Level Reporting.* Additional information is needed about the prevalence and nature of restraint and seclusion in schools (Council of Parent Attorneys and Advocates, 2009; Duncan, 2009; Government Accountability Office, 2009; National Disability Rights Network, 2009). Although state-level policy documents indicate that recent changes have been made at the policy level, little evidence exists that use and quality of seclusion and restraint procedures have improved, especially for children and youth with disabilities. State-level reporting procedures should be in place such that a database is developed to answer questions related to (a) what conditions restraint or seclusion procedures were used, (b) what specific procedure were implemented, (c) how long the procedures were used, (d) who was involved

in the situations, (e) what happened immediately and later after restraint and seclusion were terminated, (f) how debriefing was conducted (e.g., by whom, when, where) and what were the outcomes, and (g) what preventive strategies were put in place. This information should be used at the student, school, district, and state levels to monitor the use of seclusion and restraint procedures and guide decisionmaking related to staff training, policy revisions or decisions, accountability, and research. The existence of state-level reporting would enable researchers and policy makers to better understand the extent to which state-level policy changes are affecting practices in schools and improving the quality of student support.

*Prevention Strategies.* By necessity, regulating the use of restraint and seclusion is important to ensure no harm and safety. Many states are advocating for preventive strategies; their priority and specificity in policy, however, are not well developed. Staff training in preventative and de-escalation strategies has been shown to significantly reduce the number of seclusion and restraint episodes (Busch & Shore, 2000; Couvillon, Peterson, Ryan, Scheuermann, & Stegall, 2010; Fischer, 1994; Ryan, Peterson, Tetreault, & Hagen, 2007; Williams, 2010). State policies should increase their emphasis on professional development, implementation fidelity, and evaluation relative to these documented de-escalation practices.

Statewide efforts to scale up the implementation of schoolwide behavior systems like SW-PBIS, should be supported and encouraged at the federal level (Council of Parent Attorneys and Advocates, 2009; Duncan, 2009; National Disability Rights Network, 2009). SW-PBIS is a framework that supports the development of safe school environments by (a) clearly defining, teaching and reinforcing appropriate behaviors; (b) using school data to guide intervention selection and progress decision making; (c) carefully monitoring implementation integrity; (d) giving priority to evidence-based practices; and (e) establishing organizational structures that give staff efficient implementation capacity (Center on Positive Behavioral Interventions and Supports, 2010). A substantial evidence base supports the value of SW-PBIS in reducing discipline-related problem behavior, supporting academic achievement, improving school climate and safety, and reducing

reports of bullying incidents and peer rejection (Bradshaw, Koth, Bevans, Ialongo, & Leaf, 2008; Bradshaw, Koth, Thornton, & Leaf, 2009; Bradshaw, Mitchell, & Leaf, 2010; Bradshaw, Reinke, Brown, Beavans, & Leaf, 2008; Horner et al., 2009; Horner, Sugai, & Anderson, 2010)

In the context of policy, preventive, school-wide systems, like SW-PBIS, have been indicated as an effective way to reduce the number of problem behaviors in schools and potentially reduce the need for aversive techniques, such as seclusion and restraint (CEC, 2010; Couvillon et al., 2010; GAO, 2009; Peterson, Albrecht, & Johns, 2009; Ryan et al., 2009; U.S. Department of Education, 2010).

*Clear Limitations.* The use of seclusion and restraint in schools should be limited to emergency use and not be considered a therapeutic treatment option except in very rare instances where the need for these procedures is clearly defined and limited in a student's individualized education program (Council of Parent Attorneys and Advocates, 2009; National Disability Rights Network, 2009).

Finally, we found the research to be limited with respect to providing strong evidence-based recommendations relative to the use of restraint and seclusion, prevention strategies, alternative responses to restraint and seclusion procedures and strategies. As such, research must be conducted to enable statements about what works, under which conditions, for how long, where, and why. The use and outcomes of restraint and seclusion procedures are sufficiently volatile and potentially harmful that a significant increase in research is needed to inform our practice and policy decisions at the individual student and staff, classroom, school, district, and state levels.

## REFERENCES

- Bradshaw, C. P., Koth, C. W., Bevans, K. B., Ialongo, N., & Leaf, P. J. (2008). The impact of school-wide Positive Behavioral Interventions and Supports (PBIS) on the organizational health of elementary schools. *School Psychology Quarterly*, *23*, 462–473. <http://dx.doi.org/10.1037/a0012883>
- Bradshaw, C. P., Koth, C. W., Thornton, L. A., & Leaf, P. J. (2009). Altering school climate through school-wide Positive Behavioral Interventions and Supports: Findings from a group-randomized effectiveness trial. *Prevention Science*, *10*(2), 100–115. <http://dx.doi.org/10.1007/s11121-008-0114-9>
- Bradshaw, C. P., Mitchell, M. M., & Leaf, P. J. (2010). Examining the effects of School-Wide Positive Behavioral Interventions and Supports on student outcomes: Results from a randomized controlled effectiveness trial in elementary schools. *Journal of Positive Behavior Interventions*, *12*, 133–148. <http://dx.doi.org/10.1177/1098300709334798>
- Bradshaw, C. P., Reinke, W. M., Brown, L. D., Bevans, K. B., & Leaf, P. J. (2008). Implementation of school-wide Positive Behavioral Interventions and Supports (PBIS) in elementary schools: Observations from a randomized trial. *Education & Treatment of Children*, *31*, 1–26. <http://dx.doi.org/10.1353/etc.0.0025>
- Busch, A. B., & Shore, M. F. (2000). Seclusion and restraint: A review of recent literature. *Harvard Review of Psychiatry*, *8*, 261. PMID:11118235
- Council for Exceptional Children. (2010). CEC's policy on physical restraint and seclusion procedures in school settings. *Teaching Exceptional Children*, *42*(5), 24–25.
- Council of Parent Attorneys and Advocates, Inc. (2009). *Unsafe in the schoolhouse: Abuse of children with disabilities*. Retrieved from [http://c.ymcdn.com/sites/www.copaa.org/resource/collection/662B1866-952D-41FA-B7F3-D3CF68639918/UnsafeCOPAAMay\\_27\\_2009.pdf](http://c.ymcdn.com/sites/www.copaa.org/resource/collection/662B1866-952D-41FA-B7F3-D3CF68639918/UnsafeCOPAAMay_27_2009.pdf)
- Center on Positive Behavioral Interventions and Supports. (2010). *PBIS implementation blueprint*. Eugene, University of Oregon. Retrieved from <http://www.pbis.org>.
- Couvillon, M., Peterson, R. L., Ryan, J. B., Scheuermann, B., & Stegall, J. (2010). A review of crisis intervention training programs for schools. *Teaching Exceptional Children*, *42*(5), 6–17.
- Duncan, A., (2009) *Letter to chief state school officers*. Retrieved from <http://www2.ed.gov/policy/elsec/guid/secletter/090731.html>
- Donaldson, J. M., & Vollmer, T. R. (2011). An evaluation and comparison of time-out procedures with and without release contingencies. *Journal of Applied Behavior Analysis*, *44*, 693–705. <http://dx.doi.org/10.1901/jaba.2011.44-693>
- Erford, B. T. (1999). A modified time-out procedure for children with noncompliant or defiant behaviors. *Professional School Counseling*, *2*(3), 205–210.
- Fabiano, G. A., Pelham, W. E., Manos, M. J., Gnagy, E. M., Chronis, A. M., Onyango, A. N., Swain, S. (2004). An evaluation of three time-out procedures for children with attention-deficit/hyperactivity disorder.

- Behavior Therapy*, 35(3), 449–469. [http://dx.doi.org/10.1016/S0005-7894\(04\)80027-3](http://dx.doi.org/10.1016/S0005-7894(04)80027-3)
- Government Accountability Office. (2009). *Seclusions and restraints: Selected cases of death and abuse at public and private schools and treatment centers*. Retrieved from <http://www.gao.gov/new.items/d09719t.pdf>.
- Hobbs, S. A., Forehand, R., & Murray, R. G. (1978). Effects of various durations of timeout on the noncompliant behavior of children. *Behavior Therapy*, 9, 652–656. [http://dx.doi.org/10.1016/S0005-7894\(78\)80142-7](http://dx.doi.org/10.1016/S0005-7894(78)80142-7)
- Horner, R., Sugai, G., Smolkowski, K., Eber, L., Nakasato, J., Todd, A., & Esperanza, J., (2009). A randomized, wait-list controlled effectiveness trial assessing school-wide positive behavior support in elementary schools. *Journal of Positive Behavior Interventions*, 11, 133–145. <http://dx.doi.org/10.1177/1098300709332067>
- Horner, R. H., Sugai, G., & Anderson, C. M. (2010). Examining the evidence base for school-wide positive behavior support. *Focus on Exceptionality*, 42(8), 1–14.
- Kapalka, G. M., & Bryk, L. J. (2007). Two- to four-minute time-out is sufficient for young boys with ADHD. *Early Childhood Services: An Interdisciplinary Journal of Effectiveness*, 1, 181–188.
- National Disability Rights Network. (2009, January). *School is not supposed to hurt*. Retrieved from <http://www.napas.org/images/Documents/Resources/Publications/Reports/SR-Report2009.pdf>.
- National Disability Rights Network. (2010, January). *School is not supposed to hurt: Update on progress in 2009 to prevent and reduce restraint and seclusion in schools*. Retrieved from <http://www.ndrn.org/images/Documents/Resources/Publications/Reports/School-is-Not-Supposed-to-Hurt-NDRN.pdf>.
- Peterson, R., Albrecht, S., & Johns, B. (2009). CCBBD's position summary on the use of physical restraint procedures in school settings. *Behavioral Disorders*, 34, 223–234.
- Ryan, J. B., Robbins, K., Peterson, R. L., & Rozalski, M. (2009). Review of state policies concerning the use of physical restraint procedures in schools. *Education and Treatment of Children*, 32, 487–504. <http://dx.doi.org/10.1353/etc.0.0062>
- Ryan, J. B., & Peterson, R. L. (2004). Physical restraint in school. *Behavioral Disorders*, 29, 154–168.
- Ryan, J. B., Peterson, R., Tetreault, G., & Hagen, E. (2007). Reducing seclusion timeout and restraint procedures with at-risk youth. *Journal of At-Risk Issues*, 13(1), 7–12.
- U.S. Department of Education. (2010 *Summary of seclusion and restraint statutes, regulations, policies and guidance, by state and territory: Information as reported to the regional comprehensive centers and gathered from other sources*. Retrieved from <http://www2.ed.gov/policy/seclusion/seclusion-state-summary.html>.
- Weiss, E. M. (1998, October 11). A nationwide pattern of death. *The Hartford Courant*. Retrieved from <http://courant.ctnow.com/projects/restraint/data.stm>.
- Williams, D. E. (2010). Reducing and eliminating restraint of people with developmental disabilities and severe behavior disorders: An overview of recent research. *Research in Developmental Disabilities*, 31, 1142–1148. <http://dx.doi.org/10.1016/j.ridd.2010.07.014>

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