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Written Testimony in Favor of SB0705 Education – Physical Restraint and Seclusion – Limitations, Reporting, and Training

To the Chair Senator Paul Pinsky, Vice-Chair Senator Cheryl Kagan, and members of the Education, Health, and Environmental Affairs Committee:

I am writing this testimony from the personal perspective of a person on the autism spectrum. I have a bachelor's degree in psychology. I also work full-time in the capacity of a case manager supporting autistic children with significant support needs. Straight out of montessori school to high school graduation, I grew up going to a private special education school for students with learning disabilities, where I was diagnosed with Asperger's Syndrome (now diagnosed based Autism Spectrum Disorder) in my high school years. While my lived experience does not speak for every student with learning disabilities or in the special education system, I would like to share my experience of not having been restrained or secluded - to show that alternatives to seclusion and restraint do work.

To my memory, I was never secluded or restrained. Especially during my elementary school years, teachers took time to talk to me and ask me what was bothering me, whenever I might have shown signs something was bothering me; they would pull me aside and talk the situation through with me or see if the elementary school level social worker was available. There would be times I would just need to work on an assignment outside of the classroom, away from the distracting stimuli.

Unnecessary seclusion and restraint is cruel treatment for students with disabilities. Such cruel intervention creates lasting trauma. While I wasn't secluded or restrained in school, I can't even begin to imagine what students have gone through who have been secluded and restrained. It is more effective to teach and reinforce the desired behavior and address any psychological and/or mental health issues that may be contributing to any dysregulation or other actual or perceived behavioral concerns.

There may be exceptional times when restraining a person is warranted for the safety of the student and those in the immediate area; as a case manager in the developmental disability field I have witnessed such situations. In those situations the paraprofessionals or direct support staff utilized every non-restrictive measure first and the restraint was implemented only long enough to help calm the person down before release and was done so in a manner to maintain both the student's and staff's safety - these often lasted less than 1 minute - and an incident report was done each time that included me following up with the child's parent or legal guardian.

It is important that teachers and paraprofessionals look to the cause of the behavior or dysregulation and find ways to redirect and address any dysregulation the student may be having. There might be a medical reason for such behavior. For students who do not communicate through speech, it can be a challenge but it is important that faculty working with the student get to know the student's signs of dysregulation before it reaches the level of a meltdown.

Seclusion and restraint should only be reserved as an absolute last resort when safety cannot be maintained.

I ask that this committee pass this bill forward and I ask for a favorable report. Thank you for your attention to my testimony.

Ms. Elizabeth Graham
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