

# LEPH2012

MELBOURNE  
AUSTRALIA  
11-14 NOV

The First International Conference on Law Enforcement & Public Health

SIDNEY MYER ASIA CENTRE, UNIVERSITY OF MELBOURNE

CONFERENCE PROGRAM



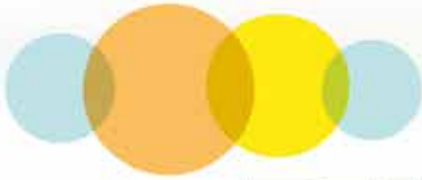
**CLEPH**  
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# Welcome from the Conference Director

On behalf of the Centre for Law Enforcement and Public Health and the Nossal Institute for Global Health, I have much pleasure in welcoming you to the First International Conference on Law Enforcement and Public Health.

Most of us work at the intersection of these two sectors. We are public health practitioners who depend critically on police and other arms of law enforcement to achieve our public health goals. We are police who are dependent on the public health system to deal with complex social issues, for which there are no easy solutions but great urgency and need. We are all constantly aware in our daily work of the value of the partnership. This awareness stimulated the calling of this first Conference.



But three realisations have been increasingly evident to us in our work and dramatically through the organising of this Conference. Firstly, the enormous breadth of the partnership, ranging across a huge list of complex social and health issues of importance to both sectors, of which the Conference themes highlight merely a sampling of the more important. Secondly, the lack of recognition of the general importance of the partnership both within police and within public health circles. Thirdly, the paucity of studies of the nature and characteristics of successful partnerships between these two worlds.

Police in particular are inadequately recognized as key partners in the public health enterprise, whose multi-sectorality and multi-disciplinarity are proud badges of its uniqueness. The contribution of police and other law enforcement personnel to achieving public health goals, while recognised by individual public health practitioners in their own field, are not recognised in the broad rubric of public health.

If the partnership is not valued, it is not studied or its value taught. If it is not studied, we cannot work on improving it, nor teach its benefit and operation.

This Conference is an attempt to create a space to enhance communication between two sectors traditionally seen to have different goals, different cultures and different languages. We hope that the demonstration here by world leading academics, leading public health practitioners, police engaged in policy development and police engaged in street-level operations as well as many others, will go some way to convincing all of the breadth and importance of the partnership. Hopefully it will set the scene for an expanding dialogue, research effort and collaboration.

The Conference would not have happened without partnership support from the Australian Institute of Police Management, the Victoria Police, the Public Health Association of Australia and the International Development Law Organization. The significant funding support from the Victorian Department of Health, the City of Melbourne, the Transport Accident Commission and Vic Health is highly valued. We are immensely grateful for their enthusiasm and visionary support. Recognising that the police-public health collaboration addresses the most pressing of practical and social issues, we have created a showcase for those who have made innovative approaches to tackling such matters through partnerships, and we are grateful to Lifeline for their support for our Marketplace of Ideas where much of this work will be demonstrated.

To you, as delegates, welcome. I hope you find the program engaging, useful and inspiring – and that partnerships formed at and through the Conference, recognising the true worth of each other's contribution to our own goals, continue to thrive.

Nick Crofts  
Conference director

# Conference Supporters



# Conference Organising Committee

**Bill Stronach, (Co-Chair)**, Centre for Law Enforcement and Public Health

**Matthew Allen, (Co-Chair)**, Nossal Institute for Global Health

**Professor Nick Crofts**, Centre for Law Enforcement and Public Health

**Lisa Fitzgerald**, Nossal Institute for Global Health

**Dean Griggs**, City of Melbourne

**Associate Professor Steve James**, University of Melbourne

**Melissa Jardine**, Nossal Institute for Global Health

**Brigitte Tenni**, Nossal Institute for Global Health

**Dr Nick Thomson**, Centre for Law Enforcement and Public Health

**Nicole Turner**, LEAHN (Law Enforcement and HIV Network)

## PROGRAM ADVISORS

### **Professor Nick Crofts (Chair)**

Director, Centre for Law Enforcement and Public Health  
Honorary Professorial Fellow, Melbourne School of  
Population Health, University of Melbourne

### **Matthew Allen**

Program Officer, Nossal Institute for Global Health

### **Dr Lee Barclay**

Prevention and Population Health Branch  
Victorian Department of Health

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Head, Justice Health Research  
Kirby Institute, University of New South Wales

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### **Superintendent Graham Kent**

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### **Associate Professor Stuart Kinner**

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Senior Research Fellow  
Centre for Population Health  
Burnet Institute

### **Brigitte Tenni**

Senior Technical Advisor- HIV  
Nossal Institute for Global Health  
The University of Melbourne

### **Dr Nicholas Thomson**

Director, Centre for Law Enforcement and Public  
Health Field Director, Johns Hopkins Bloomberg  
School of Public Health;  
Senior Research Fellow, Nossal Institute for  
Global Health

### **Nicole Turner**

Law Enforcement & Harm Reduction Coordinator  
Nossal Institute for Global Health

# Delegate Information

## Assistance and help

If you require assistance of any type please talk to one of the conference staff or volunteers. They will be identified by the red name badges. There will always be staff or volunteers at the Registration and information desk.

## ATMs

Are located on campus near the Union Hall (NAB and Commonwealth).

## Catering

Morning tea, lunch and afternoon tea will be provided at a number of catering stations on the ground floor of the Sidney Myer Asia Centre. There is a pleasant outdoor area adjacent to the building which will be accessible if desired and the weather is fine.

## Dietary requirements

If you have requested special dietary requirements when you registered for the conference, these lunches will be located in a signed area. Please contact the conference staff if you have any problems.

## Marketplace of Ideas:

This area in the YHM Room (see Room Locations) is a more casual venue that will be available as a meeting space to share ideas, chat and network. Please use it.

In the afternoons, part of the Marketplace will be the venue for a series of less formal presentations. PowerPoint and other audio visual equipment may be in use in this sectioned off area. You should feel free to come in and participate in these sessions, or just use the Marketplace for a quiet chat during these times. However, please be aware of these presentations and be as courteous as possible.

## Media

Members of the media are requested to check-in at registration on arrival. The LEPH2012 Media Manager or their staff will meet you.

There is a dedicated media room available on request for interviews.

## Name badges

Name badges on lanyards must be worn at all times. Admittance to sessions will only be gained by those wearing name badges.

If you misplace your name badge please see staff at the Registration and information desk for a replacement.

## Photography

During LEPH2012, and all related activities and events, photographs may be taken of delegates. These photos may be used by the conference organisers in publications, newsletters and websites as part of reports on the conference. If you have any concerns regarding this, or do not wish your photo to be published in any way please talk to staff at the registration and information desk.

## Printing or photocopying

The nearest facility for printing or photocopying is located about 2 minutes walk away. Please get directions from the Registration and information desk.

## Program

Every endeavour has been made to provide an accurate program in the conference handbook. However, the conference organisers reserve the right to change the program at any time without notice.

Late changes to the program will be posted on notices throughout the conference areas being used in the Sidney Myer Asia Centre.



## Publication of proceedings

Once the conference is over it is likely that some/all of the proceedings will be published on-line. All registered delegates will be advised when this occurs.

## Registration and information desk

The registration and information desk will be located on the ground floor of the Sidney Myer Asia Centre.

It will be open at the following times;

Sunday 11 November:	4.00 pm – 7.30 pm
Monday 12 November:	7.30 am – 5.30 pm
Tuesday 13 November:	8.00 am – 8.30 pm
Wednesday 14 November:	8.00 am – 5.30 pm

## Session Chairs

Please make sure that you are in your specified room at least 10 minutes before the commencement of the session. Hopefully you will have been in contact with all the presenters in your session and with the designated LEPH2012 staff member who will be in your session room at all times to provide assistance if needed.

## Smoking

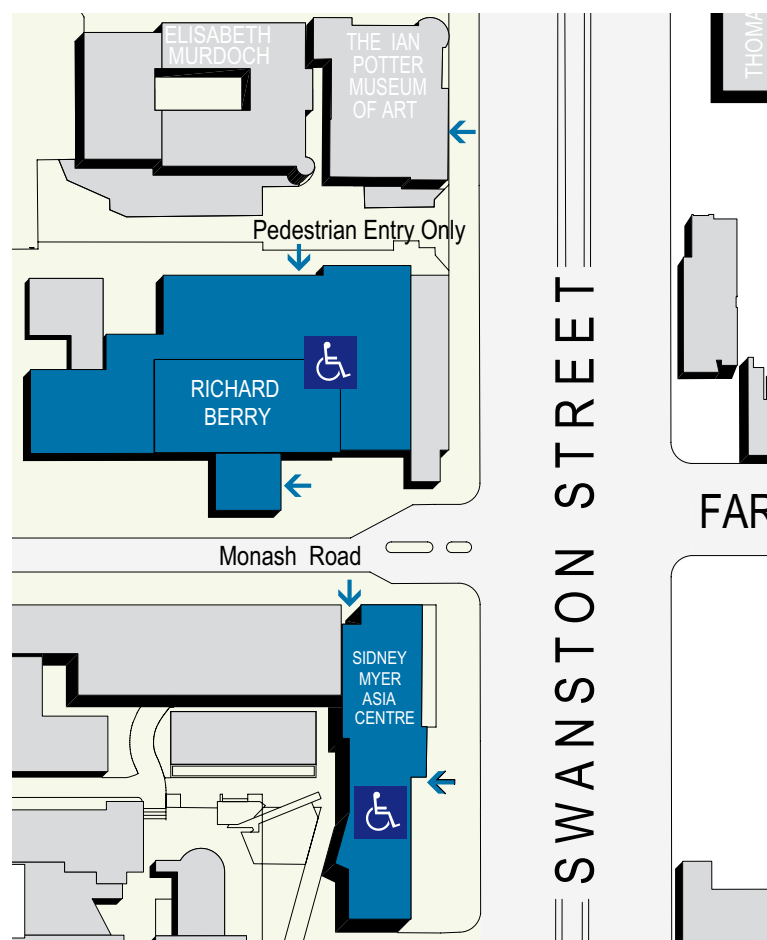
Smoking is not permitted anywhere inside university buildings.

## Storage

There is very limited storage available at the venue. Please see staff at the Registration and information desk if you need assistance.

## Room locations

- All plenary sessions:  
**The Carrillo Gantner Theatre** which is located in the lower ground floor of the Sidney Myer Asia Centre. Access stairs and ramps are at the 'city end' of the building.
- Concurrent major sessions:  
**The Carrillo Gantner Theatre**  
**The J. H. Mitchell Theatre** in the adjacent Richard Berry Building  
**The Russell Love Theatrette** in the Richard Berry Building
- The Marketplace of Ideas:  
**The Yasuko Hiraoka Myer Room (YHM Room)** on the first floor of the Sidney Myer Asia Centre (access by stairs and lifts)
- The screening of Mad Bastards on Tuesday 13 November at 5.30pm: The Carrillo Gantner Theatre





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# Keynote and Plenary Speakers



## **Gil Kerlikowske**

R. Gil Kerlikowske is Director of the Office of National Drug Control Policy. In this position he coordinates all aspects of Federal drug control programs and implementation of the President's National Drug Control Strategy. Mr. Kerlikowske brings 37 years of law enforcement and drug policy experience to the position. He most recently served 9 years as the Chief of Police for Seattle, Washington after similar positions in other cities. He was elected twice to be President of the Major Cities Chiefs and also President of the Police Executive Research Forum. He served in the U.S. Army where he was awarded the Presidential Service Badge.

He served as the Chair of the Board of Directors of Fight Crime: Invest in Kids, a national organization and on the advisory boards of the Salvation Army in Buffalo and Seattle. Mr. Kerlikowske holds a B.A. and M.A. in criminal justice from the University of South Florida and is a graduate of the F.B.I. National Executive Institute in Quantico, Virginia.



## **Chris Brook**

Professor Chris Brook is the Executive Director, Wellbeing, Integrated Care and Ageing for the Victorian Department of Health. This role focuses on prevention and population health; aboriginal health; integrated care - including the primary, sub acute and hospital diversion programs; aged care; workforce policy and planning in the health sector; and internal departmental human resource functions. He is also the State Health and Medical Commander for Emergency Management. Chris' original postgraduate training was as a specialist physician but he has subsequently gained specialist qualifications in public health medicine, and in medical administration. In 2011 he was awarded a Public Service Medal.



## **Scott Burris**

Scott Burris is Professor of Law at Temple Law School where he directs the Center for Health Law, Policy and Practice and the Robert Wood Johnson Foundation's Public Health Law Research program. He is also Associate Director of the Centers for Law and the Public's Health: A Collaborative at Johns Hopkins and Georgetown Universities. Scott began his career in public health law during the early days of the HIV/AIDS epidemic. Since joining the Temple faculty in 1991, his research has focused on how law influences public health and health behavior. Scott is a graduate of Washington University in St. Louis and the Yale Law School.



### **Tom Calma AO**

Dr Tom Calma was appointed in 2010 as the inaugural National Coordinator for Tackling Indigenous Smoking. Prior to this he was the Aboriginal and Torres Strait Islander Social Justice Commissioner at the Australian Human Rights Commission for five and a half years. Dr Calma is an Aboriginal elder from the Kungarakan tribal group and a member of the Iwaidja tribal group whose traditional lands are south west of Darwin and on the Coburg Peninsula in the Northern Territory. He has been involved in Indigenous affairs at a local, community, state, territory, national and international level and worked in the public sector for 38 years.

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### **Assistant Commissioner Dave Cliff**

Dave Cliff joined the police force in 1983 and has worked in a range of general duties, criminal investigation and road policing positions around New Zealand. He also worked in Vietnam and Argentina advising on road safety issues. In November 2005 he was appointed the National Road Policing Manager at Police National Headquarters in Wellington. After his appointment as District Commander for the Canterbury Police District, he led the police response to both earthquakes for which he was made an Officer of the New Zealand Order of Merit. He assumed his current role as Assistant Commissioner with responsibility for policing within the South Island in September 2011.

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### **Jennifer Coate**

Her Honour, Judge Jennifer Coate has been the State Coroner of Victoria since 2007. She has worked as a solicitor in private practice for the Legal Aid Commission of Victoria and in policy and research for the Victorian Government. Judge Coate was appointed as a Magistrate in 1992 and as Senior Magistrate of the Children's Court in December 1995. In 1996, she became Deputy Chief Magistrate and in 2000 she was appointed as a Judge of the County Court and the inaugural President of the Children's Court of Victoria. She was also a part-time Law Reform Commissioner from 2001 to early 2008.

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### **Peter d'Abbs**

Dr Peter d'Abbs is Professor of Substance Misuse Studies at the Menzies School of Health Research in Darwin, Australia. He also holds adjunct positions with the School of Population Health, University of Melbourne and at James Cook University, Queensland. He is a sociologist with a research background in alcohol and other drug policy issues and in program evaluation, much of it conducted in northern Australia. His projects include a review of interventions into volatile substance misuse, a national evaluation of the rollout of Opal low aromatic fuel in communities affected by petrol sniffing and evaluations of alcohol management plans.



### **Martin Donoghoe**

Martin Donoghoe is the HIV/AIDS, STIs and Viral Hepatitis Programme Manager for the World Health Organization's Regional Office for Europe. The programme is committed to responding to the public health challenges of HIV/AIDS in all 53 Member States of the European Region. He is also the Senior Adviser on HIV/AIDS, Injecting Drug Use and Harm Reduction for the WHO European Region.

Martin recently led the development and adoption of the European Action Plan on HIV/AIDS 2012-2015. He has extensive national and international experience in, and has published widely on HIV/AIDS prevention, particularly for injecting drug users and other marginalised and criminalised populations .

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### **Ernest Drucker**

Ernest Drucker is Professor Emeritus in the Department of Family and Social Medicine, Montefiore Medical Center/Albert Einstein College of Medicine; Adjunct Professor of Epidemiology at Columbia University's Mailman School of Public Health and Senior Research Associate and Scholar in Residence at John Jay College of Criminal Justice of The City University of NY. He is a member of the teaching faculty of the Bard Prison Initiative. Professor Drucker is a clinical psychologist in NY State and conducts research in AIDS, drug policy and prisons and is active in public health and human rights efforts in the US and abroad. He has authored over 100 peer reviewed scientific articles, texts, and book chapters.

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### **Joachim Kersten**

Joachim Kersten is Foundation Professor and Chair of Police Science at the German Police University in Muenster, Germany. He has a Masters in Political Science from McMaster University and a Doctorate in Social Science from the University of Tuebingen. Amongst many academic appointments he has previously been a Senior Research Fellow and Senior Lecturer at Deutsches Jugendinstitut in Munich; in Criminology at the University of Melbourne and Professor of Sociology at the University of Applied Police Sciences, Villingen, Germany. His major research interests include restorative justice and the policing of minorities in Germany.

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### **Libby Lloyd AM**

Libby Lloyd was Chair of the Australian Government's Violence against Women Advisory Group from 2009-2011. She also served as the Chair of the former National Council to Reduce Violence against Women and their Children (2008-09) which delivered 'Time for Action – the National Council's Plan to Reduce Violence against Women and their Children'. Libby is also a member of the Council for Australian Arab Relations (CAAR) and the Ministerial Advisory Council for Asylum Seekers and Detention. She is a past President of UNIFEM (the United Nations Development Fund for Women) in Australia and is a founding and continuing Board Member of the White Ribbon Foundation.



### **Cr Geoff Gough**

Councillor Geoff Gough was elected to Manningham City Council, Victoria in 1997 and served continuously to the present day winning 6 elections. He has served as Mayor for four terms. He is currently Vice President of the Municipal Association of Victoria being first elected to the board in 2005 and as the Victorian representative on the Australian Local Government Association Board. Cr Gough has worked for 32 years in the area of special education and now runs a business in skills training. He has served on a number of state government advisory boards, community boards, cemetery trusts and for five years was a member of the liquor licensing panel for Victoria. He is also currently a board member of Victorian Interpreting and Translation Services Inc and the MCA - a nursing home and aged services provider.

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### **Karyn McCluskey**

Karyn has worked in the police for the last 15 years in Sussex, UK as head of intelligence analysis and was responsible for setting up the intelligence analysis function. In 2004 she wrote the report on Violence Reduction for Strathclyde police proposing a different way of addressing violence in Scotland. She subsequently established the violence reduction unit. In 2006 it was made a National Unit and lead on violence reduction in Scotland. She is an Honorary Lecturer in Medicine at the University of Glasgow, and is a Fellow, by distinction, of the Faculty of Public Health – an arm of the Royal College of Physicians.

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### **Geoff Monaghan**

Research Fellow, Semeion Research Center for the Science of Communication, Rome, Italy.

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### **Lucinda Nolan**

Lucinda Nolan is the Deputy Commissioner, Strategy and Organisational Development for Victoria Police. In this role she is responsible for the development of strategic policy, practice and service delivery to ensure Victoria Police achieves all of its stated outcomes. She is also currently managing some significant projects, including the recruitment and deployment of 1700 additional police officers and 940 protective services officers. She has been a member of Victoria Police for 29 years and has a broad and diverse background, encompassing frontline policing, criminal investigations and taskforce work, internal investigations, strategy and planning, education, intelligence management, and media and corporate communications.



### **James R. P. Ogloff**

Professor James Ogloff is a lawyer and psychologist. He is Foundation Professor of Clinical Forensic Psychology at Monash University and Director of the Centre for Forensic Behavioural Science. He is also Director of Psychological Services at the Victorian Institute of Forensic Mental Health (Forensicare). He has specific expertise in the development and implementation of services for mentally ill people in the criminal justice system. He served as British Columbia's first Director of Mental Health Services. Professor Ogloff has published extensively. He received the 2012 Donald Andrews Career Contributions Award for Criminal Justice Psychology from the Canadian Psychological Association and the 2009 Award for Distinguished Contributions in Forensic Psychology from the Australian Psychological Society.

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### **Andrew Scipione**

Commissioner Andrew Scipione was appointed Commissioner of NSW Police in 2007 after joining the force in 1980. This followed a period of employment with the Australian Customs Service. He has held a range of positions including general and traffic duties, and work as a detective in the CIB. He was subsequently seconded to the National Crime Authority in 1985. During the period 1992 to 1998 he was also a Senior NSW Police Counter Terrorist Advisor to SAC-PAV. Commissioner Scipione is a recipient of the Australian Police Medal and the National Medal. He holds a Masters degree in Management (Macquarie University), a Graduate Diploma in Police Management (Macquarie University) and a Graduate Certificate in Security Management (Edith Cowan University).

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### **Mark Stevenson**

Professor Stevenson is an epidemiologist and Professor and Director of the Monash University Accident Research Centre at the Monash Injury Research Institute. He is a National Health and Medical Research Council Fellow, an Honorary Professor at the Peking University Health Science Center and a Lifetime Fellow of the Australasian College of Road Safety. He has extensive research experience in road trauma and considerable public health experience in low income countries, including as a consultant for the World Health Organization, UNICEF and the Swedish International Development Agency. Professor Stevenson is an advisor for injury to the Director General of the World Health Organization.

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### **Auke van Dijk**

Auke van Dijk is adviser to the Chief of the Amsterdam Police and strategist at the think tank Agora Police & Security. His fields of expertise included the future of policing, co-operation in the field of security, crisis organization, counter terrorism and constitutional law, and changing relations between internal and external security. He was a member of the Project Group Vision of Policing of the Board of Chief Commissioners of the Dutch Police which developed a new vision and strategy. In 2006 he was co-founder of Agora Police & Security whose aim is make sense of the societal context and its current or future consequences for day-to-day policing.

# Plenary Session Abstracts

## PLENARY SESSION P1: SETTING THE SCENE

**Deputy Commissioner Lucinda Nolan.**

### **The partnership in Victoria – the police view**

This plenary session will set the scene for the conference by outlining some of the challenges and benefits of agencies working in partnership from the perspectives of three key sectors – policing, health and local government. From the policing perspective, Deputy Commissioner Lucinda Nolan will discuss the importance and role of partnerships in enabling Victoria Police to achieve its community safety outcomes. She will highlight the unique position that police hold in the broader service system as the agency of first – or last – resort for many people whose health issues cause harm to themselves or to those around them. Deputy Commissioner Nolan will explain how this unique position presents police with an opportunity to divert people into health services and away from the criminal justice system and how seizing this opportunity requires ongoing collaboration between police and health professionals at all levels. She will conclude with some observations about the features of effective partnerships and their potential to enhance overall service delivery.

**Professor Chris Brook PSM.**

### **The partnership in Victoria the view from health**

This presentation will provide an overview of areas of collaboration between health, law enforcement and local government in Victoria, taking both an historical and contemporary perspective across complex issues such as road safety, infectious disease control and emergency management. Professor Brook will also draw on his experiences in his role as State Health and Medical Commander for Emergency Management to discuss principles of cross sector collaboration in crisis situations.

**Cr Geoff Gough.**

### **The partnership in Victoria – the role of local government**

Local government directly influences the key ingredients of health and well-being of the community. Leading local policies in transport, parks, waste, land use, housing, recreation and cultural activities and creating safe public places all contribute to community wellbeing. Councils are also responsible for management of the environment and public spaces and for infrastructure such as roads, footpaths and community facilities, and for emergency management in conjunction with other key agencies. Providing protective services such as immunization, animal control, food safety and tobacco control also contribute to public health. Community wellbeing is enhanced through services such as maternal and child health, home and community care and youth services and community development.

Local government has always been active in this arena and over the past 20 or so years, councils have also increasingly been involved with community safety and the intersection between land use planning, local policing and public health – with the density of alcohol outlets being a case in point.

Most recently, councils have been at the forefront of preventative initiatives, with the prevention of violence against women being a key policy priority within councils' health and wellbeing plans. Building respectful and non-violent communities is supported in Victoria through a funded initiative in selected councils and through research, evidence, partnerships and most importantly cross-sectoral leadership.



## PLENARY SESSION P2: EXPLORING THE ROLE OF POLICE

**Professor James Ogloff.**

### **Principles and opportunities in developing enhanced strategies for policing people with mental illness**

There can be little doubt that the plight of the mentally ill in the criminal justice system, and the frustration faced by both police and mental health services, can be improved by building on recent research findings in Victoria and elsewhere. Surprisingly little systemic attention has been paid to the challenges faced by policing people with mental illnesses in the community. The police are forced to employ creative ad hoc options to resolve encounters with mentally ill people that they would not use if mental health resources were more forthcoming. Perhaps surprisingly, the primary challenge facing police in resolving situations with people experiencing mental illness is gaining support from mental health services. A whole of government response and political willingness is required to address the issues arising to enable ministries to work together.

Ultimately, it is important that diversion from justice is available to people with mental illnesses who do not pose a risk of significant violence and who have not committed a serious offence. Appropriate services and expert staff are required to deal with people with mental illnesses who commit more serious offences. Only with a coordinated systematic focus on the problems that affect people with mental illnesses coming into contact with the police, can meaningful advances be made. This presentation will note some developments that can help address problems that arise in policing people with mental illnesses (police training, training of mental health staff, service system development, specialist models that suit the needs of particular regions or circumstance).

Beyond the specific models that could be developed to integrate police and mental health, better linkages are required between police and area mental health services. Finally, it is important to have integrated mental health services within justice agencies, including police and corrections (prisons and community corrections).

**Prof Mark Stevenson.**

### **The Road to Success: Road Policing and Public Health**

Road traffic injuries are a significant public health problem. Injuries incurred across the road network are the leading cause of injury mortality and morbidity globally and by 2030, are predicted to be the 5th leading cause of mortality in the world. Australia has seen dramatic reduction in road deaths and serious injuries since the 1970's and holds an international reputation for road traffic injury prevention due, in part, to its success in pioneering the multidisciplinary and inter-sectoral approach needed to address this significant issue and by applying an evidence-led approach to policy development. Australia's early success in road traffic injury prevention (road safety), was achieved by implementing targeted programs that focused on road user behaviours. The most successful of these programs was the introduction of comprehensive seat belt laws, random breath testing and more recently, strategic speed enforcement programs. Considerable emphasis over the past decade has also been placed on a Safe Systems approach to road safety which continues to focus on the road users behaviour but importantly, focuses prevention efforts across the entire road system and therefore places renewed emphasis on the road infrastructure and the vehicles in order to minimise the likelihood of injury in the event of a crash and importantly, early post crash intervention.

In the Australian state of Victoria, the state's ability to reduce road fatalities and serious injury has resulted in Victoria having "...roads and road users that are among the safest in the world". Despite an array of successful prevention strategies that have contributed to the decline in road fatalities and serious injuries, there is no one action that can be attributed to the decline in road fatalities observed in Victoria since the 1970's. Rather, the following elements have been integral to the success observed namely, i) the state's road safety policies have been evidence-based, ii) there has always been extensive and effective collaboration between the government agencies, iii) a high-level of community engagement and iv) there have been high profile champions at key stages over the 4 decades. These elements clearly highlight the nexus between road policing and public health.

The presentation will illustrate the value of the road policing and public health partnership. It will then describe the currency of road policing and public health using a case-study from China in which road policing and public health achieved measureable road safety gains in a short timeframe. The presentation will conclude by discussing the significant challenges facing the transport system in the years ahead and the impact these will have on road policing and particularly public health. These challenges are not insurmountable and the presentation will conclude with the exciting opportunities evolving for road policing and public health from the application of information and communication technologies to the transport system.

**Commissioner Andrew Scipione APM.**

**Regulating alcohol, minimising the damage: the police role in the public health partnership**

Alcohol consumption is a socially acceptable activity that has arguably become a cultural expectation. However, many people demonstrate an inability to drink responsibly, becoming intoxicated to the extent that their behaviour places them and others at risk.

No other substance or issue occupies more police time; is more difficult for police to manage; involves police in more grief and trauma; and puts police at risk of physical harm, than alcohol misuse. Crime, violence and anti-social behaviour associated with alcohol misuse and abuse have become critical issues with significant consequences for the individual, the health system, and police. They have a major impact not only on police resources but also on the public health system, both in terms of short-term provision of health services (Ambulance and Emergency Department presentations) and for the treatment of chronic health impacts.

In this address, Commissioner Scipione explores the emerging culture and impacts of alcohol misuse; the law enforcement and public health responses that are currently being put in place; and the need to fundamentally reflect on and challenge our drinking culture.

**PLENARY SESSION P4:  
THE MULTIPLE INTERSECTIONS OF LAW ENFORCEMENT AND PUBLIC HEALTH**

**Judge Jennifer Coate.**

**A coroner's view of the relationship between law enforcement and public health**

The Australian coronial system is based on an independent legally-focused inquiry with an explicit mandate on public health and safety and the administration of justice. This system was originally derived from the United Kingdom. It has changed and developed much since that time.

The modern coronial system may intersect with law enforcement and public health in a myriad of ways. These may include deaths as a result of police shootings; police motor vehicle pursuits; physical and / or chemical restraint; physical altercations, sieges and/or domestic violence interventions, transportation and temporary custody of a person to a medical practitioner under Section 10 of the Mental Health Act, 2006 (Vic), intervention in suicide attempts, deaths in police cells, deaths in psychiatric facilities and deaths in child protection care, to name but some.

The information generated for and examined by coroners during such investigations provides the basis for coroners to find, as best they can, the cause of death, and the circumstances in which the death occurred and in the course of so doing, with the range of powers available to coroners, to contribute to a reduction in the number of preventable deaths and the promotion of public health and safety and the administration of justice.

**Professor Scott Burris.**

**The public health and social work of the police: If we ignore it, will it go away? If we acknowledge it, will anything change?**

This conference is built on the recognition that police activity has some clear effects on health. To start with the obvious, police are instrumental in reducing the number of people who are murdered, assaulted, raped, or otherwise terrorized. Policing – like any form of social intervention – can also have unintended consequences. There is, for example, considerable evidence that criminal law and legal practices can increase risks of HIV and other harms among drug users. It is also true, however, that every day police are doing things that look like public health or social work – or miss the opportunity to do so. This talk will consider the social and health work that is or could be an integral element of law enforcement in the 21st century. In much of their day to day work, police are the first responders to citizens in health distress, especially acute distress, and to people engaging in risky behavior like commercial sex and drug use; thus they are triage officers and gate keepers – sometimes transportation providers – to services; moreover, for some classes of people in distress, the police and the criminal justice system has become a site of treatment and/or a treatment provider. Austerity has and will increase the intensity of these roles: fewer other public responders will be available; competition for resources and the demands for efficiency may lead to more concentration of services within law enforcement and criminal justice. Are we ready to move from tacit acceptance of these phenomena to active engagement with them? And if we do recognize and engage them, is there space in governance and professional culture for a new set of identities and relationships to flourish? Those are the important questions for this conference.

**Professor Peter D'Abbs.**

**Alcohol, community action and the role of police: lessons from Northern Territory initiatives**

In recent years governments in many jurisdictions, including Australia, have moved to shift responsibility for managing problems arising from alcohol misuse away from centralized authorities towards more localized agencies, for example through local governments, 'accords' among licensees, and community-based alcohol management plans.

Initiatives of this kind entail both challenges and opportunities for local police. Put simply, where police engage pro-actively with other community agencies and groups, they can play a pivotal role in shaping the effectiveness of local initiatives. Where they choose not to do so, other agencies often struggle to build a cohesive, effective coalition in a context of competing interests and conflicting definitions of the problem.

In this presentation, I examine a number of case studies from northern Australia where police have played an important role in helping to develop effective community-based alcohol strategies, with a view to drawing lessons for application elsewhere.

## **PLENARY SESSION P5:**

### **THE MULTIPLE INTERSECTIONS OF LAW ENFORCEMENT AND PUBLIC HEALTH**

**Assistant Commissioner Dave Cliff.**

**Police and public health: a New Zealand perspective**

The New Zealand experience of policing as it intersects with the public health sector is illustrated through reference to a variety of scenarios. These include the partnership approach to frequent mental health presenters, the role of watchhouse nurses and the challenging context of alcohol licensing enforcement. This intersection is well illustrated through the monitoring of various statistics like crash casualty reporting rates through admissions to hospitals and ADAM (Alcohol and Drug Addiction Monitoring).

**Dr Tom Calma.**

**Auke van Dijk.**

**Policies to practice: the Dutch experience**

In the Dutch city of Amsterdam – probably as in almost every city – a relatively small group of repeat offenders is responsible for a considerable amount of crime. In the last decade or so this has led to established ways of working especially aimed at repeat offenders. However, a hard core of offenders seems to be immune to the numerous interventions by sometimes (seemingly) numerous professional organizations. In recent years, crime rates were going down but there was an increase in crime with a high impact on victims like street robberies, muggings, burglaries, serious abuse and public violence against persons. The crimes are often committed by young (and armed) adults. And, to add to the frustration, the police know who they are! And, many other professionals have dealt with these offenders as well. Obviously, something is not working! The Top600 offenders were selected for a new approach. Together they had 15,000 police contacts in the last five years. Central to the new approach is a truly horizontal collaboration between all professionals and integrated interventions. This leads to a number of intriguing questions about the future of policing, and its relation to health care: for example, can – or should – a health care practitioner in some cases direct police interventions? It is one of the possible consequences of the concept of nodal policing (Johnston & Shearing 2003). The approach chosen in Amsterdam has led to some interesting new insights into the repeat offenders, and to fundamental insights – some inspiring and others sobering – in how law enforcement and health care are – and could be – intertwined.

In this paper we will start at an abstract level in discussing the actual and possible connection between law enforcement and public health from a functional perspective. Next, the Top600 case is used to gradually descend – passing culture, organisation and information exchange – to the most practical level of the ‘nuts and bolts’ of (combined) interventions.

## **PLENARY SESSION P6:**

### **VIOLENCE: ITS IMPACT ON HEALTH AND ITS PREVENTION**

**Karyn McCluskey.**

**Doing it differently: a public health approach to tackling violence and gangs in Scotland.**

In 2004 Scotland was identified as the most violent country in Europe by the UN and Glasgow had the highest homicide rate. Instead of disputing the figures, Scotland embarked on turning around its association with gangs and violence and began to treat violence as a disease, a public health issue.

Scotland’s ambition is to be “the best place in the world to bring up your kids”. The violence reduction strategy and work is one of the foundations of this aspiration becoming a reality. The gap between strategy and activity is often wide, but Scotland embarked upon work focusing on ‘teachable moments’, where people were motivated to change their behaviour. This has led to innovative work around gangs and offenders, working with the medical profession and embracing a public health ethos to changing a country’s attitude to violence. In 2012 Scotland now has the lowest crime levels in 37 years, the highest detection rates for 36 years and Glasgow is no longer the murder capital of Europe.

**Libby Lloyd AM.**

**Countering domestic violence**

During the past decade the focus on responding to domestic and family violence and sexual assault has increasingly explored and addressed ways to prevent it as well as ways to respond to it. Unless we can find more effective ways to prevent intimate partner violence almost one in three Australian women will continue to be victims of domestic and family violence and approximately one in five women will be victims of sexual assault, during their lifetimes.

Considerable focus and effort has been put into the issue of intimate partner violence since the 1970s. Over the past ten years a number of community-based initiatives such as the men-led White Ribbon Campaign, various state government programs, as well as combined initiatives of the Commonwealth and all states and territories, have been strengthened. This session will particularly explore the development and implementation of the COAG supported National Plan to Reduce Violence against Women and their Children 2010 - 2022 and its major emphases.

**Professor Ernest Drucker.**

### **The public health impact of incarceration**

The role of imprisonment in violence and its prevention in any society is a function of the conditions and length of confinement and the rate and distribution of incarceration employed – both its overall prevalence and its concentration in particular sub-populations. The theoretical rationale of incarceration in deterring crime is only weakly demonstrable (especially for violence) and the incapacitation, which (at least temporarily) does shield society from individual offenses while confined.

But imprisonment itself can be also cause subsequent increased violence for individuals enraged and made vengeful by brutal treatment and prison conditions – e.g. over-crowding, the use of punitive isolation, withholding health care, and the failure to protect inmates from assault and rape by staff and other inmates. In addition high population rates of imprisonment employed as social control (mass incarceration) is a form of “structural violence”, reinforcing existent societal structures of ethnic and racial prejudice, cementing disparities and discrimination, and sustaining social and economic injustice. Mass incarceration of entire populations (e.g. blacks in the US or Aboriginals in Australia) can also determine wider public health “collateral” adverse consequences extending beyond the offender to their families – including intergenerational effects that increase the likelihood of children’s future imprisonment, and worsened family and community health outcomes on the health and life expectancy of wives and children.

Conversely, the use of non-punitive confinement and comprehensive programs aimed at education, better health and rehabilitation can be a positive force for helping the most marginal populations with significant health problems – including addiction and infectious diseases – sheltering them from the harsh conditions of the outside world. This potential of confinement as “assertive” treatment must be further developed and evaluated in practice

## **PLENARY SESSION P7: MINORITIES AND THE MARGINALISED**

**Martin Donoghoe.**

### **Communicable disease control among marginalized communities in Europe**

Communicable disease epidemics (HIV, tuberculosis and hepatitis) in Europe are diverse; but in all European countries (particularly in Eastern Europe and Central Asia) these diseases disproportionately affect populations that are socially marginalised and people whose behaviour is socially stigmatized or illegal. Drawing on research supported by the WHO Regional Office for Europe, and other related work in the European region, the will evidence structural factors associated with communicable disease; how marginalisation of populations and criminalisation of behaviours increases risk of communicable disease and how law enforcement and the criminal justice system can be mobilized to control rather than exacerbate communicable disease in marginalised communities

An association between law enforcement and health is particularly apparent in the relationship between HIV risk in people who inject drugs (PWID) and contact with criminal justice systems. Between half and three-quarters of PWID in Eastern Europe have experienced arrest. In Estonia and Lithuania, an estimated 58%-70% of PWID had been in prison at least once. In Georgia and Russia, this figure is between 6% and 37% and in Central Europe 18% and 50%. Prisons are venues that can exacerbate transmission of communicable disease but also provide prevention and treatment opportunities. While evidence internationally links prison and a history of incarceration to elevated odds of HIV among PWID only three countries in eastern Europe and central Asia (Moldova, Romania, and Kyrgyzstan) provide harm reduction services to prisoners, an approach that is gaining traction in western Europe.

Studies evidencing the adverse effects of the legal environment on HIV risk among PWID suggest a relationship between street-based policing practices and increased HIV vulnerability. A growing body of work substantiates relationships between health harms related to drug use and sex work and social-material factors that shape vulnerability to HIV. Several studies have examined contact with law enforcement agencies as an environmental factor linked with the odds of being HIV infected. Contact between police and PWID in the region is highly commonplace. Qualitative work among PWID in Russia has illustrated how reduced capacity for HIV risk reduction is shaped by street-level policing practices and contextualised by broader structural policies of criminalisation and cultural practices of marginalisation which increase individual risk. There is disturbing evidence from the region that physical and sexual assault of sex workers by the police is not uncommon. A study of sex workers in ten Eastern European countries reported that 42% and 37% have been physically or sexually assaulted by police in the previous year. The experiences of PWID in Ukraine and Russia, where harassment and arrest of PWID and sex workers are a major barrier to treatment access and integration, contrasts with absence of accounts of repressive police intervention in an assessment of two models of integrated HIV, TB and drug dependency care for PWID in Portugal.

Recognizing the central role of law enforcement and the criminal justice system to the control of communicable disease in marginalised communities the European Action Plan on HIV/AIDS 2012-15 has prioritized laws and regulations related to the HIV response as an area of intervention.

**Prof Dr Joachim Kersten.**

#### **European perspectives of public health and police-minority relations**

Law Enforcement/Policing and Public Health are obviously interconnected. However, security research in the European Union rarely attends to this link. In the German academic context for cultural and historical reasons, the discipline of Public Health is less established than in English speaking countries. The reasons will be briefly addressed before the relationship between minorities and law enforcement will be examined. German, Austrian and Hungarian data on health issues concerning the minorities under investigation will complete the picture, before the main question will be raised: How can restorative Justice (RJ) programs designed to improve minority community – police relations include the issue of public health? What can be the means of reform? How can police contribute to networks? Can we reestablish the role of research on policing and public health as “Polizeywissenschaft” (police science) where “Gesundheit” (health) was part and parcel of the general idea of policing and on the research agenda?

**Geoff Monaghan.**

#### **Policing Illicit Drugs in a Public Health Environment: You don't wanna do it like that!**

The presentation discusses contemporary ideas and approaches to policing illicit drugs against the backdrop of HIV, hepatitis, tuberculosis and other public health threats. In particular, it considers the public health and policing interface in this context, and highlights some of the persistent tensions arising from police services' legal and professional obligations when enforcing drug laws, protecting their staff, budget cuts, community expectations, and modern-day public health imperatives. Overall, the presentation argues that whilst there is merit in police services working to develop 'Real Impact Drug Enforcement' (RIDE) - policing strategies and tactics which achieve reductions in harms to communities - as a viable alternative to the 'traditional' supply and demand reduction models, the RIDE approach is less than straightforward and a number of issues arise including whether police services and their partners have the capacity to obtain reliable outcome data on the back of the many methodological, logistical, legal, and fiscal challenges.



# Marketplace of Ideas: Summaries of presentations

## SESSION MoI 1

### Bridges Across Borders Southeast Asia Community Legal Education Initiative

**PRESENTER:** Bruce A. Lasky, Co-founder/Co-director, BABSEA CLE

BABSEA CLE will provide insight on the way university clinical legal education programmes can collaborate in the area of policing and public health. This will include specific examples of a number of clinical legal education models including those focusing on pre-trial detention/bail release programmes.

### Operation Newstart

**PRESENTER:** Phil Wheatley, Executive Officer, Operation Newstart Victoria

Research shows that if youth are engaged in education then the risk of involvement with the criminal justice system is reduced and health and social outcomes are markedly improved. Operation Newstart seeks to re-engage 'at risk' youth in education. Participants are aged between 14-17 years, are still enrolled in school and typically demonstrate the following characteristics; truancy, contact with police, emerging mental health issues, experimentation with alcohol and other drugs, family conflict and an unstable peer group.

The principle partners are Victoria Police, the Department of Education and Early Childhood Development and the Royal Children Hospital Mental Health Service. There are currently 7 programs operating in metropolitan Melbourne and Regional Victoria. The first program commenced in Frankston in 1997 and most recent programs commenced at Geelong and Bendigo in 2011. Each program caters for 8 students per term and involves them in a comprehensive curriculum involving components of outdoor learning skills, life skills, vocational options and therapeutic sessions.

Programs have been independently evaluated with the most comprehensive study being longitudinal evaluation between 1999 and 2006, which demonstrated that youth who completed the program had far less involvement in the criminal justice system and achieved markedly improved social outcomes. In 2010 the Operation Newstart was one of several winners at a national level in the Australian Crime and Violence Prevention Awards.

### Gang violence mediation, New Zealand style

**PRESENTERS:** Harry Tam, Te Puni Kokiri  
Dr Julia Carr, Senior Policy Analyst, Whanau and Social Policy, New Zealand

This presentation will describe work by experienced mediators to intervene where there is escalating violence between gang-affiliated communities. Gang mediation requires particular skills, credibility and experience. Interrupting violence is not enough – post resolution action is required to move beyond 'firefighting' into positive pro-social development. Collaboration with police is always part of the process and the health of children and families is a useful first post-mediation engagement point.

Key elements in building sustainable collaborations include recognition of the different roles, skills, values, drivers of each party while understanding common goals. The continuity of people involved is important so that the different approaches and risk management of each party is understood and credibility based on results is built. A range of measures were critical in stopping escalating violence. These included engagement of 'hard to reach' families with local health services; immunisation of children and cardiovascular

risk assessment of adults; whanau ora plans; improved health literacy and action on determinants of health such as education.

The approach is innovative but has developed over several years, and has achieved success in mediating where there has been serious escalating violence. It goes beyond 'violence interruption' with individuals into a community development process with hard to reach families and the communities affiliated with gangs.

## SESSION MoI 2

### Road policing – the impact of road trauma

**PRESENTERS:** Bernadette Nugent, Team Leader, Counselling and Support Services, Road Trauma Support Services Victoria  
Christine Harrison, Manager, Education Programs, Road Trauma Support Services Victoria

Road Trauma Support Services Victoria (RTSSV) has been undertaking monthly presentations to the Road Policing Investigator Course. The aim of the presentation is to educate members of the Police force about the ripple affects of one road incident and how their role in the initial phase following a road crash can influence and impact upon people's ability to recover well.

RTSSV and Victoria Police have a long standing reciprocal relationship based on education and raising community awareness around road trauma. Extensive knowledge of available services, open communication and the development of collaborative projects and programs are essential when working within the same arena.

Maintaining a regular schedule of contact, networking opportunities and having a detailed understanding about community support options as well as knowledge of how community agencies can partner with police, are all vital elements for the maintenance of sustainable collaboration.

To date, an evaluation questionnaire is completed by each participant following every presentation. The shared outcomes are to raise awareness of both how road trauma affects individuals who are involved in a road incident and how their interaction with these people can impact either in a positive or negative way on their recovery. The project also aims to increase their self awareness around the issues of self care.

### Motor vehicle pursuit fatalities in Australia, 2000 – 2011: National Deaths in Custody Program (NDICP)

**PRESENTER:** Mathew Lyneham, Australian Institute for Criminology

The National Deaths in Custody Program monitors the circumstances and nature of deaths occurring in motor vehicle pursuits across Australia. In 2012 the Australian Institute of Criminology undertook some collaborative research with police services across Australia which examined fatal motor vehicle pursuits, including their impact on innocent road users, precipitating offences, as well as factors such as speeds reached, prior drug/alcohol consumption and length and location of pursuits. Key findings from this study will be presented and discussed.

The National Deaths in Custody Program (NDICP) is an ongoing research partnership with police services across Australia. It has been monitoring the extent and nature of all deaths that have occurred in police custody and custody-related operations since 1992, with data available back to 1980. Established in response to recommendations handed down by the Royal Commission into Aboriginal Deaths in Custody, the purpose is to collect information about deaths in custody, analyse the circumstances of these deaths, and report findings regularly to the Federal Government. The data collected in this program are supplied directly to the AIC by police agencies in each jurisdiction. Data provided by the police are supplemented with information obtained through coronial findings, as well as toxicology and autopsy reports. One of the key functions of the NDICP is to serve as a performance and accountability measure for police agencies, in that it brings to light details about deaths and identifies emerging trends and issues.



## The Joint Investigation Response Team

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**PRESENTER:** Detective Sergeant Matthew Brown, Victoria Police

The Joint Investigation Response Team (JIRT) comprises Victoria Police and Victoria's Department of Human Services (DHS) personnel and provides a coordinated response to child sexual and physical assault. It initially started as a pilot program in which one DHS worker was located in a police station every second week. JIRT has now grown into six DHS workers located with specialized police within the police complex.

From the outset it was identified by both parties that the success or failure of the project would centre on recruiting and training response workers that could operate effectively in a team environment. Careful consideration and management of each other's roles and responsibilities as well as addressing points of difference also led to better outcomes for the victims.

The most important lesson learnt was in implementing a strategy to start the project. Obstacles at various levels were placed in the way when the concept was conceived, delaying the original pilot. This was a continuing theme and without creativity and persistence the project would never have moved beyond the concept phase.

The model has challenged police and DHS to think outside the square. Police are very protective of physical boundaries and not inclined to open their doors to other agencies. This model indicated an ability to think and operate in holistic terms. This presentation will focus on overcoming obstacles in expanding the JIRT program.

## SESSION MoI 3

### 'Cape York Cannabis Project' (James Cook University, Queensland) and 'Weed it Out' Project (Queensland Police Service)

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**PRESENTERS:** Bernadette Rogerson, Senior Research Officer, James Cook University  
Detective Senior Sergeant Kevin Goan, Queensland Police Service (to be confirmed)  
Detective Senior Sergeant, Gary Hunter, Queensland Police Service (to be confirmed)

The Cape York Cannabis Project (CYCP) commenced in January 2010 and is funded by Australia's National Medical Research. The main objective is to encourage a reduction in the demands of cannabis using, awareness-raising, community surveys and feedback of information in selected Cape York communities. The project has centred on partnership building, community engagement, capacity building and consultation. The Queensland Police Service's (QPS) 'Weed It Out' project commenced in July 2009, is funded by the Department of Health and Ageing and focuses on reducing the supply of cannabis and associated harms with cannabis use and problems relating to drug misuse in Indigenous communities.

The partnership between JCU and QPS enabled community-based research to be conducted, aimed at reducing demand through awareness, education, feedback and support appropriate interventions. Cannabis use data has been collated with findings presented back to community members in culturally appropriate forms to inform initiatives aimed at changing attitudes to cannabis use. Engagement and capacity building efforts have proven instrumental for implementation of supply reduction/crime prevention strategies by existing service providers to ensure project sustainability.

This presentation will consider the many initial obstacles to the establishment of the projects and the on-going barriers that impede or challenge their implementation. The actual strategies employed by the projects will be detailed.

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## Project Aegis: Addressing the Social Impact of Pharmaceutical Drug Misuse

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**PRESENTERS:** Susan Beattie, Senior Project Officer, Drug and Alcohol Coordination Unit, Queensland Police Service  
Senior Sergeant Corey Allen, Officer in Charge, Brisbane City Station, Queensland Police Service

Operating since 2010 the Brisbane City Division Vulnerable Persons Strategy (VPS) brings together a range of activities to achieve a cultural change in the approach City police have to vulnerable persons through capacity building, first response police participation in community activities and empowering first response police as ‘first to see – first to act’ agents of change. The goals of the City VPS are focused on encouraging a values based approach to vulnerable persons in the CBD that builds trust, strengthens relationships, raises the positive profile of police in the support services community, and to improve the personal, problem solving approach of general duties police.

Project Aegis aims to improve the awareness of first response police regarding the diversion of pharmaceuticals. The presentation will detail the activities of Project Aegis and expand on the principles underlying its operations.

The police have a valid and appropriate role to play in public health issues, in particular regarding issues associated with pharmaceutical misuse and diversion to the illicit market. The police experience and perspective on the issue can give great traction to collaborative efforts to address this shared area of concern. Due to the complexity of the issues involved with this area, addressing the misuse of pharmaceutical drugs requires a balanced approach developed in partnership with other respective health and regulatory agencies. The police approach to vulnerable persons in the Brisbane City Division is measured, supportive and highly effective.

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## A police-health partnership in addressing alcohol and other drug issues in Footscray (Victoria)

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**PRESENTERS:** Detective Sergeant Peter Bitton, Victoria Police  
Acting Detective Sergeant Brendan O’Mahoney, Victoria Police  
Bernadette Suter, Western Region Health Service  
Joanna Noesgard, Senior health and social planner, Maribyrnong City Council

The municipality of Maribyrnong is located 5km west of Melbourne. Footscray (its central business district) has an entrenched history of public drinking and drug use. Due to this history Footscray Police, Maribyrnong City Council and Health Works (Western Region Health Centre) have created a collaborative partnerships to share essential communication which supports a joined up, holistic approach to community wellbeing, planning and enforcement.

Over the years the partnership has been pivotal, however even more so now with the rapid development, gentrification and growth across the western region. Through the partnership, collaborative organisations are able to respond quicker to community changes and needs and advocate and plan for long term changes.

The partnership has not been without its difficulties. Approaches to the issue vary between organisations. Health Works comes from a harm minimisation approach, Police from a law enforcement and community protection approach and Council from a harm minimisation and future planning/development approach. While approaches between organisations differ the benefit of this partnership has been strengthened by acknowledgement and respect for these perspectives and the sharing of a common goal.

The presentation will discuss some of the partnership’s activities and strategies for both strengthening the partnership and implementing the program. Overall, the community has benefitted and individual organisations have been able to build on and achieve greater outcomes.

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## SESSION MoI 4

### Yarra Drug and Health Forum

**PRESENTER:** Greg Denham, Executive Officer, Yarra Drug and Health Forum

The Yarra Drug and Health Forum (YDHF) has been operating for 16 years and provides a dynamic and consistently informative gathering point and 'space' for anyone interested in drug related issues affecting police, the alcohol and other drug (AOD) sector and the broader community. The Forum, based in the City of Yarra, Melbourne assists by keeping a 'finger on the pulse' of local and international AOD related treatment, health and legal matters, and offering a vibrant and respected space for conversation, support and innovation in the sector.

The effective practices include collaboration and building a coalition of consensus where police and health personnel work together on equal terms to address the harms associated with drug use. Stakeholder engagement is important and this is best achieved when the notion of collaboration is 'operationalised' for police and health workers. Experience shows that what doesn't work, or is ineffective, is when agencies, particularly police, have a pre-determined agenda and impose that agenda on other agencies with no consultation.

The YDHF is quite unique and has sustained its influence in addressing alcohol and drug issues through stakeholder engagement and relationship building and is a worthwhile model to duplicate elsewhere. The Forum's strategic responses have enabled immediate actions while also striving to bring about longer-term systemic change at all levels. Yarra Drug & Health Forum continues to provide a dynamic and consistently informative gathering point and neutral 'space' for anyone interested in drug related issues affecting both the AOD sector and the broader community.

### Lifeline's Read the Signs project

**PRESENTER:** Debbie Knee and John Jones

Lifeline is a charitable organisation that provides all Australians experiencing a personal crisis with support and suicide prevention services. In this presentation, Lifeline will talk about the range of support services it is delivering in Australia with specific focus on the programs available in Victoria. Lifeline works in partnership with organisations and communities to promote good mental health among Australians.

### Local laws preventing violence against women

**PRESENTERS:** Tracey Blythe, Team Leader Health Promotion, City of Casey  
Nick Svarnias, Sergeant & Manager Family Violence Unit, Victoria Police, Cranbourne  
Rod Bezanovic, Team Leader Local Laws, City of Casey

After attending a 'White Ribbon Day' breakfast with a police guest speaker, the team leader of City of Casey (in Victoria) local laws department realised that there was a strong link between the role of local laws officers and the potential for prevention of violence against women. In reviewing reports from the past year it was noted that in at least twelve incidents local laws officers' intervention had indirectly contributed to an act of violence against a woman. For example dog seizures led to a resulting assault of a woman resident/partner of a dog owner. A similar example related to a passenger/partner of a driver who had committed a parking offence. By officers changing attitudes and procedures, the safety of women is now at the forefront of all work undertaken.

A partnership was strengthened with the local police and the local laws and health promotion team within Council. A model was developed to build the capacity of the local laws team to proactively ensure the safety of women and prevent violence, or become a referral point for assistance. It is suggested that this approach is unprecedented, and no other local laws departments are doing this work. It is suggested that local laws departments in local government are a good setting for undertaking family violence prevention and intervention. The detail of the model will be highlighted in the presentation as a good practice initiative.

## SESSION MoI 5

### Good Sports – an Australian Drug Foundation – Police partnership

**PRESENTERS:** Rod Glenn-Smith – State Manager Good Sports (Victoria and South Australia), Australian Drug Foundation  
Bob Barby – Responsible Serving of Alcohol and Club Liquor Licensing Seminar presenter and former District Inspector, Victoria Police

Good Sports is an alcohol harm reduction program of the Australian Drug Foundation (ADF). Good Sports strives to make community sporting clubs healthier and safer places. The program supports clubs to introduce policies and practices that create a culture of responsible drinking within the club. It puts the emphasis back on people and sport rather than alcohol. Independent research shows that Good Sports helps to reduce alcohol consumption, risky drinking, drink-driving and anti-social behavior.

Good Sports is effective because it offers sporting clubs practical solutions to real problems experienced by them. It works because it offers clubs the hands-on project officer support and resources that they need to succeed at no cost to them. And it works because participation is voluntary and clubs are free to progress through the program at their own pace according to their 'readiness' to achieve culture change within their club. It delivers the program through a coordinated strategy involving Police, the Australian Drug Foundation, and Good Sports contracted Community Partners and Project Officers.

### Youth Support Service

**PRESENTERS:** Ipsita Wright, Director Services, Youth Support and Advocacy Service, Victoria

Established by the Victorian Government in 2011, the Youth Support Service (YSS) is a partnership between Victoria Police, the Victorian Department of Human Services and Community Service Orders, of which the Youth Support and Advocacy Service (YSAS), as Victoria's largest youth health service, is the main provider. YSS is the largest youth diversion program in Victoria, created as an early intervention service for young people at risk of entering the Youth Justice system.

The exclusive referral from Victoria Police based on at-risk factors in youth seen by them is through a new commercial electronic referral system called Support Link. This represented both effective and ineffective practices. Lesson learnt relate to the roll out of a Statewide program with Victoria police, establishment and implementation of referral criteria, implementing a new referral system and determining health and wellbeing outcomes for young people in the program. These will be detailed in the presentation.

The Youth Support Program has exemplified a unique partnership between police, government and health and community services for at-risk youth who are destined to enter the criminal justice system.

### How Supportlink and SANE Australia help Police to Help Others

**PRESENTERS:** Rosario Grasso. Victorian Manager, Supportlink  
Yvonne Santen. Manager, SANE Helpline

This presentation will examine the link between policing and community mental health issues. The project aim is to maximise opportunities for early intervention for vulnerable persons with the assistance of a collaborative referral framework between the Victoria Police and a variety of services from the social support sector, involving organisations such as SANE Australia. This project is seen as progressive and highly advantageous for remote, rural, regional and metropolitan communities.

Fragmentation of service provision across remote, rural, regional and metropolitan areas can reduce the sector's effectiveness in the delivery of community care to vulnerable individuals and families. Police services regularly come into contact with persons presenting with unmet social needs and/ or affected

mental illness within every community in Victoria. Police are a unique and natural gateway to social services. Despite police desire to further assist people they have often lacked a suitable referral framework to participate fully in early intervention opportunities.

SupportLink IT Pty Ltd (SupportLink) is a Community Service organisation whose aim is to work with the emergency and social support sectors to accelerate early intervention opportunities for vulnerable families and individuals. The primary strategy is to establish a referral framework between emergency services and the social support sector. SANE Australia is a national charity which operates a mental health Helpline via 3 channels: 1800 telephone number, online email, and online Chat.

Sharing this project with other delegates at LEPH 2012 will allow the project to highlight how the service gaps are being overcome through the increased utilisation of the SupportLink framework.

## SESSION MoI 6

### Sex, Drugs, and Law Enforcement: Models of Police-Community Collaboration

#### FACILITATORS AND PANELISTS:

Sanjay Patil, Program Officer, International Harm Reduction Development (OSF)

Rachel Thomas, Senior Program Officer, Sexual Health and Rights Project (OSF)

Jones Blantari, Deputy Director of Health, Ghana Police Service (Ghana)

Dr. Gyaw Htet Doe, Senior Consultant Psychiatrist, Substance Abuse Research Association (Myanmar)

Police in low and middle-income countries normally adopt a punitive approach towards drug users and sex workers. However, where police and NGOs have worked together to improve the health and well-being of criminalized groups, it is critical to understand why the collaborations succeeded so that we can learn how such partnerships can possibly be replicated. Utilizing a talk-show format, this session will look at interesting examples of collaboration from Kyrgyzstan, Ghana and Myanmar.

#### UNAIDS

To be advised

# The Program

## DAY 1: SUNDAY 11 NOVEMBER 2012

5.00 – 7.00 pm Welcome Reception

## DAY 2: MONDAY 12 NOVEMBER 2012

8.30 – 9.00 am **Welcome to the Conference** **Professor Nick Crofts**, Conference Director

**LOCATION:**

The Carrillo Gantner Theatre

**Welcome to country**

**A Wurundjeri Elder**

**Introductions**

**The Lord Mayor of Melbourne**

**Professor Graham Brown AM**, Director, Nossal Institute for Global Health, University of Melbourne

**Warwick Jones**, Director, Australian Institute of Police Management

9.00 – 10.20 am **PLENARY P1: Setting the scene**

**LOCATION:** The Carrillo Gantner Theatre

**CHAIR**

**Warwick Jones**, Executive Director, Australian Institute of Police Management

**Deputy Commissioner Lucinda Nolan**, Victoria Police: *The partnership in Victoria – the police view*

**Professor Chris Brook PSM**, Executive Director, Wellbeing, Integrated Care and Ageing Division, Victorian Department of Health: *The partnership in Victoria – the view from health*

**Cr Geoff Gough**, Vice-President, Municipal Association of Victoria: *The partnership in Victoria - The role of local government*

10.20 – 10.40 am MORNING TEA

10.40 – 12.00 pm **PLENARY P2: Exploring the role of police**

**LOCATION:** The Carrillo Gantner Theatre

**SESSION SUPPORTER:** The Transport Accident Commission

**CHAIR**

**Jon White**, CEO, Australia New Zealand Policing Advisory Agency

**Professor James Ogloff**, Director of the Centre for Forensic Behavioural Science, Monash University: *Principles and opportunities in developing enhanced strategies for policing people with mental illnesses*

**Professor Mark Stevenson**, Director of the Monash University Accident Research Centre  
*The road to success: road policing and public health*

**Commissioner Andrew Scipione APM**, NSW Commissioner of Police  
*Regulating alcohol, minimising the damage: the police role in the public health partnership*

12.00 – 12.15 pm **COMMENTARY: Jon White**, CEO, Australia New Zealand Policing Advisory Agency

12.15 – 1.00 pm LUNCH

1.00 – 1.55 pm

**PLENARY P3: Conference Keynote Address**

**LOCATION:** The Carrillo Gantner Theatre

**Gil Kerlikowske**, Director of the US Government’s Office of National Drug Control Policy  
*Breaking down silos: uniting public health and law enforcement to pioneer a 21st century approach to drug policy*

**CO-CHAIRS**

**Professor Nick Crofts**, Director, Centre for Law Enforcement and Public Health & Honorary Professorial Fellow, Melbourne School of Population Health

**Warwick Jones**, Executive Director, Australian Institute of Police Management

2.00 – 3.30 pm

Major session M1	Major session M2	Major session M3	Mol 1: The Marketplace of Ideas
<p>Mental Health 1. <b>The role of police in the management of people in acute psychiatric distress</b></p> <p><b>LOCATION:</b> The Carrillo Gantner Theatre</p> <p><b>SESSION CONVENER:</b> Centre for Forensic Behavioural Science, Monash University</p> <p><b>SESSION OBJECTIVE:</b> To explore how police best work with mental health services</p> <p><b>CHAIR:</b> Professor Duncan Chappell, Adjunct Professor, Institute of Criminology in the Faculty of Law, University of Sydney</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Assoc Professor Stuart Thomas, Centre for Forensic Behavioural Science (CFBS), Monash University: <i>The police approach style in the management of people with acute psychiatric crisis</i></li> <li>• Dr Dani Kesic, CFBS: <i>Police management of suicide and alternative resolution strategies</i></li> <li>• Superintendent Mick Williams, Victoria Police: <i>Policy and training around mental illness</i></li> <li>• Sergeant Tim Hoban, Victoria Police: <i>Mental health e-learning package</i></li> </ul>	<p><b>Sex work and the police</b></p> <p><b>LOCATION:</b> The Russell Love Theatre</p> <p><b>SESSION CONVENERS:</b> Resourcing Health and Education in the Sex Industry (RhED) and the Nossal Institute for Global Health</p> <p><b>SESSION OBJECTIVE:</b> To explore the ways police can best support public health programs for sex workers in a criminalised environment</p> <p><b>CHAIR:</b> Jelena Popovic, Deputy Chief Magistrate, Victoria</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Sergeant David Morrow, Sex worker Liaison Officer, St Kilda Police Station</li> <li>• Senior Sergeant Brad Daly, St Kilda Police Station</li> <li>• Emily Gillespie, Arrest Referral Program RhED</li> <li>• Sally Boothby, Arrest Referral Program RhED</li> <li>• Catriona Hodgson, Education and Support Worker RhED</li> <li>• Vanda Hamilton, Drug Outreach lawyer, St Kilda Legal Service</li> </ul>	<p><b>Road trauma</b></p> <p><b>LOCATION:</b> The J. H. Mitchell Theatre</p> <p><b>SESSION CONVENERS:</b> Monash University Accident Research Centre (MUARC), Monash Injury Research Institute (MIRI)</p> <p><b>SESSION SUPPORTER:</b> Transport Accident Commission</p> <p><b>SESSION OBJECTIVE:</b> To answer the question: “Do Police, as public health actors, get credit for their contribution?”</p> <p><b>CHAIR:</b> Professor Max Cameron</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Professor Max Cameron, MUARC/Monash Injury Research Institute (MIRI): <i>Enforcement of speeding and impaired driving: The most effective methods and cost-effective intensity levels</i></li> <li>• Belinda Clark, MUARC/MIRI: <i>Hooning around: The application of vehicle impoundment legislation to address anti-social driving behaviour</i></li> <li>• Professor Arie Freiberg, Dean of Law, Monash University: <i>Law Enforcement, sentencing and public health: Driving while suspended or disqualified</i></li> <li>• Inspector Martin Boorman, Victoria Police: <i>The drink and drug driving enforcement link to public health</i></li> </ul>	 <p><b>LOCATION: YHM Room</b></p> <p><b>2.00 - 2.30 pm</b> <b>TITLE: Bridges Across Borders Southeast Asia Community Legal Education Initiative (BABSEA CLE)</b></p> <p><b>PRESENTER:</b> Bruce A. Lasky, Co-founder/Co-director, BABSEA CLE</p> <p><b>2.30 - 3.00 pm</b> <b>TITLE: Operation Newstart</b></p> <p><b>PRESENTER:</b> Phil Wheatley, Executive Officer, Operation Newstart Victoria</p> <p><b>3.00 - 3.30 pm</b> <b>TITLE: Gang violence mediation – New Zealand style</b></p> <p><b>PRESENTERS:</b> Harry Tam, Te Puni Kokiri, New Zealand. Government and Julia Carr, Senior Policy Analyst, Whanau and Social Policy, New Zealand.</p> <p>Sponsored by</p>  

Major session M4	Major session M5	Major session M6	Mol 2: The Marketplace of Ideas
<p>Mental Health 2. <b>Contemporary challenges at the police-mental health interface</b></p> <p><b>LOCATION:</b> The Carrillo Gantner Theatre</p> <p><b>SESSION CONVENER:</b> Centre for Forensic Behavioural Science, Monash University</p> <p><b>SESSION OBJECTIVE:</b> To determine how ‘the partnership’ can better handle mental health issues</p> <p><b>CHAIR:</b> Superintendent Mick Williams, Victoria Police</p> <p><b>PRESENTERS</b></p> <ul style="list-style-type: none"> <li>• Professor Duncan Chappell, Adjunct Professor, Institute of Criminology in the Faculty of Law, University of Sydney. <i>The current international landscape</i></li> <li>• Professor Simon Bronitt, <i>Policing discretion and mental health: Regulating reasonable force</i></li> <li>• Elli Wellings, Acting Sergeant, Victoria Police <i>Intersectoral collaboration: responding to complex policing, health, social and welfare issues</i></li> <li>• Senior Sergeant Paul Campbell, Victoria Police <i>An overview of the Victoria Police co-response to mental health crisis incidents in the community</i></li> </ul>	<p><b>Local government</b></p> <p><b>LOCATION:</b> The J. H. Mitchell Theatre</p> <p><b>SESSION CONVENER:</b> City of Melbourne</p> <p><b>SESSION OBJECTIVE:</b> Given that local government bears the brunt of complex social issues: what lessons have been learned?</p> <p><b>CHAIR:</b> Dean Griggs, Manager, Community Safety and Wellbeing, City of Melbourne</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Suzi Matthews, Manager Late Night Economy, City of Sydney</li> <li>• Anne Malloch, Team Leader City People, City of Melbourne</li> <li>• Inspector Bernie Jackson, Victoria Police, Melbourne East</li> <li>• Donna Macik, Community Safety and Wellbeing Officer, City of Greater Dandenong</li> <li>• Jennifer West, Team Leader Safety Strategy, City of Adelaide</li> </ul>	<p><b>Turning the tide of HIV: police collaboration with sex workers and drug users in low and middle-income countries</b></p> <p><b>LOCATION:</b> The Russell Love Theatre</p> <p><b>SESSION CONVENER:</b> Law Enforcement and HIV Network (LEAHN)</p> <p><b>SESSION OBJECTIVE:</b> Understanding what makes for successful police collaboration with criminalized communities</p> <p><b>CHAIR:</b> Dr Nick Thomson, Director, Centre for Law Enforcement and Public Health; Honorary Fellow, Nossal Institute for Global Health &amp; Field Director, Johns Hopkins School of Population Health</p> <p><b>SESSION DETAILS:</b> An examination of the essential elements for successful collaboration between the police and criminalized communities, like sex workers and drug users, in low and middle-income countries.</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Natalya Shumskaya, Country Director, AIDS Foundation East-West (Kyrgyz Republic). <i>Friendly police, ministerial guidelines and positive incentives: a foundation for HIV prevention among marginalized groups in Kyrgyzstan.</i></li> <li>• Jones Blantari, Deputy Director of Health, Ghana Police Service (Ghana). <i>Engaging police personnel in reducing HIV-related stigma and discrimination: a case of the Ghana Police Service</i></li> <li>• Leo Beletsky, Assistant Professor of Law and Health Sciences, Northeastern University School of Law (United States). <i>Aligning police and harm reduction: research to practice</i></li> <li>• Dr. Gyaw Htet Doe, Senior Consultant Psychiatrist, Substance Abuse Research Association (Myanmar). <i>Introducing harm reduction interventions in Myanmar: partnering with Anti-Narcotic Task Forces.</i></li> </ul>	 <p><b>LOCATION:</b> YHM Room</p> <p><b>3.50 - 4.20 pm</b> <b>TITLE:</b> Road Policing – Impact of road trauma</p> <p><b>PRESENTERS:</b> Bernadette Nugent and Christine Harrison, Road Trauma Support Services Victoria (RTSSV).</p> <p><b>4.20 - 4.50 pm</b> <b>TITLE:</b> Motor vehicle pursuit fatalities in Australia, 2000 – 2011: National Deaths in Custody Program (NDICP)</p> <p><b>PRESENTER:</b> Mathew Lyneham, Australian Institute for Criminology</p> <p><b>4.50 - 5.20 pm</b> <b>TITLE:</b> Joint Investigation Response Team (JIRT) for child sexual and physical assaults</p> <p><b>PRESENTERS:</b> Matthew Brown, Detective Sergeant, Victoria Police</p> <p>Sponsored by</p>  



9.00 – 10.30 am **PLENARY P4: The multiple intersections of law enforcement and public health**

**LOCATION:** The Carrillo Gantner Theatre

**CHAIR**

**Alison Crocket**, Senior Adviser, Key populations, UNAIDS, Geneva

**Judge Jennifer Coate**, State Coroner of Victoria

*A coroner's view of the relationship between law enforcement and public health*

**Professor Scott Burris**, Professor of Law at Temple Law School, USA

*The public health and social work of the police: If we ignore it, will it go away? If we acknowledge it, will anything change?"*

**Professor Peter D'Abbs**, Menzies School of Health Research

*Alcohol, community action and the role of police: lessons from Northern Territory initiatives'*

10.30 – 11.00 am MORNING TEA

11.00 – 12.30 pm **PLENARY P5: The multiple intersections of law enforcement and public health**

**LOCATION:** The Carrillo Gantner Theatre

**CHAIR**

**Professor Graham Brown AM**, Director, Nossal Institute for Global Health, University of Melbourne

**Assistant Commissioner Dave Cliff**, New Zealand Police

*Police and public health: a New Zealand perspective*

**Dr Tom Calma**, National Coordinator for Tackling Indigenous Smoking

**Auke van Dijk**, Adviser to the Chief of the Amsterdam Police

*Policies to practice: the Dutch experience*

12.30 – 1.30 pm LUNCH



Major session M7	Major session M8	Major session M9	Mol 3: The Marketplace of Ideas
<p><b>Suicide prevention</b></p> <p><b>LOCATION:</b> The J. H. Mitchell Theatre</p> <p><b>SESSION OBJECTIVE:</b> To explore the complex challenges faced by police in the prevention of suicide</p> <p><b>CHAIR:</b> Nicole Turner, Law Enforcement and HIV Network (LEAHN) Co-ordinator</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Jack Heath, CEO, SANE Australia. <i>The SANE-SupportLink outreach partnership.</i></li> <li>• David L Ranson, Deputy Director, Victorian Institute of Forensic Medicine: <i>The law enforcement-public health partnership as it relates to suicide prevention.</i></li> <li>• Trevor Hazell, Director, Hunter Institute of Mental Health. <i>The role of police in suicide prevention and response: the Mindframe project</i></li> <li>• Joel Murchie, Inspector - Commander, Mental Health Intervention Team, NSW Police. <i>Suicide prevention; everybody's business</i></li> </ul>	<p><b>Leadership and good practice</b></p> <p><b>LOCATION:</b> The Carrillo Gantner Theatre</p> <p><b>SESSION CONVENER:</b> Australian Institute of Police Management</p> <p><b>SESSION OBJECTIVE:</b> To explore the concept of leadership as it is taught at the Australian Institute of Police Management.</p> <p><b>SESSION DETAILS:</b> A broad discussion of contemporary leadership theory and the type of leadership required to influence change. Specifically, an exploration of the type of leadership that will most effectively progress the challenges faced by law enforcement and public health agencies and others as they work together to reduce and manage the increasing demand for these services. Two case studies will be presented describing change introduced and achieved within organisations and jointly with others to improve the health outcomes and futures for people involved as victims and/or offenders. We will identify the leadership that was exercised and that was most effective in terms of influencing.</p> <p><b>CHAIR:</b> Superintendent Graham Kent, Australian Institute of Police Management</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Warwick Jones, Executive Director, Australian Institute of Police Management</li> <li>• Superintendent Graham Kent, Australian Institute of Police Management</li> <li>• Lucinda Nolan, Deputy Commissioner, Strategy and Organisational Development, Victoria Police</li> <li>• Peter Burns, Chief Executive, YMCA Victoria</li> </ul>	<p><b>Public health as crime prevention</b></p> <p><b>LOCATION:</b> The Russell Love Theatrette</p> <p><b>SESSION CONVENER:</b> Australian Crime Prevention Council</p> <p><b>SESSION OBJECTIVE:</b> To determine the contribution of public health to crime prevention, and how it can be optimized ethically.</p> <p><b>CHAIR:</b> Andrew Wilson AM, past National President of the Australian Crime Prevention Council, Auxiliary Judge of the District Court of South Australia and Adjunct Professor of RMIT University</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Isabelle Bartkowiak-Theron, Australian Crime Prevention Council. <i>Dismantling the silos: consolidating knowledge-sharing and partnerships between law enforcement, law and medicine'</i></li> <li>• Vivien Carli, International Centre for Prevention of Crime. <i>The problematic relationship of public health and crime prevention</i></li> <li>• Kerry Walker, Director of the Neighbourhood Justice Centre, Victoria. <i>'Motivating communities to be involved in crime prevention'</i></li> <li>• Richard Bent, Senior Research Fellow, Insitute for Canadian Urban Research Studies, Simon Fraser University, Canada. <i>Calls for police service relating to the Mental Health Act: an analysis of data for Burnaby RCMP Detachment</i></li> </ul>	 <p><b>LOCATION: YHM Room</b></p> <p><b>1.30 - 2.00 pm</b> <b>TITLE: Addressing cannabis use in Indigenous communities in Far North Queensland</b></p> <p><b>PRESENTERS:</b> Bernadette Rogerson, Senior Research Officer, James Cook University; Detective Senior Sergeant Kevin Goan, Queensland Police Service (attendance to be confirmed); Detective Senior Sergeant Gary Hunter, Queensland Police Service (attendance to be confirmed)</p> <p><b>2.00 - 2.30 pm</b> <b>TITLE: Project Aegis: Addressing the Social Impact of Pharmaceutical Drug Misuse</b></p> <p><b>PRESENTERS:</b> Susan Beattie, Senior Project Officer, Queensland Police Service and Corey Allen, Senior Sergeant, Queensland Police Service.</p> <p><b>2.30 - 3.00 pm</b> <b>TITLE: Police/health partnership in addressing alcohol and other drugs (AOD) in Footscray (Melbourne)</b></p> <p><b>PRESENTERS:</b> Bernadette Suter, Program Manager, Health Works; Joanna Noesgaard, Senior Health and Social Planner, Maribyrnong City Council; Detective Sergeant Peter Bitton, Victoria Police; Acting Detective Sergeant Brendan O'Mahoney, Victoria Police.</p> <p>Sponsored by</p>  

Major session M10	Major session M11	Major session M12	Mol 4: The Marketplace of Ideas
<p><b>Street level services co-operation</b></p> <p><b>LOCATION:</b> The Carrillo Gantner Theatre</p> <p><b>SESSION CONVENER:</b> Australian National Council on Drugs (ANCD)</p> <p><b>SESSION OBJECTIVE:</b> To examine law enforcement policy and operational strategies that enhance health outcomes for individuals and the community</p> <p><b>CHAIR:</b> Professor Margaret Hamilton AO, Executive member, ANCD</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Commissioner Karl O'Callaghan, Western Australian Police. <i>'Operation Safeplace - protecting our children'</i></li> <li>• Detective Superintendent Brett Guerin, Chair, Intergovernmental Committee on Drugs. <i>Differences in perspectives: police and health practitioners at street level</i></li> <li>• Jon White, CEO, Australia New Zealand Policing Advisory Agency: <i>Cross jurisdictional policing perspectives</i></li> <li>• Tony Campbell, CEO and Founder, SupportLink. <i>The changing tide of police partnerships</i></li> <li>• <b>COMMENTARY:</b> Auke van Dijk, Adviser to the Chief of the Amsterdam Police, The Amsterdam Experience</li> </ul>	<p><b>Policing those putting others at risk of infectious diseases</b></p> <p><b>LOCATION:</b> The J. H. Mitchell Theatre</p> <p><b>SESSION CONVENER:</b> Department of Health, Victoria</p> <p><b>SESSION OBJECTIVE:</b> To explore the place of the public health law and the criminal law in preventing people placing others at risk of infectious diseases</p> <p><b>CHAIR:</b> Dr Rosemary Lester, Chief Health Officer, Health Protection Branch, Department of Health, Victoria</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Dr Danny Csutoros, Medical Advisor, Health Protection Branch, Victorian Department of Health. <i>'Operation of the national and state guidelines 5 years on from the Griev review'</i></li> <li>• Tom Carter OAM, Department of Health Victoria. <i>'A case study of the public health management of a client allegedly placing others at risk.'</i></li> <li>• Dr Ric Milner, General Practitioner and Medical Officer, Barwon Health Sexual Health Clinic. <i>Assessing and coping at the coalface with patients putting others at risk</i></li> <li>• Detective Senior Constable Greg Nunn, Victoria Police. <i>'People with HIV who put others at risk'</i></li> </ul>	<p><b>Promoting HIV prevention and public health through law enforcement</b></p> <p><b>LOCATION:</b> The Russell Love Theatre</p> <p><b>SESSION CONVENER:</b> International Development Law Organisation and the Law Enforcement and HIV Network (LEAHN)</p> <p><b>SESSION OBJECTIVES:</b> To show the mutual benefits to law enforcement and public health officials of police practices that support public health objectives and respect the rights and integrity of all citizens.</p> <p>To describe the UNAIDS "Investment framework" and the important role that law enforcement plays in achieving an enabling environment in which political targets can be met.</p> <p>To illustrate examples of existing good practice and collaborations between international organisations, civil society and police.</p> <p><b>CHAIR:</b> Leo Kenny, Country Co-ordinator, Bangladesh, UNAIDS</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Alison Crocket, Senior Adviser, Key populations, UNAIDS, Geneva. <i>UNAIDS investment framework: why is it important and what is the role that Law Enforcement can play.</i></li> <li>• Fariba Soltani, United Nations Office of Drugs and Crime. <i>The work of the UNODC in promoting police practice that supports public health initiatives (Feedback from a recent event with senior police in Kiev)</i></li> <li>• Surita Jadev, UNAIDS, New Delhi. <i>Regional examples of good practice, where both police and public health objectives have been met, and crime rates and HIV transmission amongst injecting drug users and/or sex workers have gone down.</i></li> <li>• Gloria Lai, Senior Policy Officer, International Drug Policy Consortium. <i>Developing policy guidance for law enforcement authorities on policing key populations: What is the evidence that supporting public health objectives can also support police objectives of creating safer, healthier communities?</i></li> </ul>	 <p><b>LOCATION:</b> YHM Room</p> <p><b>3.30 - 4.00 pm</b> <b>TITLE:</b> Yarra Drug and Health Forum (YDHF)</p> <p><b>PRESENTER:</b> Greg Denham, Yarra Drug and Health Forum, Victoria</p> <p><b>4.00 - 4.30 pm</b> <b>TITLE:</b> Lifeline's Read the Signs project</p> <p><b>PRESENTER:</b> Debbie Knee and John Jones</p> <p><b>4.30 - 5.00 pm</b> <b>TITLE:</b> Local laws preventing violence against women</p> <p><b>PRESENTERS:</b> Tracey Blythe, Team Leader Health Promotion, City of Casey; Sergeant Nick Svarnias, Victoria Police; Rod Bezanovic, Team Leader Local Laws, City of Casey.</p> <p>Sponsored by</p>  

5.00 - 8.15pm

**Mad Bastards** - a special screening

Sponsored by: Justice Reinvestment

**LOCATION:** The Carrillo Gantner Theatre

5.00 - 5.30 pm

Refreshments for delegates attending the film screening

5.30 - 8.15 pm

A public screening of Mad Bastards with introductions and post-screening commentaries by:

Dean Daley-Jones who plays TJ in the film

Megan Williams - Muru Marri Indigenous Health Unit, School of Public Health and Community Medicine, UNSW. Megan was also one of the founding directors of the Project 10% campaign on Aboriginal health and imprisonment in Queensland

Dr Ted Wilkes, member of the Australian National Council on Drugs and Chair of the National Indigenous Drug and Alcohol Committee (for Justice Reinvestment)

Dr Tom Calma, National Coordinator for Tackling Indigenous Smoking (for Justice Reinvestment)

**DAY 4: WEDNESDAY 14 NOVEMBER 2012**

9.00 – 10.30 am

**PLENARY P6: Violence, its impact on health, and its prevention**

**LOCATION:** The Carrillo Gantner Theatre

**CHAIR**

**Andrew O’Keefe**, Chairman, White Ribbon

**Karyn McCluskey**, Co-Director, Scottish Violence Reduction Unit

*Doing it differently: a public health approach to tackling violence and gangs in Scotland*

**Libby Lloyd AM**, Chair of the Australian Government’s Violence against Women Advisory Group (VAWAG) (2009-2011)

*Countering domestic violence*

**Professor Ernie Drucker**, Professor Emeritus, Montefiore Medical Center, and Scholar in Residence, John Jay College of Criminal Justice of The City University of NY, New York, USA

*The public health impact of incarceration*

10.30 – 11.00 am

MORNING TEA

11.00 – 12.30 pm

**PLENARY P7: Minorities and the marginalised**

**LOCATION:** The Carrillo Gantner Theatre

**CHAIR**

**Larry Proud**, Director, Strategic Services, Australia New Zealand Policing Advisory Agency

**Martin Donoghoe**, HIV/AIDS, STIs and Viral Hepatitis, Programme Manager for the World Health Organization’s Regional Office for Europe

*Communicable disease control among marginalized communities*

**Professor Joachim Kersten**, Foundation Professor and Chair of Police Science at the German Police University, Muenster, Germany

*European perspectives on public health and police-minority relations*

**Geoff Monaghan**, Research Fellow, Semeion Research Center for the Science of Communication, Rome, Italy

*Policing illicit drugs in a public health environment*

12.30 – 1.30 pm

LUNCH

Major session M13	Major session M14	Major session M15	Mol 5: The Marketplace of Ideas
<p><b>Security and health</b></p> <p><b>LOCATION:</b> The J. H. Mitchell Theatre</p> <p><b>SESSION OBJECTIVE:</b> To examine whether global health is possible without secure governance</p> <p><b>CHAIR:</b> Associate Professor Steve James, Criminology Discipline Chair, School of Social and Political Sciences, University of Melbourne</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Associate Professor Tilman Ruff, Nossal Institute for Global Health, University of Melbourne &amp; Co-President, International Physicians for the Prevention of Nuclear War. <i>The Fukushima nuclear disaster: the public health response and lessons for government.</i></li> <li>• Professor Richard Tanter, School of Social and Political Sciences, University of Melbourne &amp; Senior Research Fellow, Nautilus Institute for Security and Sustainability. <i>The signature wound of the United Nations war in Afghanistan: contemporary modes of warfare, socio-technical networks, and cosmopolitan responsibility for health and security.</i></li> <li>• Jason Eligh, Country Manager, UNODC Myanmar: <i>Responding to health and insecurity in a transforming Myanmar</i></li> </ul>	<p><b>Violence prevention</b></p> <p><b>LOCATION:</b> The Carrillo Gantner Theatre</p> <p><b>SESSION OBJECTIVE:</b> To canvas the range of policies and strategies that may contribute to a reduction in all forms of violent behaviour.</p> <p><b>CHAIR:</b> Andrew O’Keefe, Chairman, White Ribbon</p> <p><b>PRESENTERS:</b></p> <ul style="list-style-type: none"> <li>• Detective Superintendent Rod Jouning, Victoria Police &amp; Fiona McCormack, Chief Executive Officer, Domestic Violence Victoria: <i>The link between policing, violence against women and public health organisations</i></li> <li>• Deborah Costello, Chief Executive Officer, Injury Control Council of Western Australia, <i>Towards a future without violence: A community violence prevention strategy for the North Metropolitan area of Western Australia</i></li> <li>• Amanda Wheeler, Centre Development General Manager, Lifeline. <i>DV-alert: Lifeline’s domestic violence training program</i></li> </ul>	<p><b>Drug detention centres: improving the lives of detainees</b></p> <p><b>LOCATION:</b> The Russell Love Theatrette</p> <p><b>SESSION OBJECTIVE:</b> To explore the potential of an enhanced police-health partnership in promoting diversion of drug users away from compulsory treatment.</p> <p><b>CHAIR:</b> Dr Nick Thomson, Director, Centre for Law Enforcement and Public Health; Honorary Fellow, Nossal Institute for Global Health &amp; Field Director, Johns Hopkins School of Population Health</p> <p><b>PRESENTERS</b></p> <ul style="list-style-type: none"> <li>• Tan Sri Mohamed Zaman Khan, Chief of Malaysian Police (retired), Prison Governor, and recent Chair of the Malaysian AIDS Council. <i>How do we get police to play an active role in diversion into health services (reflecting on Malaysia)</i></li> <li>• Dr Ouk Vichea, Head of Technical Bureau, National Centre for HIV/AIDS, Dermatology and STD, Cambodia. <i>The Police-Community Partnership Initiative: diversion away from detention in Cambodia.</i></li> <li>• Jennifer Hasselgard-Rowe, University of Melbourne PhD student. <i>Legal systems in the context of CCDUs - where are the legal leverage points (including the role of legal/paralegal aid)</i></li> <li>• Sonia Bezziccheri, UNAIDS, Phnom Penh. <i>Report back on the recent UNODC, ESCAP and UNAIDS high level meeting on CCDU in Malaysia</i></li> </ul>	 <p><b>LOCATION: YHM Room</b></p> <p><b>1.30 - 2.00 pm</b> <b>TITLE: The Australian Drug Foundation’s Good Sports / Victorian Police partnership</b></p> <p><b>PRESENTERS:</b> Rod Glenn-Smith – State Manager Good Sports Victoria and South Australia and Bob Barby – Responsible Serving of Alcohol and Club Liquor Licensing Seminar presenter and former District Inspector, Victoria Police.</p> <p><b>2.00 - 2.30 pm</b> <b>TITLE: Youth Support Service</b></p> <p><b>PRESENTER:</b> Ipsita Wright, Director Services, Youth Support and Advocacy Service (YSAS).</p> <p><b>2.30 - 3.00 pm</b> <b>TITLE: How SupportLink and SANE Australia help police to help others</b></p> <p><b>PRESENTERS:</b> Rosario Grasso, Victorian Manager, SupportLink and Yvonne Santen, Manager, SANE Helpline</p> <p>Sponsored by</p>  

## 3.30 – 4.30 pm

## Major session M16

**Solving Complex Problems: Starting and Sustaining Change****LOCATION:**

The Carrillo Gantner Theatre

**SESSION CONVENER:**

REOS Partners

**CHAIR:**

Steve Fontana, Assistant Commissioner Crime, Victoria Police

**SESSION OBJECTIVE:**

This session will explore new, creative and imaginative approaches to shifting stuck and complex social systems. It will examine the latest thinking and experience in mobilising police and community around common goals and collaborative approaches to community problem solving.

**PRESENTERS**

- Charles Allen, Inspector, Greater Dandenong, Victoria Police. *Sustainable conflict resolution for emerging communities: the experience of Greater Dandenong*
- Dr Nicholas Thomson, Director, Centre for Law Enforcement and Public Health. *Police and community led structural change: addressing crime and improving social risk environments in Asia*

**SUMMATION:**

Dr Leigh Gassner, REOS Partners. *Examining systemic problems and convening multisectoral dialogue to find solutions.*

## Major session M17

**Policing and public health at major events and disasters****LOCATION:**

The Russell Love Theatrette

**SESSION OBJECTIVE:**

To examine how effective policing can reduce the damaging outcomes from major disasters and events involving large numbers of people.

**PRESENTERS:**

- Malcolm (Jock) Menzel, Superintendent, State Emergency Response Officer, State Emergencies and Security Department, Victoria Police. *Major planning for emergency responses*
- Assistant Commissioner Dave Cliff, New Zealand Police: *The response to the Christchurch earthquakes*
- Julian Meagher, Manager, Public Health Emergency Management, Victorian Department of Health. *'Roles and responsibilities of public health in major events and disasters: the need to work collaboratively'*

## Mol 6:

## The Marketplace of Ideas



**LOCATION:** YHM Room

**3.30 - 4.00 pm**

**TITLE:** Sex, Drugs, and Law Enforcement: Models of Police-Community Collaboration

**PANELISTS:**

Sanjay Patil, Program Officer, International Harm Reduction Development (OSF)  
 Rachel Thomas, Senior Program Officer, Sexual Health and Rights Project (OSF)  
 Jones Blantari, Deputy Director of Health, Ghana Police Service (Ghana)  
 Dr. Gyaw Htet Doe, Senior Consultant Psychiatrist, Substance Abuse Research Association (Myanmar)

**4.00 - 4.30 pm**

UNAIDS - to be advised

Sponsored by



## 4.30 – 5.00 pm

Conference close

**LOCATION:** The Carrillo Gantner Theatre

**Professor Nick Crofts**, Conference Director.

*Some closing reflections*





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