MONDAY 22 OCTOBER

LEPH2018 DRAFT PROGRAM
(correct at 14 September)

Important Notes:
➢ This is a draft program only. The final program will be posted early October
➢ Some times may change
➢ Some speakers and presentation titles are yet to be confirmed
➢ The order of speakers in a session may change.

8:30-10:00 a.m.  PLENARY SESSION P1
Room: Ballroom East and West
Chair: Nick Crofts, LEPH2018 Conference Director & Director, Centre for Law Enforcement and Public Health
Speakers:
- Nick Crofts, see above
  Welcome to the LEPH2018 Conference
- Howard Sapers, Independent Advisor on Corrections Reform, Ontario, Canada
  Prison health IS public health
- Charles H Ramsey, Philadelphia Police Commissioner, USA (ret)
  Police, crisis intervention and officer well being
- Shannon Cosgrove, Director of Health Policy at Cure Violence, Canada
  Health at the center of violence prevention

10.00 – 10.30  MORNING TEA

10:30-11:55  MAJOR SESSIONS

M1  The Crisis Intervention Team Model: What we have learned after 30 years
The Crisis Intervention Team (CIT) model was developed 30 years ago in Memphis, Tennessee. There is now a growing body of research evidence on it’s effectiveness. However, there remains some confusion about the model. This session will discuss the Core Elements of the CIT model and what is meant by “more than just training.” Community collaboration, a responsive mental health system and the specialized CIT officer role will be covered.

Room: Ballroom East
Chair: Tom VonHemert, CIT International, USA
Speakers:
- Amy Watson, University of Illinois Chicago, USA
  CIT – The evidence to date
- Don Kamin, Institute for Police, Mental Health & Community Collaboration, USA & Pat Strode,
  Georgia Public Safety Training Center, USA
  Perspectives on developing and implementing CIT programs – collaboration is key
- Ron Bruno, CIT Utah, USA
The core elements of the CIT model – the “More” explained and why it matters
Thomas Vonhemert, CIT International, USA
The CIT Model: what have we learned after 30 years

M2  Public health and policing in England: an opportunity to improve health through Partnership
Is health a policing issue? Reviewing the landscape and developing a consensus statement in England. (Both speakers will address this topic)
Room: Ballroom Center
Chair: Eamonn O’Moore, WHO UK Collaborating Centre for Health in Prisons
Speakers
Justin Srivastava, Lancashire Police, UK
Helen Christmas, Public Health England

M3  ‘Hidden in Plain Sight’: medical and behavioural conditions affecting communication with police
Room: Giovanni
Chair: Nick Crofts, Centre for Law Enforcement and Public Health, Australia
Speakers:
Lesslie Young, Epilepsy Scotland
Crime Seen?
Nathan Hughes, University of Sheffield, UK
The discrimination and criminalisation of childhood neurodevelopmental impairment
Discussant:
Joanne Maclsaac, Affected Families and Police Homicide, Canada

10.30 – 6.00 p.m.  POSTERS

Mr Reza Novalino, Karitas Sani Madani, Indonesia.
Prevention and treatment of HIV AIDS and drugs against people with substance abuse disorders

Mr Christopher Baguma, Ugandan Harm Reduction Network.
A documentary changing the attitude and perception of law enforcement officers, policy makers and community leaders on issues of drug users in Uganda

Mr Christopher Baguma, Ugandan Harm Reduction Network.
Case management of drug users in Police Custody as a harm reduction approach

Mrs. Roberta Magalhães,
Program for improving access and quality in primary care in Belo Horizonte - Brazil: daily tensions in the implementation of the policy

Ishwor Maharjan, Youth RISE.
Impact of drug law enforcement on harm reduction services and people who use drugs in Nepal
Stella Nalukwago Settumba, University of New South Wales, Australia. 
What type of treatment program for impulsive violent offenders will encourage societal support and increase offender uptake?

Thomas Ndeogo, Ghana Police Service. 
Enhancing harm reduction among key populations: the police as agents

Leah Dunbar, Michael Garron Hospital, Canada. 
Investment in MCIT yields enhanced support for persons in crisis

12:05-1:30 MAJOR SESSIONS

M4 The evolution of pre-arrest pathways for vulnerable populations
Global initiatives across the fields of policing and public health are forging new pathways to treatment and social support for people following police encounters with vulnerable populations. An increased focus on police encounters when neither arrest nor hospital transportation, nor taking no action serve as appropriate pathways to enhanced public health and public safety. The panel will examine theoretical, empirical and policy foundations of such initiatives, with a focus on the US.
Room: Ballroom East
Chair: Jac Charlier, Center for Health and Justice at TASC, USA
Speakers:

Jennifer Wood, Temple University, USA 
Why ‘deflection’ matters: Frontline experiences of Chicago police in managing the family and community contexts of mental health encounters

Amy Watson University of Illinois at Chicago, USA
Why ‘deflection’ matters-Part II: Places, encounter characteristics and outcomes of police encounters with persons with mental illnesses in Chicago

Jac Charlier, Center for Health and Justice at TASC, USA
Police and treatment: Fighting crime and saving lives together in the U.S.

M5 Epidemiological Criminology as an emerging paradigm
Epidemiological Criminology is an emerging paradigm, model, theory, and discipline for a new type of interdisciplinary scientist, practitioner, and student. Epidemiological Criminology can serve as an emerging theory for the study of gangs, substance abuse, and law enforcement, among other issues.
Room: Ballroom Center
Chair: Timothy Akers, Morgan State University, USA
Speakers:

Dr. Paul Archibald, Morgan State University, USA
Development of the Behavioral-Biomedical Law Enforcement Stress Discordance Model (B^2LESDD): an epidemiological criminology framework

Dr. Jennifer Reingle Gonzalez, University of Texas Southwestern, USA
Does military veteran status and deployment history impact officer involved shootings? A case-control study
**MONDAY 22 OCTOBER**

Roberto Hugh Potter, University of Central Florida, USA
*Epidemiological Criminology and Behavioral Health: an examination of the intersections of Behavioral Health Burden and Criminogenic Risk in a Florida county*

Shelby Scott, University of Tennessee, USA
*Handguns and Hotspots: spatio-temporal modeling of gun crime in Chicago*

Stacy Smith, Morgan State University, USA

Guy Lamb, University of Capetown, South Africa
*The policing of firearm controls and the reduction of firearm homicides in South Africa*

**M6** Rethinking the role of technology in law enforcement and public health
The history of humankind is replete with technological innovations that were supposed to solve all of our problems. The session will focus on understanding the limits, benefits and risks that technology can bring to those at the frontlines of law enforcement and public health, conscious of the human propensity to hope for and seek easy answers to complex human and organizational challenges with complicated but seemingly easy to use technology.

Room: Giovanni
Moderator: Danielle Dowdy, Senior Strategic Initiatives Lead, Ontario Street Checks Review, Canada
Panellists:
- Robert Ridge, Medicalert, Canada
- Ron Anderson, Saskatchewan Ministry of Justice, Canada
- Ritesh Kotak, University of Edinburgh, Scotland
- Dan Law, Chief Data Scientist, Motorola Solutions, Canada

**1.30 – 2.30** LUNCH

**1.45 – 2.25** LUNCHTIME SESSIONS

L1: Critical perspectives on cannabis reform: Health, policy and policing
Room: St. David
Convener: Leo Beletsky, Northeastern University, USA
Speakers:
- Leo Beletsky, Northeastern University, USA
- Akwasi Owusu-Bempah, University of Toronto, Canada

The 21st century has ushered in an era of rapid transformation in the landscape of cannabis regulation throughout the world. This transformation has proceeded with limited input of diverse perspectives and considerations, largely without addressing cascades of individual and structural harms resulting from decades of cannabis prohibition policies and their enforcement. This session will identify the gaps in existing reform efforts, highlight promising initiatives that have engaged cannabis reform to pursue racial and social objectives, and outline an agenda to re-envision drug policy reform from a public health perspective.
L2: Promoting women’s needs as employees and clients in criminal justice
Room: Giovanni
Chair: Melissa Jardine, Centre for Law Enforcement and Public Health, Australia
Speakers:
Mily Biswas, Dhaka Police, Bangladesh
Women in policing: a Bangladesh perspective
Dorin Purice, State Secretary, Moldova
*Presentation title to be advised
Many services and occupations are designed with a default to suit conditions for men. The needs of women as service clientele in criminal justice and as employees of law enforcement organisations have become an important focus to achieve gender equality. This session will explore ways that access to justice must be advanced with consideration to gender and how the inclusion of women in law enforcement institutions contributes to the United Nations Sustainable Development Goal No. 5 regarding gender equality

2:30-4:00 CONCURRENT SESSIONS

C1 Violence
Violence has many faces and multiple impacts; its root causes and effects demand joint responses from multiple sectors. This session illustrates a range of these complex issues and some possible responses.
Room: Giovanni
Shahala Pervin, Bangladesh Police
Vicious cycle of violence against women: prosecution, prevention and protection in Bangladesh
Tony Butler, University of New South Wales, Australia.
Use of Text Mining of the Police event narratives in identifying mentions of mental illness among those involved in family and domestic violence
Lyndel Bates, Griffith University, Australia.
Assault-related traumatic brain injuries: factors related to stress, depression and anxiety
Matty de Wit, Public Health Amsterdam.
Childhood adversity and self-sufficiency problems in early adulthood among violent repeat offenders
Joachim Kersten IMPRODOVA
Horizon2020 EU research on first responder cooperation re high impact domestic violence
Stephanie Waddell, Early Intervention Foundation, UK
The role of early intervention in preventing violence
**C2 Moving forward: Police mental health & well-being**

The session will focus on mental health promotion and prevention; national research and findings from the Canadian Institute for Public Safety Research and Treatment (CIPSRT) and the National Plan of Action to improve the lives of the front line; identifying and overcoming barriers to care; intervention and employer best practice guidelines and the Canadian Police Association’s Current and Future Vision.

Room: Ballroom East  
Chair: **Katy Kamkar**, Centre for Addiction and Mental Health, Canada  
Speakers:
- **Katy Kamkar**, Centre for Addiction and Mental Health, Canada  
- **Employer best practice guidelines and disability management**
- **Nicholas Carleton**, University of Regina, Canada
  - *Mental health among Canadian public safety personnel: a brief overview of contemporary research*
- **Steve Palmer**, University of Regina, Canada
  - *Building a network of academics and police organizations to address front line mental health*
- **Greg Anderson**, Justice Institute of British Columbia, Canada
  - *Police officer stress and mental health*
- **Tom Stamatakis**, Canadian Police Association
  - *The mental health of police personnel should be recognized as a ‘mission critical’ priority*

**C3 Criminalization of reproductive health and partnering with police to reduce legal risk**

Abortion is a common but stigmatized health service: nearly every country has laws restricting abortion those with liberal laws have challenges with implementation due to stigma. Laws on abortion carry criminal penalties, creating legal risks both for people who provide abortions and those who seek them. These presentations examine legal risk faced by people who end their pregnancies in Africa and the United States. We will also present research on the results of partnership with law enforcement, which include a decrease in instances of adverse police interactions between the police and abortion providers.

Room: Armoury  
Chair: **Patty Skuster**, Ipas, USA  
Speakers:
- **Farah Diaz-Tello**, SIA Legal Team, USA
  - *Putting the myth of protecting pregnant people to rest: understanding the public health threat of criminalizing abortion*
- **Dr. Samuel Otu-Nyarko**, Ghana Police Service
  - *Partnering with Police to Improve Abortion Care in Ghana*
- **Edosa Oviawe**, Ipas Nigeria
  - *Ipas intervention with the Police Force in Nigeria*
- **Dr. Msipu Phiri T**, Police Health Services, Zambia
  - *An evaluation of reproductive rights training for police officers in Zambia*
C4  Harm reduction services for young people who use drugs and the role of law enforcement

Violence has many faces and multiple impacts; its root causes and effects demand joint responses from multiple sectors. This session illustrates a range of these complex issues and some possible responses.

Room: St. David
Chair: Morgana Daniele, Youth RISE, Lithuania
Speakers:
Ms Morgana Daniele Youth RISE, Lithuania
Human rights, young people who use drugs and policing across the world: what can we learn?
Florian Scheibein, Youth RISE, Ireland
Policing young people’s engagement in high risk drug use
Peter Muyshondt, Anyone’s Child/Local Police, Belgium
The impact of policing on vulnerable groups
Alissa Greer, Canadian Institute for Substance Use Research.
Youth who use drugs and perceptions of police across three communities in British Columbia, Canada
Monique Marks, Urban Futures Centre, Durban University of Technology, South Africa.
“We cannot allow children to take drugs freely”: contemporary moral panics about drug treatment in Durban, South Africa

C5  Law enforcement and mental health

The difficulties policing experiences with people with mental health issues illustrate the inadequacy of communities’ understandings of mental health issues, and create dangers for all involved. We need a better understanding on which to build humane and effective practice.

Room: St. Patrick
Chair:
Speakers:
John McDaniel, University of Wolverhampton, UK
Deconstructing the mental health dimensions of community-oriented policing
Maria Liegghio, York University, Canada.
Preliminary findings of a qualitative study exploring police encounters in child and adolescent mental health
Nabila Zohora Chowdhury, University of New South Wales, Australia
The relationship between psychoses and offending in New South Wales – a data-linkage study
Nadine Dougall,
Care pathways related to Scottish Ambulance Service contacts for people with psychiatric or self-harm emergencies
Adam Vaughan, Simon Fraser University, Canada.
Psychiatric presentations to the emergency department via police custody, 2008-2016

Sara Jacoby, University of Pennsylvania, USA.
An evaluation of costs and benefits of pre-hospital transport by police for urban trauma patients

2.30 – 4.00  MARKETPLACE OF IDEAS

Marketplace of Ideas: 1 (2 x 45 minute presentations)
Room: Terrace East

1.1. Culturally-competent response to perpetrators of intimate partner violence
Facilitator: Amber Christensen Fullmer, University of Alaska, USA
This session targets stakeholders who are working to address intimate partner violence, sexual assault and violence against women from a cross-cultural, interdisciplinary evidence-based platform. Discussions surrounding the unique difficulties in providing services in developing and/or remote locations, cultural competency in professionals and treatment modalities as well as resource development.

1.2. Preventing and reducing violence: How we developed a routine surveillance and analysis system for early intervention and prevention of violence from a multi-agency perspective
Facilitators: Emma R Barton & Michelle McManus, Public Health Wales
In 2012 South Wales police set reducing violent crime as a top priority. The effects of violence on individuals are widespread causing poor health and well-being while under-reporting violent crime. This session will demonstrate the project that is an example of effective multi agency working that has successfully helped to develop a better understanding of violence across South Wales and demonstrating the value of sharing data and resources across agencies. The residence of victims and perpetrators of assault were mapped, helping agencies target resources at communities most at risk, tackling the root causes of violence.

Marketplace of Ideas: 2 (2 x 45 minute presentations)
Room: Terrace West

2.1. We cannot afford the make the same mistakes: reflecting on LEPH incidents for all the right reasons
Facilitators: Isabelle Bartkowiak-Théron, University of Tasmania, Australia & Michael Brown College of Policing, UK
Discussant: Commander Stuart Bateson, Victoria Police, Australia
How quickly do we look at LEPH incidents worldwide and answer (or hear) “police need more training” on those issues? This session challenges several ideas as to the role of police and other agencies in the management of those incidents. An incident of police brutality towards a disabled pensioner in Australia is highlighted. We cannot ‘make the same mistakes again, except better’, or ‘doing the wrong thing, righter’. From a recent article by Michael Brown and opinion piece by Isabelle Bartkowiak-Théron the facilitators will lead a discussion of the prevention of, and management of the aftermath of such incident.
2.2. Law Enforcement and Youth

Facilitator:  Morgana Daniele, Youth RISE Lithuania

Youth RISE is an international NGO that represents the interests of young people who use drugs. ‘Law Enforcement and Drugs’ is one of the organisation’s strategic objectives with projects in Ireland, Czech Republic, Kenya, Zimbabwe, Pakistan and Nepal. These projects center on themes like access to harm reduction services, festival/nightlife harm reduction and key affected populations. Outcomes will include various products developed in consultation with all key players, including police.

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<th>Time</th>
<th>Session</th>
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<td>4.00 – 4.30</td>
<td>AFTERNOON TEA</td>
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### C6 An intersectoral and integrated approach to addressing public safety, health and quality of life issues for vulnerable residents of Surrey, BC

Surrey, like many other Canadian cities, is grappling with a deadly overdose epidemic, homelessness and many individuals living with mental ill-health. In 2017, the Surrey Outreach Team (SOT) was initiated by the Surrey RCMP to support approximately 130 vulnerable individuals living in 90 tents in the City Core to respond to the health, social and public safety needs of vulnerable individuals. Through this initiative, intersectoral partners collaborated in a strategic and integrated fashion.

**Room:** Ballroom East

**Chair:** Shovita Padhi, Fraser Health Authority, Canada

**Speakers:** (each speaker will address the session title from their perspective)

- Shovita Padhi, Fraser Health Authority, Canada, *The Public Health/Health Authority’s perspective*
- Len Garis, City of Surrey, Canada, *The Surrey Fire perspective*
- Keir Macdonald, Lookout Housing and Health Society, Canada, *The Lookout Society’s perspective* (an NGO)
- Shawna Baher/ Wendy Mehat, Royal Canadian Mounted Police, *The RCMP perspective*
- Terry Waterhouse, City of Surrey, Canada, *The City of Surrey perspective*

### C7 Structures, successes of, and lessons learned in the HIDTA/CDC Heroin Response Strategy

This session will familiarize participants with the structures, successes of, and lessons learned in the HIDTA/CDC Heroin Response Strategy, the largest federally funded law enforcement/public health collaboration in the U.S., which is dedicated to combating the current opioid crisis. In particular, this session will highlight findings from new research and intervention efforts that allow law enforcement officers and correctional entities to incorporate public health approaches in their work as it touches the opioid epidemic.

**Room:** St. Patrick
MONDAY 22 OCTOBER

Chair: Jennifer Carroll, Centers for Disease Controls and Prevention, USA.

Speakers:

Rita Noonan, Centers for Disease Controls and Prevention, USA.

The heroin response strategy: a new approach for collaboration between federal law enforcement and public health entities in the U.S.

Jennifer Carroll, Centers for Disease Controls and Prevention, USA.

A comprehensive assessment of Good Samaritan Laws in 20 states: attitudes, implementation, and effect

Sasha Mital, Centers for Disease Controls and Prevention, USA.

Pathways from the criminal justice system to medication assisted treatment: differences in prevalence and relationship with treatment dropout

Joan Papp, MetroHealth System, Ohio, USA.

Increasing access to medication assisted treatment in Cuyahoga County Corrections Centre

Traci Green, Boston University and Brown University Schools of Medicine, USA.

Public health and public safety in action: detecting Fentanyl in street drugs using Fentanyl testing strips and portable machines

C8 Incarceration and health

Incarceration is unhealthy in itself and creates unhealthy conditions; insofar as it is necessary, how can these be ameliorated?

Room: Giovanni

Nasrul Ismail, University of the West of England

Impact of macroeconomic austerity on prisoner health in England: a qualitative study involving international policymakers

Sheila Lindner, Federal University of Santa Catarina, Brazil

Health care for persons deprived of liberty: experience of distance education in Brazil

Stuart Kinner, RMIT University, Australia; The role of prisons, jails and youth detention centres in addressing health inequalities in the Americas

Kate McLeod, University of British Columbia, Canada

Transforming governance of healthcare in British Columbia’s correctional facilities.

Rai Reece, Humber College, Canada

The need for dialogue: Correctional officers and prison based needle and syringe programs

C9 Marginalised populations and police

Members of marginalised communities are at increased risk of multiple health threats; law enforcement actions can ameliorate or exacerbate these risks.

Room: Armoury

Chair:

Thomas Ndeogo, Ghana Police Service.

Enforcing the laws on public morality against key populations: the dilemma of the Ghana police service

Bronwen Lichtenstein, University of Alabama, USA

Big Stakes, High Payoff? HIV and Hepatitis C education, testing, and referrals at the Parole Office
Melanie Simpson, University of New South Wales, Australia.
Knowledge and awareness of new treatments for hepatitis C among Australian prison entrants

Katie Hail-Jares, Griffith Criminology Institute, Australia
Pace of neighborhood change and residents' willingness to call police in response to street-based sex work

C10 The Dutch approach: towards a sustainable solution for people with disturbed behaviour
Incidents involving people with disturbed behaviour have risen substantially in the Netherlands and police spend 20% of their time on this problem. There is a shared sense of urgency among partners and politics. It is unanimously believed that the current approach is not always in the interest of the patient. The current approach is characterized by great attention to crises, less attention to the preventive side. A sturdy chain approach is essential for a sustainable solution. The police can play a facilitating – rather than leading – role in getting parties around the table.

Room: St. David
Chair: Auke van Dijk, Dutch Police Service
Speakers:
Pieter-Jaap Aalbersberg, Chief Police Officer, Amsterdam.
The Dutch approach: towards a sustainable solution for people with disturbed behaviour
Brenda van Middelkoop, Senior Community Policing Officer, The Netherlands
Cooperation between the Public Health Service (PHS), police and other partners in Vught, Netherlands
Jurriën Zondervan, Police Liaison Officer Mental Health, The Netherlands
The SQT approach
Joris van ’t Hof, Police Liaison Officer Mental Health, The Netherlands
Solid and steady support by both mental health and police staff works for ‘difficult’ people
Jeroen Zoeteman, Spoedeisende Psychiatrie Amsterdam & Henk van Dijk, Dutch Police Service
Confused suspects: a pilot study of data exchange between police, public prosecutor and mental health care in crisis situations in Amsterdam, the Netherlands.

4:30 – 6:00 MARKETPLACE OF IDEAS

Marketplace of Ideas: 3 (2 x 45 minute presentations)
Room: Terrace East

3.1 Police-Mental Health Partnership: working together to support wellness and respond to mental health concerns of officers and staff
Facilitators: Krystle Martin, Ontario Shores Centre for Mental Health Sciences, Canada Britton H
With new Canadian research reporting soaring rates of mental health concerns amongst public safety personnel (PSP) (Carleton et al., 2017), the government of Canada mandated the development of a National Action Plan to address this pressing issue. Using the mental health continuum to guide the allocation of resources, Ontario Shores Centre for Mental Health Sciences brings mental health and
research expertise to support a collaboration with Durham Region Police Service to work together to co-design a guide for mental health.

3.2. Respectful Relationships Education
Facilitators: Shelby Steel, Harmony Martin-Binks, Jessica Kile & Katherine King
Maryborough Education Centre, Australia
Resilience, Rights and Respectful Relationships Education is the holistic approach to school based, primary prevention of gender based violence. The 2015 Australian Royal Commission into Family Violence identified the importance of the education system as a catalyst for generational and cultural change. Two year 11 students from Maryborough Education Centre will explain how a culture of respect and equality has been created across their entire Maryborough community, from their classroom to staffroom, sporting field, public transport, workplace and social events.

Marketplace of Ideas: 4 (2 x 45 minute presentations)
Room: Terrace West

4.1. The John Howard Society of Toronto’s Reintegration Centre: a collaborative approach to re-entry and improved health outcomes for men leaving jail
Facilitator: Amber Kellen, The John Howard Society of Toronto, Canada
Toronto South Detention Centre is the largest remand facility in Canada. At capacity (1620), nearly 200 men will be released weekly. Most have complex health needs/substance use issues with few local resources. A unique reintegration centre, located across from the jail, is designed to improve health outcomes and address social determinants of health for these men and hence reduce the likelihood of recidivism and overdoses while enhancing access to primary care, housing and harm reduction services.

4.2. The Advocates Co-Responder Pre-Arrest Jail Diversion Program Model: pathways to replication and evidence based practice
Facilitator: Sarah Abbott, Advocates, USA
This session will describe the origin, operation and outcomes of the Advocates pre-arrest Co-Responder Jail Diversion Program in Massachusetts. This innovative model pairs mental health professionals with police officers in ‘ride-alongs’ to co-respond to 911 calls involving people in crisis. The objective is to de-escalate, stabilise and address mental health or substance use needs. It resulted in reduced arrests, reduced unnecessary transport to emergency departments and increased police officer confidence and compassion.
TUESDAY 23 OCTOBER

8:30-10:00  PLENARY SESSION P2

Room: Ballroom East and West
Chair: 
Speakers:
- **Oscar Alleyne**, Senior Advisor, Public Health Programs, National Association of County and City Health Officials, USA
  *Healthy equals: practice lessons in partnership, policy and community engagement*
- **Grant Edwards**, Commander, Australian Federal Police
  *The cost of being a cop: police wellbeing and resilience*
- **Harold Johnson**, Crown Prosecutor, Treaty 6 Territory, Canada
  *The role of law enforcement and public health collaborations in addressing alcohol-related issues in Indigenous communities*

8.30 – 3.00  POSTERS

See Monday at 10.30 for a list of poster presentations

10.00-10:45  LEPH ORATION

**Professor Sir Michael Marmot**, Professor of Epidemiology, University College London, UK

*‘Social justice and health inequalities’*

10.45 – 11.15  MORNING TEA

11:15 - 12:30  MAJOR SESSIONS

**M7**  Why a Public Health approach to policing is vital in the 21st Century:

Improved understanding of police vulnerability demand has led to a collaborative Public Health approach to policing in Wales, where a multi-agency Adverse Childhood Experience (ACE)-informed approach is the basis for “early intervention and prompt positive action” and root cause prevention.

The session will present an overview incorporating evidence from the Welsh ACE study used as background for this project; various research findings that supported its development into a national Welsh programme by using a public health upstream trauma-informed approach to understanding vulnerability, reducing harm and crime.

Room: Ballroom East
Chair/Convener: **Sir Alun Michael**, South Wales Police and Crime Commissioner, UK
Co-Convener: **Janine Roderick**, Public Health Wales
Speakers:

**Janine Roderick**, Public Health Wales

*Why understanding vulnerability and a public health approach is vital to policing*

**Emma Barton**, Public Health Wales

*Operationalising the vision: turning understanding into action*

**Dr Michelle McManus**, Public Health Wales/**Detective Superintendent Jo Ramessur-Williams**, Public Health Wales

*Moving forward: National roll-out*

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### M8 Prisons, pathways and partnerships: a collaborative approach to improve health, reduce reoffending and support continuity of care

The UK spends £15bn annually and has one of the largest prison populations in Western Europe. Prison can be an opportunity to effectively engage so-called ‘hard-to-reach’ people in a range of structured healthcare services, as well as working ‘through the gate’ to plan for resettlement and address issues healthcare, social welfare, housing, education and employment while people are still in prison. This session will outline England’s multi-agency approach and its internationally unique national partnership agreement between health and justice government departments.

**Room:** Ballroom Center

**Chair:** Sunita Sturup-Toft, Public Health England

**Speakers:**

**Eamonn O’Moore**, Director of WHO UK Collaborating Centre for Health in Prisons Program

**Representative** from NHS England, National Health and Justice Commissioning Team (TBC)

**Rupert Baille**, Her Majesty’s Prisons and Probation Services, UK

*Presentation titles to be advised*

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### M9 Models of law enforcement/mental health collaboration to improve responses to persons with mental illnesses: the evidence to date

There is significant attention worldwide to providing better responses to persons with mental illnesses or experiencing mental health crises that come to the attention of law enforcement. Several models of law enforcement/mental health collaboration have been developed, with the Crisis Intervention Team and Co-Responder models being the most well-known. This panel session will include a discussion of research evidence related to the CIT and co-responder models, as well as other collaboration strategies.

**Room:** Giovanni

**Chair:** Jennie Simpson, Substance Abuse and Mental Health Services Administration, USA

**Speakers:**

**Amy Watson**, University of Illinois at Chicago, USA/**Michael Compton**, Columbia University, USA

*The CIT Model: can we call it evidence-based?*

**Melissa Morabito**, University of Massachusetts Lowell, USA

*Reviewing the co-responder approach to serving people with mental illnesses: The Boston Model*
TUESDAY 23 OCTOBER

Michael Compton, Columbia University, USA
A potential new form of jail diversion and re-connection to mental health services: the Police–Mental Health Linkage System

Stuart Thomas, RMIT University, Australia/ Michael Brown, College of Policing, UK
Developing a practice guideline for police for management and resolution of mental health related incidents (a report from an Expert Meeting)

12.30 – 1.30 LUNCH

12.45 – 1.25 LUNCHTIME SESSION

L3: Community safety and well-being: a new paradigm for human service delivery
Room: Giovanni
Dr Chad Nilson & Cal Corley, Community Safety Knowledge Alliance, Canada
Innovation in human service delivery is changing driven by a desire for evidence-based funding models, clear limitations of siloed approaches to human services, and both ethical and political aspirations to simply “do better”. Across Canada, there are emerging social innovations in collaborative risk-driven intervention (e.g. Hub/Situation Tables), multi-sector coordinated support (e.g. Wraparound), and bi-sector response teams (e.g. Police-Mental Health Crisis Units), among others. But what is really happening within this movement toward community safety and well-being. To conceptualize these efforts, developmental evaluator and multi-sector collaboration specialist, Dr. Chad Nilson, will address the interconnectivity of risk, vulnerability, and harm across human service sectors, and discuss the concepts, practice, and alignment of community safety and well-being.

L4: The disproportional impacts of exponential technology on policing and public safety
Room: St. David
Peter Sloly, Lead of Deloitte’s Security and Justice Practice & past Deputy Chief, Toronto Police Service
Peter Sloly is the former Deputy Chief in the Toronto Police Service, a graduate of the FBI National Academy and he also participated in two tours of duty in the United Nations Peacekeeping Mission in Kosovo. Peter is currently a partner at Deloitte leading the “Security & Justice” practice with the goal to help modernize and optimize Canada’s police, courts, corrections and national security agencies. Peter also built Deloitte Canada's Security Convergence practice which employs a multi-disciplinary, enterprise-wide methodology that enables organizations to identify, assess and address dynamic security risks across physical and cyber domains. Peter will explore how the application of exponential technology in the justice system may result in disproportional impacts – some beneficial, some harmful and some that simply can’t be fully understood.”
TUESDAY 23 OCTOBER

1:30-3:00 CONCURRENT SESSIONS

**C11 Law Enforcement and mental health**

Of all the complex issues law enforcement must deal with, none is more complicated or complexifying than issues of mental health – and none is more demanding of collaborations.

Room: Ballroom East

Chair:

Matty de Wit, Public Health Amsterdam

‘Dr, your client did not pick up his prescription’: a system for pharmacists and psychiatrists to report any uncollected prescription to prevent mental health crisis and police intervention

Elizabeth Sinclair, Treatment Advocacy Center, USA.

*Law enforcement road runners: costs of transportation for mental illness crisis response*

Peter Silverstone, University of Alberta, Canada / Joris van't Hoff Dutch National Police, Netherlands / Yasmeen Krameddine, University of Alberta, Canada.

Crossing Borders: a mental health and de-escalation training collaboration between ProTraining.com and the Dutch National Police.

Serina Fuller, London South Bank University, UK

*A threatening enquiry: the identification of crime victims’ mental health problems by police officers*

**C12 First responder stress and resilience 1**

Without healthy law enforcement, there is no healthy outcome. Given extraordinary demands, how do we measure, how do we cope, and how do we move beyond coping?

Room: St. Patrick

Chair:

Jennifer Reingle Gonzalez, University of Texas, USA.

*Real-time, objective measurements of physiological stress among law enforcement officers in Dallas, Texas*

Ian Hesketh, College of Policing, UK.

*Co-producing an emergency services wellbeing strategy in the UK*

Jonas Hansson, Umea University, Sweden

*Mind the Blues: Swedish police officers’ mental health and forced deportation of unaccompanied refugee children*
C13 Health post-incarceration
In an ideal world, people should leave contact with the justice system, including incarceration, better positioned to deal with life: why then are they at greater risk? What can be done?
Room: St. David
Chair: Stuart Kinner, RMIT University, Australia. (to be presented by Katie Hail-Jares, Griffith University, Australia)
High risk of death in young people exposed to the youth justice system: a retrospective data linkage study
Amanda Butler, Simon Fraser University, Canada.
Patterns of emergency department utilization among people released from prison: a prospective cohort study
Jesse Young, University of Melbourne, Australia.
Medically verified self-harm and subsequent mental health service contact in adults recently released from prison: a prospective cohort study
Albert Kopak, Western Carolina University, USA.
Predicting risk of jail readmission with a 10-item Behavioral Health Index
Ruth Martin, University of British Columbia, Canada.
Unlocking the gates to health: peer health mentoring for women transitioning from a Canadian provincial correctional facility
Nemesia Kelly, Touro University, USA.
California Exonerees Health and Well-Being Project: assessing the mental, physical, and emotional health of the wrongfully convicted

C14 Opioid overdoses
Death associated with opioids has emerged – unpredictably – as one of the major current public health threats facing numerous populations, to the extent of lowering national life expectancy in the U.S. How can law enforcement partnerships contribute to prevention and reduction of opioid harms?
Room: Giovanni
Terry Bunn, University of Kentucky, USA.
Overlay of public safety and public health drug burden data to inform prevention and safety interventions
DJ Larkin, Pivot Legal Society, Canada.
Policing the crisis: the impacts of local policing practices on harm reduction and overdose prevention efforts in British Columbia
M. Jill Sporidis, Metis Nation of Alberta, Canada.
Culturally-Appropriate Harm Reduction: The Métis Nation of Alberta's (MNA) Opioid Crisis Management and Action Plan (O-CMAP)
Kim Lan St-Pierre, Université de Sherbrooke, Canada.
Opioid overdose: increasing 911 calls through Good Samaritan Law to save lives
Jane Buxton, BC Centre for Disease Control, Canada.
Drug Overdose and Alert Partnership (DOAP): interpreting and sharing timely illicit drug information to reduce harms
Katie Hail-Jares, Griffith University, Australia.
"I Thought He Was Sleeping:" Bystanders' reasons for not calling emergency services following fatal overdoses

C15 Road and railroad policing
Improving safety and reducing harm has been an ongoing major contribution to community safety and wellbeing from law enforcement. These are common public health triumphs led by police initiatives.
Room: Armoury
Chair:
Lyndel Bates, Griffith University, Australia.
Improving road policing through the use of partnership policing
Levi Anderson, Griffith University, Australia.
Educating Intentions: the impact of police-led driver education on young drivers
James Nunn, Loughbrough University, UK
Linking police collision data and hospital trauma patient data. Enabling comparison of culpable drivers from serious injury non-fatal collisions with those who cause fatal injuries.
Hayley McDonald, Monash University, Australia.
Infringements and crash risk: do sanctions for traffic offences have a deterrent effect?
Nick Jones, University of Regina, Canada
Understanding the effects of impaired driving in Saskatchewan: perspectives of victim's family members
Milan Tucek, Charles University, Czech Republic.
Medical fitness and drug use: railroad safety standards

1:30 – 3:00 MARKETPLACE OF IDEAS

Marketplace of Ideas: 5 (2 x 45 minute presentations)
Room: Terrace East

5.1. The Amsterdam joined-up ‘chain’ approach to public nuisance and misdemeanors
Facilitator: Michael Willemsen, Public Health Service, The Netherlands
A significant proportion of nuisance and misdemeanors involves vulnerable citizens with complex health and social problems. Amsterdam developed the joined-up ‘chain’ approach in response to this situation based on collaboration between the police, the municipality (e.g. the public health service, public order and safety, and social services), mental health care welfare/shelter organisations and others. The underlying principle is that law enforcement and (social) care services have common goals, which can only be achieved by an integrated approach.

Facilitator: Kevin Weir, Durham Constabulary, UK

Checkpoint is a voluntary multi-agency adult offender intervention programme offered in the Durham Constabulary (UK) judicial area. It was agreed by the statutory criminal justice partners and driven by both police and public health to change our approach to dealing with offenders. It is designed to reduce offending and also improve the wellbeing and life chances of the vulnerable population. Checkpoint offers eligible offenders a 4 month contract as an alternative to usual prosecution and supports them with a specialist navigator.

Marketplace of Ideas: 6 (2 x 45 minute presentations)
Room: Terrace West

6.1. Police as partners in improving abortion access

Facilitator: Patty Skuster, Ipas, USA

Police officers can be important allies in efforts to improve women’s access to safe abortion care. Ipas has worked with police since 2009, and in a published manual, A Practical Guide for Partnering Police to Improve Abortion Access, shares lessons and guidance based in that experience. Even in countries where abortion is legal, a women’s ability to get an abortion may depend on the response of the police. Preliminary results of a study in Nigeria show that through sustained partnerships police can be an important partner in creating an enabling environment for improved services.

6.2. To be advised

3:00 - 3:30
AFTERNOON TEA

3:30 - 5:00
CONCURRENT SESSIONS

Note: Sessions C17 & C18 are scheduled to finish at 5.15 p.m.

C16 Alternatives to incarceration

For vulnerable populations, for behavioural issues with underlying health and social welfare causes, for non-violent victimless offences, incarceration is increasingly recognised as exacerbating the antecedent conditions. But what can be put in its place?

Room: Ballroom East
Chair:
Paul Simpson, University of New South Wales, Australia.

Views of senior and influential Australian policy stakeholders on justice system reform towards incarceration alternatives that address the health and social determinants of crime

Barry Goetz, Western Michigan University, USA

A new era of pre-arrest/booking interventions for drug users?

Dan Jones, Huddersfield University, UK.

The Victimization and Predation Cycle as an opportunity to work towards desistance from crime
Sarah Abbott
The Advocates Co-responder Pre-arrest Jail Diversion Program Model: pathways to replication and evidence based practice

Michael Gropman, Brookline Police Department, USA
Structured decision making for objective detention decisions of juveniles

C17  Policing and LEPH: collaborations, identity and education
(Note: This session is scheduled for 3.30 – 5.15 p.m.)
Increasingly complex issues, and increasing recognition of the complexity of issues facing the law enforcement and the public health sectors require examination of identity and increased self-awareness among police and other sectors, intersectoral collaboration, planning and education.
Room: St. Patrick
Chair: Jamie Clover, Edmonton Police Service & MacEwan University, Canada
The future brand of policing in Canada: considering the impact on institutional identity, public expectations and genuine collaboration.
Richard Bent, Simon Fraser University, Canada
Exploring the reality of contemporary policing responsibilities and whether context matters.
Denise Martin, Scottish Institute of Police Research/University of the West of Scotland.
Changing the rules of the game: from crime focused to prevention focused: An essential new model for policing.
Isabelle Bartkowiak-Théron, Tasmanian Institute of Law Enforcement Studies, University of Tasmania, Australia.
Law Enforcement and Public Health in Tasmania: is Collective Impact a viable pathway for collaboration? Results from a state-wide consultation
Isabelle Bartkowiak-Théron, (see above)
Should we teach police officers about public health? Sorry, that’s the wrong question to ask.
Daliah Heller, CUNY Institute for Implementation Science in Population Health, USA
Building a criminal justice pedagogy in public health: workforce development in academia
Dawn Rault, University of Calgary, Canada
Towards recognizing officers who enforce animal laws as professionals in public health. Risks and rewards of working in a medico-legal borderland

C18  Harm reduction and drug policing 1
(Note: This session is scheduled for 3.30 – 5.15 p.m.)
No field is as conflicted as that of illicit drugs, with ideology pitted against evidence. Policing has been shown to be able to both ameliorate and exacerbate associated harms.
Room: Giovanni
Wamala Twaiibu Lotic
Effectiveness of Support Don’t Punish Campaigns in engaging Law Enforcement Officers and other stakeholders to embrace harm reduction in Uganda
Christopher Baguma, Ugandan Harm Reduction Network.  
Law enforcement officers embracing and taking lead during the Support Don’t Punish Campaign

Wamala Twaibu Lotic  
Soft Skills Advocacy: A tale of how Law Enforcement Officers champion issues of drug users in Uganda

Yan Win Soe, Alliance Myanmar.  
Legal Environment for the HIV affected Key Populations in Myanmar

Carol Strike, University of Toronto, Canada.  
What’s going on in the supervised injection services? Police need for more harm reduction training

Greg Denham, Yarra Drug and Health Forum, Australia.  
Collaborative action toward establishing a Supervised Injecting Facility in Melbourne, Australia: a case study

Marie Peoples  
Medical marijuana edible voluntary recall in Arizona

Marginalised communities and criminal justice

Nowhere is the confluence of impaired access to health care and increased involvement with the criminal justice system more marked than among marginalised communities – especially indigenous communities.

Room: St. David

Chair: Jonas Hansson, Umea University, Sweden.

Community police interventions to strengthen social capital in socially deprived areas: a scientific clarification of Mareld investigation

Adam Vaughan, Simon Fraser University, Canada.

Location quotients and social disorganization: a spatial analysis of mental health calls to police services in Canada

Sharon Paten, Victoria Police, Australia.

Intervening early to ensure first contact is the last: innovative approaches to reduce Aboriginal over-representation in the criminal justice system

Jason Fenno, Trent University, Canada.

Could Indigenous Criminology improve current Public Health model of policing programs for Indigenous Peoples

Paul Simpson, University of New South Wales, Australia.

Examining primary health care access for Indigenous people in the Australian justice system using geospatial and qualitative analyses

To be advised

Room: Armoury

Chair:

3:30 – 5:00 MARKETPLACE OF IDEAS
Marketplace of Ideas: 7  (2 x 45 minute presentations)
Room: Terrace East

7.1. Confused suspects: a pilot study of data exchange between police, public prosecutor and mental health care in crisis situations in Amsterdam, the Netherlands.
Facilitator: Jeroen Zoeteman, Spoedeisende Psychiatrie Amsterdam, The Netherlands
It is relatively arbitrary for confused people who have offended which pillar – justice or care – the person ends up in. A dangerous person who needs care can end up on the street without assistance. Following the murder of an ex-public health minister in The Netherlands this problem was examined by a special committee that highlighted that the Public Prosecution and emergency psychiatry did not consult each other. In a pilot project 120 confused people were investigated by justice and health care within hours of arrest and safety and care needs were assessed. Relatively few people were compulsorily admitted.

7.2. To be advised
Marketplace of Ideas: 8  (2 x 45 minute presentations)
Room: Terrace West

8.1. Developing a police-hospital partnership model to serve people experiencing a mental health crisis in the community
Facilitator: Leah Dunbar, Michael Garron Hospital, Canada
Mobile Crisis Intervention Teams (MCIT) are a partnership between six hospitals and 17 Police Services in Toronto. Each team comprises police and nurse co-responders. Together they assess a situation with an individual experiencing a mental health crisis, de-escalate it and intervene to support a client’s safety. Three evaluations will be examined as well as challenges including police and public health system cultural differences, variation in awareness and commitment to the program, role clarity and training needs.

8.2. Ontario Provincial Police Mental Health Strategy: our communities collaborating to improve outcomes for people with mental health issues in Ontario
Facilitator: Lisa Longworth, Ontario Provincial Police, Canada
Police interactions with persons with mental health issues continue to be concerning for police, the public, health care partners and the media. Following extensive research and consultation, priorities for action were articulated in a comprehensive OPP Mental Health Strategy: Our People, Our Communities which will be the focus of this session. This session will highlight successful examples of various collaborative response models, across, how the OPP moved forward in transfer of care protocols, improved training for officers to better understand mental health and effective methods to improve data collection.
WEDNESDAY 24 OCTOBER

8:30-10:00  PLENARY SESSION P3

Room:  Ballroom East and West
Chair:
Speakers:

- **Geraldine Strathdee**, National Health Service, UK
  *Population health and mental health in England: using policy, intelligence and partnerships to improve prevention, lives, outcomes and optimise the public spend*

- **Kofi N Barnes**, Judge, Ontario Superior Court of Justice, Canada
  *Where justice and treatment meet*

- **Richard Southby**, Professor of Global Health at George Washington University, USA & University of Melbourne, Australia
  *Law enforcement and public health: challenges and opportunities in educating law enforcement officers*

10.00 – 10.30  MORNING TEA

10:30-11:55  MAJOR SESSIONS

**M10  Crossing the divide: searching for innovations in learning between Criminal Justice and Public Health**

Core barriers identified in criminal justice, law enforcement and public health literatures is the divide between occupations, such as working in silos, professional misperceptions and demands for resources. These all serve to impede effective practice and innovation. One way to achieve this is to effectively develop ways. Panel members will draw on their own experience of training and education in the field of Criminal Justice and Public Health and discuss how to overcome barriers and improve training and education for practitioners in both fields. **Note:** This session is intended to provide opportunities to establish a network of interested parties in developing a Special Interest Group of the Global Law Enforcement and Public Health Association focusing on Education and Training.

Room:  Ballroom East
Chair:  **Denise Martin**, Scottish Institute of Police Research /University of the West of Scotland

Speakers:

- **Denise Martin**, SIPR & UWS, Scotland (see above)
  *‘Looking outwards’ to ‘Look inwards’: What can we achieve when we recognise the experience of others.*

- **Inga Heyman**, Edinburgh Napier University, Scotland
  *Lessons from the classroom: the trials and triumphs*

- **Richard Southby**, George Washington University, USA
  *The University and the Police Academy: a new relationship*
Nicholas Thomson, University of Melbourne, Australia

*Shared learning for shared outcomes: cross sector teaching at the intersection*

Flora I. Matheson, St. Michael’s Hospital & Dalla Lana School of Public Health, Canada & Catherine Wiseman-Hakes, University of Toronto, Canada

*Correcting miscommunication: head injury among criminal justice populations*

James Clover, Edmonton Police, Canada

*‘What did I just hear?’ Reflections on learning and education: a practitioner’s perspective*

### M11  Community Policing & Vulnerable Populations

Community policing is promoted as an alternative policing strategy to more effectively identify and address safety needs of community members, include community members as co-producers of public safety, and to enhance police and community relationships. It has often been at the expense of, or exclusion to marginalized populations, especially people who use drugs, who may not be deemed as rightful members of the community or as the source of threat to community safety. This session will address these issues based on an innovative effort underway in three localities in Ukraine supported by the Open Society Foundations.

**Room:** Ballroom Center  
**Chair:** Marc Krupanski, Open Society Foundations, USA  
**Speakers:**

- **Marc Krupanski,** Open Society Foundations, USA  
  *Community policing & vulnerable populations – lessons from Ukraine*

- **Vikotriya Loza,** NGO representative of community policing initiative in Poltava, Ukraine  
  *The community policing initiative in Poltava, Ukraine: partnership between local police department and the NGO Light of Hope*

- **Evgeniya Kuvshinova,** representative of community policing initiative in Kiev, Ukraine  
  *The community policing and harm reduction initiative launched in Kiev, Ukraine in partnership with NGO Convictus*

- **Andrii Bukin,** representative of community policing initiative in Sumy, Ukraine  
  *The community policing and harm reduction initiative launched in Sumy, Ukraine in partnership with NGO Legal and Social Studies Studio*

- **Yurii Belousov,** Expert Center on Human Rights  
  *Efforts of Expert Center on Human Rights to provide technical assistance support to various local community policing and harm reduction initiatives*

### M12  Scientific strategies for resiliency and mental health: current evidence behind officer resilience, coping models, police performance, and the prevention of post-traumatic stress disorder

Discover little known scientific strategies for resiliency and mental health. Experts from Canada, the United States, the Netherlands, and New Zealand discuss the current evidence behind officer resilience, coping models, police performance, and the prevention of post-traumatic stress disorder.

**Room:** Giovanni  
**Chair:** Dr. Yasmeen Krameddine, University of Alberta, Canada
Speakers:
Dr. Yasmeen Krameddine, University of Alberta, Canada/ Dr. Peter Silverstone, University of Alberta, Canada
Increasing officer mental health for the long haul: introducing an innovative and customizable online mental health and PTSD prevention training tool (Actual presenter to be confirmed)
Teun-Pieter de Snoo, Politie Academie, The Netherlands/ Dr. Annika Smit, Politie Academie, The Netherlands (Actual presenter to be confirmed)
What are the underlying mechanisms of resilience? New approaches for an old challenge
Ian de Terte, Massey University, New Zealand
Psychological resilience: a model and treatment manual based on scientific evidence
Dr. Eamonn Arble, Eastern Michigan University, USA/ Dr. Bengt Arnetz, Michigan State University, USA (Actual presenter to be confirmed)
Models of First Responder coping: police as a unique population
Commander Wendy Dorrestijn, Politie Academie, The Netherlands/ Dr. Otto Adang, Politie Academie, The Netherlands/ Dr. Tom Postmes, University of Groningen, The Netherlands. Beyond the split second

12:05-1:30 MAJOR SESSIONS

M13 Racial disparities in access to health and involvement with criminal justice
Room: Ballroom East
Chair: Nick Crofts, Centre for Law Enforcement and Public Health, Australia
Speakers:
Annette Bailey, Ryerson University, Canada
Nick Glynn, Open Society Foundations, USA
Jennifer Reingle Gonzalez, University of Texas, USA
Race/ethnicity composition of law enforcement officers and civilians in officer-related shootings: 20 years of evidence from a large urban metropolitan law enforcement agency
*Presentation titles to be advised
WEDNESDAY 24 OCTOBER

M14  Working across sectors to develop an evidence-based approach to policing mental health and distress in Scotland

Police coming into contact with those in mental health distress has attracted extensive interest and a range of strategies in Scotland recently. This session will discuss how partners across policy, practice and academia have been working together to ensure that this area of activity is strongly grounded in evidence. This panel will provide an overview of the changing landscape, barriers and facilitators to delivering policing and mental health responses in Scotland. This is supported by insights of the historical context of partnership working and developments of collaboration for Police Scotland and Health Services.

Room:  Ballroom Center

Chair:  Inga Heyman, Scottish Institute of Police Research/Edinburgh Napier University, Scotland

Speakers:

John Hawkins, Police Scotland
Delivering policing and mental health responses in Scotland: the changes and the challenges within local policing

Orlando Heijmer-Mason, Scottish Government Health and Justice Collaboration
Health and justice: the central Government response

Richard Wheton, Police Scotland
Police and health: the challenges and opportunities of partnership working in Scotland.

Anita Morrison, Justice Analytical Services, Scotland
Developing policy and practice activity to strongly ground an evidence-based approach to policing mental health and distress in Scotland

Prof Brian Williams, Edinburgh Napier University, Scotland
Constructing sustainable and effective multi-agency research collaborations: reflections, lessons and suggestions

Dr Katherine Myant, Justice Analytical Services in the Scottish Government
Working across sectors to develop an evidence-based approach to policing mental health and distress in Scotland

M15  Harm reduction and policing - working together to serve and protect people who use drugs

Chair:  Dr. John Collins, London School of Economics, UK

Speakers:

Jason Kew, Inspector, Thames Valley Police, UK
 Developing an adult diversion program for people who use drugs from a policing perspective

Tony Duffin, Ana Liffey Drug Project, Ireland
Dublin’s Assertive Case Management Team – an example of Harm Reduction and Policing Services working together

Trevor Herrmann, Vancouver Police Department, Canada
People who use a Supervised Injecting Facility – a policing perspective
WEDNESDAY 24 OCTOBER

1.30 – 2.30  LUNCH

1.45 – 2.25  LUNCHTIME SESSIONS

L5:  Crisis and crisis response
Room:  Giovanni
Bethany Van Brown, Western Carolina University, USA
Crime and Catastrophe: The social problems that set the stage for crime to happen after the 1977 NYC Blackout and Hurricane Katrina

L6:  To be advised
Room:  St. David

2:30-4:00  CONCURRENT SESSIONS

C21  Sexuality, violence and criminal justice
Both legal/law enforcement and public health/health care systems often struggle with issues of sexuality and sexual diversity, reflecting societies which themselves have difficulty accommodating difference. Police and the law have major roles to play in changing this.
Room:  Ballroom East
Chair:
Maurice Tomlinson, Canadian HIV/AIDS Legal Network
Policing LGBTQI communities and public health: the case for LGBTQI sensitivity training
Alex Workman, Western Sydney University, Australia
Are Australian perspectives on Intimate Partner Violence LGBTIQ inclusive?
Nazirah Hassan, National University of Malaysia
For the sake of survival: sexuality among incarcerated young people

C22  First responder stress and resilience 2
This session provides a further examination of the impact of occupational demands and pressures on police and other first responders and ways to address them, reactively and proactively.
Room:  St. Patrick
Chair:
Amrit Purba, Public Health England
Organisational stressors and police officer mental wellbeing: a systematic review
Evangelia Demou, University of Glasgow, Scotland
Mental health and wellbeing needs of the Scottish Police Workforce
Patricia Griffin, Holy Family University, USA
Rapid assessment of alcohol and substance use in the Kenyan National Police Force
Lynda Crowley-Cyr, University of Southern Queensland, Australia
What effect is Australia’s worsening state of public sector corruption having on the mental health of law enforcement and first responders in Australia?

C23 Opioid overdoses 2
This session continues to address the legal and law enforcement contributions to preventing opioid overdose, ameliorating impact and saving lives: so much to do, so much can be done.
Room: Giovanni
Chair:
Evan Anderson, University of Pennsylvania, USA
Criminal justice contact prior to fatal overdose: identifying opportunities for intervention
Jane Buxton, BC Centre for Disease Control, Canada
Assessing policies and legislation to reduce client concerns of police attendance and encourage calling 9-1-1 during an overdose event
Mina Park, BC Centre for Disease Control, Canada
A scoping review to identify the potential impact of different legal approaches on the opioid crisis
Richard Elliott, Canadian HIV/AIDS Legal Network
Saving Lives through Law: popularizing legislation that removes a barrier to emergency response services in the event of an overdose
Jane Buxton, BC Centre for Disease Control, Canada
Evaluating the implementation of take home naloxone for persons being released from prison
Marcus Lem, BC Centre for Disease Control, Canada
Serving and protecting in the Fentanyl crisis: assessing and communicating evidence-based occupational exposure risks to law enforcement and health care workers

C24 Harm reduction and drug policing 2
No field is as conflicted as that of illicit drugs, with ideology pitted against evidence. Policing has been shown to be able to both ameliorate and exacerbate associated harm.
Room: St. David
Chair:
David Grandy, Oregon Health and Science University, USA.
The Epidemiological Criminology of methamphetamine
Sharlene Kaye, Justice Health and Forensic Mental Health Network, Australia
Crystal methamphetamine use among juvenile detainees: findings from the 2015 Young People in Custody Health Survey.
Neil Woods, Law Enforcement Action Partnership, USA.
Innovation in drugs investigations lead to an increased vulnerability in marginalised people
WEDNESDAY 24 OCTOBER

Lorenzo Jones, Katal Center for Health, Equity and Justice, USA.
Harm Reduction Community Organizing: building power and public will for criminal justice reform

Ernest Drucker
The role of police in gaining political acceptance of local harm reduction programs

C25 Vulnerability
Gender, age, poverty, social class, culture – all interact to create vulnerabilities which provoke contact with and need for health and legal responses. How do we get it right?
Room: Armoury
Chair:
Matty de Witt, Public Health Amsterdam
The Self Sufficiency Matrix – Dutch version (SSM-D): a tool for screening, monitoring and evaluation in the domain of public health and law enforcement.

Simon St. Emmanuel, Adekunie Ajasin University, Nigeria
An examination of the issues and challenges of the rights of female internally displaced persons in Nigeria

Hamed Elneel Maryoud,
Role of Law in enhancing the abandonment of Female Genital Mutilation /circumcision in Sudan

2:30 – 4.00 MARKETPLACE OF IDEAS

Marketplace of Ideas: 9 (2 x 45 minute presentations)
Room: Terrace East

9.1. Deeper dive into local initiatives on community policing and vulnerable populations in Ukraine

Facilitator: Marc Krupanski, Open Society Foundations
This interactive session is a follow-up to the Major Session M11 on community policing initiatives in Ukraine that focus on vulnerable populations, namely people who use drugs. This session will allow time for participants to ask specific questions of the panel of M11 speakers, and for these panelists to delve further into their respective initiatives. Issues include engaging broader community participation, identifying and promoting safety concerns of people who use drugs, sequencing of activities and the nexus between community safety and health concerns.

9.2. To be advised
Marketplace of Ideas: 10 (2 x 45 minute presentations)
Room: Terrace West

10.1. Adopting a Digital Mental Health Strategy
Facilitator: Daniel Pearson Hirdes, HealthIM, Canada

HealthIM is a secure communication platform designed to improve collaboration between police and their community partners during mental health crisis calls. The system is structured around an interRAI Brief Mental Health Screener and is currently used in thirteen communities across Canada. HealthIM provides a range of supports and information to police, hospitals, mental health agencies and mobile crisis teams. Results of implementation of HealthIM include a consistent drop of 20 – 30% in involuntary admission rates.

10.2. To be advised

4.05 – 4.30 CLOSING PLENARY SESSION

Room: Ballroom East and West
Chair: