80, 15, 5 percent: What we know; what they need…

A paper prepared by the disruptive antisocial behaviour in schools (DABS) working party

1. Definition

"Conduct problems" is the term used to identify a range of behaviours – from ongoing disruptive behaviours to conduct disorders – that are relevant to this report.[1]

2. Two strands

The Disruptive Antisocial Behaviour in Schools (DABS) working party established that there are two strands to this work. The answers to problems arising from conduct disorders do not and cannot lie with schools alone. It is the work of many, and it is complex work, to address conduct problems and ongoing behaviour issues.

2.1. The first strand of this paper considers issues that sit within schools (see section 5). Schools are faced with the sometimes conflicting priorities of ensuring workplaces and learning environments that are health-promoting and safe for staff and students, while trying to meet the learning needs of all students – including those who are disruptive and/or disengaged.

2.2. The second strand lies beyond schools: with families, government agencies, NGOS and the wider community (see section 6).

3. Common issues

3.1. Fragmentation

Fragmentation can occur in a variety of ways, all of which are barriers to effective responses to conduct problems.

3.1.1. To share, or not to share – the information breakdown

Incomplete provision of enrolment information on entry to secondary school can mean that full knowledge of past or current interventions, referrals or diagnoses can be missed. Further, the privacy legislation can mean that schools are not always informed of existing treatment or referrals for students and their families. PPTA is currently engaged in work focused on clarifying schools' practice in relation to the privacy legislation, which should improve communication channels between schools and other agencies.

3.1.2. The left hand does not know what the right hand is doing

The lack of liaison staff or protocols to work with other providers means that government agencies do not always contact schools, either to inform them of referrals or to ensure that interventions cohere with existing work. Schools don't always know of other agency involvements with students and families.

It is difficult to achieve or maintain co-ordinated work between primary and secondary

sectors, and between schools and other social agencies. Even when school liaison staff are appointed (for example, CYFS Porirua) information-sharing and disclosure remain complex and time-consuming, with staff in schools sometimes knowing more about a situation than the assigned case workers. High turnover rates in front-line mental health and social work services can also add to the fragmented nature of information sharing and service provision.

3.1.3. Money troubles… and the sinking lid

Programmes that work effectively are not always sustainably funded. This is usually to do with short-term funding, capped funding and/or contestable funding arrangements. Significant time is diverted from work with students, as school managers and/or staff from other agencies spend time seeking new or ongoing programme funding (for example, youth workers in schools and NGO-provided behaviour programmes for students with conduct problems). Only multi-party agreement to fund effective programmes and interventions can break this cycle.

3.1.4. Not in my backyard… competition vs collaboration

Initiatives that are successful in one area are not necessarily made available to other communities and schools. One consequence of this is that the effects of successful programmes are limited due to their localised nature, constituting missed opportunities for other schools. Another is that schools that have benefited from these programmes fail to realise the extent of the need in other areas. Schools are also faced with contestable funding – which means they have to compete against other schools for limited programme places and funding. We need collaboration – not competition over scarce resources.[2]

Examples of effective practice and programmes already exist. There is a real and growing need to ensure that these are sustainably funded, and that they are made available for implementation in more schools and communities. Programmes that acknowledge local contexts, but which are proven effective in a range of education settings, need to be supported, developed across clusters of schools and allowed to become embedded in our practice.

3.2. Complexity

Moderate to severe behaviour in children and young people is complex and has a range of causes. Some diagnosed conduct disorders cannot be "fixed" by teachers and schools.[3] The Ministry of Education needs to recognise this and work with the Health and Justice Ministries to develop accessible, and ongoing specialist support provision for these children and their families. People working with children and young people who have conduct disorders require specialist (master's level) training. The current provision of Resource Teacher: Learning and Behaviour (RTLB) training offers a useful model for this.

Conduct problems do not sit in the "quick fix" basket. Often they seem to spring from the basket labelled "too hard". Adolescents with conduct problems need specialist interventions and support – at school, at home and, sometimes, in other settings as well – and the teachers working with them need professional support and guidance too. Experts say that conduct problems are harder to deal with, more expensive to deal with and take longer to

deal with once students have reached secondary school age. The Advisory Group on Conduct Problems (AGCP) suggests that, by the age of 13, neither classroom-based interventions nor combined parent/teacher programmes are likely to be effective solutions to conduct problems.[4] Schools need access to trained psychologists and social workers to support the limited in-school resources (RTLB, counsellors, teacher aides and local support programmes) that may be available. Schools also need tagged time so that appropriate staff can liaise with in-school and external support.

3.3. Collaboration

Collaboration is easy to say but hard to do. It makes sense to work with other education, health and welfare professionals and, where needed, aligned justice and law enforcement officers. Often, schools are the glue in this knot of people and programmes, yet teachers and school leaders lack the specialist training, time and money to co-ordinate as effectively as these students need. Trained case managers – working long term with conduct-disordered children and their families – are needed. Case managers would be able to communicate and co-ordinate between schools and other service agencies to ensure that information is shared in a timely manner and that interventions are understood and appropriately managed.

Researchers from Otago University recommend that behavioural health clinics be established in schools, "providing a stepped pathway from prevention to care", and that they are staffed by specially trained school psychologists.[5]

Schools offer considerable potential as hosts or hubs for interventions, but this needs funding and staffing above and beyond existing provision. It is possible that the Ministry of Social Development's community link centres may also offer a model for this (see section 6.4).

3.4. Early intervention (and the fallout for secondary schools)

PPTA accepts that early intervention works best. Evidence shows that programmes targeting preschoolers and their families offer the best return on investment – both in economic and social terms. If interventions do not begin until a young person arrives at secondary school, the costs will be significant and the benefits far less certain. Evidence also shows that school/family interventions are less likely to be successful once a child reaches college. This is not good news for secondary school teachers in the short term. However, long term, it is in all of our interests to see well-funded, coherent programmes extended across early childhood services.[6]

4. Key concepts

4.1. Evidence

Programmes that have been proven to be effective are what is needed; programmes that do not work should be dropped. There is evidence about individual interventions that work best with children at different ages. There are school-based programmes that have shown evidence of effectiveness. These need to be looked at, committed to and applied (see section 5.3.1). Research-approved programmes are neither easy to monitor nor quick to implement, and the ultimate test for effectiveness –randomised controlled trials – is seldom achieved in New Zealand.

International evidence suggests that even the most effective in-school behaviour programme is likely to result in a 30–40% decrease in behaviour problems. No programme will be 100% successful.[7]

4.2. Fidelity

This term describes the need to follow programmes, as designed, without compromise. Whole-school programmes (and other designed interventions) that have an evidence base will only be effective if they are fully and faithfully implemented – often over a significant period of time. Again, to test and develop programmes in this way is a slow process.

4.3. Investment

Funding is tight – schools have been operating under significant constraints for some years now. Why is the funding so often directed into trials and pilots that are not further developed for all schools? Why is funding targeted at programmes that do not work? There are financial and social imperatives that those trial programmes that meet the evidence tests should be rolled out into more schools. At present, typically, one trial ends and another begins. This is one of the symptoms of fragmentation described above.

4.4. Timeliness

4.4.1. The long march – the need for ongoing commitment

Effective programmes will take 10–20 years to implement and embed. A matching commitment of funding, evaluation and development is needed to support this time frame.[8]

4.4.2. Early interventions are the best interventions

Research shows that conduct problems are best dealt with as soon as they appear. Usually, this means during a child's preschool or primary school years (see section 3.4). However, should conduct problems develop during adolescence, prompt interventions work best. Yet there is currently a four-to-eight-week minimum response time to RTLB (and subsequent Group Special Education (GSE)) referrals, a minimum eight-week Children and Adolescent Mental Health Services (CAMHS) waiting list, and a delay of up to a term in specialist response to students exhibiting conduct problems. These delays are both unacceptable and unsafe for students and their teachers.

Inadequate response times are no surprise, given the inadequate staffing formulae that govern RTLB and GSE provision. Every secondary school needs access to at least one full-time, trained RTLB; larger schools need more. GSE staffing should reflect the research that shows students with severe conduct problems number closer to 5% of the student population than the 1% attribution that governs current GSE provision.[9]

5. Schools

The literature shows that, by keeping students at school, teachers are already doing a huge service to the wellbeing of young people – the interest the Ministry of Education takes in reducing the number of "NEETs" (not in education, employment or training) and improving District Truancy Service outcomes is a clear example of its importance. Secondary teachers

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and schools need to be acknowledged for the positive work they are already doing to keep students in the system, safe and with opportunities to continue learning.

5.1. Workplace health and safety for teachers

School boards must ensure that teachers' emotional and physical wellbeing is not put at risk, due to the stress that may develop due to ongoing work with teenagers who have conduct problems. Teachers have a right to workplaces that meet the health and safety regulations; schools have an obligation to provide these.

5.2. PPTA School Anti-Violence Toolkit

Produced in 2007, this toolkit offers information, guidelines and resources for schools to help them develop anti-violence policies and practices. It also explains legal rights and obligations to do with the provision of safe schools – for students, teachers and support staff. The toolkit is available for download from the PPTA website and offers a useful audit tool and/or starting point to address issues of violence (and proactive approaches) in schools.

 http://ppta.org.nz/advice-and-issues/health-and-safety/

5.3. Whole-school behaviour programmes

There is a move towards pro-active, whole-school programmes that teach, promote and model desirable behaviour. These involve significant time and learning for teachers, as well as for students and the wider school community. These cannot replace other responses – even effective programmes might only expect to see a 30–40% improvement. Further, these sit alongside interventions for the 5% of students whose conduct problems require one-to-one specialist support. Change in teacher practice or behaviour, on its own, will not effect change for students who have severe conduct problems or disorders.[10]

Whole-school programmes must be:

- evidence-based;

- able to be adapted and developed in a range of contexts, without losing fidelity; and

- properly (fully and sustainably) funded and supported.

5.3.1. Local examples

AIMHI

AIMHI (Achievement in Multicultural High Schools) is a group of nine decile one urban secondary schools where a large proportion of the schools' student population comes from Māori and Pacific backgrounds. The AIMHI schools aim to raise students' educational achievement through a range of strategies, supported by research. http://www.aimhi.ac.nz/

Te Kotahitanga

Te Kotahitanga is a collaborative response to the rising problem of underachievement among Māori students in mainstream schools. This professional development and research project,

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which began in 2001, is now in its fourth phase and involves 33 schools around New Zealand, hundreds of teachers and thousands of Māori students.

This project has not been subject to randomised controlled trials and, although it is showing positive results, it is hard to determine its impact as it is often delivered in combination with other programmes running in Te Kotahitanga schools. There are also concerns that once funding is withdrawn (see section 3.1.3) Te Kotahitanga will not be sustainable.

EBS

Effective Behaviour Support (EBS), also known as Positive Behaviour Support (PBS), is a structure that enables the development of a successful school-wide culture. This is achieved by developing positive and respectful relationships through ongoing consultation with, and decision-making by, parents, students, the community and all staff. It builds on a caring environment in which students and staff feel valued and the whole school community feels safe. It involves the development of consistent expectations across all settings and by all staff. It teaches behaviours, instead of "expecting" that students just know what to do.

Students identify their strengths and strive for their potential. Time spent on student learning is maximised: students are taught to work smarter, not harder. As relationships and behaviours across the school community improve, so does student engagement and academic achievement. Data on student learning and behaviour is used to make informed decisions.

http://www.tki.org.nz/r/governance/positive_behaviours/information/pro_development_e.php#1 http://www.pbis.org/

5.4. Current services

5.4.1. RTLB

RTLB currently serve a small number of Year 1–10 students with identified moderate learning and behaviour needs. The service is variable – something that the Education Review Office has recognised with its current review of RTLB cluster management – and also not particularly well designed to work in secondary and area schools. Most secondary schools have access to less than one FTTE RTLB and referrals can take from two to ten weeks to be picked up.

http://www.tki.org.nz/r/governance/positive_behaviours/information/funding_resources_e.php#5

5.4.2. GSE

GSE work with less than 1% of the most difficult Year 1–10 students. Again, service is variable and there is no guarantee that referrals will be picked up. Delays in access are

typical – usually GSE involvement takes longer to access than RTLB and, in most cases, an RTLB referral must precede one to GSE.

http://www.minedu.govt.nz/educationSectors/SpecialEducation/AboutSpecialEducation/WhatWeDo/WhatWeDo.aspx

5.4.3. SWIS

The Social Workers in Schools (SWIS) programme began with a pilot in 1999 with 12 social workers in three areas: Northland, the East Coast and the Hutt/Porirua. From 2000 it moved into full operation.

The SWiS programme is led and financed by Child, Youth and Family and supported by the Ministry of Education and other ministries. The programme is run in partnership with service providers around the country who directly employ the social workers delivering the programme within schools.

The government's overarching goal in establishing the programme is:

To enhance life outcomes for children whose social and family circumstances place at risk their chances of achieving good health, education and wellbeing outcomes.

Currently there are 128 social workers working in around 320 low decile schools in New Zealand.

http://www.cyf.govt.nz/3629.htm

5.4.4. Alternative Education

Schools report that there are insufficient places in activity and alternative education (AE) centres to meet demand and that it is difficult to attract and retain suitably qualified staff. Long term, AE provision is probably not an adequate response to conduct problems in secondary schools. However, until such time as schools and other agencies are staffed and funded to meet the complex needs that students with conduct problems present, PPTA will continue to lobby for improved and increased provision of AE. The Ministry of Education conducted a review of AE provision earlier in 2009, to which PPTA made a submission. At the time of writing, the Ministry is consulting with principals and its findings and proposed next steps are pending. There is a student voice report, prepared by NZCER for the Ministry, available on the Education Counts website.[11]

http://www.tki.org.nz/e/community/alterned/

6. Community

There are a number of current community services and initiatives that sit outside the education sector, but which impact on students and families with conduct problems. There are also some inter-agency initiatives under way.

6.1. Inter-agency plan for conduct disorder/severe antisocial behaviour, 2007–2012

This plan, led by the Ministry of Social Development, details four areas for action in the six-year time period. Its key proposals are:

- Leadership, co-ordination, monitoring and evaluation, including establishing an experts' group.

- Building on the specialist behaviour services already provided by the Ministry of Education to ensure that, by 2012, children requiring a comprehensive behavioural intervention (up to 5% of children) receive this level of intervention before they are eight years old.

- Progressively transitioning current service provision to evidence-based, best-practice interventions.

- Developing a shared infrastructure across agencies for the delivery of specialist behavioural services. This will include the development of common screening and eligibility processes to identify and assess the needs of children and young people on an antisocial pathway, and joint workforce development and training.[12]

The plan contains statistics for current (2005) Ministry of Education provision of specialist behavioural services, from which it would appear that support for youth aged 13–22 constitutes less than 20% of the Vote Education allocation. Given what is known about effective interventions for conduct problems, it may be reasonable that more than 80% of this service is targeted at children aged 0–12, but the plan also details "gaps in the availability of specialist services, particularly for younger children and teenagers".[13] Clearly, there is significant work to be done.

The good news is that the research is being done – government agencies are aware that conduct problems are an issue for 5–10% of children and young people and that, unless effective interventions and programmes are developed, conduct problems will continue to cause significant negative social and economic outcomes for New Zealanders. The intention to work for positive change using multi-agency approaches is already agreed, and programmes are in development.

6.2. Advisory Group on Conduct Problems

This group has been established to investigate conduct problems and produce a series of reports on the prevention, treatment and management of conduct problems in children and young people. Their work is a welcome development in this area; convened by the Ministry of Social Development, AGCP materials can be accessed via that ministry's website: www.msd.govt.nz

6.3. Taumata Whanonga, 2009

The summit was convened by the Ministry of Education, but with a cross-sector focus and participants from across the public and NGO sectors. The Taumata gave a strong signal that the disruptive behaviour issues raised by members have been heard by the government, and there was recognition that these issues need to be addressed. A number of themes and ideas emerged from the summit:

- Behaviour and conduct issues are long term and complex with no silver bullet.

- The medical view is that the most difficult 5% of conduct disorders will not be able to be fixed by teachers, or in school, so the government needs to fund qualified professionals to deal with them.

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- Putting limited funding into teacher aide provision is inadequate. Many young people need skilled one-to-one interventions. It is unreasonable to expect that using low-paid, semi-skilled staff will result in lasting improvements for most conduct disordered young people.

- Evidence-based programmes that have been evaluated using randomised controlled trials are essential. George Sugai spoke about the development of whole-school programmes in the United States to address behaviour (Positive Behavioural Interventions and Supports) – including issues of sustainability, evaluation and adaptation to local contexts. This programme has an intensive research component to support implementation and evaluation. Australia and New Zealand have adaptations of PBIS, such as Positive Behaviour for Learning (PBL) in West Sydney and Effective Behaviour Systems (EBS) in Taranaki.

- Fragmentation – whether of programme implementation and distribution or funding – is damaging. The evidence-based programmes need to be rolled out sustainably across the country, not just into a minority of schools or areas.

- Collaboration is essential. Schools make a great hub for interventions with young people and families, but aren't necessarily the best-qualified case managers when multiple agencies are involved or needed.

- Prevention is better, but "treatment" is still needed for conduct-disordered students.

- Teacher professional learning and development should be fully funded, ongoing and evidence-based.

- Initial Teacher Education Providers (ITEs) may not be providing trainees with the skills they need to manage classrooms as they begin their teaching careers. There needs to be a shift in focus for ITE programmes.

- Funding constraints mean that finding new money may be difficult, but funding evidence-based, pro-social programmes is an investment with a bottom line that benefits taxpayers and society as a whole.

An interesting example given at the Taumata was the intervention programme "Scared Straight". It is a salutary reminder that popular doesn't mean effective. This US programme put difficult students in prison with a convict for a day to scare them into better behaviour. All involved agreed it was great programme; it attracted the support from the media and ran for years. Recent research evidence, however, has shown that more young people went on to prison from that group than from any control group. In practice, the experience proved to be a first step to socialisation into prison society.

The 'action plan'

The Taumata planning group final report, with its action plan, will go to the Minister of Education soon. The plan recommends:

- evidence-based programmes that are shared to stop inefficient and fragmented approaches;

- more money on teacher education to manage the 80%; and

- a review of the RTLB system to give them a greater role.[14]

Clearly the action plan has inherent within it the idea that additional resourcing is required, but not in the specific detail PPTA would like, or in the amount we would see as necessary to address the problems. It is still focused on the notion that results can be achieved by using existing teacher resources, with its proposals for money to be redirected into improving teacher education.

6.4. Community link centres

These one-stop-shops for community services have been developed by the Ministry of Social Development, through a bottom-up strategy that allows for "more upfront time with clients". This may be more expensive initially but "saves time and money downstream, both in terms of… costs and social problems".[15]

Although this is a national strategy, each centre is responsive to the needs of its host community and can develop accordingly. Currently there are five community link centres, in Ashburton, Flaxmere, Huntly, Linwood and Naenae.

6.4.1. Linwood example

The Linwood link centre houses Work and Income, the Department of Building and Housing, Career Services, ACC, Workbridge, Housing New Zealand and CYF, as well as providing small meeting rooms for community use. Its manager says: "By working closely together we are breaking down barriers to employment and services that improve people's wellbeing."[16]

6.5. Examples of research-informed community programmes

6.5.1. Northcote Child and Youth Development project

This project is research-based, and it includes participatory action research (PAR) as part of its ethos. It has four objectives:

- Promote evidence-based approaches to child and youth service development.

- Learn what works best to improve outcomes at a local level and feed this into national level work on child and youth development.

- Encourage central and local agencies to take a "whole child" approach and collaborate to improve services for children and youth.

- Increase participation in community decision-making by children and young people.[17]

Findings from some of their research are relevant to schools and agencies concerned with improving youth contexts and cultures:

- Sustainable youth development requires multiple inputs from multiple sources over the long term.

- Collaborative relationships are essential for positive child and youth development and it is important to address the challenges to effective collaboration.

- The inclusion of young people is central to any youth development initiative.[18]

6.5.2. Action plan for Counties Manukau and Otahuhu youth (Youth Gangs Action plan)

This plan was developed under the leadership of the Ministry of Social Development, with input from a number of other government departments and NGOs. It aimed at "supporting at-risk children and young people and their families to make positive choices" and to "intervene more effectively with high-risk recidivist offenders".

Like other research presented above, the project found that a 15–25 year development timeframe was realistic, and that the funding and support systems for the project needed to be maintained to allow sustained implementation. They also looked at ways to develop more effective inter-agency collaboration.[19]

7. Conclusion

There are clear themes emerging from current research and the isolated areas of practice detailed above. The challenge is to try and get the best value we can for professional support for teachers and funding for schools to work proactively with the bulk of our students, while lobbying and monitoring the government to commit badly-needed funding and resources to the development of specialist services for children and young people with conduct problems. Despite an extremely positive and proven cost-benefit ratio for early intervention into conduct problems, our system continues to be fragmented, under-staffed, under-qualified and under-funded. Do not hold your breath.

8. Further information and resources

8.1. *Executive summary from the Inter-Agency Plan for Conduct Disorder/Severe Antisocial Behaviour, 2007–2012*

http://www.msd.govt.nz/about-msd-and-our-work/work-programmes/policy-development/anti-social-behaviour/

8.2. Executive summary from the *Conduct Problems Best Practice Report 2009*

http://www.msd.govt.nz/about-msd-and-our-work/publications-resources/research/conduct-problems-best-practice/index.html

8.3. Ministry of Education behaviour action plan

http://www.minedu.govt.nz/theMinistry/EducationInitiatives/TaumataWhanonga/PublicationsAndResources.aspx

Note: This document may not be available.

Recommendations

1. That the report be received.

2. ~~That PPTA call for evidence-based professional learning programmes for teachers and teacher aides, focusing on effective behaviour management, to be rolled out across schools, with Ministry of Education funding and School Support Services support.~~

3. ~~That PPTA call for the allocation of RTLBs to each secondary and area school on the basis of a base staffing component of one RTLB plus a roll-generated component, generated at a ratio that ensures adequate and timely provision in all schools.~~

4. ~~That PPTA call for the development and extension of the social workers in schools programme (SWiS) beyond low decile secondary schools.~~

5. ~~That PPTA call for 0.5 tagged staffing to be made available to schools for liaison with support agencies (for example, CYFS, youth aid, truancy services, etc).~~

6. ~~That PPTA call for the Ministry of Education to investigate the provision of behavioural health clinics in schools.~~

7. ~~That PPTA endorse:~~

a. ~~the findings of the Advisory Group on Conduct Problems and Taumata Whanonga; and~~

b. ~~call on the government to co-ordinate and resource relevant programmes and support aimed at reducing the prevalence of conduct problems in secondary schools.~~

8. ~~That PPTA call for trained case managers to be employed by the government, through the Ministry of Social Development, to work long-term with conduct-disordered children and their families to provide continuity and coherence to interventions and information-sharing with schools and other relevant agencies.~~

9. ~~That PPTA call on the government to increase the provision and resourcing of high-quality alternative education placements for appropriate students.~~

Endnotes

1. Advisory Group on Conduct Problems (2009). *Conduct Problems; Best Practice Report*, pp11–12. Retrieved 5 August 2009 from http://www.msd.govt.nz/about-msd-and-our-work/publications-resources/research/conduct-problems-best-practice/

2. Viviane Robinson says "we've got to get over this oppositional discussion between our current model of self-managing schools or the highly centralised and bureaucratic system we had before. There are many alternatives in between. We've had Tomorrow's Schools for 19 years – surely we have learnt something about how to change the system so we achieve better outcomes for all our students" (S Boyd (2009). set. 1:3).

3. *Inter-Agency Plan for Conduct Disorder/Severe Antisocial Behaviour 2007–2012* (2007), p14. Retrieved 5 August 2009 from http://www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/policy-development/interagency-plan.pdf)

4. Advisory Group on Conduct Problems,2009 p39.

5. R Poulton (2007). 'From Cars and Kids to Choices and Capability'. Presentation to the Labour Party conference. Retrieved 5 August 20009 from www.lifecourse.ac.nz/outputs/labour2007.php

6. Advisory Group on Conduct Problems, p32.

7. George Sugai (2009). Presentation to the Taumata Whanonga. See also www.pbis.org

8. Advisory Group on Conduct Problems, p38.

9. "It is estimated that as many as 1% of 0–17 year olds receive a specialist behavioural service each year" (*Inter-Agency Plan for Conduct Disorder/Severe Antisocial Behaviour 2007–2012* (2007), p2. Retrieved 5 August 2009 from http://www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/policy-development/interagency-plan.pdf). Yet the AGCP "concludes that 5–10 per cent of children of all ages will have clinically significant levels of conduct problems" (Advisory Group on Conduct Problems, p1).

10. B Dunnachie (2007). *Evidence-Based Age-Appopriate Interventions – A guide for Child and Adolescent Mental Health Services (CAMHS)*. Auckland: The Werry Centre for Child and Adolescent Mental Health Workforce Development, p30.

11. For a summary see PPTA's HX 09/061: *Report – Background of students in alternative education: interviews with a selection of the 2008 cohort*.

12. *Inter-Agency Plan for Conduct Disorder/Severe Antisocial Behaviour*, p3.

13. Ibid.

14. While PPTA advised that schools are relying more on the Specialist Classroom Teachers than the RTLB and there are concerns about the efficacy of the RTLB system in secondary schools, there is clearly a focus on trying to find some use for them in this context.

15. Rise (2008) 4:11. retrieved from http://www.msd.govt.nz/about-msd-and-our-work/publications-resources/journals-and-magazines/rise/index.html

16. Rise (2008) 4:10.

17. S Greenaway, K Conway (2005). *Northcote Child and Youth Development Project; Formative Evaluation – Quarterly Progress Report Two*. Retrieved 5 August 2009 from http://www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/initiatives/northcote-child-youth-project/northcote-quarterly-review.doc

18. V Jensen, H Kaiwai, S Greenaway, K Conway (2005). *Northcote Child and Youth Development Project; A Literature Review*. Retrieved 5 August 2009 from http://www.msd.govt.nz/about-msd-and-our-work/work-programmes/initiatives/northcote-child-youth-project

19. Centre for Social Research and Evaluation Te Pokapū Rangahau Arotake Hapori (2006). *From Wannabes to Youth Offenders: Youth Gangs in Counties Manukau*. Retrieved 5 August 2009 from http://www.msd.govt.nz/about-msd-and-our-work/publications-resources/research/youth-gangs-counties-manukau/

80, 15, 5 percent: What we know; what they need

1.   That the report be received.

2.   That PPTA call for evidence-based professional learning programmes for teachers and teacher aides, focusing on effective behaviour management, to be rolled out across schools, within two years with Ministry of Education funding and SSS support.

3.   That PPTA call for the allocation of RTLBs to each secondary and area school on the basis of a base staffing component of one RTLB plus a roll-generated component, generated at a ratio which ensures adequate and timely provision in all schools.

4.   That PPTA call for the development and extension of the social workers in schools programme (SWIS) beyond low decile secondary schools.

5.   That PPTA call for tagged staffing for schools for liaison with support agencies of 0.5 FTTE base staffing plus a roll and decile-linked component.

6.   That PPTA call for the Ministry of Education to investigate the provision of behavioural health clinics with appropriately qualified staff, in schools.

7.   That PPTA:

    a.   Endorse the findings of the Advisory Group on Conduct Problems (AGCP) and Taumata Whanonga; and

    b.   Call on government to co-ordinate and resource relevant programmes and support aimed at reducing the prevalence of conduct problems in secondary schools.

8.   That PPTA call for trained case managers to be employed by government, through MSD, to work long-term with conduct disordered children and their families to provide continuity and coherence to interventions and information-sharing with schools and other relevant agencies.

9.   That PPTA call on the government to increase the provision and resourcing of high quality alternative education placements for appropriate students.

10.   That executive bring back a proposal to 2010 conference, outlining strategies, including a range of alternative staffing formulas, targeting severely disruptive behaviour.

11.   That PPTA actively endorse the need for tagged staffing for trained guidance counsellors in secondary and area schools.

12. That PPTA reaffirms its Policy that violence (that is, physical violence, threat of violence, intimidation, violent language) by a student towards a teacher is a health and safety issue.

13. That PPTA promote the Anti-Violence Toolkit and other resources that branches can adopt where a teacher is not protected from violence, threat of violence, intimidation or verbal violence by a student and regularly promote these procedures through branch and regional officer training.

14. That PPTA investigate the creation of a new category of resource teacher for Disruptive Children, additional to current staffing.