

ENVISAGING THE FUTURE OF POLICING AND PUBLIC HEALTH

WORKING WITH MARGINALISED COMMUNITIES: INNOVATIVE PROGRAMS AND POLICE PARTNERSHIPS FROM AROUND THE WORLD



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ABOUT THIS REPORT

In September 2022, the Global Law Enforcement and Public Health Association held a major event series called the 'Marketplace of Ideas', which showcased practical and innovative approaches to addressing public health issues that have traditionally been criminalised or over-policed, with a particular focus on policing and policing alternatives. The United Nations Office on Drugs and Crime was a major supporter of the event series.

This report summarises the key learnings and discussions stemming from the event's session on 'Working with Marginalised Communities' in which three exciting programs from around the globe were selected to present their unique approaches to protecting the health and human rights of minority and marginalised communities.

In this report, we look across these case studies to examine the key elements of the programs, to discuss their common characteristics, and to demonstrate the importance of collaborating across sectors to change perspectives and improve community safety, health, and wellbeing outcomes.

A video recording of the full session can be viewed here:
<https://glepha.com/moi-video/>

INTRODUCTION:

BUILDING BRIDGES BETWEEN POLICE AND MARGINALISED COMMUNITIES THROUGH APPROPRIATE CARE AND SUPPORT

What does it mean to be marginalised?

“Marginalised populations are groups and communities that experience discrimination and exclusion because of unequal power relationships across economic, political, social, and cultural dimensions. Examples of marginalised communities are racial/cultural minorities, the LGBTQ+ community, those with limited English proficiency, persons with cognitive or physical impairments, and more.” (Resilience 2022)

“Marginalised populations are groups and communities that experience discrimination and exclusion (social, political and economic) because of unequal power relationships across economic, political, social and cultural dimensions.” (National Collaborating Centre for Determinants of Health 2023)

The killing of George Floyd, a black man, by a white police officer in May 2020 triggered a wave of protests against police brutality and systematic racism in the United States and around the world (Silverstein 2021). Meanwhile, people seeking asylum are routinely and arbitrarily arrested on the basis of their migration status (Human Rights Watch 2015, 2021 & 2022), and in most countries, relationships between lesbian, gay, bisexual, transgender, queer and intersex (LGBTQI+) communities and police have historically been very poor (European Agency for Fundamental Rights 2015; Girardi 2021; Mallory, Hasenbush & Sears 2015). Similarly, many sex workers globally report being afraid and intimidated by hostile police attitudes and practices (African Sex Worker Alliance, 2019; Gillespe 2021; McBride et al. 2020).

These are all examples of marginalised communities that frequently experience police violence, stigma and discrimination. These populations are often in need of critical health and social care but are instead dealt with by the police in ways that exacerbate the existing inequities they experience (Van Dijk & Crofts 2017). Although policing and public safety should be assured for the whole community, too frequently the role of police has been suborned to serve and uphold the status quo.

But it doesn't have to be this way and there are a growing number of alternative policing models and practices being explored and tested. This report showcases three innovative programs that aim to fulfil the police mandate to protect and serve all members of the community, with a particular focus on the human rights and health of minority and marginalised communities. From promoting access to healthcare for sex workers in Mozambique, to enabling public health approaches to human trafficking in Australia, to ensuring adequate social protection for sexual minorities in Liberia, this report canvasses three inclusive programs where police have adopted new ways of working respectfully with focus communities.

Collectively, these case studies demonstrate that law enforcement alone cannot solve complex societal issues. Police must work in close partnership with marginalised groups and social and health services to devise appropriate approaches that respond to the unique needs of these communities. Fostering collaboration, mutual learning, trust and understanding between minority groups, police and health services is imperative to effectively reduce harm and provide appropriate care and support.

CASE STUDY 1:

MOZAMBIQUE POLICE AT THE FOREFRONT OF PROMOTING THE HEALTH AND HUMAN RIGHTS OF SEX WORKERS

THE PLACE OF SEX WORK UNDER NATIONAL LAW

Sex work is not criminalised in Mozambique, but police have been known to target sex workers through other laws. For instance, public decency laws around what is acceptable to wear in public, or a law requiring people to carry identity cards are used as the basis for arrest (Aidsfonds 2018). Because the existing legal framework does not offer sex workers any real protections, the relationship between sex workers and police officers is somewhat ambiguous. On the one hand, police officers have the mandate to protect the community, yet the police can also be perpetrators of discrimination and violence. As a result, many sex workers are reticent to trust the police and many avoid reporting violence or seeking legal advice (Aidsfonds 2016).

VIOLENCE AGAINST SEX WORKERS

A series of reports documenting serious violence against female sex workers – some incidents perpetrated at the hands of the Mozambique Police – signaled to higher authorities that police officers on the frontlines were failing in their duty to protect and serve this vulnerable population.

According to a 2016 survey on violence against sex workers conducted by an NGO based in Mozambique (Aidsfonds 2016):

- 70% of sex workers had experienced violence in the past year, of which 57% experienced physical violence and 54% experienced sexual violence. A significant proportion experienced both forms of violence.

- Of the total incidents of police violence towards sex workers, 12% consisted of beatings and 17% comprised forced sex.
- To prevent arrest, 16% of sex workers reported they had sex with police, while 25% reported they had paid a bribe.
- Among the group of sex workers who had been subject to arrest, 20% were arrested just for being a sex worker, 13% for soliciting sex work on the street, and 6% for carrying condoms.

SEX WORK AND THE PREVALENCE OF HIV

The rate of HIV among female sex workers in Mozambique is high (Aidsfonds 2016); data recorded in 2019 indicates that the HIV prevalence among female sex workers was 28% (compared with 15% in the general female population). Of the sex workers who had contracted the virus, close to 15% said they did not have regular access to medical treatment. Health workers with discriminatory attitudes toward sex workers are a factor that inhibits the uptake of life-saving treatments. Sex workers have reported being shouted at, beaten, and sent away from medical services by health workers.

DEVELOPING NEW POLICE STRATEGIES

In 2018, the Police Service embarked on the development of a training package to increase police officer understanding of gender-based violence. The training provides police with correct information about the legal framework surrounding sex work. Through the training, police learn that sex work is not a crime in Mozambique, that the police role is to protect this vulnerable community group, and that police have legal obligations to uphold the rights of sex workers as articulated in the National Constitution and in the Universal Declaration of Human Rights. The Police Service also developed a curriculum for ‘training of trainers’.

Between 2020 and 2021, the Mozambique Ministry of Health and National AIDS Council established a national plan supported by a multisectoral

Technical Working Group that focuses specifically on key populations including sex workers. The police held a series of liaison meetings with key groups to inform them of their rights and set up services to provide counselling and assist in following up cases of violence not previously reported to the police. To align with the national plan, monitoring and evaluation systems were established to measure the impact of the existing plans and new approaches.

PROGRAM ACHIEVEMENTS

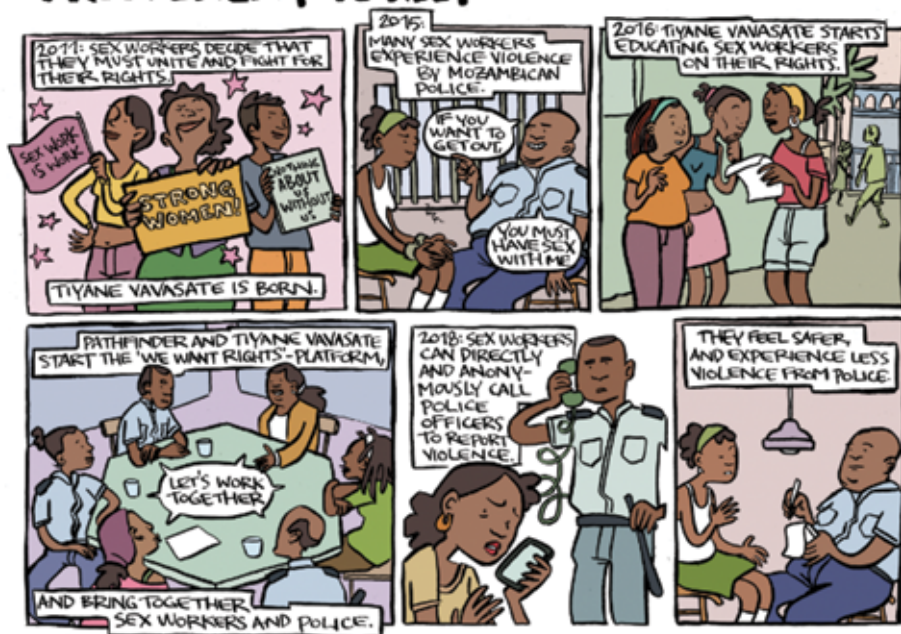
The training program has enabled police officers to better understand the difference between criminal violations and civil violations. Following the training, over 100 cases of discrimination against sex workers were identified, of which 65 were criminal cases and 36 were civil cases. Overall, the training catalysed a significant change in police attitudes resulting in lower levels of discrimination against sex workers. Instead of automatically associating sex workers with criminal behavior, the police provided these vulnerable groups with access to justice and crisis support.

After participating in training, police officers demonstrated a more egalitarian approach towards sex workers and were more inclined to communicate using respectful language instead of responding with physical force. In general, the police were less inclined to assume sex workers were 'guilty of a crime' just by virtue of their profession or their gender.

Although police violence against sex workers has not been eradicated, the data shows that the situation has improved. Beginning in July 2019, across all 11 provinces of Mozambique, sex workers have held joint weekly monitoring and progress meetings with police in their local areas. A designated reporting mechanism has been established for sex workers to notify authorities about cases of violence, and these incidents are discussed at these meetings. As a measure to improve accountability, sex workers take on the role of meeting facilitators.

The program has succeeded in improving the quality of police and sex worker relations. Sex workers report feeling that the general environment has improved as they now are subject to police violence less frequently, and many feel that it is easier to report police violations when incidents do occur. Importantly, the mistreatment of sex workers now has direct consequences for individual police officers; some officers have been suspended or even fired from their roles.

WORKING WITH THE POLICE: FROM ENEMY TO ALLY



CASE STUDY 2:

PROGRAM TO SUPPORT TRAFFICKED PEOPLE IN AUSTRALIA

What is human trafficking?

“Human trafficking is the recruitment, transportation, transfer, harbouring or receipt of people through force, fraud or deception, with the aim of exploiting them for profit. Men, women and children of all ages and from all backgrounds can become victims of this crime, which occurs in every region of the world.” (United Nations Office on Drugs and Crime 2023)

Human trafficking, sometime called ‘modern slavery’ or ‘modern day slavery’, is an umbrella term that refers to all human trafficking, slavery and slavery-like crime types. Human trafficking encompasses a range of serious exploitative practices which are criminalised in Australia as slavery, servitude, forced marriage, forced labour, deceptive recruiting, debt bondage, trafficking in persons, organ trafficking, and harbouring a victim.

These practices seriously impinge on a person’s basic human rights and their personal freedoms. Human trafficking is most likely to occur to people who are vulnerable to forced displacement due to political instability resulting from conflict, poverty, natural disaster, racism, discrimination or marginalisation.

HUMAN TRAFFICKING AND MODERN SLAVERY IN AUSTRALIA

National level data on the number of identified victims of modern slavery, including people experiencing human trafficking, is very difficult to accurately collect since these practices are often hidden in



plain sight. Within the 2021-22 financial year (a twelve-month period), the Australian Federal Police (AFP) received close to 300 reports of modern slavery and human trafficking (AFP 2022). In its report titled *Estimating the dark figure of human trafficking and slavery*

victimisation in Australia, the Australian Institute of Criminology estimates that there are approximately four undetected victims of human trafficking for every victim identified (Lyneham, Dowling & Bricknell 2019).

Other measures have calculated the likely figure to be much higher. The Global Slavery Index estimates that on any given day there were 15,000 people living in modern slavery in Australia, a prevalence of 0.6 victims of modern slavery for every thousand people in the country (Walk Free Foundation 2018).

AUSTRALIA'S RESPONSE TO COMBAT HUMAN TRAFFICKING AND MODERN SLAVERY

Australia takes a whole-of-government approach to human trafficking as detailed in the *National Action Plan to Combat Modern Slavery 2020-2025*, which sets out the strategic direction of Australia's response to modern slavery. There are five strategic priorities under the National Action Plan:

1. **Prevent** – Implement prevention activities that combat the drivers of modern slavery and empower individuals and groups that are vulnerable to modern slavery.
2. **Disrupt, investigate and prosecute** – Identify victims and survivors, implement disruption strategies, and deter perpetrators by holding them to account through effective investigations and prosecutions.

3. **Support and protect** – Provide holistic and tailored victim-centred support and protection that meets the needs of victims and survivors.
4. **Partner** – Collaborate across government and with international partners, civil society, business, unions and academia to ensure a coordinated response to modern slavery.
5. **Research** – Strengthen data collection practices to build the evidence base to support our response to modern slavery.

THE AUSTRALIAN RED CROSS SUPPORT FOR TRAFFICKED PEOPLE PROGRAM

A key component of the National Action Plan is the Support for Trafficked People Program (Support Program), which is run by the Australian Red Cross and administered by the Government's Department of Social Services. The Red Cross program provides assistance to survivors of trafficking and slavery who are referred by the Australian Federal Police. The program aims to assist individuals in meeting their safety, security, health and well-being needs, and to develop options after they leave the program (Australian Government 2020).

People subject to human trafficking often have significant and complex needs requiring ongoing support. The Support Program helps to provide survivors with safe and secure housing, access to health and medical care, skills development and referrals to employment services, access to interpreters, legal and migration assistance, financial support, counselling, and in some cases repatriation and reunification with family.

As part of the Support Program, the Red Cross provides a complex case work service across the entire country. The program draws on a 'client-centred approach' which means that the needs, goals, and aspirations of individuals are identified, and tailored support is provided to each person. In this way, the type of support provided depends on the specific needs of each person.

The Support Program is a time limited support. Initially, a person is given 45 days to rest and recover during which time they are provided with intensive support services (Australian Government 2020). After this, depending on their level of vulnerability and their willingness and ability to participate in a criminal justice process, the person will remain in the Support Program or transition to exit the program.

PROGRAM ACHIEVEMENTS

The Support Programs has seen a gradual increase in the number of police referrals year after year. It has also seen an increase in the number of people offered social and health services through a client-centred case management approach. As of 30 June 2022, 556 people in Australia who were subject human trafficking have received support through the Support Program. The Australian Red Cross and other civil society organisations have also been advocating for an additional referral pathway that allows people fearful of the police and other authorities to receive support.

If you or someone you know is being exploited, help is available. For information or confidential advice please contact the Australian Red Cross on +61 3 9345 1800 or email national_sttp@redcross.org.au



Health Care



Reconnect
with Family



Accomodation



Emotional
Support



Employment



Financial
Support



Education
and Training



Essential
Items



Connection
to Community



Access to
Financial
Services



Access to
Social
Services



Legal and
Migration
Advice*

CASE STUDY 3:

POLICE TRAINING ON SOCIAL PROTECTION AND HUMAN RIGHTS FOR SEXUAL MINORITIES IN LIBERIA

DISCRIMINATION AGAINST SEXUAL MINORITIES IN LIBERIA

Liberia experienced unprecedented political unrest during its Civil War (1980-2005). An estimated 150,000-200,000 men, women and children died, while many more were displaced (Centre for Justice & Accountability 2023). In subsequent decades, although there have been improvements across a number of indicators, many challenges still exist (Sachs et al. 2022).

In Liberia, lesbian, gay, bisexual, transgender, queer and intersex (LGBTQI+) people continue to face serious stigma and discrimination. Same-sex sexual activity is criminalised under Liberia's Penal Code, which is defined within the Code as "voluntary sodomy, a first-degree misdemeanor punishable by up to one year in prison or a fine of up to 1000 Liberian Dollars or both" (Liberian Penal Code 1976). Repeat offenders may be subject to even heavier penalties. According to the Code, same-sex sexual activity is illegal irrespective of a person's gender.

LGBTQI+ communities routinely encounter harassment, death threats and physical attacks. A report published by the United Nations in November 2020 calls attention to the widespread violence and abuse LGBTQI+ individuals face in Liberian society (United Nations Development Programme & Office of the United Nations High Commissioner for Human Rights 2020). The report further points to numerous instances where police either harassed people based on their real or perceived sexual orientation or gender identity or failed to investigate crimes against those persons. It documents instances of arbitrary arrest and detention of individuals suspected of engaging in same-sex sexual conduct. Based on the research findings, the report recommends law enforcement officials receive training on how to work with sexual minorities to ensure the

safety and protection of these communities in line with international human rights standards.

THE LESBIAN AND GAY ASSOCIATION OF LIBERIA AND THE SOLIDARITY SISTERS NETWORK

In the absence of strong support from most national institutions, civil society organisations have played an important role in providing police training on the protection of sexual minorities. Two local organisations that run police training sessions include the Lesbian and Gay Association of Liberia (LEGAL) and the Solidarity Sisters Network of Liberia (SoSNoL).

LEGAL was founded in 2012 to serve as the voice for the LGBTQI+ community and to advocate for their access to justice, health rights and equality. The Solidarity Sisters Network was founded several years later in 2015 to serve as Protection Officers for the LGBTQI+ community and to specifically focus on strengthening access to social justice. The two organisations work as partners and aim to ensure that the LGBTQI+ community receive appropriate access to health care services without any form of stigma and discrimination.

POLICE TRAINING TO RAISE AWARENESS ON THE RIGHTS OF SEXUAL MINORITIES

Within the training package for police developed by LEGAL and SoSNoL, particular attention is given to educate police officers on international and national level human rights agreements and to highlight the underlying principles





under which a national police force ought to operate. The training raises awareness on the human rights, health rights, and sexual and reproductive health rights of LGBTQI+ communities.

The training content includes information on The Universal Declaration of Human Rights, Resolution 275 on Protection against Violence and other Human Rights Violations against Persons on the Basis of their Real or Imputed Sexual Orientation or Gender Identity, and Resolution 375 on the Rights to Life in Africa which urges “all State Parties to ensure that their domestic laws on the use of force by law enforcement officials are in line with regional and international standards and in particular the principles of precaution, necessity and proportionality.” The training module also includes information on the Constitution of the Republic of Liberia and the country’s Public Health Law in relation to the role and mandate of law enforcement officers.

Following attendance at the training, law enforcement officers are then selected by the Police Force to serve as ‘Protection Focal Persons’ within policing zones. The role of these Focal Persons is to provide protection for the LGBTQI+ community and to help individuals access social and health services. The function of the role aligns with the national public health law and other legal frameworks that are discussed in the training sessions.

PROGRAM ACHIEVEMENTS

For the past twenty years, LEGAL and SoSNoL have worked to inform and educate the Liberian Police on the rights of sexual minority groups, the harmful impacts of stigma and discrimination, and the health and wellbeing consequences of excluding minority communities from social and medical services.

Between 2016 and 2022, LEGAL and SoSNoL trained over 100 law enforcement officers. By participating in the trainings, police officers learn to apply national and international laws and guidelines in their daily practices. As a result of these trainings and dialogue with the police, things are changing in the right direction as many more LGBTQI+ community members now have access to justice without facing discrimination.

Other notable achievements include the placement of Protection Focal Persons at nine police zones across two district localities, and the placement of Outreach Officers at the community level who document cases of abuse and violence committed against LGBTQI+ individuals, as well as against sex workers, people who use drugs, and people living with disabilities.



In order to continue this important work, the two community-based organisations have to overcome a number of challenges and are working to mitigate these. Successful delivery of the training program relies on the good will of police to participate, strong multi-sectoral collaboration between partners, and sufficient funding to cover the costs of running the training sessions.

DISCUSSION

WHAT CAN WE LEARN FROM THESE CASE STUDY PROGRAMS?

Due to their life circumstances and the bias often inherent in criminal justice systems, people from marginalised communities are more likely than the rest of the general population to come into contact with law enforcement. Across the world, people from vulnerable groups are routinely subject to violence, stigma and discrimination in their interactions with police. If concerted efforts are not made to improve the nature of these relationships, rather than protecting and upholding the rights of marginalised communities, police will continue to exacerbate existing inequalities and put these populations at greater risk of harm.

Fortunately, there is a growing number of alternative policing models and practices currently being explored and tested. In the three case study programs we have selected to highlight in this report, police have developed new ways of working respectfully with marginalised communities. Our case studies illustrate how closer collaboration between law enforcement, key communities, and public health and welfare services have led to tangible improvements in health and justice outcomes.

There are different approaches to bringing stakeholders together to develop more effective and humane policing models. While it is crucial to ensure that programs fit with the local culture and context, there are a number common themes and underlying principles evident across the case studies that we can learn from and that are important in almost any context.

COMMON THEMES AND UNDERLYING PRINCIPLES FOR WORKING WITH MARGINALISED COMMUNITIES

Partnerships

The case studies demonstrate that law enforcement on its own cannot solve complex societal issues. Police must work closely in partnership with marginalised communities and with social and health services to devise appropriate approaches that respond to the specific needs of these populations. Fostering collaboration, mutual learning, trust and understanding between marginalised groups, police and health services is essential to effectively reduce harm and ensure vulnerable communities have access to appropriate care and support.

Shifting police attitudes

The evidence shows that punitive police behaviours towards marginalised communities can significantly increase health risks. For example, police in many countries have been found to use the possession of condoms as evidence to justify arrest for prostitution (Clark 2014; Footer et al. 2016). The same is true for needles and syringes. This “evidence” is then used by police officers to extort money, sexual favours, or drugs, or given as a rationale for beatings, torture, rape and other human rights abuses (Crofts & Patterson 2016).

As agents of the state, the police role often reflects the status quo and societal prejudices. The behaviours of police are therefore critical in shaping the risk environment for marginalised communities. In order to address deeply entrenched power and opportunity inequality, it is necessary to shift the attitudes of police so that they come to view their mandate as protecting the broader society which *include* marginalised communities, rather than as protecting society *against* marginalised communities.

Education and training

Quality training provides police officers with on-the-job tools that they can use to improve their relationships with communities and better respond to the specific needs of marginalised groups. Training content can include an overview of relevant laws and human rights frameworks, awareness raising on the harmful impacts of stigma and discrimination, and practical ways in which police can support individuals to access welfare and medical services.

Police officers who attend training sessions are able to hear the concerns of marginalised communities directly from individuals with lived experience. In the case study from Liberia, for example, people from the LGBTQI+ community developed and ran training sessions for the police. Designing and delivering police training sessions together with representatives from key communities can also be an effective way to foster greater understanding and collaboration.

Evaluation and data collection

It is important to continuously evaluate police interventions and the efficacy of police training to ensure that programs are responding appropriately and sensitively to the needs of focus communities. Evaluation processes should meaningfully include the perspectives of people from focus communities and seek to integrate their feedback and advice on how the design and implementation of programs can be improved.

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GLEPHA'S SPECIAL INTEREST GROUPS

The Global Law Enforcement and Public Health Association is a not-for-profit, membership-based association bringing the law enforcement and public health sectors together to address complex issues requiring an inter-sectoral approach. GLEPHA sees it of prime importance to bring together practitioners, policymakers, and academics to explore the nature of the myriad interactions between the police and public health sectors across the widest range of social, humanitarian, security, and public health issues.

Under GLEPHA's umbrella there are 11 Special Interest Groups that serve as international forums for individuals and organisations who have knowledge, experience or interest on particular topics to engage in collaborative discussion and exchange. If you are interested in finding out more about the issues explored in this report, please consider joining a Special Interest Group.

To find out more visit: <https://glepha.com/special-interest-groups/>

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