

LEPH2019 PROGRAM

MONDAY OCTOBER 21

8:30-9.55 PLENARY SESSION P1 DIMENSIONS OF THE LAW ENFORCEMENT AND PUBLIC HEALTH RELATIONSHIP

Room: Pentland Auditorium

Co-Chairs: **Malcolm Graham**, Deputy Chief Constable, Police Scotland

David Crichton, Chair of NHS Health Scotland & the Scottish Police Authority

Speakers:

- **Iain Livingstone**, Chief Constable, Police Scotland

Welcoming comments

- **Jane Townsley**, Executive Director, International Association of Women Police, England

Gender responsive policing is essential for building confidence across all communities

- **Matt Jukes**, Chief Constable, South Wales Police

Early Action Together: ACE – informed partnership in Wales

- **Larry Krasner**, City of Philadelphia's 26th District Attorney, USA

Prosecution = Prevention

9.55 – 10.05 WELCOME FROM YOUR HOSTS Professor Andrea Nolan, Principal and Vice-Chancellor, Edinburgh Napier University

10.05 – 10.30 MORNING TEA

10:30-11:55 MAJOR SESSIONS

M1. The Scottish Centre for Law Enforcement and Public Health: how we got here and where we are going.

Room: Tinto Room, Lomond Suite

Convener and Chair: **Inga Heyman**, Edinburgh Napier University, Scotland

Presenters:

Nadine Dougall, Edinburgh Napier University, Scotland

Setting the scene, vision and purpose of the Scottish Centre for Law Enforcement and Public Health

Chris White, Mental Health Foundation, Scotland

Citizen participation in LEPH research, policy development and education

Jennifer Murray and **Ini Enang**, Edinburgh Napier University, Scotland

Co-creation and the five key LEPH research areas in Scotland

Andrew Wooff and **Inga Heyman**, Edinburgh Napier University, Scotland

Collaborative LEPH research and education: the joys and challenges of working across sectors.

Liz Aston, Scottish Institute for Policing Research and Edinburgh Napier University

Partnerships and where we go from here

M2. Public Health approaches in policing

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Room: Moorfoot Room, Lomond Suite

Convener and Chair: **Stan Gilmour**, Thames Valley Police, England

Presenters:

Helen Christmas, Public Health Leadership Fellow, Public Health England & **Justin Srivastava**, Lancashire Constabulary, England

Public Health approaches in policing

Jason Kew, Detective Inspector, Thames Valley Police, England

Public Health approaches in policing: Drug Diversion

Paul Gresty, Partnership Manager, Brighter Futures for Children, England

Public Health approaches in policing: The Reading Model of Collaborative Leadership

Éamonn O'Moore, National Lead Health & Justice Team and Director UK Collaborating Centre, WHO Health in Prisons Programme (Europe), Public Health England

Public health approaches in policing: no justice without health

M3. Police mental health and well-being

Note: This double session finishes at 1.00

Room: Pentland Auditorium

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

Chair: **Richard Southby**, George Washington University, USA

Panelists:

Katy Kamkar, Centre for Addiction and Mental Health, Canada

Police mental health and well-being: psychological health and safety strategies addressing moral injury, compassion fatigue and burnout to promote individual and organizational resiliency.

Grant Edwards, Australian Federal Police

Police mental health and well-being

Ian Hesketh, College of Policing, England

The Thin Blue Line is OK: delivering a national wellbeing service in policing

Dale McFee, Edmonton Police Service, Canada

Police mental health and wellbeing from an intake and off ramp perspective

Paul Pedersen, Greater Sudbury Police Service, Canada

Leadership opportunities: helping our people help others

Katrina Sanders, Australian Federal Police

A holistic approach to health protection in law enforcement agencies

Jeff Thompson, Columbia University Medical Center, USA

The Law Enforcement Psychological Autopsy: understanding suicide in policing

Abby McLeod, Australian Federal Police

Reframing diversity and inclusion in policing: it's a health and wellbeing issue

Ann Bell, Police Scotland

Positive action in recruitment

M4. Checkpoint: an innovative programme to navigate people away from the cycle of reoffending, and improve their wellbeing and life chances, particularly around the use of alcohol and drugs.

Room: Kilsyth Room, Lomond Suite

Convener and Chair: **Gillian Routledge**, Head of Tasking and Coordination, Durham Constabulary, England

Presenters

Gillian Routledge, Head of Tasking and Coordination - Durham Constabulary, England

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Can Durham Police's Checkpoint deferred prosecution program reducing reoffending and improve life chances through early intervention?

John Cooper, Durham Constabulary, England

One size doesn't fit all: similar people? different needs?

Jo McGregor-Taylor, Checkpoint Supervisor – Durham Constabulary, England

Diverting people with mental health issues away from the criminal justice system

Tracy Claughton, Checkpoint Supervisor – Durham Constabulary, England

Diverting people with alcohol issues away from the criminal justice system

Kevin Weir, Durham Constabulary, England

Diverting people who use drugs away from the criminal justice system

Andy Crowe, Durham Constabulary, England

Diverting domestic abuse perpetrators away from the criminal justice system

10.30 – 3.50.

POSTERS

Room: Cromdale Hall

Ngozichukwuka Agu, University of South Florida, USA

Understanding characteristics and perceptions of individuals attending the Batterer Intervention Programs

Robert Andersson, Linnaeus University, Sweden

Evaluating qualitative police work by quantitative methods, possibilities and risk

Garima Arora, University of Dundee, Scotland

Is oral health an important factor for mental health among people in custody in Scottish prisons?

Gil Artyom, First Moscow State Medical University, Russia

Gaps in the legal regulation of non beverage alcohols consumed for drinking in Russia

Jane Buxton, University of British Columbia, Canada

The silent increase of methamphetamine use and its harms

Katherine Comer, Health Education England

Modern slavery and public health

Mikael Emseng, Umea University, Sweden

Conflict management training among Swedish police officers

He Gao, Imperial College London, England

Use of TETRA personal radios and sickness absence in the Airwave Health Monitoring Study of the British police forces

Mehdi Ghazinour, Umea University, Sweden

Conflict management training among Swedish police officers

Mery Gonzales Delgado, Fundacion Universitaria del Area Andina, Columbia

Comparative analysis of public policies on the voluntary termination of pregnancy in Latin American countries in the period 2008 to 2018

Roberta Guio de Azevedo, Federal University of Rio de Janeiro, Brazil

Silicosis in the extraction of ornamental granite in Esperito Santo, Brazil: to prevent you need to know

Shi Haitao, University of Edinburgh, Scotland

Community-based drug rehabilitation under the 'People's War on Drugs' in China

Claudia Heinzelmann, German Prevention Congress

Applied prevention research: crime and violence prevention in Germany

Alexandra Hernandez, Touro University, USA

Developing a 'Health Equity and Criminal Justice (HECJ)' concentration for a Master of Public Health (MPH)

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program: assessment of community partner and potential employer interest

Ivana Jeles, Police College Croatia

A new three-part approach to stress reduction in the Croatian Police Force

Cecilia Jonsson, Linnaeus University, Sweden

Police cooperation with civil society: from a closed authority to an open social actor?

Chanika Kaeorat, MMC Tools (Thailand) Co. Ltd.

Legal problems regarding the disclosure of severe confidentiality of psychiatric patients by psychiatrists under Thai law

Mohammad Karamouzian, University of British Columbia, Canada

Intentional fentanyl use among people who use drugs in British Columbia, Canada: findings of the BC Harm Reduction Clients' Survey

Paul Keppel, GGZ inGeest, The Netherlands

Mobile Care Unit (The Netherlands): an integrated approach

Oluchukwu Obiora, University of the Witwatersrand, South Africa

Experiences of girls who underwent female genital mutilation/cutting

Tracey Price, University of Stirling, Scotland

Diversion: criminal justice to drug treatment

Islanda Rivera Arias, Fundacion Universitaria del Area Andina, Columbia

Analysis of public policies of healthy work environments in some Latin American countries in the period from 2000 to 2019

Debbie Sigerson, NHS Health Scotland

Smoke-free prisons: co-producing a service specification supporting people in our care

Coral Sirdifield, University of Lincoln, England

Healthcare for offenders on probation: availability and the relationship between health and criminal justice agencies

Vaughan Statham & Andrew Clark, NHS National Services Scotland

National Strategic Networks for Police and Prison Care: a renewed approach

Melissa Willoughby, University of Melbourne, Australia

Increased risk of violence related death among people exposed to the criminal justice system

12:05-1:00

CONVENED SESSIONS

CV1. Fighting domestic violence in Europe - best practices and major challenges

Room: Tinto Room, Lomond Suite

Convener : **Joachim Kersten**, Coordinator of the IMPRODOVA project, German Police University

Chair: **Pat Griffin**, Holy Family University, USA

Presenters:

Joachim Kersten, Coordinator of the IMPRODOVA project, German Police University

Leadership as a key resource for frontline responses to domestic abuse

Michele Burman, Head of School, University of Glasgow, Scotland

Frontline responses to domestic abuse in Scotland: assessing, managing and mitigating risk

Stefanie Giljohann, Research assistant, Police Berlin, Germany

Networks against domestic abuse in Berlin: from intervention to prevention

CV2. Drug courts – evidence, lessons learned and recommendations

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Room: Moorfoot Room, Lomond Suite
Convener: **John Collins**, Executive Director, London School of Economics Drug Policy Unit, England
Chair: **Denise Tomasini-Joshi**, Open Societies Foundation, USA
Panelists:
John Collins, London School of Economics Drug Policy Unit, England
International experiences of drug courts: a comparative perspective
Ana Pecova, EQUIS Justice for Women, Mexico
Drug courts in Mexico: a feminist perspective
Winifred Agnew-Pauley, Policy Institute for the Eastern Region (PIER), England
Drug courts in the United States: lessons learned

CV3. The approach to violence reduction in Scotland and its wider application

Room: Kilsyth Room, Lomond Suite
The panel will address how the learning from Scotland can be transferred across very different areas of the country? What are the challenges and how can we overcome them? There is no 'one size fits all' approach to violence prevention. However, what is key is the need to understand the underlying problems and how best to apply the evidenced based 'solutions'.
Convener and facilitator: **Niven Rennie**, Violence Reduction Unit (VRU), Glasgow, Scotland
Panellists:
Will Linden, VRU Scotland
Lib Peck, VRU London
Claire Dhami, West Midlands Combined Authority, England
Ashley Bertie, West Midlands Police, England
Daryl Lyons, Community Initiative to Reduce Violence, Northamptonshire, England

CV4. Public health approaches to the prevention of child sexual abuse

Room: Harris Room, Galloway Suite
Convener and Chair: **Stuart Allardyce**, Director of Stop It Now! Scotland, Lucy Faithfull Foundation, England
Presenters:
Stuart Allardyce, Director of Stop It Now! Scotland, Lucy Faithfull Foundation. England
Public health approaches to preventing child sexual abuse
Donald Findlater, Director Stop it Now Helpline, Lucy Faithfull Foundation. England
The work of the Stop it Now! UK & Ireland Helpline
Fiona Jackson, Detective Inspector Online Child Abuse Investigations Team (OCAIT), England
Preventing child sexual exploitation online

1.00 – 2.00

LUNCH

1.15 – 1.45

LUNCHTIME SESSIONS

L1: **David Harvie**, Crown Agent, Scotland
Public health: should prosecutors mind their own business?
Room: Tinto Room, Lomond Suite
Chair: **Richard Bent**, Simon Fraser University, Canada

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L2: Commandante António Leitão da Silva, Chief of Polícia Municipal do Porto, Portugal

The police role in drug use scenarios: stigma and expectations of police actions

Room: Moorfoot Room

Chair: **Nick Crofts**, Centre for Law Enforcement and Public Health, Australia

L3: Auke van Dijk, Police of the Netherlands

The disadvantage of a head start: why low and middle income countries might take the lead in developing LEPH

Room: Kilsyth Room, Lomond Suite

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

2:00 – 3:30:

CONCURRENT SESSIONS

C1: Collaboration & technology: building enhanced capacity for community safety and well-being

*This session will be a facilitated discussion

Room: Ochil Room, Galloway Suite

Convener and facilitator: **Chad Nilson**, Collaboration Specialist, Living Skies Centre for Social Inquiry, Canada

Panellists:

Dale McFee, Chief of Edmonton Police Service, Canada

Cal Corley, CEO, Community Safety Knowledge Alliance, Canada

Mathew Swarney, Director of Government Affairs, Motorola Solutions, Canada

Chad Nilson, Collaboration Specialist, Living Skies Centre for Social Inquiry, Canada

Nishan Duraiappah, Deputy Chief, Halton Regional Police Service, Canada

C2: Harm reduction

Room: Harris Room, Galloway Suite

Chair: **Palani Narayanan**, Global Fund for AIDS, Tuberculosis and Malaria

Presenters:

Benjamin Scher, University of Waterloo, Canada

Police practices in relation to supervised injecting site users in Vancouver: an ethnographic study

Saket Priyadarshi, National Health Service, Scotland

A drug consumption room in Scotland?

Liz Aston, Scottish Institute for Policing Research and Edinburgh Napier University

What is the role of law enforcement in a public health approach to the drug problem? A synthesis of international data and implications for Scotland

Jerusha Vithiyandandan, University of Dundee, Scotland

Assessing risk of drug death in people known to Substance Misuse Service: a retrospective cohort study

Jessica Davidson, NHS Lothian, Scotland

Faculty of Arrest Referral: anticipatory care and preventing deaths in custody

Leah Pope, Vera Institute of Justice, USA

Emerging police responses to the US overdose crisis

C3: Mental Health pathways and partnerships

Room: Tinto Room, Lomond Suite

Chair: **Nadine Dougall**, Edinburgh Napier University

Presenters:

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Arun Sondhi, Therapeutic Solutions (Addictions) Ltd, England & **Emma Williams**, Canterbury Christ Church University, England

Police and health operational staff perspectives on managing detainees held under Section 136 of the Mental Health Act: a qualitative study in London

Alice Park, University of York, England

Policing mental health: a realist evaluation of mental health triage

Ron Hoffman, Nipissing University, Canada

Police use of a mental health screener to promote a collaborative approach to effectively respond to the needs of persons with serious mental health disorders

Francesca Menichelli, University of Surrey, England

Innovations in institutional responses to vulnerability: a case study from an English local authority

Lynda Breen, Garda Siochana Analysis Service, Ireland

To assist the Local Authority in Limerick to reduce suicide and suicide attempts in public places

C4: Risk assessment and risk management of intimate partner violence

Room: Moorfoot Room, Lomond Suite

Convener: **Susanne Strand**, Orebro University, Sweden

Chair: Jennifer Wood, Temple University, USA

Presenters:

Susanne Strand, Orebro University, Sweden

Risk assessment and risk management of intimate partner violence and stalking in urban, rural and remote areas

Joakim Petersson, Orebro University, Sweden

Proposing a typology of intimate partner violent men: implications for risk assessment and management

Joakim Petersson, Orebro University, Sweden

Legal risk management strategies: the use of arrest and restraining orders as protective interventions in cases of intimate partner violence

Susanne Strand, Orebro University, Sweden

Structured risk management within and between police and social service reduces intimate partner violence

Alexander Workman, Western Sydney University, Australia

Victims from the margins: racial and ethnic minorities access to criminal justice

C5: Developing best practices related to data, education and screening: working across sectors to improve outcomes associated with Fetal Alcohol Spectrum Disorder

Room: Kilsyth Room, Lomond Suite

Convener and Chair: **Jocelynn Cook**, Society of Obstetricians and Gynaecologists, Canada

Presenters:

Kathy Unsworth, Canada FASD Research Network, Canada

FASD, law and mental health: the Canadian experience

Hayley Passmore, University of Western Australia

Fetal Alcohol Spectrum Disorder in the Australian youth justice system: prevalence, implications and workforce development

Christopher Steer, Scottish Government

Provision and support for Fetal Alcohol Spectrum Disorder in Scotland: progress report and implications for the criminal justice community

Patricia Jackson, University of Edinburgh, Scotland

New opportunities in Scotland to diagnose those affected by FASD

Jennifer Shields & Sarah Brown, Fetal Alcohol Advisory and Support team

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Lessons learned from Scotland's first Fetal Alcohol Assessment and Support Team

2.00 – 3.30

MARKETPLACE OF IDEAS

PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS

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

Marketplace of Ideas: 1 (2 x 45 minute sessions)

Room: Carrick Room 1, Galloway Suite

1.1. Jeff Thompson, Columbia University Medical Center, U.S.

Law enforcement psychological autopsy: hands-on workshop

The purpose of creating the Law Enforcement Psychological Autopsy (LE-PA) was to adapt and modify current PA templates being used and suggested by researchers and groups including AAS in order to be practical for implementing in law enforcement.

This workshop will raise awareness of what the psychological autopsy is and how it can be trained to law enforcement agencies so their personnel tasked with investigating suicides (including that of their own officers) can have a better understanding of suicide, the risk factors and warning signs, how to conduct interviews in order to build rapport and trust, and how to present the findings.

In this session there will be group discussions, interactive example “test” questions, review of the LE-PA template, active listening exercises, and opportunities to review data.

1.2. Ron Bruno, CIT International, USA & **Amy Watson**, CIT International and University of Illinois at Chicago

Building mental health crisis response systems: emerging best practices from the United States

In many communities in the USA, police are the primary service to respond to individuals experiencing mental health crises. This can have significant negative consequences for all involved, and increase the over representation of individuals with mental illness in the criminal justice system.

While many associate CIT with law enforcement training, the CIT model is much more and provides a useful framework for building mental health crisis response systems that minimize the involvement of law enforcement. The model develops partnerships across LE, mental health services, advocates and service users/family members. The panel format of this session will ensure the session is dynamic and engaging, we will take a team approach to presenting and involving audience members in discussion. Several segments of the session will ask the audience to walk through scenarios related to their own local crisis response resources and consider best practice strategies for building more comprehensive and responsive crisis response systems that minimize the role of police and the criminal justice system.

Marketplace of Ideas: 2 (2 x 45 minute sessions)

Room: Carrick Room 2, Galloway Suite

2.1. John Harrison, College of Policing, England & **James Nye**, Devon and Cornwall Police, England

A health promoting police force: an evolutionary development for wellbeing at work

The concept of a health-promoting police force arises as a consequence of a strategic approach to health and wellbeing. Investment in wellbeing requires culture change to embed it as business as usual. Successful policing of communities is contingent on promoting and maintaining high levels of health and wellbeing in our police officers and police staff. A health-promoting police force will be concerned with the health of our

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communities and our ability to influence this. There are clear links between some health issues and levels of crime.

A policing – health collaboration would explore how police wellbeing resources and initiatives might be used to also benefit local communities. This session will comprise two short presentations followed by a facilitated discussion of set questions.

2.2. Abby McLeod & Katrina Sanders, Australian Federal Police

Connecting the dots: promoting a joined up approach to "diversity and inclusion" and "organisational health and wellbeing"

In this session we aim to stimulate discussion about the relationship between organisational health and inclusion, and the ways in which policing organisations can connect these currently separate bodies of work to maximise benefits for all. In doing so, we will share reflections on our own experiences working to promote organisational health and inclusion in the Australian Federal Police (AFP) and offer our views on practical ways of bringing these areas of work closer together, including a consideration of risks and benefits. We will then invite participants to share their own experiences and ideas, through a semi-structured series of questions aimed to generate sharing and critical analysis.

Marketplace of Ideas: 3 (2 x 45 minute sessions)

Room: Carrick Room 3, Galloway Suite

3.1. Helen Christmas and Linda Hindle, Public Health England, Mike Cunningham, College of Policing, England

Public health approaches to policing: practical tools for police forces and partners

The question of “what exactly is a public health approach to policing?” is one that has often been raised, especially during the development and implementation of the Police and Health consensus for England. The phrase “a public health approach to” is used in different ways. In the UK at the moment there is a particular focus on public health approach to serious violence, but there has been a lack of clarity about meaning. We have developed a discussion paper, published with the College of Policing and Public Health England. It explores what a public health approach looks like for policing under five headings: population, prevention, causes of the causes, data and evidence base, partnership. Phase two of the project is to develop a set of principles and some practical materials to support the implementation of public health approaches in police forces. It is this part of the project that the *Marketplace of Ideas* session will focus on, seeking the input and agreement of the audience to finalise the resource.

3.2. Lynne McNiven, NHS Ayrshire and Arran, Scotland; Kathleen Winter, Crosshouse Hospital, Scotland; Joanne Logan, Police Scotland; Jemma Davidson and Alice Dillon, Community Justice Ayrshire, Scotland; Colin Convery, Police Scotland

Working together to achieve more

The ACE’s framework provides a well researched explanatory model for the link between exposures to trauma and adversity in childhood, associated inter-generational transmission of adversity and long term negative health and social outcomes. Our work is multifaceted involving collaboration between colleagues from Police Scotland, Public Health, The Violence Reduction Unit and Community Justice who have worked closely to develop and deliver targeted pieces of joint work across Ayrshire. The initial feedback from 3rd sector, police officers, addiction workers and other individuals have highlighted subtle changes in practice which have enhanced experiences. There has been recognition at grass roots level of the ‘Start Where You Are and Do What You Can’ ethos. Multidisciplinary and Agency Teams will discuss the journey undertaken to date

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highlighting challenges, sharing good practice, lessons learned from their perspective, Interactive session will engage with the audience.

3.30 – 4.00

AFTERNOON TEA

4:00 – 5.30

CONCURRENT SESSIONS

C6: Collaborative leadership

Room: Ochil Room, Galloway Suite

Chair: **Auke van Dijk**, Police of The Netherlands

Presenters:

Craig McGrath, Queensland Police Service, Australia

Product contamination: complexities of managing an enmeshed public health alert and a criminal investigation

Rachel Staniforth, Health Education England

Fortifying our relationships

Roz Warden, Barnwood Trust, England & **Amy Dyde**, Gloucestershire Constabulary, England

An initiative to build community capacity and resilience: collaborative evaluation findings

Rebecca Stenberg, Linköping University, Sweden

In search of Dante: initiative and collaboration in emergency situations

Guy Lamb, University of Cape Town, South Africa

The complexities of pursuing a 'whole of society' policing approach in a violent and unequal African city

C7: Police well-being I

Room: Harris Room, Galloway Suite

Chair: **Isabelle Bartkowiak-Theron**, Tasmanian Institute of Law Enforcement Studies, University of Tasmania, Australia

Presenters:

Annika Smit, Police Academy, Netherlands

Sensitivity or resistance: on the resilience paradox in policing

Grainne Perkins, Seattle University, USA

The spectre of trauma in the South African Police Service

Terry Bunn, University of Kentucky, USA

Officer use of force injuries while apprehending individuals under the influence

Evangelia Demou, University of Glasgow, Scotland

The Airwave Health Monitoring Study (AHMS): an occupational cohort study of the British police forces

Evangelia Demou, University of Glasgow, Scotland

Policing and work-life balance: attainable or elusive?

C8: Diversion

Room: Tinto Room, Lomond Suite

Chair: **Liz Aston**, Scottish Institute for Policing Research & Edinburgh Napier University, Scotland

Presenters:

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Matthew Bacon, University of Sheffield, England

Police-led diversion programs for drug and drug-related offenders in England and Wales

Jack Rowlands, Metropolitan Police Service, England

DIVERT: a police custody diversion programme for young adults

Arun Sondhi, Therapeutic Solutions (Addictions) Ltd, England

Assessing engagement with the Drug Intervention Programme (DIP) in London

Evan Anderson, University of Pennsylvania, USA

Police perspectives on police assisted diversions in Philadelphia

Evangelica Juarez, Temple University, USA

Issues in the distribution of behavioural health resources: considerations for police diversion efforts

C9: Impact of incarceration

Room: Moorfoot Room, Lomond Suite

Chair: **Greg Denham**, Law Enforcement and HIV Network (LEAHN), Australia

Presenters:

Melissa Willoughby, University of Melbourne, Australia

Violence-related deaths among adults released from prison: a data linkage study

Stuart Kinner, University of Melbourne, Australia

The Mortality After Release from Incarceration Consortium (MARIC) study: a multi-national, individual participant data meta-analysis

Jesse Young, University of Melbourne, Australia

Overdose deaths among justice-involved young people: a whole-population retrospective cohort study

Nemesia Kelly, Touro University California, USA

Replacing the state: the role of post-conviction attorneys in the post-incarceration lives of California's exonerees

Mudia Uzzi, Johns Hopkins Bloomberg School of Public Health, USA

Temporal relationship of criminal justice involvement and transactional sex among black men who have sex with men in Baltimore, Maryland: depressive symptoms as a mediator

Margaret Erickson, Centre for Gender and Sexual Health Equality, Canada

"They look at you like you're contaminated": how HIV-related stigma and power dynamics shape HIV care access for incarcerated women living with HIV in a Canadian setting

C10: Female genital mutilation

Room: Kilsyth Room, Lomond Suite

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

Presenters:

Sara Johndotter & Lotta Wendel, Malmo University, Sweden

Societal measures to check for suspected female genital mutilation in Sweden: an analysis of proportionality in the authorities' handling of suspected cases

Saffron Karlsen & Christina Pantazis, University of Bristol, England

Towards more collaborative approaches to female genital mutilation safeguarding: accommodating the perspectives of Somali families

Oluchukwu Obiora, University of Witwatersrand, South Africa

Female genital mutilation in Africa: scoping the landscape of evidence

Glenda Bonde, National FGM Centre, England

Harmful practices: leaving no one behind using a whole systems approach

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4:00 – 5:30

MARKETPLACE OF IDEAS

PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS

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

Marketplace of Ideas: 4 (2 x 45 minute sessions)

Room: Carrick Room 1, Galloway Suite

4.1. Stan Gilmour & Lewis Prescott-Mayling, Thames Valley Police, England, Éamonn O'Moore, Public Health England

Data analytics for law enforcement and public health in the Reading Model

Individuals are affected by heterogeneous harm events (e.g. crimes, neglect, mental health, adverse childhood experiences) and the police, social care and health are tasked with reducing the likelihood of these events occurring and their harmful impact if they do. Often the identification of individuals or groups most likely to come to harm is done in isolation by each agency. This discussion will unpack the potential when multiagency data is brought together to forecast individuals and groups most likely to come to harm following adverse experiences being recorded by any agency. Currently most decisions on when and where to target public sector resources are 'clinical decisions'. Public sector agencies need to utilise 'data analytics' to identify threat, harm, opportunity and risk which is more accurate than using clinical decisions alone. However, as not everything that needs to be considered is quantifiable, best practice blends clinical experience with quantitative evidence. It is simply likely to be more accurate, particularly when dealing with large numbers of cases as it is not possible for all information to be assessed by clinical based decisions.

4.2. Lesslie Young, Epilepsy Scotland

Are you going to kill me? The potential fatal consequences of misinterpreted behaviour

Epilepsy is the world's most common neurological condition and seizures present in a huge variety of ways involving impaired consciousness and cognition, and sometimes automatism or inappropriate behaviours. The post-seizure period may be associated with communication difficulties, confusion and impaired cognition, amnesia, emotional instability and post-ictal psychosis. It poses particular challenges to law enforcement through individuals displaying seizure-related behaviour which can be misinterpreted – sometimes with fatal consequences. This session discusses epilepsy and how it can manifest in a law enforcement situation, including automatism behaviour. It describes the effects of the condition beyond seizures and how this may impact the work of police and prosecutors. It also details questions those in law enforcement can ask themselves in identifying whether apparently criminal behaviour is in fact related to seizure activity. This is a practical session, brought to life with thought-provoking case studies and footage.

Marketplace of Ideas: 5 (2 x 45 minute sessions)

Room: Carrick Room 2, Galloway Suite

5.1. Dave Caesar, Carol Goodman, Susan Fraser – all Project Lift, Scotland, Steph Phillips, NHS 24, Scotland & Christine Goodall, University of Glasgow, Scotland

Project Lift: collaboration - learning from practice

This session will illustrate the issues or needs that this collaborative partnership is addressing. *Project Lift* is a new approach to recruit, retain, develop and manage talent within Health and Social Care in Scotland to ensure the best, most able leaders reach boardrooms. By identifying, supporting, enhancing and growing its talent at every level, we will enable delivery of best outcomes for patients and high quality safe, effective care in our communities. *Project Lift* focuses on embedding a leadership approach underpinned by principles of collective, collaborative and compassionate leadership. The intended impact is for senior leaders in the Scottish Prison Service to use the learning and experiences of others, as well as their own, to inform their ongoing work to

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enable cultural and transformational change. The collaboration also offers rich experience and learning for the Criminal Justice Team.

We will offer insights and learning from our stories of collaboration from a number of sources: from our live collaborative experiments within leadership, more broadly from *Project Lift* leadership communities and from our own experiences of collaboration as a *Project Lift* team.

5.2. Jac Charlier, TASC's Center for Health and Justice, USA & **Mike Trace**, The Forward Trust, England

Deciding when to "deflect": a visual model of police decision-making factors

There is a groundswell of government and police-led innovations designed to link people affected by mental health and substance use issues to treatment and community services. As developments unfold, it is important to share ideas and practices across jurisdictions and collaborate in producing shared conceptual frameworks and models of systems-wide change. Researchers and practitioners across the law enforcement and public health sectors must develop a shared understanding of first responder decision-making and the specific factors that influence officers' decisions to divert or "deflect" people away from criminal justice interventions. This session will offer a provisional visual model for considering officer decision-making, incorporating what is known about deflection decision-making and the contextual factors that influence decisions to deflect in different sites. The initiative seeks to develop a robust model of systems-wide change that can guide research and collaborative work to shift strategies aimed at addressing mental health and substance use conditions away from law enforcement/criminal justice responses to community-based treatment. Presenters will workshop the model with attendees and map out how the decision-making processes play out in different contexts.

Marketplace of Ideas: 6 (2 x 45 minute sessions)

Room: Carrick Room 3, Galloway Suite

6.1. Norrie Petrie, Police Scotland & **Jardine Simpson**, Scottish Recovery Consortium (SRC)

Substance misuse and the impact of stigma

Stigma is recognised as a key factor impacting on People Who Use Drugs (PWUD). It can cause reluctance in individuals to engage with services that could support them in tackling substance use and also any correlated issue(s) that may have been a factor that has resulted in substance use/addiction. The research will be delivered by way of a workshop. Attendees from a cross sector will be invited to provide feedback/stimulate discussion on the following key areas:

How stigmatisation impacts are seen from different organisational perspectives who come into contact with PWUD.

How the contact between organisations and PWUD can positively/negatively impact on the stigmatisation of an individual.

How we can use the learnings to inform organisations about how they can positively influence individual/multi-organisational and community culture in relation to the stigmatisation of PWUD

What success looks like and how do we measure it.

6.2. Carolyn Thom, The Forensic Practice Vancouver, Canada & **Scott Jones**, Edmonton Police Service, Canada

Canine assisted child forensic interviewing in child abuse cases

This session will include an oral presentation with photographic and video demonstrations that will describe the impact of a Canine Assistance Intervention (CAI) program in a Canadian Child Advocacy Centre, in the context of criminal investigations of child maltreatment. The Centre is a collaborative community approach

LEPH2019 PROGRAM

utilizing a multidisciplinary team including police, child protection workers, medical personnel, therapists, prosecutors and victim advocates. In 2015 service dogs were allowed to join child witnesses in court whilst testifying re child abuse matters.

5.30

NETWORKING SESSION OVER DRINKS AND NIBBLES



Hosted by **Police Scotland** and **The Scottish Institute for Policing Research**

DCC Malcolm Graham

Partnership, Prevention and Community Wellbeing
Police Scotland
*Welcome remarks and overview of LEPH
in Police Scotland*

Liz Aston

Scottish Institute for Policing Research
Knowledge exchange in LEPH

TUESDAY 22 OCTOBER

8:30-10:00

PLENARY SESSION P2

DIMENSIONS OF WELLBEING IN LAW ENFORCEMENT AND PUBLIC HEALTH

Room: Pentland Auditorium

Co-Chairs: **Gary Ritchie**, Assistant Chief Constable, Police Scotland

Gerald McLaughlin, Chief Executive, NHS Health Scotland

Speakers:

- **Mark Collins**, Chief Constable Dyfed-Powys Police; National Police Chiefs' Council Lead for Mental Health and Policing, Wales

Mental health: next steps in policing

- **Andy Rhodes QPM**, Chief Constable of Lancashire Constabulary, England

UK policing approach to wellbeing: rhetoric to reality

- **John Middleton**, President, Association of Schools of Public Health in the European Region

Public health problems are multidisciplinary: why do we train for them apart?

- **Gary Ritchie**, Assistant Chief Constable, Police Scotland

Police Scotland's approach to the law enforcement and public health collaboration

8.30 – 3.00

POSTERS

See Monday at 10.30 for a list of poster presentations

10:00-10:45

LEPH ORATION

Location: Pentland Auditorium

PROFESSOR SIR HARRY BURNS

Professor of Global Public Health

University of Strathclyde, Scotland

Wellbeing: what is it and how does society create it?

10.45 – 11.15

MORNING TEA

11:15 - 12:45

MAJOR SESSIONS

M5. Leave your ego at the door

Room: Tinto Room, Lomond Suite

Convener: **Linda Hindle**, Public Health England

Chair: **Liz Aston**, Scottish Institute for Policing Research and Edinburgh Napier University

Presenters:

Linda Hindle, Public Health England

Leave your ego at the door

Duncan Selbie, Chief Executive, Public Health England

TUESDAY 22 OCTOBER

Why collaborative leadership at national and place level is essential to improve outcomes for individuals, communities and populations

Andy Rhodes QPM, Chief Constable Lancashire Constabulary, England

Compassionate leadership, the national police and health consensus: what has worked and what more needs to happen

Karyn McCluskey, Chief Executive, Community Justice Scotland

Driving systems leadership to reduce health inequalities and maintaining a focus on the people at the receiving end of services

M6. Models and mechanisms supporting LE/MH partnerships to improve response to individuals with behavioural health conditions

Room: Pentland Auditorium

Convener and Chair: **Amy Watson**, University of Illinois at Chicago, USA

Presenters:

Amy Watson, University of Illinois at Chicago & **Michael Compton**, Columbia University College of Physicians and Surgeons, USA

Review of research on models of LE/MH response to individuals with mental illnesses and intellectual and developmental disabilities

Stuart Thomas, RMIT University, Australia

Policing complexity: police involvement with people with intellectual disability

Melissa Morabito, University of Massachusetts Lowell & **Jenna Savage**, Office of Research and Development, Boston Police Department, USA

Dedicated: evaluating Boston's response to people with mental illnesses

Daniel Pearson Hirdes, McMaster University, Canada

Mental health call trends in Canada: a review of police response to mental health calls in 18 communities

Ron Hoffman, Nipissing University, Canada

The use of a brief mental health screener to enhance police response to mental health crisis and reduce impact on police and health resources

M7. Early Action Together Programme: moving from understanding to operationalising trauma-informed policing in Wales.

Room: Moorfoot Room, Lomond Suite

Convener: **Dusty Kennedy**, Public Health Wales

Chair: **Nadine Dougall**, Edinburgh Napier University, Scotland

Presenters:

Emma Barton, Early Action Together Programme, Public Health Wales

Understanding the police landscape across Wales in responding to vulnerability

Emma Barton, Early Action Together Programme Public Health Wales

Effectiveness of the ACE TIME training (part of the EAT programme) on the police workforce in increasing awareness of ACE related trauma and impact across the life course; in enabling individuals to competently and confidently respond to vulnerability using ACE informed approach and supporting a whole systems approach between police & partners in preventing and mitigating ACEs

Helen Douglas, North Wales Police, National Early Action Together Programme, Public Health Wales, and **Vicky Jones**, North Wales Local Partnership, Early Action Together Programme, Public Health Wales

The Reality – 'Early Action Together': operationalising the recommendations from research

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M8. Learning from Canada's accelerating journey toward collaborative Community Safety and Well-Being (CSWB)

Room: Kilsyth Room, Lomond Suite

Convener and Chair: **Norman E. Taylor**, Journal of Community Safety and Well-Being, Canada

Presenters:

Norman E Taylor, Journal of Community Safety and Well-Being, Canada

Human Security: the fundamental promise of any democratic society

Brent Kalinowski and **Lisa Taylor**, Global Network for Community Safety, Canada

A decade of Canada-wide mobilizing for collaborative CSWB

Matthew Torigian, Munk Centre for Global Affairs and Public Policy, Canada

Ontario's path to a legislated mandate for collaborative CSWB planning

Current case studies in locally-led and collaborative CSWB planning and action

Case Study #1: Halton Region CSWB Plan

Susan Biggs, Halton Regional Police Service, Canada

Case Study #2: British Columbia's accelerating uptake of collaborative CSWB models

Shannon Tucker, Office of Crime Reduction and Gang Outreach, BC

Ministry of Public Safety and Solicitor General, Canada

All Presenters: Interactive panel and Town Hall sub-session:

Lessons learned and lessons yet to learn

12.45 – 2.00

LUNCH

1.00 – 1.40

LUNCHTIME SESSION

L4: **Emma McAllister**, Scotland

Don't just do something, stand here: an autoethnographic account of police involvement in mental health

Chair: **Stuart Thomas**, RMIT University, Australia

Room: Tinto Room, Lomond Suite

L5: **Iain Smith**, Keegan Smith Defence Lawyers, Scotland

Cutting crime with compassion: a curious defence lawyer's story

Chair: **Leah Pope**, Vera Institute for Justice, USA

Room: Moorfoot Room, Lomond Suite

L6: **Meet the Editor - writing for the special LEPH journal issues**

An introduction to the Journal of Psychiatric and Mental Health Nursing

Lawrie Elliott, Editor and Chief, Glasgow Caledonian University, Scotland

Chair: **Inga Heyman**, Edinburgh Napier University

Room: Kilsyth Room, Lomond Suite

2.00 – 3.30

CONCURRENT SESSIONS

TUESDAY 22 OCTOBER

C11: Health and health needs of people involved with criminal justice

Room: Ochil Room, Galloway Suite

Chair: **Éamonn O'Moore**, Public Health England

Presenters:

Joan Papp, MetroHealth, USA

Expanding access to medication assisted treatment in Cuyahoga County Corrections Center (CCCC)

Nasrul Ismail, University of West England

Rolling back the prison estate: the pervasive impact of macroeconomic austerity on prison health in England, from the perspective of national policymakers

Amanda Butler, Simon Fraser University, Canada

Co-occurring disorders in the provincial correctional system in British Columbia

Stuart Kinner, University of Melbourne, Australia

Health and health service outcomes associated with re-incarceration after release from prison: a prospective data linkage study

Debbie Sigerson, NHS Health, Scotland

Smoke free prisons: co-production of a service specification supporting people in our care and improving health outcomes

Fiona Kumari Campbell, University of Dundee, Scotland

A new vision for social care of disabled people in prison

C12: Harm Reduction in different countries I

Room: Harris Room, Galloway Suite

Chair: **Auke van Dijk**, Police of The Netherlands

Presenters:

Lanying Huang, National Taipei University, Taiwan

Protection or punishment? Developing a multi-agency model for adolescent substance users in Taiwan

Bajram Nuhui, Kosovo Police.

Activities of the Kosovo Police in framework of the National Drug Strategy on prevention and combating drugs.

Kateryna Denysova, UNDP Ukraine

Strengthening the HIV/AIDS response in Ukraine through capacity building of the law enforcement representatives: UNDP Ukraine experience

Jane Buxton, University of British Columbia, Canada

Exploring reasons people use drugs alone: more than stigma or concerns about police

Hai Thanh Luong, RMIT University, Australia

Harm reduction for drug control: a review of one decade changes in Vietnam

C13: Sex work

Room: Tinto Room, Lomond Suite

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

Presenters:

Susan Sherman, Johns Hopkins University, USA

Police as 'clients' of sex workers in Baltimore, MD, USA: health risks and abuses of power

Lucy Platt, London School of Hygiene and Tropical Medicine, England

The health impacts of sex work criminalisation: a review of the evidence

Donna Evans, RMIT University, Australia

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The policing of sex work in South Africa: introducing the Positive Policing Partnership

Jocelyn Elmes, London School of Hygiene and Tropical Medicine, England

High levels of police contact and violence among a diverse sample of sex workers in East London: baseline results from an epidemiological cohort study (East London project, component B)

Pippa Grenfell, London School of Hygiene and Tropical Medicine, England & **Rachel Stuart**, University of Kent, England

Safety, health and social (in)justice: a participatory qualitative study exploring sex workers' experience of enforcement, violence and access to healthcare, support and justice in East London (East London Project, component A)

C14: Trauma and Adverse Childhood Experiences I

Room: Moorfoot Room, Lomond Suite

Chair: **Nadine Dougall**, Edinburgh Napier University

Presenters:

Sharon Lambert, University College Cork, Ireland

Trauma-informed policing in Ireland

Claire Warrington, University of Brighton, England

Policing the aftermath of ACEs: public health approaches to reduce high frequency repeat detention under Section 136 of the Mental Health Act

Sarah Anderson, University of West Scotland

Rethinking trauma and adverse childhood experiences

Joseph Schafer, St. Louis University, USA

Exposure to violence and public health: lessons and implications from the St. Louis, Missouri Police-Prosecutor Partnership Initiative

C15: The role of prosecutors in achieving public health goals

Room: Kilsyth Room, Lomond Suite

Convener and Chair: **Lucy Lang**, John Jay College, USA

Panellists:

David Harvie, Crown Agent, Scotland

Larry Krasner, City of Philadelphia's 26th District Attorney, USA

Iain Smith, Keegan Smith Defence Lawyers, Scotland

2.00 – 3.30

MARKETPLACE OF IDEAS

PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS

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

Marketplace of Ideas: 7 (2 x 45 minute sessions)

Room: Carrick Room 1, Galloway Suite

7.1. Elaine Tomlinson, Police Scotland

Mental health, police and other first responders.

John Mitchell, Mental Health Directorate, Scottish Government

Distress Brief Intervention (DBI): working beyond frontline boundaries to build connected, compassionate support for people presenting in distress.

& joined by **designated members of the DBI programme from Emergency Services and 3rd**

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party sector agency.

Distress Brief Intervention (DBI) supports adults with emotional pain. It provides services with the ability to provide a caring and compassionate response for those in distress. The need to improve the response for people in distress was strongly advocated by people with lived experience, frontline services and research. In response the Scottish Government established the DBI programme in November 2016. This is a national and regional distress collaboration between Health and Social Care, Primary Care, Police Scotland, Scottish Ambulance Service, NHS Emergency Departments and 3rd sector agencies.

Community Triage is for persons who come into contact with the police in the community and are suffering from mental health crisis. Community Triage is available in 9 out of 13 local policing divisions in Scotland.

Police Officers can request the assistance of Mental Health professionals to provide advice.

The panel will share their experience in relation to the initiatives and outline the intentions, learning and future direction of their work. Panellists will then be open to questions from the audience.

7.2. Neil Wilson, Police Scotland and Jess Davidson, NHS Lothian, Scotland

Operation Threshold: assertive outreach

Operation Threshold was conceived and initiated in Edinburgh to identify, engage and support drug users at the greatest risk of harm whilst robustly targeting those seeking to exploit vulnerable users through enforcement activity. The proposed discussion group will explore the assertive outreach strand of the approach that involved a police led intelligence cell retrospectively reviewing incidents and information systems to identify those who had suffered instances of public space non-fatal overdose. Once identified, the individual's circumstances were triaged by a single point of contact within NHS Lothian who evaluated their health needs, reviewed recent contact with support and treatment services and generated an anticipatory care plan. Subsequently, the engagement team, comprised of police officers and peer mentors with lived experience of addiction, traced the individual and provided the necessary support or signposting/onward referral as appropriate. The session will include presentations from police and health representatives supported by case studies to probe the effectiveness of the approach, and will incorporate time for discussion and an overview of planned future work to further enhance interagency information sharing.

Marketplace of Ideas: 8 (2 x 45 minute sessions)

Room: Carrick Room 2, Galloway Suite

8.1. Jan Fox, Edmonton Police Service & Dale McFee, Edmonton City Chief of Police, Canada

Collaborations, systems change and community safety: the 24/7 Crisis Diversion Initiative

24/7 Crisis Diversion is a first-rate example of collaborative leadership. Edmonton police officers spend a disproportionate amount of time responding to 'social disorder' calls each year. This represents thousands of events, many of which do not require police intervention and could be better addressed with community supports. 24/7 Crisis Diversion Teams respond to calls directly from emergency services, as well as public dispatch via the '211' line, for citizens experiencing non-emergency crises. Teams address the crisis at hand and follow a 'warm handoff' protocol to connect the person with supports they need 24 hours per day, 365 days a year. The 24/7 Crisis Diversion team responded to 14,412 events in 2018 alone and is seen as an essential

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service to the City of Edmonton. Robust social media campaigns have reached hundreds of thousands of citizens, providing a non-emergency resource to call when they see a vulnerable person needing help. In this session we will show videos from multiple perspectives of the collaborative, offer an interactive simulation of our real-time information system and engage in frank discussion of the challenges and barriers to the success of the initiative. We will also personalize the work by showcasing client journey maps of vulnerable Edmontonians who have engaged with our services.

8.2. Carlyn Muir, Monash University Accident Research Centre, Australia

Bringing policing for road safety out of the shadows

Road trauma continues to be a global public health problem with between 20 and 50 million people disabled and 1.35 million people killed annually - 90% of the deaths occurring in low and middle-income countries (LMICs). While a decrease in deaths has occurred in many high-income countries, this is not the case in LMICs, where deaths are projected to increase by 80% over the next 20 years to become the second leading cause in the global burden of disease ranking. While road safety is an intersectoral issue police have a unique opportunity to achieve road-user behaviour change (and resulting public health benefits) through intensive and strategic enforcement. Police are a lead agency for road safety across government in many LMICs. However currently, prioritisation, institutional support and capacity for road policing in many LMICs is low. In 2017, Monash University (MUARC), WHO and Victoria Police hosted a Workshop on Safe Systems and Police Enforcement for Road Safety, which was attended by Chiefs of Police in selected Pacific Island countries. The focus of this session is to present a case example of the development and implementation of a police capacity building program suitable for LMICs and to bring together operational police, researchers and related agencies to share experiences, challenges and future opportunities for traffic policing in LMICs.

Marketplace of Ideas: 9 (2 x 45 minute sessions)

Room: Carrick Room 3, Galloway Suite

9.1. Madeleine Smith, REACH Edmonton Council for Safe Communities, Canada &

Dan Jones, University of Huddersfield, England

Collaborating to provide trauma informed training to frontline workers and law enforcement members

REACH Edmonton Council for Safe Communities is a backbone organization that works to mobilize and coordinate organizations, community groups and Edmontonians to find innovative solutions to community safety and prevention. For the last 5 years REACH has supported the Trauma Informed Edmonton Committee (TIE) - a network of leading social service agencies and the Edmonton Police Services. The committee acknowledges that personal and intergenerational trauma is one of the most salient contributing factors resulting in people's involvement in the justice and correctional system. The over-arching goal is to ensure services engaging with vulnerable populations are trauma-informed. This initiative is based on a collaborative and innovative approach to delivering trauma informed training, research and networking in Edmonton. TIE's approach has resulted in front line workers and support staff creating better service outcomes for clients, which in turn contributes to harm reduction and safer communities. A short Power Point presentation will highlight a recent environmental scan of clients, perspectives on staff knowledge, and trauma informed capacity and a video of the most recent training that speaks to this effective approach to training via interviews with training participants, facilitators, and Indigenous Elders.

9.2. Helen Douglas, North Wales Police & Vicky Jones, North Wales Police and Early Action

Together Program

Improving community and individual resilience through social navigation: an early help pathway to address vulnerability

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Whilst Police demand for public welfare and safety is increasing, efforts to address vulnerability often result in 'no further action' (NFA), with many individuals unable to receive intervention to address their needs. To address the lack of early intervention and preventative activity the Early Action Together Program was developed, a collaboration between Public Health Wales and the four Wales Police Forces and Police and Crime Commissioners, in partnership with Criminal Justice, Youth Justice and third sector organisations. The programme aims to facilitate the start of a transformation of policing and criminal justice in Wales to take a multi-agency, public health ACE and trauma informed approach to vulnerability. Each force are required to develop localised early help referral pathways to address vulnerability at the earliest opportunity and where possible, before statutory intervention is required. North Wales Police are testing Social Navigation models within a policing context, a multi-agency approach which draws on local partners to find a community resolution to address presenting needs or vulnerabilities that do not meet statutory thresholds.

The session will present this model and early findings from evaluation and research video clips and animations, a case study and attendees will have the opportunity to ask questions, feedback on outcomes and share good practice.

3.30 – 4.00

AFTERNOON TEA

4.00 – 5.30

CONCURRENT SESSIONS

C16: Effective police responses to mental health related calls

Room: Ochil Room, Galloway Suite

Chair: **Stuart Thomas**, RMIT University, Australia

Presenters:

Jennifer Wood, Temple University, USA

What "counts" as good police work during mental health related encounters

Ian Cummins, University of Salford, England

Policing and mental illness: exploring the problems of definition

Jill Stavert, Edinburgh Napier University, Scotland

Supporting equal and non-discriminatory enjoyment of rights by persons with mental disabilities in crisis situations: the role of advance planning

Jeremy Tumoana, University of Otago, New Zealand

Citizen stories of police encounters while experiencing mental distress in Aotearoa

Jonas Hansson, Umea University, Sweden

The use of conducted energy weapons by the Swedish police in relation to vulnerable populations

Jolene Geh, Melbourne Health, Australia

When two worlds collide: Enhanced Critical Response Program

C17: LEPH education and training

Room: Harris Room, Galloway Suite

Chair: **Andrew Wooff**, Edinburgh Napier University

Presenters:

Matthew Green, Touro University California, USA

Thinking about justice: student and alumni feedback on the development of a new MPH concentration in health equity and criminal justice

Daliah Heller, City University of New York, USA

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Building a criminal justice pedagogy in public health: workforce development for change

Larissa Engelmänn, Edinburgh Napier University, Scotland

Policing in Scotland: the role of higher education in supporting police officer development and partnership work

Noorhan Abbas, University of Cumbria, England

Technology training: an effective tool to enhance inter-organisational information sharing

Yasmeen Krameddine, University of Alberta, Canada

Evidence-informed strategies for de-escalation and non-escalation between law enforcement and those in distress: current research for safe interactions

C18: Police well-being III - mental health

Room: Tinto Room, Lomond Suite

Chair: **Ian de Terte**, Massey University, New Zealand

Presenters:

Lynda Crowley-Cyr, University of Southern Queensland, Australia

Australian law enforcement and mental health: the dire need for action

Adam Vaughan, Texas State University, USA

Relationship between mental health training and mental health knowledge, stigma and resilience in a sample of Canadian public safety personnel

Serina Fuller, London South Bank University, England

'We are not mental health experts': distinctiveness in negotiating and protecting the police identity

Ronald Camp II, University of Regina, Canada

Leadership and psychological safety: evidence from a study with the Calgary Police Service

Shane Doyle, Central Queensland University, Australia

Stress and leadership development: what impact does eustress, distress and catastrophic stress have on the development of senior police leaders

C19: Trauma and Adverse Childhood Experiences II

Room: Moorfoot Room, Lomond Suite

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

Presenters:

Daniel Jones, University of Huddersfield, England

Women, incarceration, victimisation, offending and trauma: the overlap and the impact

Rebecca Phythian, University of Central Lancashire, England & **Justin Srivastava**, Lancashire Police, England

Safer communities in Lancashire

Kate Thomson, Glasgow Caledonian University, Scotland

Understanding and responding to child sexual exploitation in Scotland

Alan Mulholland, Police Scotland

Police Scotland: corporate parenting - joining the dots on our parenting journey

Suzanne O'Rourke, University of Edinburgh, Scotland & **Graeme Buchan**, Police Scotland

Edinburgh VOW Project: a successful collaboration between police officers and mentors with lived experience

C20: Neurocognitive disorders and law enforcement

Room: Kilsyth Room, Lomond Suite

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

Presenters:

Ron Hoffman, Nipissing University, Canada

Enhancing police officer identification of persons with intellectual disabilities

Katie Gambier-Ross, University of Edinburgh, Scotland

Staying safe 'Going Out': the experience of being missing for people with dementia

Danielle Wallace, Arizona State University, USA

Individuals with Spectrum Disorders: concerns from law enforcement officers and parents

Thijs Fassaert, Public Health Service, Amsterdam, Netherlands

Screening for brain injury in a population of frequent violent offenders

Tony Bowman, Sold Network, ARC Scotland

Neurocognitive disorders: 'Hidden in plain sight' (e.g. epilepsy, fetal alcohol spectrum disorder, acquired/traumatic brain injury)

4.00- 5.30

MARKETPLACE OF IDEAS

PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS

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

Marketplace of Ideas: 10 (2 x 45 minute sessions)

Room: Carrick Room 1, Galloway Suite

10.1. Janet Whitley, Workforce Scotland & **Dot McLaughlin**, Scottish Government

Collective leadership for Scotland

There is a growing recognition of the need for shared responsibility in leadership and action across public services in Scotland. There is a growing understanding of the need to work differently to achieve better outcomes and tackle inequalities. There is also an increasing understanding of the complex, systemic and interrelated nature of many issues that we are trying to address. With this comes the recognition that no single organisation, group or agency can tackle these alone, and that effective collaboration in support of transformed outcomes is difficult to achieve. *Collective Leadership* is an innovative programme of leadership development which works with multi-partner groups of leaders at whatever level they are in the system, seeking to tackle a societal or place-based issue for which they have day to day responsibility, actively drawing on theories and learning relevant to the issue and to leadership. *Collective Leadership for Scotland* seeks to reach beyond the boundaries of traditional hierarchies and public institutions tackling issues like mental health and policing or the links between health and justice. Session participants will be involved in activities that will focus on their own complex issues and have an opportunity to reflect on their skills in practice.

10.2. Martin Gallagher, Fil Capaldi & Nathan Claderwood, all Police Scotland, **Iain Keith**, NHS

Scotland, **Colin Atkinson**, University of West Scotland

Policing Paisley in partnership

This session will examine systemic issues in police and NHS incident management; the effect of a new substance (Etizolam) on the local violence profile; measures taken to improve NHS and Police partnerships; measures taken to mitigate rise in violence. Two complimentary but discreet projects will be presented: Joint Police and NHS SLWG formed (Acute Interface Meeting), protocols revisited, local drug scene information shared, Police undertook NHS staff briefing program. Operation Winter Shield focused on violence reduction through targeted intelligence led stop and search, licensed premises' interventions, focus on street level Etizolam supply. The Panel has been heavily personally invested in the matters above, are forward thinking

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individuals who will take questions and comments from the audience during the panel rather than this being an information download, ensuring audience participation.

Marketplace of Ideas: 11 (2 x 45 minute sessions)

Room: Carrick Room 2, Galloway Suite

11.1. Claire Coleman & Emma Croft, Police Scotland

Supporting police: understanding CAM and its foundations in the THRIVE Model

Police Scotland is rolling out the Contact Assessment Model (CAM) Project, to transform the way that Police Scotland assesses and responds to vulnerability. In addition to adopting the THRIVE assessment (THRIVE - Threat, Harm, Risk, Investigation, Vulnerability, Engagement) methodology the CAM Project will also seek to introduce a range of alternate resolution options, designed around meeting the needs of the caller. One such leading option at initial point of contact will be Mental Health Pathways (MHP).

In advance of the implementation of CAM and the MHP, the only resolution option currently available to Police Scotland Control Room / Service Centre staff dealing with distressed adult callers/people with apparent mental health issues is to arrange for police officer attendance. Whilst calls of this nature typically generate a high priority police response, police officers receive very limited training in relation to mental health. This will be an informal session where participants will understand what CAM actually means, how it is based on the THRIVE model and what the scale/scope of it is, as well as how we have implemented it – and how it is being received. We see this as an opportunity to get other policing partners to interact with us and will look for their advice, guidance and some ideas as well.

11.2. Rachel Staniforth, South Yorkshire Violence Reduction Unit, England & Melanie Palin, South Yorkshire Police, England

Fortifying our relationships

Serious and organised crime in Sheffield is rising and it is necessary to explore alternative ways of disrupting serious and organised crime. A co-located team was operationally led by a Partnership Lead (Sheffield City Council), Public Health Lead (Health Education England), and a Detective Inspector (South Yorkshire Police). This team actively shares intelligence to disrupt serious and organised crime. The public health leadership fellow is engaged as public health lead for Operation Fortify and is based within a police building and provides a public health perspective and completes the circle of prevent, prepare, protect and pursue by linking in other organisations from the wider system and bringing attention to the causes of serious and organised crime. This session will be a knowledge exchange. We have a couple of options for making the session interactive and dynamic including role and group analyses of the challenges faced.

Marketplace of Ideas: 12 (2 x 45 minute sessions)

Room: Carrick Room 3, Galloway Suite

12.1. Ian Thomson & Clare Craig, Police Scotland

Your wellbeing matters: Police Scotland's approach to wellbeing and resilience

Working within the emergency services involves exposure to stress including violent and traumatic events which can generate an increased risk of developing mental health problems including depression, anxiety disorder and post-traumatic stress disorder. Police Scotland have created the 'Your Wellbeing Matters' programme, to ensure that our officers and staff feel informed, valued and supported - physically, psychologically, socially and financially. The program offers EAP services available 24 hrs a day and TRiM, a trauma focussed peer support system. Furthermore a national network of more than 200 Wellbeing Champions has been established, all receiving NHS accredited Scottish Mental Health First Aid Training. The programme is embedding a culture where the promotion of wellbeing is integrated into all aspects of the organisation. This is creating a safe, positive and healthy working environment for all officers and staff whilst ensuring that managers are equipped with effective and practical information, policies and guidance to

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support the wellbeing of their teams. This session will include input from a serving Police Superintendent, who with 25 years police experience has lived with the challenge of suffering poor mental health throughout a large part of his service.

12.2. Caitlin Britten, Rose McNabb, Julie Reiger & Ashlee Lierich, Maryborough Educational Centre, Australia

A story of hope: a whole community's response to disadvantage

Maryborough is a pretty post-gold rush town in Central Victoria, Australia where disadvantage is manifested in avoidable death, low birth-weight babies, mental health problems, family violence, unemployment and complex high risk health compromising behaviours. Many students are affected by adverse childhood experiences. Attendance and low self-belief remain challenges for the school. However, this story is not a tragedy but of love and hope. A raft of interventions was initiated by educators to help students enjoy the present and cultivate belief in the future. This tale will include a baby-animal sanctuary, trauma-informed practice, two dogs, a 'Nurture Group', a Doctor of Philosophy (PhD) and a wellbeing farm. It will talk of students who left town to study, returning as a new generation of educators and mentors to champion their school and determined to break the cycle of poverty and disadvantage. This session will be led by two secondary school students from Maryborough Education Centre.

WEDNESDAY 23 OCTOBER

8:30-10:00

PLENARY SESSION P3

DIMENSIONS OF PUBLIC HEALTH APPROACHES TO VIOLENCE AND INJURY

Room: Pentland Auditorium

Co-Chairs: **Gillian Imery**, HM Chief Inspector of Constabulary in Scotland

Cath Denholm, Director of Strategy, NHS Health Scotland

Speakers:

- **Karyn McCluskey**, Chief Executive, Community Justice Scotland

The truth doesn't set you free

● **Raynard Washington**, Chief Epidemiologist at the Philadelphia Department of Public Health, USA

Roadmap to a safer Philadelphia: a public health approach to stop everyday "mass shootings".

- **Huw Williams**, Centre for Clinical Neuropsychology Research (CCNR), Exeter University, England.

Why understanding brain injury can enhance Trauma Informed Policing

10.00 - 10.30

MORNING TEA

10:30-11.55

MAJOR SESSIONS

M9. Autism and policing: supporting autistic individuals in police custody

Room: Tinto Room, Lomond Suite

Convener and Chair: **Chloe Holloway**, University of Nottingham, England

Presenters:

Chloe Holloway, University of Nottingham, England

Exploring the experiences of autistic individuals arrested and detained in police custody

Nicholas Clarke and **Nell Munro**, University of Nottingham, England

Going to Pot: Nick's Journey through the criminal justice system

Katie Maras, University of Bath, England

Eliciting best evidence from autistic interviewees

Danielle Ropar, University of Nottingham, England

Improving the support of autistic individuals in police custody through autism training

Duncan Collins, Nottinghamshire Police, England

Improving the custody environment: a case study

M10. Police mental health and wellbeing

Room: Moorfoot Room, Lomond Suite

Convener and Chair: **Yasmeen Krameddine**, University of Alberta, Canada

Presenters:

Ian de Terte, Massey University, New Zealand

The conundrum of working in a therapeutic manner with police officers

Teun-Pieter de Snoo, Police Academy, The Netherlands

WEDNESDAY 23 OCTOBER

Resilience: a fluffy concept in a hard world

Saralla Chettiar, Massey University, New Zealand

Developing a treatment manual based on a 3-part model of psychological resilience (3-PR) for high-risk occupations and general populations

Yasmeen Krameddine, University of Alberta, Canada

The primary prevention of post-traumatic stress injuries in a Canadian police organization: the effectiveness of an evidence-informed online training program

M11. 5 Nations' Health & Justice Collaboration

Room: Pentland Auditorium

Convener and Chair: **Éamonn O'Moore**, Public Health England

Presenters:

Kate Davies & Chris Kelly, NHS England

NHS England/NHS Improvement in delivering the long-term plan in the health and justice landscape in collaboration

Stephanie Perrett, Public Health Wales

What makes Wales unique?

Orlando Heijmer-Mason, Scottish Government

Health and justice collaboration in Scotland

Ruth Gray, South Eastern Health and Social Care Trust, Northern Ireland

Using quality improvement to enhance information flow across criminal justice organisations and designing new pathways for people in custody

Enda Kelly & Sarah Hume, Irish Prison Service, Republic of Ireland

SADA (Self-harm Assessment and Data Analysis)

M12. Collaboration and collaborative leadership

Room: Kilsyth Room, Lomond Suite

Chair: **Emma Williams**, Canterbury Centre for Policing Research, England

Presenters:

Peter Roderick, Health Education England

Collaboration for prevention: taking a whole population approach to vulnerability and anti-social behaviour in a local police force

Patrick Widell, Swedish Police Authority

Engaging the police in violence prevention: lessons learned from 20 years of prevention work in the Stockholm nightlife setting

Isabelle Bartkowiak-Theron, University of Tasmania, Australia

Working with police and community stakeholders towards community safety and wellbeing: collaborative processes in Tasmania, Australia

Julia Crilly, Griffith University, Queensland, Australia

Strengthening interagency collaborations between health and police in emergencies to optimise health, security and economic expenditure

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CV5. Breaking boundaries: bringing public health practice to public safety

Room: Tinto Room, Lomond Suite

Convener: **Kris Nyrop**, Public Defender Association, USA

Chair: **Norm Taylor**, Global Network for Community Safety, Canada

Presenters:

Brendan Cox, LEAD National Support Bureau, USA

Using public health approaches to address public safety: a police perspective

Najja Morris, Public Defender Association, USA

Using public health approaches to address public safety: a case manager perspective

Kris Nyrop, Public Defender Association, USA

Shifting the paradigm of policing behavioural health conditions: law enforcement assisted diversion

CV6. Late Breaking Session

Maurizio Barbeschi, WHO & **Nick Crofts**, Centre for Law Enforcement and Public Health, Australia

Key considerations on law enforcement and public health in public health events and emergencies

**Watch the Daily Program Updates for further presentations that may be happening in this session

CV7. Trauma Informed Organisations: what, why and how.

Room: Kilsyth Room, Lomond Suite

Convener and Chair: **Caroline Bruce**, NHS Education for Scotland (NES)

Presenters:

Caroline Bruce, NHS Education for Scotland (NES)

Leading trauma-informed approaches to law enforcement: what and why?

Jennie Young, NHS Education for Scotland (NES)

Leading trauma-informed approaches to law enforcement: how?

CV8. Road Safety

Room: Ochil Room, Galloway Suite

Convener and Chair: **Helen Wells**, Keele University, England

Presenters:

Helen Wells, Keele University, England

'Message Not Delivered': mobile phones, knowledge exchange and accessible academia

James Nunn, Loughborough University, England

Comparing the drivers involved in fatal and serious injury collisions

Leanne Savigar, Keele University, England

Fairly policing an 'unfair law' – educating drivers of the issues surrounding mobile phone use while driving

Lyndel Bates, Griffith University, Australia

Young drivers, road policing, deterrence theory and punishment avoidance

1.00 – 2.00

LUNCH

1.15 – 1.45

LUNCHTIME SESSIONS

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- L7: Callum Hutchison: "Start where you are and do what you can!"**
Callum was born and raised in a very challenging environment in Glasgow's East End. His early life was one of significant trauma, which resulted in low aspiration, exclusion, fear, addiction and crime. Both as a perpetrator and victim, Callum was no stranger to violence and prison was a regular destination for him. He then encountered life changing interventions from people and organisations he thought would be the last to help him and this has resulted in Callum turning his life around. Callum is now an experienced and inspirational mentor and public speaker. He knows first-hand how we can all make a difference
Chair: Will Linden, Violence Reduction Unit, Scotland
Room: Kilsyth Room, Lomond Suite
- L8: Greg Anderson**, Justice Institute of British Columbia, Canada
The impact of police officer stress on health and performance: a Canadian perspective
Chair: Grant Edwards, Australian Federal Police
Room: Ochil Room, Galloway Suite
- L9: Meet the Editor - an introduction to the Journal of Community Safety and Wellbeing**
Norm Taylor, Editor, Saskatchewan, Canada
Room: Harris Room, Galloway Suite

2:00 – 3:30

CONCURRENT SESSIONS

C21: Hate crime and terrorism

Room: Ochil Room, Galloway Suite

Chair: Joachim Kersten, German Police University, Muenster

Presenters:

Anton Weenink, National Police of the Netherlands

Adversity, criminality and mental health in foreign fighters from the Netherlands

Rania Hamad & Philippa Boyd, City of Edinburgh Council, Scotland

Hate crime: a collaborative approach to using restorative justice to repair the harms

Isabel Kreifels, University of Cape Town, South Africa

ISIL's recruitment of foreign fighters: public health insights for the future policing of violent extremism

C22: Incarceration

Room: Harris Room, Galloway Suite

Chair: Sunita Sturup-Toft, Public Health England & UK Collaborating Centre for the WHO Health in Prisons Programme

Presenters:

Lisa Scholin, University of Edinburgh, Scotland (presented by Stuart Kinner)

Defining research priorities for prison health in Scotland: a Delphi study

Jane Donaldson, Police Scotland

Working in partnership to support desistance in young offenders

Ashley Brown, University of Stirling, Scotland

Providing evidence to support health improvement in criminal justice settings: a case study of the Tobacco in Prisons study

Stuart Kinner, University of Melbourne, Australia

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Harnessing global data on prison and youth detention health to tackle health inequalities

C23: Mental health in institutions and institutional responses

Room: Tinto Room, Lomond Suite

Chair: **Dani Kesic**, RMIT University, Australia

Presenters:

Gayle Cummings, University of Touro California, USA

Peer support and engagement in advocacy opportunities: key elements for the mental and emotional health of exonerees

Sarah Armstrong, University of Glasgow, Scotland

What can criminologists contribute to understanding health in prison?

Asanga Fernando, Macmillan Cancer Psychological Support Team, England

Educating staff on cancer and mental health co-morbidity in prisons

Menno Segeren, Public Health Service Amsterdam, Netherlands

Determinants of post-detention recidivism: a recurrent events analysis

Catriona Connell, University of Warwick, England

Reducing reoffending and improving health: increasing occupational participation for people with criminal justice involvement and a personality disorder.

C24: LATE BREAKING SESSION – to be advised

Room: Moorfoot Room, Lomond Suite

Chair:

Presenters:

C25: LATE BREAKING SESSION – to be advised

Room: Kilsyth Room, Lomond Suite

Chair:

Presenters:

2:00 – 3:30

MARKETPLACE OF IDEAS

PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS

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

Marketplace of Ideas: 13 (1 x 90 minute session)

Room: Carrick Room 1, Galloway Suite

13. Amber Christensen Fullmer, University of Alaska, USA

Intimate partner violence (IPV) in Alaska: a focus on perpetrators of IPV using a culturally-competent response

Alaska is one of the most culturally diverse states in the United States of America. It is home to many tribes of indigenous peoples as well as a significant immigrant population representing virtually every culture on earth and has the highest rate of intimate partner violence and sex assault. The rate is significantly higher in Alaska's indigenous populations. The social, justice and correctional systems are failing to address the causative factors of intimate partner violence in the scope of perpetrator motivations. Little work is being conducted in a

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proactive, preventive arena - further entrenching harmful norms and values in our unique populations. This roundtable discussion will focus on perpetrator traits, behaviours and causative factors in the context of culturally diverse populations with emphasis on indigenous populations. The session will explore perpetrator identification, education, intervention and treatment modalities using an evidence-based, multi-disciplinary, culturally competent approach. Exploration of successful models in reducing recidivism will be explored. Intergenerational trauma and harm-reduction models with an emphasis on cultural norms and values will be explored. First responders and those in public health have the ability to respond to this public health crisis in a different, more meaningful way.

Marketplace of Ideas: 14 (1 x 90 minute session)

Room: Carrick Room 2, Galloway Suite

14. Lesley Graham, NHS National Services Scotland, Amanda O'Byrne, Police Scotland

A public health approach to police custody healthcare

The Police Care Network was established as a collaborative partnership between the NHS and Police Scotland to improve health and justice outcomes for people in care of the police, reduce health inequalities and improve community safety through reductions in offending related to health behaviours. The Network works across traditional organisational, professional and geographical boundaries providing national strategic leadership, expertise and advice in relation to the delivery of healthcare and forensic medical services for people in police care. This collaboration has helped to provide holistic, person centred care to those in police custody. This session will showcase the model and demonstrate how by working together NHS and Police Scotland have made the transition from traditional, security orientated custody suites to community justice hubs which focus on health improvement and reducing reoffending as well as criminal justice processes. The session will include short presentations with time for discussion, including the facilitation of ideas on how wider partners can contribute to supporting people through the criminal justice pathway.

Marketplace of Ideas: 15 (2 x 45 minute sessions)

Room: Carrick Room 3, Galloway Suite

15.1. Carolyn Bruce, University of Glasgow, Scotland

Taking a trauma informed lens to law enforcement

There is widening recognition that the experience of engaging in the criminal justice process for survivors of traumatic experiences such as rape and sexual assault can fail to support recovery and actively re-traumatise, leading to disengagement and poor recovery. This workshop will describe a multi disciplinary training and workshop held on the Isle of Shetland for the development of a trauma informed pathway that supports recovery and minimises re-traumatisation for those reporting rape or sexual assault. A multi-disciplinary, multi-agency workshop was facilitated for staff from almost every organisation on the island with a role involving rape and sexual assault survivors. Participants used a trauma informed lens together to identify and evaluate every stage of the survivor journey in terms of the collection of evidence and support of psychological recovery, including all procedures, processes, contacts, examinations, policies, communications, interactions and environments. After summarising the approach taken on Shetland and relevant implications, participants in this session will use the animated film "Opening Doors" (8 minutes) and prompts provided to create their own trauma informed lens through which to examine their own practice and organization, identifying areas of strength and a plan for any areas for change.

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15.2. Paul Pedersen, Sudbury Police Service, Ontario, Canada

Looking ahead to build the spirit of our women: Learning to Live Free from Violence Project

In response to the issue of Missing and Murdered Indigenous Women and Girls (MMIWG) gaining national attention, the Greater Sudbury Police Service (GSPS) committed to explore and develop an action plan to respond. In 2014, a partnership was established consisting of members of the N'Swakamok Native Friendship Centre and the GSPS. The mandate was to develop community based strategies designed to address and bring awareness to MMIWG, effectively engaging Ontario and specifically Indigenous communities to end the cycle of violence. These strategies would include systems to ensure future generations of Indigenous women can live the way they deserve — with safety and respect. An innovative and unique approach was the recruitment of a paid civilian Aboriginal Women's Violence Prevention Coordinator (AWVPC). The project came to life under the name 'Looking Ahead to Build The Spirit Of Our Women-Learning To Live Free From Violence'. This Marketplace session will explore the mutual benefits of multi-agency collaboration for staffing solutions and discuss the lessons learned and results achieved from a grass-roots local approach to national and multi-generations issues.

4.00 -5.00

CONCURRENT SESSIONS

C26: Vulnerable populations

Room: Ochil Room, Galloway Suite

Chair: **Greg Denham**, Law Enforcement and HIV Network, Australia

Presenters:

Nicoletta Policek, University of Cumbria, England

Medical citizenship and HIV: the untold stories of stateless populations

Luciana Pol, Centre for Legal and Social Studies, Argentina

The health consequences of crowd-control weapons

C27: Learning about and living LEPH

Room: Harris Room, Galloway Suite

Chair: **Stuart Thomas**, RMIT University, Australia

Presenters:

Dave Burnside, Auckland University of Technology, New Zealand

He kohikohinga purakau whanau (Collection of whanau stories) about experiencing mental health distress and/or addiction while in the justice system

Shannon Walding, Griffith Criminology Institute, Australia

Developing respect through mentoring and education: for self, others and police

Ruth Martin, University of British Columbia, Canada

Releasing Hope: women's stories of transition from prison to community

Jane Mulcahy, University College Cork, Ireland

Restorying offending behaviour as a normal symptom of trauma

C28: LEPH in Low and Middle Income Countries

Room: Tinto Room, Lomond Suite

Chair: **Nick Crofts**, Centre for Law Enforcement and Public Health, Australia

Presenters:

Hannata Janada Dimas, Nigeria Security and Civil Defence Corps

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The drivers of the cholera epidemic in North-East Nigeria

Kanockon Ngamnak, Ministry of Public Health, Thailand

Alcohol availability and patterns of drinking behaviour: binge drinking, regular drinking and drink driving

Apichat Chotchusee, Ministry of Public Health, Thailand

Thailand situational report on Alcoholic Beverages Control Law abidance at provincial level

C29 Our rights and what works for us

Note: This presentation and facilitated discussion occupies the whole session

Room: Moorfoot Room, Lomond Suite

Tony Bowman, Sold Network, ARC Scotland

Steve Robertson and SOLD users group

James McNab

Paul Roberts

Allan Spiers

5.00 – 5.50

CLOSING PLENARY SESSION P4