

Rights, Research, and Relational Practice: A Guide to the use of Isolation and Seclusion



An evidence-based resource for education and social care practitioners, incorporating the latest research on systemic inequalities, trauma-informed practice and global human rights standards.

1 Introduction - the global paradigm shift

The landscape of restrictive practices in education is currently undergoing a fundamental paradigm shift, moving from traditional disciplinary models toward the elimination of unnecessary coercion. This document serves as a comprehensive 2026 update to the original 2017 CAPBS (Centre for the Advancement of Positive Behaviour Support) Information Sheet. Here we bridge the gap between historic guidance and the contemporary statutory, empirical and ethical realities facing schools today.



For decades, enforced isolation (including what we know as time out, time alone, isolation and seclusion) were often rationalised as ‘necessary evils’ within the educational system. However, research (discussed herein) and global mandates from the UNCRC (2023, pg. 9, para. 30.a) and World Health Organization (WHO, 2024) have reframed these practices as indicators of systemic failure and have called for prohibition, without exception.

This document integrates the Department for Education’s (DfE, 2026) most recent statutory requirements with the ‘normalisation of coercion’ theory (Richter, 2025), to provide practitioners with a robust framework for understanding the human rights implications of separating children from their peers.

Through the lens of human rights, trauma informed support and best practice guidance, this document challenges the mainstream myth that such restrictive practices are limited to specialist settings or extreme behavioural cases. Instead, we highlight the 1 in 12 prevalence of isolation in mainstream schools and give a voice to the children whose ‘thwarted belonging’ and ‘psychological confinement’ have been documented in recent qualitative studies (Mallon, 2025; Condcliffe, 2021). We ultimately aim to support schools in transitioning from cultures of environmental control to relational, rights-based support systems.

2 Defining the continuum of restriction

Definitions and clarity in terminology are essential to identifying and documenting the use of restrictive practice and therefore supporting human rights. When definitions are ‘blurred’ schools risk inadvertently engaging in illegal deprivations of liberty or using high-level restrictive interventions for minor disciplinary matters. The following definitions are derived from the DfE (2026) statutory guidance, UNCRC (2023) and the WHO QualityRights framework.

2.1 Seclusion

The Department for Education (DfE, 2026) define seclusion as the **“supervised confinement and isolation of a person, away from others, in a room or area from which they are prevented from leaving.”**

- The DfE (2026) specifies that seclusion exists whenever a pupil is kept alone in a space and is not allowed to leave of their own free will. This applies regardless of whether the door is physically locked or whether the child is prevented from leaving by the presence of a staff member at the door (Richter, 2025) or if they believe they will be sanctioned further if they leave, e.g., psychological restraint (RRN, 2024).
- Seclusion is classified as a ‘restrictive intervention’ and should only be used in ‘exceptional circumstances’, e.g., as an emergency measure where ‘significant harm’ would result to the pupil or others (DfE, 2026).
- **"Restrictive interventions, including seclusion, must never be used as a punishment"** DfE (2026). Therefore any use of seclusion as a disciplinary consequence - for example, for non-compliance with school rules or ‘disruption’ that does not pose a significant harm risk, is a violation of statutory guidance and a safeguarding failure.
- Seclusion should be considered a ‘pure form of coercion’ (Richter, 2025) because it completely overrides an individual’s autonomy. Hollins (2023) and Quinn et al., (2025) further assert that enforced isolation of this nature is functionally equivalent to solitary confinement, which is viewed as a high-level punitive measure in other sectors, e.g., prisons.

2.2 Isolation (internal exclusion)

The DfE (2024; 2026) defines isolation (or internal exclusion) as ‘relocating a pupil from their classroom to a designated space as a consequence of disruptive behaviour’. Unlike seclusion, isolation is intended as a disciplinary sanction.

- For a relocation to remain ‘isolation’ rather than ‘seclusion’ the pupil must be **free to leave**. The DfE (2026) guidance states that if a child is forced to stay in an isolation space and cannot leave, it has functionally become seclusion.

- For safeguarding considerations, any use of isolation must be ‘proportionate’ and schools must consider the pupil's mental and physical health. Schools must have a clear policy on how long a pupil can be isolated and what support will be provided during that time (DfE, 2026).
- Research from Mallon (2025) and Condliffe (2021) shows that ‘isolation’ is effectively ‘unlawful seclusion’ as psychological barriers exist owing to power differentials between staff and pupils, e.g., pupils likely believe they cannot leave an isolation space - due to staff ‘orders’, verbal threats or the removal of property (shoes/coats). In such cases the practice meets the legal threshold for seclusion under Article 5 of the ECHR (EHRC, 2025).

2.3 Isolation booths

Isolation booths (also known as ‘reflection units’, ‘calm spaces’ or ‘booths’) are physical cubicles or partitioned desks often used within internal exclusion rooms.

- Mallon (2025) highlights the ‘mechanics of the room’ as a coercive tool. Booths are often designed to face a wall to eliminate visual and social stimulation.
- Booths are governed by strict ‘orders’ (e.g., bans on eye contact, movement or turning the head). While these booths are often framed as ‘calm spaces’ children in the qualitative research describe them as ‘prison-like’ environments that exert a psychological pressure making them feel physically and mentally trapped (Condliffe, 2021; Mallon, 2025).
- While DfE (2026) does not explicitly ban booths, they emphasise environments must be safe and that the ‘wellbeing of the pupil’ is paramount. If the design of a booth causes ‘mental suffering’ it risks breaching the Article 3 threshold for ‘degrading treatment’ (EHRC, 2025).

2.4 Time out vs. time away (proactive vs. reactive)

The Department for Education differentiate between the removal of a student as a punishment versus a supportive intervention:

- **Time out** - a reactive behavioural technique involving the removal of the pupil from a reinforcing environment. Mallon (2025) found that pupils often experience this as a ‘rejection’ by the school.
- **Time away** (proactive) - this is a voluntary, self-directed break taken by the pupil to assist with self-regulation. To remain non-restrictive, the child must retain the ‘will and preference’ to participate and must be free to return to the main environment at any time (Richter, 2025; Gill et al., 2024).

2.5 Warning

The EHRC (2025) identifies a dangerous ‘blurred line’ in school policies regarding these definitions. While the DfE (2026) prohibits punitive seclusion, many schools use ‘isolation’ for minor rule-breaking (e.g., uniform, lack of equipment). The EHRC warns that if a pupil is prevented from leaving these spaces, the school has transitioned into **unlawful punitive seclusion**, breaching both the statutory DfE guidance and the Human Rights Act.

3 Systemic inequalities

The #BeeWell study (Thornton et al., 2025), involving over 34,000 pupils, provides the empirical evidence of who is targeted by practices of enforced isolation.

The '1 in 12' crisis - data shows 8.3% of pupils - roughly 1 in 12 - experience at least one episode of internal exclusion in a typical week, losing an average of 8.44 hours of curriculum learning (Thornton et al., 2025). This is not a niche concern; it is a mainstream crisis.

Gender gap differences - Thornton et al., (2025) found that boys are significantly more likely to be internally excluded while research from other sectors suggest girls are more likely to suffer psychological harm from enforced isolation (Hanson, 2026). Richter (2025) discusses the 'social construction of danger', where boys are perceived as more 'threatening'. Mallon (2025) found that boys often felt they were 'targeted' or 'watched more closely' by staff, leading to a self-fulfilling prophecy of frequent isolation.

Ethnic disproportionality and 'adultification' - The EHRC (2021, 2025), Gill et al., (2024) and UNCRC (2023) emphasise institutional bias leads to racialised patterns of coercion, e.g., children from marginalised backgrounds are often 'adultified' (and viewed as having more agency in their disruptive behaviour) and thus deserving of 'punishment' rather than 'support'.

LGBTQ+ vulnerability: safety or punishment? Data from Thornton et al., (2025) and qualitative narratives (Mallon, 2025) suggest that LGBTQ+ children are uniquely vulnerable. Mallon (2025) identifies a 'protective seclusion trap' where schools place LGBTQ+ victims of bullying in isolation 'for their own safety'. Children noted that this functionally punishes them - the victim - by removing them from their friends and curriculum, while the perpetrators remain in class, leading to feelings of injustice and secondary victimisation.

SEND and SEMH - Thornton et al., (2025) found that pupils with **SEMH** needs are at the highest risk, aligning with the UNCRC (2023). Pupils with neurodivergent traits (such as needing to move) were frequently secluded for 'non-compliance' with booth rules that explicitly forbade movement, essentially secluding them for the symptoms of their disability.

4 Lived experiences and psychological impact

The transition from a relational classroom to a coercive isolation space shifts a child's psychological landscape. Research from Condliffe (2021), Mallon (2025) and Thornton et al., (2025) reveals a consistent pattern of biological threat, educational erasure and dehumanisation as a result of enforced isolation.

4.1 The narrative of shame and dehumanisation

Pupils consistently describe isolation booths as 'prison-like' and 'dehumanising' (Condliffe, 2021; Mallon, 2025). This is because the architecture enforced isolation, e.g., the booth, is not merely an aesthetic choice but a psychological tool of control.

- **Social and identity erasure.** Mallon (2025) found that the physical separation leads to a rapid collapse of student identity. One child said, “You’re just a number in a booth; you’re not a person anymore.” This sense of being ‘deleted’ from the school community is echoed in Condliffe’s (2021) study, where a pupil noted, “It’s like they just put you in a room and forget you’re there... out of sight, out of mind.”
- **Animal metaphor.** The frequency with which children use animalistic imagery indicates the perceived loss of human rights. A child in Mallon’s (2025) study stated, “You feel like an animal in a cage”, while a participant in Condliffe’s (2021) research described the experience as being ‘treated like a dog’. These are not hyperbolic statements but reflect the experience of being ‘caged’ by systems prioritising containment over care.
- **The visuals of shame.** The physical requirement to face a wall - a common feature of ‘booth’ design - is specifically identified as a source of profound shame. Mallon (2025) describes this as a ‘visual of punishment’. Students report that being forced to look at a blank board or wall for hours feels like having a ‘blanket on your head’, stripping away any sense of dignity and reducing the child to a passive object of surveillance.

4.2 Threat physiology

Forced isolation is not a neutral behavioural event but a physiological one. Richter (2025) explains that for a child, social isolation is perceived by the brain as a primary survival threat, triggering a ‘biological trauma response’.

- **Hyper-vigilance.** Mallon (2025) found that pupils in booths did not ‘reflect’; they monitored. They were in a constant state of physiological alert: “I was always listening... hearing their footsteps in the corridor... wondering if they were coming for me.” This ‘threat response’ floods the brain with cortisol and adrenaline, making the cognitive functions required for ‘reflection’ neurobiologically impossible.
- **Stress in the silence.** Condliffe (2021) identifies ‘the silence’ as a major stressor rather than a calming influence. One participant stated, “The silence is the worst part... it makes your head go round and round.” In the absence of positive social stimulation, the child’s mind ruminates on perceived unfairness, shame and rejection, often leading to secondary emotional crises. This is likely to be especially harmful for girls.
- **Sensory and physical pain.** For neurodivergent pupils, the ‘no movement’ rule is physically painful. A child in Mallon’s (2025) study explained the somatic distress, “I just needed to move my legs, but they said if I moved, I had to stay longer.” This creates a ‘double bind’ where the symptoms of the child’s distress (restlessness) are punished with further isolation, leading to sensory overload and physical suffering (Quinn et al., 2025).

4.3 Lost learning

While Department for Education guidance suggests that learning should continue in isolation, the qualitative reality is one of ‘educational abandonment’.

- Students report that the work provided in isolation is often “just bits of paper” or “work I’ve already done” (Mallon, 2025). This lack of meaningful curriculum engagement sends the message to the child that the school has given up on their academic potential.

- Thornton et al., (2025) have quantified this ‘lost learning’ as an average of 8.44 hours per week for the typical isolated student. For the ‘1 in 12’ children affected, this represents a massive, cumulative deficit in their education that is rarely recovered.
- Prolonged segregation leads to what Quinn et al., (2025) call a ‘loss of meaningful social contact’. In a school setting, this means the child stops seeing themselves as a learner. As one student put it, “I don't feel like I go to this school anymore, I just go to the booth.” (Mallon, 2025).

4.4 When relationships collapse and becoming a ‘lost cause’

The most enduring impact of isolation is the destruction of the therapeutic and educational relationship between staff and students.

- **Stigma - the ‘Isolation Kid’.** Mallon (2025) found that once a child has been secluded, their identity can become ‘spoiled’. One pupil shared, “They just give up on you... once you’ve been in there, that’s it, you’re the ‘isolation kid’.” This label becomes a self-fulfilling prophecy, where staff expectations lower and disciplinary responses escalate.
- **Children develop distrust.** Condliffe (2021) highlights a shift in how pupils perceive adults. They stop seeing teachers as supporters and start seeing them as ‘guards’ or ‘policemen’. As one child put it, “They don't care why you're upset, they just want you out of the way.”
- **Collapsing belonging.** Thornton et al., (2025) statistically linked isolation to significantly lower scores in school belonging. This is not just about being ‘unhappy’ but about the ‘rupture of the social contract’. Richter (2025) notes that when an institution uses coercion as its primary tool, it loses the moral authority to teach, and the child's ‘will and preference’ to belong to that institution evaporate.
- **Moral injury for staff.** Richter (2025) identifies the ‘moral injury’ caused to practitioners who must enforce these policies as teachers experience a breakdown in their own professional identity, moving from a ‘nurturer’ to an enforcer, leading to burnout, decreased empathy and a ‘hardening’ of the school culture that further perpetuates the need for coercion.

5 Human rights and legal frameworks

The Equality and Human Rights Commission (EHRC), as the national human rights institution, has provided extensive scrutiny regarding the use of restrictive practices in schools. Following its 2021 Inquiry and its formal 2025 response to the Department for Education (DfE), the EHRC’s position has called for a Human Rights Framework for Restraint. This is 2-3 years after UNCRC (2023) suggested “statutory guidance on the use of restraint on children to ensure that it is used only as a measure of last resort and exclusively to prevent harm to the child or others and monitor its implementation” (p.10, para. 30.b). This moves away from viewing isolation as a ‘behaviour management’ tool and instead reframes it as a significant intervention in a child’s fundamental rights to physical and psychological integrity.

5.1 ‘Blurred lines’

The EHRC (2025) identifies a systemic failure in current school policies as there exists a blurred line between the use of restraint for 'good order and discipline' and its use as an unlawful punishment.

- The EHRC (2025, para 69) recommends that the legal provision allowing force/seclusion for 'good order and discipline' must be interpreted **narrowly**. The Commission warns that this provision is often misinterpreted by schools as a blanket justification for the use of isolation booths for minor rule infractions.
- **It is never lawful to use seclusion or isolation as a means of punishment** (EHRC, 2025). The EHRC notes that when isolation is mandated as a standard consequence for non-compliance with minor rules (e.g., uniform, lack of equipment), the school is effectively using a high-level restrictive intervention as a punitive measure. This mirrors Richter's (2025) 'normalisation of coercion' where the ethical threshold for removing liberty is lowered for the sake of institutional convenience.

5.2 Article 3 - freedom from degrading treatment

Article 3 of the ECHR prohibits torture and inhuman or degrading treatment. The EHRC (2025) emphasises that the threshold for a breach of Article 3 is reached if the treatment causes 'intense mental suffering'.

- Treatment that might not reach the threshold for an adult may constitute degrading treatment for a child. The EHRC (2025) highlights that the environment of isolation booths - bare rooms, visual isolation and forced stillness - can reach this threshold if it causes distress.
- The EHRC (2025) emphasises that the impact on the individual must be considered. As Mallon (2025) and Quinn et al., (2025) demonstrate, for neurodivergent children, the nature of booths can be sensory-punitive, leading to suffering that is fundamentally disproportionate. The EHRC warns that failing to consider a child's disability when applying isolation constitutes a significant risk of breaching Article 3.

5.3 Article 5 - the right to liberty and the 'free to leave' test

Article 5 protects the right to liberty and security. The EHRC (2025) is clear... seclusion is a deprivation of liberty.

- The EHRC (2021 Inquiry) found that many schools do not realise they are secluding pupils. If a child believes - either due to staff presence, verbal commands or 'being told to' - that they cannot leave, they are being deprived of their liberty.
- Schools do not possess the legal authority (such as a court order or a warrant under the Mental Health Act) to deprive children of their liberty for disciplinary reasons. The EHRC (2025) notes that while the DfE allows for isolation, if it functionally becomes seclusion (where the child is not free to leave), it constitutes unauthorised detention. This is what Mallon (2025) describes as 'psychological confinement'... where the environment itself prevents the child from exercising their right to leave.

5.4 Article 8 - psychological integrity and private life

Article 8 includes the right to ‘physical and psychological integrity’. The EHRC (2025) highlights that the routine use of isolation booths is an interference with this right.

- The Commission warns that the long-term psychological scarring described in qualitative research (Condliffe, 2021; Mallon, 2025) is an unlawful interference with a child’s mental health.
- For an interference with Article 8 to be lawful, it must be ‘necessary and proportionate’. The EHRC (2025) argues that if a school has not exhausted all less-restrictive alternatives (such as the WHO QualityRights strategies), then the use of isolation is an unjustified breach of the child's psychological integrity.

5.5 Article 14 and the disproportionality crisis

Article 14 prohibits discrimination. The EHRC’s 2021 Inquiry, ‘Restraint in Schools: using meaningful data to protect children’s rights’, exposed a critical data gap.

- Schools should record and monitor all instances of restrictive intervention, specifically tracking protected characteristics (race, gender, disability).
- Without this data, schools cannot monitor if their policies are disproportionately targeting vulnerable groups. Thornton et al., (2025) have now provided the data that the EHRC (2021) warned was missing, confirming that ‘zero-tolerance’ isolation policies lead to ‘indirect discrimination’ against SEMH and minority ethnic pupils, a clear breach of Article 14.

5.6 National training standards: the EHRC's call for change

On 13 May 2025, the EHRC formally called on the UK government to develop **National Training Standards** for the use of restraint and seclusion in schools.

- The EHRC (2025) argues that training should not just be about the ‘mechanics of force’ but must be grounded in the Human Rights Framework for Restraint. This includes training on de-escalation, sensory needs and the legal thresholds of Articles 3, 5 and 8.
- Purchasing training compliant with the Restraint Reduction Network’s training standards will ensure schools do not rely on ‘inconsistent’ and ‘punitive’ isolation policies that fail to protect children’s rights (EHRC, 2021; 2025).

6 The myth of ‘therapeutic’ enforced isolation

Schools and institutions frequently justify enforced isolation by framing them as ‘therapeutic interventions’, ‘cooling-off periods’, ‘time out’ or ‘opportunities for reflection’. However, recent evidence and lived-experience narratives expose these justifications as myths that mask harmful, coercive practices.

6.1 The fallacy of the ‘reflection’ rationale

The primary justification for internal exclusion is that it provides a space for pupils to reflect on their behaviour. Thornton et al., (2025), Mallon (2025) and Condliffe (2021) found that the psychological reality for children in booths is the opposite of reflection.

- Rather than considering their actions, pupils spend their time ruminating on the unfairness of the sanction, the harshness of the staff and their feelings of shame. One student noted, “You don't think about what you did, you think about how much you hate them for putting you there.” (Mallon, 2025). Thornton et al., (2025) empirically support this by identifying that isolation is used as an ‘ineffective disciplinary practice’ that fails to solve the underlying problem, instead fostering resentment.
- **Reflection is a neurological impossibility!** As Richter (2025) explains, the ‘survival state’ triggered by forced isolation inhibits the pre-frontal cortex, which is responsible for higher-level cognitive reflection and empathy. You cannot ‘reflect’ while your brain is screaming ‘threat’ (Haney, 2019; Quinn et al., 2025). Thornton et al., (2025) highlight that the stress induced by these relocations actively blocks the development of self-regulation skills.

6.2 Rupture of the social contract

Thornton et al., (2025) provide critical quantitative evidence regarding ‘thwarted belonging’ showing a significant, negative association between isolation and a pupil's sense of school belonging.

- Seclusion functionally communicates to the child that they do not belong in the school community. This ‘rupture of the social contract’ (Richter, 2025) leads to long-term educational disengagement. Thornton et al., (2025) found that even a single episode of isolation can significantly damage a pupil's perception of their place within the school.
- Pupils describe a feeling of being ‘deleted’ from the school. One participant in Mallon's (2025) study shared, “When I'm in the booth, I'm not a student at [School Name], I'm just an isolation kid. The rest of the school is happening out there, and I'm just... gone.” This sense of thwarted belonging is a primary risk factor for mental health decline and school refusal.

6.3 Mental health risks and creating a vicious cycle

Enforced isolation is not merely a temporary discomfort; it is a significant mental health risk. Quinn et al., (2025), Richter (2025), and Thornton et al., (2025) identify several long-term psychological harms.

- Seclusion often triggers the very behaviours it seeks to manage, e.g., the sensory deprivation or over-stimulation of a bare room can cause profound distress, which is then misinterpreted as ‘non-compliance’ leading to extended seclusion (Quinn et al., 2025). Thornton et al., (2025) observe that this ‘revolving door’ of isolation leads to worsening mental health outcomes over time.
- Prolonged or repeated isolation can lead to symptoms of Post-Traumatic Stress Disorder (PTSD) in children. Furthermore, as noted by Richter (2025), the practice causes moral injury to both the child and the staff involved, creating a culture of cynicism and hardening.
- Mallon (2025) describes how children internalise the isolation as a personal failing. They develop a ‘spoiled identity’, viewing themselves as ‘bad’ or ‘unreachable’. This internalised stigma is a major barrier to future successful reintegration and positive mental health outcomes.

6.4 Seclusion is a failure of support

Quinn et al., (2025) and Thornton et al., (2025) assert that seclusion represents a failure of support rather than a necessity. Framing seclusion as ‘safety’ often masks underlying systemic failures.

- High rates of seclusion are often linked to a lack of trained staff who understand neurodiversity or trauma-informed de-escalation.
- Schools with high isolation rates often have physical environments that are over-stimulating and ‘triggering’ for vulnerable pupils.
- Seclusion is the ‘cheap’ alternative to providing the high-quality, 1:1 relational support that pupils with SEMH needs actually require. Thornton et al., (2025) explicitly label internal exclusion as a practice that ‘exacerbates existing inequalities’ rather than providing the targeted support vulnerable students need.

7 Proactive alternatives as a path to elimination

The transition from a coercive culture to one of relational support requires a systemic paradigm shift. Current research indicates that the goal must move beyond ‘reduction’ to the elimination of coercion (Richter, 2025; UNCRC, 2023; WHO, 2024). This requires the implementation of school-wide, person-centred and trauma-informed strategies.

7.1 School-wide de-escalation and positive support (SWPBS)

Evidence from Hodgkiss and Harding (2023) demonstrates that the most effective way to reduce restrictive practices is through school-wide intervention plans.

- Interventions are most successful when they move away from ‘substituted judgment’ (where staff decide for the child) toward ‘supported decision-making’ (Richter, 2025). This involves staff and leadership committing to a philosophy where coercion is viewed as a systemic failure rather than a disciplinary tool.
- Reducing seclusion requires mandatory training not in the ‘mechanics of force’ but in trauma-informed care and neurodivergent understanding. Hodgkiss and Harding (2023) find that consistent, whole-school training in de-escalation significantly lowers the frequency and duration of restrictive incidents.
- Prioritising the therapeutic alliance is key. When staff are encouraged to see behaviour as communication rather than ‘non-compliance’ the need for environmental control diminishes (WHO, 2024).

7.2 Environmental audits and ‘sensory-ready’ spaces

Quinn et al., (2025) and Mallon (2025) highlight that the physical environment is often the primary trigger for behaviours that lead to seclusion.

- Children in Mallon’s (2025) study were clear about the difference between a ‘box’ and a ‘quiet room’. Proactive alternatives include voluntary sensory spaces that are comfortable, offer choice (e.g., beanbags, soft lighting, fidget tools), and allow the child to leave whenever they wish.
- Instead of punishing sensory-seeking behaviours (e.g., movement), schools should proactively integrate sensory regulation into the daily routine. Advocate for sensory assessments and the provision of ‘regulation breaks’ that prevent the escalation to a crisis point.

- The WHO (2024) QualityRights toolkit suggests that the mere presence of seclusion infrastructure reinforces a coercive culture. Successful schools are those that replace these units with comforting spaces and relational support zones.

7.3 Advance directives and person centred planning

The WHO (2024) and Mallon (2025) both emphasise the importance of involving the child in their own support plan before a crisis occurs.

- **Advance Support Plans (ASPs):** Based on the ‘will and preference’ of the child (CRPD Art 12), ASPs document how a child wants to be supported when they are overwhelmed. This might include identifying a specific ‘safe person’, a particular sensory activity, or a voluntary quiet space.
- **Supported decision-making:** Richter (2025) argues that coercive practices thrive when a child's voice is silenced. Proactive support means asking children, “What helps you?” and “What makes things worse?”. Mallon (2025) found that children felt more regulated when they had a sense of agency over their own ‘time away’ rather than being ‘ordered. into a room.

7.4 Restorative approaches and relational repair

The ‘lost learning’ and ‘thwarted belonging’ identified by Thornton et al., (2025) can only be repaired through restorative practice.

- Rather than ‘out of sight, out of mind’ (Condliffe, 2021), schools should use restorative circles and relational repair sessions. This moves the focus from ‘punishment’ to ‘resolution’ and ‘reintegration’ (Hodgkiss and Harding, 2023).
- Thornton et al., (2025) suggest that since isolation is ineffective, resources should be diverted toward early intervention, mentors and SEMH specialists who can address the root causes of distress.

7.5 Addressing institutional resistance

Richter (2025) identifies ‘institutional resistance’ as the primary barrier to the abolition of seclusion.

- Leadership must explicitly state that seclusion and isolation booths are no longer an option. As long as the ‘booth’ exists as a default, staff will continue to use it as a ‘cheap’ alternative to the harder work of relational support.
- Schools must stop using ‘safety’ as a shield for coercion. True safety is found in a trauma-informed, relational culture where every child feels they belong... not in a locked room or an isolation box.

8 Finally, lets try to meet our ethical imperative

The research of 2021–2025 has drawn a clear line: the use of seclusion and isolation booths in mainstream schools is a systemic failure. We must move away from the ‘normalisation of coercion’ (Richter, 2025) and embrace our responsibility to eliminate these practices, recognising that enforced isolation is a harmful, rights-restricting practice (Quinn et al., 2025; UNCRC, 2023; WHO, 2024) that has no place in our schools.

Key references

- Condliffe, E. (2021). "Out of Sight, Out of Mind": An interpretative phenomenological analysis of young people's experience of isolation rooms/booths in UK mainstream secondary schools (Doctoral thesis, University of East Anglia).
- Department for Education (DfE) (2024) Behaviour in schools: Advice for headteachers and school staff. HM Government.
- Department for Education (DfE) (2026) Restrictive interventions, including use of reasonable force, in schools: statutory guidance for schools in England. HM Government.
- Equality and Human Rights Commission (EHRC) (2021) Restraint in schools inquiry: using meaningful data to protect children's rights. EHRC.
- Equality and Human Rights Commission (EHRC) (2025) Use of reasonable force and other restrictive interventions guidance: our response. EHRC.
- Equality and Human Rights Commission (EHRC) (2025, May 13) EHRC calls for national training standards for the restraint of children in response to government consultation on guidance [Press release].
- Gill, N, Drew, N, Rodrigues, M, Muhsen, H, Cano, G M, Savage, M, Pathare, S, Allan, J, Galderisi, S, Javed, A, Herrman, H and Funk, M (2024) Bringing together the World Health Organization's QualityRights initiative and the World Psychiatric Association's programme on implementing alternatives to coercion in mental healthcare: a common goal for action. *BJPsych Open*, 10(e23), 1-7. doi:10.1192/bjo.2023.622
- Hansen, A (2026) "Eliminating seclusion use for women in secure forensic hospitals. Are we doing enough to consider sex and gender differences for elimination?." *International Journal of Mental Health Nursing*, 35, no. 2: e70260. <https://doi.org/10.1111/inm.70260>.
- Hodgkiss, B and Harding, E (2023) Reducing physical restraint in educational settings: a systematic literature review. *Journal of Research in Special Educational Needs*, 23(4), 265-278. <https://doi.org/10.1111/1471-3802.12598>
- Hollins, S (2023) Baroness Hollins' final report: my heart breaks - solitary confinement in hospital has no therapeutic benefit for people with a learning disability and autistic people. Department of Health and Social Care
- Mallon, R (2025) Young people's narratives on their experiences of attending a school with an isolation space (Doctoral thesis, University of Sheffield).
- Quinn, A, Cavanagh, D E, Kilcoyne, J, Haines-Delmont, A, Ryan, S, Lodge, K M, Bradley, E, Shalev, S, Lamb, N, Hassiotis, A, Memmott, A, Banks, R, Pellicano, E and Pavlopoulou, G (2025) Long-term segregation and seclusion for people with an intellectual disability and/or autism in hospitals: critique of the current state of affairs: Commentary. *The British Journal of Psychiatry*, 1-3. doi: 10.1192/bjp.2025.53
- Richter, D (2025) Human rights in psychiatry: prospects and dilemmas of abolishing coercion in mental health care. Springer Nature. www.google.com/search?q=https://doi.org/10.1007/978-3-031-98635-2
- Thornton, E, Cheng, Q, Demkowicz, O and Humphrey, N (2025) Lost learning: prevalence, inequalities and outcomes of internal exclusion in mainstream secondary schools. *British Educational Research Journal*. www.google.com/search?q=https://doi.org/10.1002/berj.70049
- United Nations Committee on the Rights of the Child (UNCRC) (2023) Concluding observations on the combined sixth and seventh periodic reports of the United Kingdom of Great Britain and Northern Ireland (CRC/C/GBR/CO/6-7). United Nations.
- WHO (World Health Organization) (2024) QualityRights toolkit: mental health, human rights and legislation. World Health Organization.