**NEVADA GOVERNOR’S COUNCIL ON DEVELOPMENTAL DISABILITIES**

**Position on Restraints and Seclusion for Individuals with Intellectual and/or Developmental Disabilities**

Historically, individuals with intellectual and/or developmental disabilities (I/DD) have been subjected to restraints and seclusion in various settings, often leading to significant harm. The risks associated with these practices are well documented and include physical and psychological injury, trauma, and, in extreme cases, death. Restraint and seclusion disproportionately impact individuals with I/DD, perpetuating inequality and reinforcing a power imbalance between caregivers and individuals receiving care.

# The use of seclusion, mechanical and chemical restraint, or exposure to unpleasant or harmful sensory experiences (taste, touch, auditory, etc.) should never be adopted as the sole approach to managing challenging behavior. These interventions do not address the root causes of behavior, and their use can lead to social isolation, psychological trauma, and increased distress. Instead, interventions should focus on positive behavioral support within a trauma-informed environment that prioritizes dignity, respect, and evidence-based strategies.

NGCDD supports the implementation of trauma-informed, person-centered approaches that emphasize a framework of moral and ethical values that focus on:

* Improving quality of life,
* Ensuring individuals with I/DD have the opportunity to be self-determined,
* Recognize behavior as a form of communication,
* Implementing interventions that emphasize the development and use of positive skills for greater independence, and,
* Making modifications to the context in which problem behavior occurs.

# **The Nevada Governor’s Council on Developmental Disabilities (NGCDD) believes that the use of physical, mechanical, and chemical restraints is inappropriate except in situations of imminent danger of serious physical harm to the individual or others. Seclusion or restraint must never be used for convenience or to punish or coerce individuals. The Council strongly opposes the inappropriate and/or unnecessary use of restraints and other aversive interventions. The NGCDD also believes that seclusion should not be used under any circumstances. Lastly, we believe that Individuals have the right to be treated with respect and dignity and in a safe, humane, culturally sensitive and developmentally appropriate manner that respects individual choice and maximizes self-determination.**

**Policy Recommendations:**

1. Adopt policies at the federal, state, and other organizational levels that will protect individuals from needless trauma associated with seclusion and restraint use, while supporting both the safety of all individuals.
2. Ensure that students with I/DD are entitled to free and appropriate public education (FAPE) in the least restrictive environment (LRE).
3. Ensure that policies support that restraint should only be used in situations where an individual with I/DD has demonstrated that they are in imminent physical danger to themselves, or others and all other least restrictive supports have been exhausted. Moreover, when restraint is used, it should end when the individual with I/DD demonstrates that they are no longer a danger to themselves or others or demonstrates signs of medical distress. Restraint should never be used as a means of discipline or coercion, nor should restraint ever be used as a primary method for de-escalating an individual’s behavior.
4. Support full funding of IDEA 2004, that promotes the use of Functional Behavioral Assessments (FBA) and Behavior Intervention Plans (BIP) when a student has demonstrated behavior that impedes their learning or the learning of others, is necessary to fully support children and youth with disabilities. (Council for Exceptional Children, 2020)
5. Adults and children with I/DD shall be afforded the same rights of protection from unnecessary seclusion and restraints. Implement policies that require rigorous oversight, reporting, and accountability for the use of restraint and seclusion in adult service settings. Develop comprehensive training programs for caregivers, direct support professionals, and medical personnel to utilize non-restrictive, trauma-informed approaches that prioritize de-escalation and person-centered support.
6. All entities shall make a movement toward future elimination of seclusion and restraint requires instituting and supporting less intrusive, preventative, and evidence-based interventions in behavioral emergencies that aid in minimizing aggression while promoting safety.

Last Review Date:

References:

Council for Exceptional Children (2020) Position on Restraint and Seclusion Procedures in School Settings. [https://exceptionalchildren.org/sites/default/files/2020-11/Restraint%20and%20Seclusion-2020.pdf](https://exceptionalchildren.org/sites/default/files/2020-11/Restraint%20and%20Seclusion-2020.pdf#:~:text=POSITION%20STATEMENT%20Position%20on%20Restraint%20and%20Seclusion%20Procedures%20in%20School)