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**Testimony: Wisconsin Family Ties
Speaker's Task Force on Urban Education
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Wisconsin Family Ties (WFT) is the only non-profit agency in the state of Wisconsin that is run by parents with the lived experience of raising a child with social, emotional, behavioral or mental health challenges. WFT parent peer specialists support and assist families throughout Wisconsin, drawing on our own experiences and additional training as we assist other families to navigate systems of care such as the school system.

On behalf of families whose children have such challenges, we appreciate the opportunity to submit testimony for today's hearing of the Speaker's Task Force on Urban Education, given the hearing focus on behavioral and mental health challenges in the education setting. This testimony addresses the following areas regarding students with behavioral and mental health challenges: peer support for families; reducing exclusionary discipline; and, reducing seclusion and restraint.

Peer Support for Families

The need for support for families of students with behavioral and mental health challenges is considerable. One in eleven children in the United States has a serious emotional disturbance (SED) that substantially impacts their functioning at home, at school or in the community, which translates to more than 100,000 children in Wisconsin. Their families often struggle with access to adequate services, including educational services, as well as with feelings of isolation and being blamed and judged.

As an organization, a significant percentage of WFT advocacy efforts are related to ensuring that children have appropriate support at school. Last year, our staff attended 275 meetings with families developing Individualized Education Programs (IEPs) for special education services, and helped many more prepare for school meetings. We have a particular focus in the area of addressing challenging behavior and school disciplinary processes, such as Manifestation Determination meetings.

Families report substantial benefits from working with parent peer specialists, including improvement in coping skills, emotional health and confidence, as well as increased knowledge, improved management of children's behavior, and more confidence in advocacy skills.¹ We also find that schools that have encountered the work of WFT parent peer specialists are appreciative of our participation, and often end up referring additional families to us.

WFT believes that family advocacy and support should be an integral part of systems that serve children with behavioral and mental health challenges, and the educational system is no exception. This year, through the Safe Schools/Healthy Students program, Wisconsin Family Ties is beginning to provide

¹ Hugh Davis, *A Brief Overview of Parent Peer Specialists*, 2010. <http://tinyurl.com/p2zf3jn>

parent peer specialist services in cooperation with two school districts, Beloit and Racine. We anticipate positive outcomes in areas of academic performance, disciplinary contact, and school attendance.

Priority: Increase opportunities for parent peer specialist outreach through Wisconsin school district partnerships.

Exclusionary Discipline

The detrimental effects of exclusionary discipline practices of suspension and expulsion have been coming under increased research scrutiny in recent years, bringing new emphasis on more collaborative and restorative practices to address behavior challenges. School suspension and expulsion are associated with a higher likelihood of dropping out of school and failure to graduate on time.² The punitive “zero tolerance” policies that became prevalent in the 1990s have since been shown to have negative impact not only on the students who are excluded, but also on the academic achievement of non-excluded students.³

In Wisconsin, though suspensions and expulsions have declined in recent years, exclusionary discipline falls disproportionately on students with disabilities in general, and on those with Emotional Behavioral Disability (EBD) in particular. In 2012-13, students with disabilities were 3.35 times more likely to be suspended than their non-disabled peers. Meanwhile, students with an EBD label comprised just 10% of Wisconsin students with a disability in 2011-2012, but represented over a third of expulsions and suspensions totaling 10 days or more among that group.⁴

Two years ago, WFT staff participated in a School Discipline Task Force assembled by the Department of Public Instruction, resulting in a 2014 report that included multiple recommendations regarding exclusionary discipline. Those recommendations remain unfinished business in 2015.

Priority: Implement the full recommendations of the 2014 report of the School Discipline Task Force, including those that impact exclusionary discipline.

Seclusion and Restraint

The restrictive interventions known as seclusion and restraint are notorious for consequences ranging from failure to learn appropriate behavior and impeding the development of trusting relationships with staff, to psychological harm, physical injury, and even death. A clear research consensus has shown that these practices are neither therapeutic nor educational, and are ineffective for purposes of treatment or discipline, to force compliance, or for the sake of convenience.

While seclusion and restraint have been regulated in Wisconsin's public schools by state law since 2012, in the wake of 2011 Wisconsin Act 125, the practices are still used all too frequently, and their use falls

²*Are Zero Tolerance Policies Effective in the Schools? An Evidentiary Review and Recommendations: A Report by the American Psychological Association Zero Tolerance Task Force*, August 2006.

<https://www.apa.org/pubs/info/reports/zero-tolerance.pdf>

³Perry & Morris, “Suspending Progress: Collateral Consequences of Exclusionary Punishment in Public Schools.” *American Sociological Review* (2014) vol. 79 no. 6, 1067-1087. <http://asr.sagepub.com/content/79/6/1067>

⁴Office of Children's Mental Health, *2014 Report to the Wisconsin Legislature*.

<http://sspw.dpi.wi.gov/sites/default/files/imce/sspw/pdf/mhchildrensmentalhealthreport2014.pdf>

disproportionately on students with disabilities. Unfortunately, school districts are only required to submit data to their school boards rather than to the Department of Public Instruction for statewide data comparisons. However, in a joint report issued by Disability Rights Wisconsin, WI FACETS and Wisconsin Family Ties, open records requests revealed at least 21,484 incidents of seclusion and restraint in the 2012-2013 school year.⁵ Though only 13.5% of Wisconsin students have disabilities, the percentage of students involved in reported seclusion and restraint incidents who also had disabilities was a staggering 75%.

Furthermore, even among students with disabilities, restrictive techniques appear to be used disproportionately on students with mental health issues. A 2014 Wisconsin Family Ties statewide online survey showed that, among 231 parents, 43% of their children with both an IEP and a mental health diagnosis were secluded or restrained at school. Only 20% of respondents with an IEP but no mental health diagnosis had experienced seclusion and restraint, while none of the respondents with neither an IEP nor a mental health diagnosis had ever been secluded or restrained.

For the sake of students with mental health challenges in Wisconsin's schools, it is imperative that our state improve both law and practice regarding seclusion and restraint in schools.

Priority: Convene a stakeholder group under the auspices of the Department of Public Instruction to recommend updates to Wisconsin law on seclusion and restraint in schools, including statewide data collection.

Thank you again for the opportunity to contribute testimony to this committee's proceedings.

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⁵ Disability Rights Wisconsin, WI FACETS, Wisconsin Family Ties. *Seclusion & Restraint in Wisconsin Public School Districts: 2012-2013 School Year Data*. <http://tinyurl.com/p4oxqga>