

## *Episode 07 - Residential Treatment Issues Series – Physical Interventions*

Physical Restraints are a complex and controversial subject that might be triggering for some people.

There are scholarly articles on this subject and many national organizations have expressed opinions on the use of physical restraint. My perspective is primarily driven by my professional experiences participating in physical restraints, mechanical restraints, chemical restraints, and seclusion; and reviewing and reporting on thousands of these sorts of incidents.

Ethical concerns around the use of physical restraints, per Scheurmann in the *Journal of Disability Policy Studies* 27(2), include:

1. Potential for death or injury.
2. Failure to use the least intrusive intervention.
3. Inappropriate restrictions on liberty and removal of access to education.
4. Repeated use of a potentially dangerous and ineffective intervention.
5. Disproportionate use with certain critical groups.
6. Insufficient professional training, supervision, and monitoring.

I would add that some kids who get restrained probably would not become that aggressive if they weren't living in programs where extreme behaviors are commonplace.

Physical intimidation and force are contrary to treatment.

However, if residential treatment programs simply don't accept, or simply discharge, clients with aggressive behaviors the alternatives for these kids are even more problematic.

Children and youth end up back at home where their parents, siblings, and the community are terrorized by their violent behaviors and their own safety is at greater risk.

The police and public schools end up having to address these behaviors, and they are less specifically trained than residential staff in how to help these kids.

Psychiatric hospitalizations are used, but the result is, all too often, the use of medications that have unwanted side effects such as flattening emotions and physical discomforts. Medication has to be continually monitored and changed as kids grow. Often times, these kids will cycle in and out of short-term psychiatric hospitalizations with no sense of the child having actually changed and learned new levels of self-control.

Juvenile incarceration will be the path that some of these kids face. These settings seem to struggle even more than residential treatment programs with becoming abusive toward the kids. It's even harder to provide these kids with effective treatment that will change the trajectory of their lives for the positive.

In my opinion, the ethical concerns around the use of physical restraints are best addressed in a treatment program setting.