

## School punishment too harsh for children

Would public schools punish students using methods that could severely harm them? It seems so.

Seclusion rooms were originally used to calm down an angry or violent child, preventing them from hurting themselves or others.



**BY JORDAN SMITH**  
STAFF WRITER

But recently public schools have used this method as a form of punishment, a practice that damages children and is unregulated in many places.

It comes as a shock that such forms of punishment are used in this day and age, especially when the harm they cause is so clear. While seclusion rooms may be necessary in extreme cases, where a child has become a threat to their own or others' safety, schools should not use them to discipline students.

The New York Times reporter Bill Lichtenstein told of how, after noticing strange behavior in his daughter Rose, he was one day called to the school to find her locked in a closet for misbehavior. It had become a regular experience for the child, and

six years later, she still suffers from post-traumatic stress disorder because of it.

Rose is not alone. A study in Ohio found that out of 100 school districts, 39 of them had unregulated seclusion rooms — 40 percent of the schools. In fact, about 20 states have no rules for them at all.

According to the U.S. Department of Education, of 40,000 students who were isolated or restrained in some way, the majority developed physical, learning or behavioral issues.

How could using something often labeled "scream rooms" become an ordinary practice? Lack of regulations appears to be the

bulk of the issue.

The seclusion method began in schools for students with special needs as a safety precaution, but in the 1970s, it slowly slid into public schools as well.

The slow transition left schools to monitor these methods themselves. With individual districts and sometimes even single teachers governing their use, faculty in many schools would abuse it to punish students.

Locking a child in an enclosed space is easier than other forms of discipline. It is quick and doesn't require a teacher to deal with him or her for longer than they have to, giving it appeal to those who are willing to do it.

Anything that can emotionally harm children in such a way needs to be prevented, and the only thing that can truly stop this offense is legislation, whether it be from individual states or from Congress.

The Keeping All Students Safe Act was presented to Congress in December 2011. It would protect all students from harmful and life-threatening seclusion or restraint methods. But Congress referred the bill to a committee, and no results are expected from it any time soon.

So the responsibility of ending this may very well fall to individual states. Iowa has already amended its laws, requiring parental permission and training in order to use seclusion and restraint.

While other states are doing the same, it is still vital for seclusion and restraint methods to be restricted and heavily monitored in schools. Difficult as a student may be to deal with, no teacher has the right to abuse them with these practices.

Hopefully in the near future schools will eliminate this destructive punishment permanently.

### This Week's

## STAFF EDITORIAL

### Become our pen pal: write a letter to the editor

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We've published articles that speak directly to your condition. We address the intimate details of the lives you lead — from sexually transmitted diseases to your safety on campus to the hairstyles you rock on a daily basis. The Guilfordian sees it all and exposes what we can. We try to be honest and understanding, but we readily admit to being imperfect.

Here's your formal invitation to call us out. This issue, we're personally inviting you to transform your reading from passive to responsive. Do we say things you disagree with? Did something we've published offend you or anger you to your very core? Are we completely missing the point on a certain subject? Then tell us about it!

Letters to the editor can be submitted as easy as pie! Simply speak your mind on previously covered topics covered in Guilford's newspaper in an email to [guilfordian@guilford.edu](mailto:guilfordian@guilford.edu). Your letter to the editor should be submitted on the website and the only requirements are that your letter does not exceed 300 words and that it's posted by the deadline of 3 p.m. on the Sunday before publication.

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## Alzheimer's: would you want to know?

**BY MCCAFFREY BLAUNER**  
STAFF WRITER

On the good days, she could remember my name. Some days I was Tom, her son she hadn't seen in years, and other days she didn't know me at all. On the good days, she knew where she was, and talked with me, my mother and my little brother. On the bad days, she would weep and her Eastern European nurse would kindly usher us out of the room, smiling sadly.

Alzheimer's ate my grandmother alive. Bit by bit, the woman I had known receded, replaced by a different person who could do little but stare out at the world with glassy-eyed, childlike confusion. It was strange, but she was old and it was understood that this was simply a facet of the aging process, albeit a dark one.

It never occurred to me that, decades earlier, she might have had some premonition of what was to come. Perhaps she had seen her own parents go down a similar path. Perhaps not. Perhaps it had come upon her with the swiftness of nightfall, as her memories faded and she had no time to feel the terror of encroaching darkness.

On April 6, 2012, the FDA approved an early-detection tool developed by the pharmaceutical company Eli Lilly, that will be able to test for Alzheimer's disease, indicating plaques in the brains of patients who seem to be exhibiting early signs of the disease. The process works by tagging certain proteins, whose presence might indicate

Alzheimer's, with a radioactive dye called florbetapir F 18, which can then be detected in positron emission tomography scans.

The question that occurs then is: would you want to know?

For some, early detection offers a host of complications. In some cases, patients whose diagnoses have been confirmed have experienced severe depression and anxiety while remaining

entirely asymptomatic. Others argue, given that no cure for Alzheimer's exists, knowledge of one's own prognosis does little for the patient in question.

In my own case, I can say with some certainty that I would want to know.

It is no simple or easy thing to know of your own coming decline, but I would rather have some warning than to be suddenly overtaken by this debilitating disease. Then, at least, knowing that your days of complete cognition are numbered, you might put some value on the "good" days you have.

Perhaps if more of the population was made aware of their impending fates, there might be more support for pharmaceutical companies to find a definitive treatment for this disease. With prior knowledge, one might be able to stave off the eventual decline by prioritizing a healthy lifestyle and taking supplements like folic acid, fish oil and vitamin B12, known to help decrease the chances of developing Alzheimer's.

Finally, I would hope that if any loved one of mine were at risk for developing this awful ailment, they might confirm it through this test. I would hope that — though this knowledge might weigh heavily on them — it would allow them to treasure the time they have left, and inspire me to place the same value on my time. And perhaps that it might allow them the opportunity — or even inspire them — to engage in preventative measures.

