



End isolation & reduce restraint of students

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Isolation is harmful to children's development and mental health and interferes with the skill-building young learners need to identify and resolve problems so they can thrive in school and later as adults.

Students and staff benefit when educators use effective strategies to address challenging behaviors in the classroom.

In recent years the state has invested in pilot sites, created demonstration schools, and written a manual to support school districts in eliminating isolation and reducing restraint.

We are asking legislators to take the next step in ending the use of isolation in our public schools, starting by prohibiting the practice in preschool, transition to kindergarten, and kindergarten programs.

ABOUT ISOLATION

Isolation is the practice of forcing dysregulated students into rooms and spaces where they are **kept alone and not allowed to leave**. This pushes anxious students already in flight or fight mode into escalating cycles of dysregulation, disrupting classrooms and traumatizing the child, staff, and students who witness the removal.

Isolation does NOT include a student's voluntary use of a quiet space for self-calming, or temporary removal to an unlocked area for co-regulation, support with de-escalation, or positive behavior support.

For the isolated child, the experience causes nightmares, school refusal, suicidal thoughts, depression, and anxiety that last well into adulthood. Repeated cycles can lead to complex PTSD.

ABOUT RESTRAINT

Restraint means using physical intervention or force to **control** a student.

Restraint is legal when there is a substantial risk that serious **physical harm** will be inflicted by a student upon themselves or another. But restraint is not always used legally and is often used to force a child into isolation.

WHY THIS PROPOSAL

Students with disabilities and those with a trauma history are often punished for stress responses. It happens when they are overwhelmed and dysregulated – in [flight, fight, or freeze](#) mode. They need support to regulate.

There are proven, effective strategies to address student behavior and ensure emotional well-being—without resorting to harmful practices like isolation or restraint.

These practices are used mostly on students with disabilities in segregated or self-contained classrooms, and mostly on young children in preschool, kindergarten, and grades 1-5. There is a racial component. Black students are isolated 1.5 times more often than white students. American Indian/Alaskan Native and multi-racial students are also restrained and isolated at rates higher than white students.

In 2022 guidance, the U.S. Department of Education’s Office for Civil Rights found no evidence that restraint or isolation were effective. It warned school districts that their use may discriminate against youth with disabilities.

We must ensure schools are using effective strategies that keep schools safe and do not harm young learners.

If a child is escalated and needs support to regulate, it should occur in a safe space, with an adult to co-regulate with. Not alone, locked in a cell or closet.

RESOURCES

- [We can end isolation: early vs late practices](#) (short video)
- [We can end isolation](#) (short video)
- OSPI, Restraint & Isolation page: [Restraint and Isolation](#)
- OSPI, Reducing Restraint and Eliminating Isolation Project, [Reducing Restraint & Eliminating Isolation \(RREI\) Project](#)
- Coalition to End Isolation and Reduce Restraint:
 - [Home - Coalition to End Isolation and Reduce Restraint](#),
 - [Insights - Coalition to End Isolation and Reduce Restraint](#)
 - [Resources - Coalition to End Isolation and Reduce Restraint](#)
 - [Legislative Platform - Coalition to End Isolation and Reduce Restraint](#)