

MONDAY 22 OCTOBER

LEPH2018 PROGRAM

8:30-10:00 a.m. PLENARY SESSION P1

Room: Ballroom East and Center

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, USA
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

MONDAY 22 OCTOBER

M2 Public health and policing in England: an opportunity to improve health through partnership

Working in partnership is essential if we are to address the 'causes of the causes' which lead people into contact with the police. This session will discuss work in England to develop and implement a national consensus agreement between policing and health partners; and present an example of a multi-agency offender diversion scheme.

Room: Ballroom Center

Chair: **Eamonn O'Moore**, WHO UK Collaborating Centre for Health in Prisons

Speakers:

Justin Srivastava, Lancashire Police, UK and **Helen Christmas**, Public Health England

Developing a partnership approach between health and policing in England

Kevin Weir and **Gillian Routledge**, Durham Constabulary, UK

Durham Police approach to health based issues within the criminal justice system

M3 'Hidden in Plain Sight': medical and behavioural conditions affecting communication with police

Health and criminal justice systems frequently encounter people experiencing communication difficulties. Understanding the health/police intersect in support of people experiencing communication problems has become critical in the provision of timely and appropriately risk assessment and safeguarding interventions.

Room: Giovanni

Chair and discussant: **Joanne MacIsaac**, Affected Families and Police Homicide, Canada

Speakers:

Lesslie Young, Epilepsy Scotland

Crime Seen?

Nathan Hughes, University of Sheffield, UK

The discrimination and criminalisation of childhood neurodevelopmental impairment

10.30 – 6.00 p.m.

POSTERS

Reza Novalino, Karitas Sani Madani, Indonesia.

Prevention and treatment of HIV AIDS and drugs against people with substance abuse disorders

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

Christopher Baguma, Ugandan Harm Reduction Network.

Case management of drug users in Police Custody as a harm reduction approach

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

MONDAY 22 OCTOBER

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 (B²LESD): 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

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

MONDAY 22 OCTOBER

Stacy Smith, Morgan State University, USA

Hybrid-gang family structure: a secondary data analysis of National Survey of Children's Exposure to Violence II, 1993-2012, using an Epidemiological Criminology Framework

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

Matthew Swarney, 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

Chair: **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.

MONDAY 22 OCTOBER

L2: Promoting women's needs as employees and clients in criminal justice

Room: Giovanni

Chair: **Zhannat Kosmukhamedova**, United Nations Office of Drugs and Crime

Speakers:

Myra James, International Association of Women Police, Canada

Shahala Pervin, Dhaka Police, Bangladesh

Women in policing: a Bangladesh perspective

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

Chair: **Anil Anand**, IDR Management Consulting, Canada

Shahala Pervin, Bangladesh Police

Vicious cycle of violence against women: prosecution, prevention and protection in Bangladesh

Armita Adily, University of Texas, USA

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

MONDAY 22 OCTOBER

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

Samuel Otu-Nyarko, Ghana Police Service

Partnering with police to improve abortion care in Ghana

Emmanuel Chijioke Sonny Ojukwu, Chief of Police (Ret), Nigeria

Ipas intervention with the Police Force in Nigeria

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

What is the role of police in young people's use of drugs? Exploration, escape, desperation, vulnerability – these factors all call for different responses, and these responses can determine the young person's life course

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

MONDAY 22 OCTOBER

Peter Muysshondt, 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: **Michael Brown**, College of Policing, UK

Speakers:

John McDaniel, University of Wolverhampton, UK

Deconstructing the mental health dimensions of community-oriented policing

Herberth Canas, Sick Kids Centre for Community Mental Health, Canada & **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

Sara Jacoby, University of Pennsylvania, USA.

An evaluation of costs and benefits of pre-hospital transport by police for urban trauma patients

MONDAY 22 OCTOBER

Marketplace of Ideas sessions will be longer, in smaller groups and should be highly interactive.

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. Discussion will occur 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 to 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. 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.

4.00 – 4.30

AFTERNOON TEA

4:30-6:00

CONCURRENT SESSIONS

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

Mark Griffioen, City of Surrey, Canada

The Surrey Fire perspective

Keir Macdonald, Lookout Housing and Health Society, Canada

The Lookout Society's perspective

Wendy Mehat, Royal Canadian Mounted Police

The RCMP perspective

Galib Bhayani, 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

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 .

MONDAY 22 OCTOBER

A comprehensive assessment of 911 Good Samaritan Laws in 20 states: attitudes, implementation, and effect

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

Chair: **Eamonn O'Moore**, WHO UK Collaborating Centre for Health in Prisons, UK

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

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: **James Clover**, Edmonton Police, Canada

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

General Vu Cong Dung, Major General, Vietnamese Police

Vietnamese police with people living with HIV and people who use drugs - from punish to support.

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, **Sarah Voss & Esther Pullen**, Neighbourhood Public Health Professionals, 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 & **Claire Morssink**, Cluster Manager Public Health, The Netherlands

The SQT approach

Joris van 't Hof, Police Liaison Officer Mental Health, The Netherlands & **Bauke Koekkoek**, University of Applied Sciences, 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 sessions will be longer, in smaller groups and should be highly interactive.

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 & Holly Britton**, Ontario Shores Centre for Mental Health Sciences, Canada

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

MONDAY 22 OCTOBER

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. 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.

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 Center

Chair: **Geraldine Strathdee**, National Health Service, UK

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

Location: Ballroom East and Center

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.

TUESDAY 23 OCTOBER

Room: Ballroom East

Chair: **Rt Hon Alun Michael JP**, South Wales Police and Crime Commissioner, UK

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

M8 Indigenous enhancements to Canada's Hub Model: the journey of Muskoday and Ochapowace Intervention Circles

Two Indigenous communities seeking opportunities for improved safety, health and well-being have gone down the path of multi-sector collaboration. Through a disciplined and systematic process, Muskoday and Ochapowace service providers from the health, justice, police, education, housing, and social sectors routinely collaborate to not only detect and mitigate risk before harm occurs, but maintain collaborative case planning around the needs of individuals and families until stability is reached.

Location: Ballroom Center

Co-Presenters:

Chad Nilson, Initiative Strategist, Living Skies Centre for Social Inquiry, Canada

Ava Bear, Health Director, Muskoday First Nation, Canada

Betty Watson, Justice Coordinator, Ochapowace Nation, Canada

Herman Crain, Band Councillor, Muskoday First Nation, Canada

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:

Speakers: **Amy Watson**, University of Illinois at Chicago, USA

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

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

TUESDAY 23 OCTOBER

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

Chair: **Dale McFee**, Deputy Minister, Corrections and Policing, Saskatchewan, Canada

Speakers: **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

Chair: **Ritesh Kotak**, University of Edinburgh, Scotland

Speaker: **Peter Sloly**, 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.

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: **Adam Vaughan**, Simon Fraser University

TUESDAY 23 OCTOBER

Speakers:

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

Joris van't Hof 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

Jennifer Chambers, Empowerment Council & Toronto Police Services Board Mental Health Panel, Canada

A voice for the people on policing in Toronto

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: **Grant Edwards**, Australian Federal Police

Speakers:

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

Katrina Sanders, Australian Federal Police

Health in the Warm Zone: an Australian perspective

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: **Nasrul Ismail**, University of West England

Speakers:

TUESDAY 23 OCTOBER

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

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 1

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

Chair: **Greg Denham**, Yarra Drug and Alcohol Forum, Australia

Terry Bunn, University of Kentucky, USA.

Overlay of public safety and public health drug burden data to inform prevention and safety interventions

Peter Kim, Pivot Legal Society, Canada.

Policing the crisis: the impacts of local policing practices on harm reduction and overdose prevention efforts in British Columbia

Chris Carriere, 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

TUESDAY 23 OCTOBER

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: **Auke van Dijk**, Dutch Police Service

Speakers:

Nick Jones, University of Regina, Canada

Understanding the effects of impaired driving in Saskatchewan: perspectives of victim's family members

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?

Milan Tucek, Charles University, Czech Republic.

Medical fitness and drug use: railroad safety standards

1:30 – 3:00

MARKETPLACE OF IDEAS

Marketplace of Ideas sessions will be longer, in smaller groups and should be highly interactive.

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.

TUESDAY 23 OCTOBER

5.2. Checkpoint: a multi-agency approach to early intervention in offender management in reducing reoffending, addressing critical pathways and improving wellness and resilience.

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. Community Wellness and Public Safety Alliance in Winnipeg

Facilitators: **David Thorne**, MNP, Canada & **Ryan Sneath**, Winnipeg Fire Paramedic Service, Canada

The future success of policing agencies will be based upon how effectively they can work collaboratively with multi-sectoral teams to provide individuals access to the right combination of services, treatments, and supports, when and where people need them. The genesis for the development of the Community Wellness and Public Safety Alliance in Winnipeg was to figure out how the police service and health and other social care services can work together to improve people's health and well-being, reduce crime and protect the most vulnerable people in Winnipeg. By utilizing a collective impact approach the Alliance has created a solution to address public intoxication that focuses on how together, public safety and health partners can drive innovation through collaboration through system thinking and transformative leadership.

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

TUESDAY 23 OCTOBER

Chair: **Neil Woods**, Law Enforcement Action Partnership, USA

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, Advocates, USA

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: **Jennifer Wood**, Temple University, Canada

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.

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

TUESDAY 23 OCTOBER

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

Chair: **Tony Duffin**, Anna Liffey Project, Ireland

Wamala Twaibu 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, Coconino County, USA

Medical marijuana edible voluntary recall in Arizona

C19 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: **Sharon Paten**, Victoria Police, Australia

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?

TUESDAY 23 OCTOBER

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

C20 Details of this session will be posted on the noticeboard near the Reception and Information desk

Room: Armoury

Chair:

3:30 – 5:00

MARKETPLACE OF IDEAS

Marketplace of Ideas sessions will be longer, in smaller groups and should be highly interactive.

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. Building relationships with indigenous peoples: critical considerations

Chair & Moderator: **Erica Di Ruggiero**, Dalla Lana School of Public Health, Canada

Speakers: **Suzanne Stewart**, Dalla Lana School of Public Health, Canada
Clayton Shirt, Indigenous knowledge keeper, Canada

The legacy of colonisation has created conditions of discrimination and fuelled mistrust between Indigenous peoples and Canada's social, legal and health institutions. In the wake of the Truth and Reconciliation Commission calling for healing, allyship and nation-building, opportunities for building productive relationships and constructive dialogue led by and with Indigenous peoples are essential. This session will critically reflect on these challenges, lessons learned and evoke some of the necessarily principles that must guide new ways of collaborating with Indigenous peoples.

Marketplace of Ideas: 8 (1 x 90 minute session)

Room: Terrace West

Developing a police-hospital partnership model to serve people experiencing a mental health crisis in the community

Facilitators: **Leah Dunbar**, Michael Garron Hospital, Canada

Mike Federico, Toronto Police Service (Ret), Canada

Linda Young, Michael Garron Hospital, Canada

Maryann O'Hearne, North York General Hospital, Canada

TUESDAY 23 OCTOBER

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.

WEDNESDAY 24 OCTOBER

8:30-10:00

PLENARY SESSION P3

Room: Ballroom East and Center

Chair: **Cal Corley**, Community Safety Knowledge Alliance, Canada

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 of learning and working together. 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'

WEDNESDAY 24 OCTOBER

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 and vulnerable populations – lessons from Ukraine

Vikotriya Loza, 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:

WEDNESDAY 24 OCTOBER

Dr. Yasmeen Krameddine, 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

Teun-Pieter de Snoo, Politie Academie, The Netherlands

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

Models of First Responder coping: police as a unique population

Commander Wendy Dorrestijn, Politie Academie, The Netherlands

Beyond the split second

12:05-1:30

MAJOR SESSIONS

M13 Racial disparities in access to health and involvement with criminal justice

Health states are intimately related to socioeconomic status, which itself relates to the major direct and indirect determinants of health (e.g. inequality in access to and quality of education, income inequality and occupational environment). Access to justice, and outcomes of involvement with the criminal justice system, are also intimately related to socioeconomic status and class – but overwhelmingly, it is racial disparities that are the most unequal and create the most unequal outcomes.

Room: Ballroom East

Chair: **Anil Anand**, IDR Management Consulting, Canada

Speakers:

Annette Bailey, Ryerson University, Canada

Trauma, racialized youth, and gun violence: creating a culture of peace

Jim Parsons, Vera Institute of Justice, USA

Race and mass incarceration as a social determinant of health

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

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

WEDNESDAY 24 OCTOBER

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 Whetton, Police Scotland

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

Nadine Dougall, Edinburgh Napier University, Scotland

Understanding the assessment of vulnerability: a scoping review

Prof Brian Williams, Edinburgh Napier University, Scotland

Constructing sustainable and effective multi-agency research collaborations: reflections, lessons and suggestions

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

Identifying LEPH research priorities in Scotland

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

When it comes to drug use, harm reduction services and police have different responsibilities and yet they can and should work closely together. In this session we will reflect on two examples of good practise from Dublin and Vancouver. The panel will also discuss barriers to harm reduction services and police working together and offer practical strategies to overcome these barriers.

Room: Giovanni

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

Speakers:

Tony Duffin, Ana Liffey Drug Project, Ireland & **Jack Nolan**, Garda Assistant
Commissioner (Ret) 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

1.30 – 2.30

LUNCH

1.45 – 2.25

LUNCHTIME SESSIONS

WEDNESDAY 24 OCTOBER

L5: The World Health Emergencies Program: public health at the security interface

Room: Giovanni

Chair: **Auke van Dijk**, Dutch Police Service

Speaker: **Maurizio Barbeschi**, Manager, Health Security Interface Function, World Health Organization

In recent years, the world has seen an ever-increasing rise in the risks posed by the potential of an epidemic event that could cause large scale devastation, death, economic, and political instability on an international level. The amplification of the risks posed by a natural outbreak have been paralleled by the amplification of risks posed by a potential biological agent. To address these risks, an increasingly multi-disciplinary, multi-level and multi-sectoral work plan is needed. The WHO World Health Emergencies Program, begun in 2017 with funding from Global Affairs Canada, initiated the Health and Security Interface (HSI) project, “(applying) to those public health activities whose performance involve to some extent the security sector broadly understood (law enforcement, police, national armies, ministries of defence, military doctors, international and non-governmental organizations with a security relevant mandate)”. This project and its place within the wider work of WHO will be explored by Dr Barbeschi.

L6: Emergency Response Services: a focus on health promotion and illness and injury prevention

Room: St. David

Chair: **Melissa Jardine**, Centre for Law Enforcement and Public Health, Australia

Speaker: **Ryan Sneath**, Winnipeg Fire Paramedic Service, Canada

Emergency response services can no longer afford to respond in an episodic fashion to calls for service; this is neither economically sustainable nor feasible given the current resource capacity and demand for service delivery. First response agencies should be focusing on early assessment and identification of symptoms that may lead to further deterioration, and addressing those identified concerns in a proactive way. The success of this approach has been demonstrated by the Emergency Paramedics In the Community (EPIC) program. This program has focused on early identification of concerns, and utilizing the unique role of paramedics in the community to work collaboratively with other health and social service agencies to promote health and prevent illness/injury before emergency crisis occurs. This program has been able to demonstrated significant reduction on the reliance of emergency services in Winnipeg.

2:30-4:00

CONCURRENT SESSIONS

C21 Sexuality, violence and criminal justice

WEDNESDAY 24 OCTOBER

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: **Melissa Jardine**, Centre for Law Enforcement and Public Health, Australia

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: **Katy Kamkar**, Centre for Addiction and Mental Health, Canada

Speakers:

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: **Richard Bent**, Simon Fraser University, Canada

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

WEDNESDAY 24 OCTOBER

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: **Marcus Keane**, Anna Liffey Project, Ireland

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

Ernest Drucker, New York University, USA

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: **Isabelle Bartkowiak-Theron**, University of Tasmania, Australia

Speakers:

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, Adekunle Ajasin University, Nigeria

An examination of the issues and challenges of the rights of female internally displaced persons in Nigeria

Hamed Elneel Maryoud, Dubai Health Authority

Role of Law in enhancing the abandonment of Female Genital Mutilation /circumcision in Sudan

2:30 – 4.00

MARKETPLACE OF IDEAS

Marketplace of Ideas sessions will be longer, in smaller groups and should be highly interactive.

WEDNESDAY 24 OCTOBER

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, USA

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. Details of this session will be posted on the noticeboard near the Reception and Information desk

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. Details of this session will be posted on the noticeboard near the Reception and Information desk

4.05 – 4.30

CLOSING PLENARY SESSION

Room: Ballroom East

Chair: **Nick Crofts**, LEPH2018 Conference Director & Director, Centre for Law Enforcement and Public Health