



# LEPH2019

EDINBURGH  
SCOTLAND  
21-23 OCT

The Fifth International Conference on Law Enforcement & Public Health

## CONFERENCE PROGRAM





# GLOBAL LAW ENFORCEMENT & PUBLIC HEALTH ASSOCIATION INC.

## BE A LEADER IN AN EMERGING FIELD

### Background to GLEPHA

The Global Law Enforcement and Public Health Association is a unique organisation founded to further the policy and practice that underpins growing and significant developments which recognise the inter-related nature of law enforcement and public health – both in their widest senses.

Join other researchers, policy makers and practitioners across a range of diverse sectors in leading the global thinking and practice in this emerging field. GLEPHA members are a diverse community whose learnings will improve community safety and well being; will enhance the health and welfare of key stakeholders; and will provide practical, evidence based and cost effective solutions to some of the most significant social, health and law enforcement challenges facing our communities.

### GLEPHA aims

- ▶ To build a network of research institutions and individuals
- ▶ To devise, support and engage in research and collaborations in the LEPH field
- ▶ To promote and support development of new researchers in the LEPH field
- ▶ To foster information exchange and support among members



A key **GLEPHA strategy** is the development of **Special Interest Groups (SIGs)**. These SIGs are becoming information exchange mechanisms and will play an integral role in the programming at future LEPH conferences.



TO JOIN **GLEPHA** GO TO [www.gleapha.wildapricot.org/membership](http://www.gleapha.wildapricot.org/membership)

# WELCOME FROM EDINBURGH NAPIER UNIVERSITY



## **Professor Andrea Nolan, Principal and Vice-Chancellor, Edinburgh Napier University**

On behalf of Edinburgh Napier University, it is a pleasure to welcome you to Edinburgh. I hope you enjoy your time in our beautiful city, and get an opportunity to experience the warm hospitality Scotland is renowned for.

We are truly honoured to be the host university and convenors of LEPH 2019 and I'm excited that the ambitions of the conference mirror the values and purpose of Edinburgh Napier. We have a shared focus on integrating academic practice with frontline services to transform lives and add value to the social, cultural and economic capital of the communities we serve.

Our commitment to this emerging field of law enforcement and public health practice is reflected in the development of the new Scottish Centre for Law Enforcement and Public Health, which you will hear more of throughout the conference.

Through promoting interdisciplinarity, LEPH 2019 seeks to bring about real change in people's lives. The coming together of law enforcement and public health is critically important and it is crucial that we recognise and acknowledge the common ground they share. In times of austerity and complex individual and community challenges, the

significance of inter-sectoral approaches has never been more vital.

Arguably, collaboration is sometimes easier said than done. Different organisational and professional cultures, educational, financial and regulatory systems, and roles and responsibilities can challenge cooperation. It would be all too easy to remain in our sectors and our silos. Yet, no organisation can address complex societal problems on its own. Real and lasting change can only be made by working together.

LEPH2019 brings to life opportunities for collaboration. The key strength of this unique event is the diversity of themes across the law enforcement and public health intersect. It is a rich inter-disciplinary community of practitioners, organisation leaders, policy makers, researchers, academics, and those with lived experience of the LEPH interface. Through knowledge exchange, debate and discussion, relationships – international, national and local – will be strengthened and we will be one step closer to making those positive changes to people's lives.

I'd like to thank you for attending and bringing your expertise to this exciting event. I wish you a productive three days and every success for the future.

# WELCOME FROM THE CHAIR OF THE ORGANISING COMMITTEE



Dear friends and colleagues,

It is an absolute pleasure to extend a very warm Scottish welcome to you. My colleagues and I from Edinburgh Napier University are delighted to host the 2019 international LEPH conference. This unique and friendly conference exists on the enthusiasm and passion of its speakers, the submissions from interested colleagues and the

willingness of all delegates to share their ideas, research and practice experiences.

Law enforcement and public health are inextricably intertwined. There is a myriad of ways in which people come to the attention of both services. It is critically important that we recognise and acknowledge where these worlds come together, and inter-sectoral approaches are developed and strengthened. No one agency or service is fully skilled, equipped and resourced to begin to support people to make lasting change.

By coming together there are opportunities to transform the way we collaborate and operate. Conferences such as LEPH2019 continuously

challenge and improve our ability to address complex problems to make real change to people's lives. I hope through your experiences at the conference you sense a willingness to work better together, as I do. There are real opportunities to think creatively and I am excited about where we are headed.

We hope and trust that you will find the program innovative, informative and thought provoking, bringing you new ideas. I encourage you to make the most of the networking opportunities during and after the conference; it provides a unique opportunity to meet colleagues, make new friends and renew old acquaintances both from familiar worlds and sectors and from brave new worlds.

So welcome to Edinburgh, Fàilte! I hope you have the opportunity to enjoy many of the delights this beautiful city has to offer. Thank you for your participation. I sincerely hope you enjoy the conference.

**Inga Heyman**  
Conference Chair  
Edinburgh Napier University

# The Scottish Institute for Policing Research

The Scottish Institute for Policing Research (SIPR) is a strategic collaboration between 14 of Scotland's universities and the Scottish police service supported by investment from Police Scotland, the Scottish Police Authority, and the participating universities. Our key aims are:

- To undertake high quality, independent, and relevant research;
- To support knowledge exchange between researchers and practitioners and improve the research evidence base for policing policy and practice;
- To expand and develop the research capacity in Scotland's universities and the police service;
- To promote the development of national and international links with researcher, practitioner and policy communities.

We are an interdisciplinary Institute which brings together researchers from the social sciences, natural sciences and humanities around four broad thematic areas: Police-Community Relations; Evidence & Investigation; Education & Leadership; and Public Protection;

We promote a collaborative approach to research that involves academics and practitioners working together in the creation, sharing and application of knowledge about policing.

Our activities are coordinated by an Executive Committee comprising academic researchers and chief police officers, and we are accountable to a Board of Governance which includes the Principals of the participating universities and Her Majesty's Inspector of Constabulary for Scotland.

We work closely with Police Scotland, the Scottish Police Authority, the Scottish Government, Her Majesty's Inspector of Constabulary and the Scottish Parliament to ensure our research informs the development of policing policy in Scotland.

We engage in joint projects with colleagues in the Scottish Centre for Crime and Justice Research, are a founding member of the European Police Institutes Collaboration (EPIC) and are members of the Policing Working Group of the European Society of Criminology.

For further information see [www.sipr.ac.uk](http://www.sipr.ac.uk)

Contact: Associate Professor Liz Aston ([l.aston@napier.ac.uk](mailto:l.aston@napier.ac.uk))



## Opportunities SIPR offers researchers and practitioners

- **Infra-structure** for engagement;
- **Investment** in research and knowledge exchange;
- **Innovation** in connecting evidence and practice
- **Interdisciplinary** community of researchers
- **International** networks of researchers and practitioners;
  - **(Pathways to) Impact ...**

## How you can get involved?

- Sign up to our **mailing list**
- Make sure you are featured on the 'People' section of our **website**:
  - align with a **Network**
  - tell us about your **expertise**



- Attend events e.g. SIPR Annual Conference
- Encourage engagement by PG students
- Apply for small SIPR grants and tenders
  - SIPR support for PhD applications
  - SIPR support for KE events
- SIPR Engagement in European Policing Research Programme
- Scottish Justice Fellows Programme (with SG and SCCJR)
  - Mentor a Practitioner Fellow

### Dissemination

- Share your findings in a SIPR Briefing Paper / Research Report / Annual Report article
- Share items on the SIPR Noticeboard (events, jobs, call for research participants, publications)

# WELCOME FROM THE CHAIR OF THE PROGRAM COMMITTEE



We are gathering here in Edinburgh for the 5th version of this extraordinary conference, the fifth time I have had the pleasure of welcoming you. It is very special to be in Scotland, where there has been so much pioneering of public health approaches to violence and to the reduction of drug-related harm, and where there is an ambition to become the first fully ACEs-aware

nation. And working with the Edinburgh Napier University, our hosts in Edinburgh, has been an especial pleasure.

The Global Law Enforcement and Public Health Association, now a partner of the World Federation of Public Health Associations, is growing in reach and capacity; specific issues within the complex field of LEPH are being addressed by the growth of GLEPHA's Special Interest Groups, active so far in mental health, drugs and harm reduction, and education, and forming around diversion/deflection, gender and law enforcement, and the role of prosecutors. That ENU is launching the Scottish Centre for Law Enforcement and Public Health marks yet another milestone along the developing pathway of the LEPH movement – and shows that the Conference is not simply a one-off event, it is a stop along the broadening highway.

The Scottish Government, through its Health and Justice Board Collaboration Improvement Board, was instrumental in bringing the conference to Edinburgh, and we are extremely grateful for this. We have received extraordinary interest and support from Police Scotland and NHS Health Scotland, as well. The public health approach to policing, informed by understandings of the impact of trauma and of Adverse Childhood Experiences, is very much to the fore in Scottish public policy development, and will be highlighted many times through the LEPH2019 program.

As well, in line with our ambition always to make the conference relevant to its host, there are pre-conference meetings addressing specifically locally important issues: one is around illicit drugs – recognizing that the rate of opioid-associated deaths in Scotland is the highest in Europe and among the highest in the world, and requires new and collaborative approaches. Another examines and addresses the multiple needs of women involved in the criminal justice system, as employees or clients; and a third looks specifically at the interaction between police and mental health services especially in the accident and emergency department.

As in previous conferences, the range of partners and supporting organisations is huge; many have now been associated with several LEPH conferences, and we are welcoming as delegates an increasing number who have been to previous LEPH conferences – we are indeed building a constituency, one which is clearly going to last and grow in size and influence. For the first time this year at a LEPH conference we have a focus on the role of the public prosecutor in the achievement of the public health mission, with keynote talks from the Scottish Crown Agent and the District Attorney of Philadelphia as well as conference sessions and a pre-conference meeting to develop a Special Interest Group. This is in acknowledgment that there are many relevant parts of the law enforcement and criminal justice sectors that the LEPH conferences and Association have not yet focused on. We have again joined forces with the CSKA's Journal of Community Safety and Wellbeing for this Conference, with production of at least one special issue with papers from the Conference, perhaps more; and also for the first time with the Journal of Psychiatric and Mental Health Nursing.

I hope you find the LEPH2018 Conference enjoyable and useful, that you establish links and partnerships that enrich your work and will grow over time, and that you consider deepening your involvement in this dynamic field by joining GLEPHA and becoming active in the SIG affairs.

**Professor Nick Crofts**

President, Global Law Enforcement and  
Public Health Association  
LEPH2019 Conference Program Director

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# CONFERENCE COMMITTEES

## ORGANISING COMMITTEE

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### **Inga Heyman (Chair)**

Lecturer, Mental Health and Nursing, Edinburgh Napier University, Scotland

### **Nick Crofts**

Director, Centre for Law Enforcement and Public Health, Australia

### **Nadine Dougall**

Associate Professor, Napier University, Scotland

### **Orlando Heijmer-mason**

Health and Justice Collaboration Team, Scottish Government

### **Bill Stronach**

Director, Centre for Law Enforcement and Public Health, Australia

## CONFERENCE MANAGERS

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### **Kevin Shapland**

#### **Atlanta Lloyd**

*CJS Event Solutions*

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## CONFERENCE DESIGNER

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### **Eeleng Kok**

*Eeleng Design*

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## PROGRAM COMMITTEE

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

Conference and Program Director  
Centre for Law Enforcement and Public Health, Australia,  
Honorary Professorial Fellow, University of Melbourne

### **Dr Elizabeth Aston**

Director, Scottish Institute for Policing Research

### **Dr Isabelle Bartkowiak-Theron**

Senior Researcher, Tasmanian Institute of Law Enforcement Studies

### **Richard Bent**

Senior Research Fellow, Institute for Canadian Urban Research Studies, Simon Fraser University

### **Chief Inspector Michael Brown**

Mental Health Co-ordinator, College of Policing, UK

### **Ian de Terte**

Senior Lecturer, School of Psychology, Massey University, New Zealand

### **Superintendent Stan Gilmour**

Local Policing Area Commander, Thames Valley Police, Reading, UK

### **Inga Heyman**

Lecturer, Mental Health and Nursing, Edinburgh Napier University, Scotland

### **Dr Melissa Jardine**

Gender Adviser and Communications Manager, Centre for Law Enforcement and Public Health, Australia

### **Dr Katy Kamkar**

Clinical Psychologist, Centre for Addiction and Mental Health, Canada

### **Professor John Middleton**

PrFPH, FRCPL, President, UK Faculty of Public Health

### **Dr Anita Morrison**

Joint Head of Justice Analytical Services, Scotland

### **Dr Khuat Thi Hai Oanh**

Executive Director, Centre for Supporting Community Development Initiatives, Vietnam

### **Geraldine Strathdee**

National Clinical Director for Mental Health, NHS, England

### **Auke van Dijk**

Senior Strategist, Police of the Netherlands

### **Professor Jennifer Wood**

Department of Criminal Justice, Temple University, USA

# PROGRAM SUMMARY

## DAY 1: MONDAY 21 OCTOBER

8.30-9.55	<b>PLENARY SESSION P1</b>
9.55-10.05	<b>WELCOME FROM YOUR HOSTS</b>
10.05-10.30	<b>MORNING TEA</b>
10.30-11.55	<b>MAJOR SESSIONS</b>
	<b>M1</b> The Scottish Centre for Law Enforcement and Public Health: how we got here and where we are going
	<b>M2</b> Public Health approaches in policing
	<b>M3</b> Police mental health and well-being
	<b>M4</b> Checkpoint: an innovative programme to navigate people away from the cycle of reoffending, and improve their wellbeing and life chances, particularly around the use of alcohol and drugs.
10.30-5.30	<b>POSTERS</b>
12.05-1.00	<b>CONVENED SESSIONS</b>
	<b>CV1</b> Fighting domestic violence in Europe - best practices and major challenges
	<b>CV2</b> Drug courts – evidence, lessons learned and recommendations
	<b>CV3</b> The approach to violence reduction in Scotland and its wider application
	<b>CV4</b> Public health approaches to the prevention of child sexual abuse
1.00-2.00	<b>LUNCH</b>
1.15-1.45	<b>LUNCHTIME SESSIONS</b>
	<b>L1</b> Public health: should prosecutors mind their own business?
	<b>L2</b> The police role in drug use scenarios: stigma and expectations of police actions
	<b>L3</b> The disadvantage of a head start: why low and middle income countries might take the lead in developing LEPH
2.00-3.30	<b>CONCURRENT SESSIONS</b>
	<b>C1</b> Collaboration & technology: building enhanced capacity for community safety and well-being
	<b>C2</b> Harm reduction
	<b>C3</b> Mental Health pathways and partnerships
	<b>C4</b> Risk assessment and risk management of intimate partner violence
	<b>C5</b> Developing best practices related to data, education and screening: working across sectors to improve outcomes associated with Fetal Alcohol Spectrum Disorder
2.00-3.30	<b>MARKETPLACE OF IDEAS</b>
	<b>1.1.</b> Law enforcement psychological autopsy: hands-on workshop
	<b>1.2.</b> Building mental health crisis response systems: emerging best practices from the United States
	<b>2.1.</b> A health promoting police force: an evolutionary development for wellbeing at work
	<b>2.2.</b> Connecting the dots: promoting a joined up approach to “diversity and inclusion” and “organisational health and wellbeing”
	<b>3.1.</b> Public health approaches to policing: practical tools for police forces and partners
	<b>3.2.</b> Working together to achieve more
3.30-4.00	<b>AFTERNOON TEA</b>

4.00-5.30	<b>CONCURRENT SESSIONS</b>
	<b>C6</b> Collaborative leadership
	<b>C7</b> Police well-being I
	<b>C8</b> Diversion
	<b>C9</b> Impact of incarceration
	<b>C10</b> Female Genital Mutilation
4.00-5.30	<b>MARKETPLACE OF IDEAS</b>
	<b>4.1.</b> Data analytics for law enforcement and public health in the Reading Model
	<b>4.2.</b> Are you going to kill me? The potential fatal consequences of misinterpreted behaviour
	<b>5.1.</b> Project Lift: collaboration - learning from practice
	<b>5.2.</b> Deciding when to "deflect": a visual model of police decision-making factors
	<b>6.1.</b> Substance misuse and the impact of stigma
	<b>6.2.</b> Canine assisted child forensic interviewing in child abuse cases
5.30	<b>NETWORKING SESSION OVER DRINKS AND NIBBLES</b>

## PROGRAM SUMMARY DAY 2: TUESDAY 22 OCTOBER

8.30-10.00	<b>PLENARY SESSION P2</b>
8.30-3.00	<b>POSTERS</b> - See Monday at 10.30 for a list of poster presentations
10.00-10.45	<b>LEPH ORATION</b>
10.45-11.15	<b>MORNING TEA</b>
11.15-12.45	<b>MAJOR SESSIONS</b>
	<b>M5</b> Leave your ego at the door
	<b>M6</b> Models and mechanisms supporting LE/MH partnerships to improve response to individuals with behavioural health conditions
	<b>M7</b> Early Action Together Programme: moving from understanding to operationalising trauma-informed policing in Wales
	<b>M8</b> Learning from Canada's accelerating journey toward collaborative Community Safety and Well-Being (CSWB)
12.45-2.00	<b>LUNCH</b>
1.00-1.40	<b>LUNCHTIME SESSIONS</b>
	<b>L4</b> Don't just do something, stand here: an autoethnographic account of police involvement in mental health
	<b>L5</b> Cutting crime with compassion: a curious defence lawyer's story
	<b>L6</b> An introduction to the Journal of Psychiatric and Mental Health Nursing
2.00-3.30	<b>CONCURRENT SESSIONS</b>
	<b>C11</b> Health and health needs of people involved with criminal justice
	<b>C12</b> Harm Reduction in different countries I
	<b>C13</b> Sex work
	<b>C14</b> Trauma and Adverse Childhood Experiences I
	<b>C15</b> The role of prosecutors in achieving public health goals



# PROGRAM SUMMARY

## DAY 3: WEDNESDAY 23 OCTOBER

8.30-10.00	<b>PLENARY SESSION P3</b>
10.00-10.30	<b>MORNING TEA</b>
10.30-11.55	<b>MAJOR SESSIONS</b>
	<b>M9</b> Autism and policing: supporting autistic individuals in police custody
	<b>M10</b> Police mental health and wellbeing
	<b>M11</b> 5 Nations' Health & Justice Collaboration
	<b>M12</b> Collaboration and collaborative leadership
12.05 - 1.00	<b>CONVENED SESSIONS</b>
	<b>CV5</b> Breaking boundaries: bringing public health practice to public safety
	<b>CV6</b> Police oversight, human rights and accountability in Africa: collaborating for better policing of vulnerable groups
	<b>CV7</b> Trauma Informed Organisations: what, why and how
	<b>CV8</b> Road Safety
1.00-2.00	<b>LUNCH</b>
1.15-1.45	<b>LUNCHTIME SESSIONS</b>
	<b>L7</b> Start where you are and do what you can
	<b>L8</b> The impact of police officer stress on health and performance: a Canadian perspective
	<b>L9</b> Meet the Editor - an introduction to the Journal of Community Safety and Wellbeing
2.00-3.30	<b>CONCURRENT SESSIONS</b>
	<b>C21</b> Hate crime and terrorism
	<b>C22</b> Incarceration
	<b>C23</b> Mental health in institutions and institutional responses
	<b>C24</b> Harm Reduction in different countries II
	<b>C25</b> Police well-being III
2.00-3.30	<b>MARKETPLACE OF IDEAS (PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS)</b>
	<b>13.</b> Intimate partner violence (IPV) in Alaska: a focus on perpetrators of IPV using a culturally-competent response
	<b>14.</b> A public health approach to police custody healthcare
	<b>15.1.</b> Taking a trauma informed lens to law enforcement
	<b>15.2.</b> Looking ahead to build the spirit of our women: Learning to Live Free from Violence Project
4.00-5.00	<b>CONCURRENT SESSIONS</b>
	<b>C26</b> Vulnerable populations
	<b>C27</b> Learning about and living LEPH
	<b>C28</b> LEPH in Low and Middle Income Countries
	<b>C29</b> Our rights and what works for us
5:00-5.30	<b>CLOSING PLENARY SESSION P4</b>



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# INVITED SPEAKERS



## Greg Anderson

**PRESENTATION: The impact of police officer stress on health and performance: a Canadian perspective**

Justice Institute of British Columbia, Canada

Dr Greg Anderson is the Dean, Office of the Applied Research & Graduate Studies, at the Justice Institute of British Columbia (JIBC), and the

Associate Director, Police Services for the Canadian Institute for Public Safety Research and Treatment. He provides oversight as Investigator and/or Administrative Lead with the application and management of individual and collaborative applied research projects that have totaled over \$38 million in the last seven years. His research interests

lie in occupational fitness and wellness, and occupational physiology of physically demanding occupations. He has developed and assessed an online learning tool for first responders to improve their personal resilience prior to deployment, and has recent publications in mental health, occupational and organizational stress. He is well published in both pure science and practitioner journals, and has been an invited speaker at regional, national and international venues where he translates "the science" for practitioners, providing them with a better understanding of the fundamental theory behind popular practice.



## Sir Harry Burns

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

Sir Harry Burns graduated in medicine in 1974 from Glasgow University. In 1984, he was appointed Consultant Surgeon in the University Department of Surgery, Royal Infirmary, Glasgow. Many of his patients lived in

the east end of Glasgow and it was this insight to the complex inter-relationships between social and economic status, illness and recovery that began his lifelong focus: to reduce health inequalities. In 1990, following completion of an MSc Public Health, he was appointed Medical Director of the Royal Infirmary.

In 1994, he was appointed Director of Public Health for Greater Glasgow Health Board and in 2005 he became Chief Medical Officer for Scotland. He was Knighted by Queen Elizabeth in 2011 and in 2014, the First Minister of Scotland, Nicola Sturgeon, presented him with a lifetime achievement award from the Scottish Government in recognition of his service to the public.

In April 2014 he became Professor of Global Public Health at Strathclyde University. In addition to research publications and supervision of doctoral students, Sir Harry leads on a number of major, multi-agency projects and is Chair of the University's Centre for Health Policy. He is a regular invited keynote speaker to local, national and international events and to academic programmes. Among many appointments, he is a member of the Scottish Government's Council of Economic Advisors; a member of Diabetes UK Board; Chair of the Wheatley Foundation; a member of Johnson & Johnson's Impact Investment Advisory Committee and a member of the Health Foundation's Sciana Programme for International Health Leaders.

In November 2017, the Scottish Government published Sir Harry's report on an independent review of targets and indicators in Scotland's NHS.



## Mark Collins

**PRESENTATION: Mental health: next steps in policing**

Mark Collins was appointed Chief Constable of Dyfed-Powys Police on 18th December, 2016. He is the National Police Chiefs Council (NPCC) Lead for Mental Health and Policing.

Mark joined Dyfed-Powys Police as a Special Constable in Carmarthen in 1987. He transferred to the Metropolitan Police in 1991. In 1995 he returned to Dyfed-Powys Police as a Police Constable in Cardigan and, over the next 10 years, he went on to work in all four counties across the force. He served at every rank up to Superintendent, in both Uniform Policing and CID.

In 2006, Mark was promoted to lead the Wales Extremism and Counter Terrorism Unit (WECTU) and in more recent years has served as the 'Preventing Violent Extremism Deputy National Co-ordinator' based in London with a national remit. Mark also served as a Borough Commander in Waltham Forest with the Metropolitan Police and as Assistant Chief Constable and Deputy Chief Constable with Bedfordshire Police prior to returning to Dyfed-Powys Police as Chief Constable in December 2016.

Chief Constable Collins has a BSc in Criminal Justice Studies and is a member of the Chartered Institute of Management.



## Matt Jukes

PRESENTATION: **Early Action Together: ACE – informed partnership in Wales**

Matt Jukes was appointed Chief Constable of South Wales Police in January 2018. Matt joined South Yorkshire Police in 1995 as a police constable on the streets of Sheffield, soon after being commended for his tenacity and

courage in the arrest of a suspect following a post office robbery.

Between 1997 and 2006, Matt went on to work in a number of roles, principally as a detective. In his early CID career he was involved in operations to tackle violent drugs gangs and later specialised in counter terrorism.

He worked for the forerunner of the National Counter Terrorism Policing network and represented United Kingdom policing at G8 meetings in the United States in 2004. Matt remains involved strategically in counter terrorism and has had a leading role in a number of high profile operations across England and Wales.

In 2006 Matt returned to local policing as a divisional Chief Superintendent in the former coalfields and industrial areas of South Yorkshire.

He joined South Wales Police as an Assistant Chief Constable in 2010. He led the latest phase of the force's response to several miscarriage of justice cases from the 1980s and 90s, including the infamous 'Cardiff 3' case. As well as overseeing electoral fraud investigations in the National Assembly, he had command of regional organised crime and counter terrorism units.

Matt was appointed Deputy Chief Constable (DCC) in August 2013. As DCC he had the task of leading a change programme to equip the force to manage a £50 million reduction in funding, at the same time as responding to huge operational challenges including the 2014 NATO Summit, 2015 Rugby World Cup and 2017 UEFA Champions League Final. After this period of change, the force has remained focused on local policing and a rigorous programme of back-office reform has supported one of the smallest front-line reductions in the UK with South Wales Police recently assessed as the most visible force in England and Wales.

Matt is a member of the Prince's Trust Advisory Council in Wales and has a leading role in work with Public Health Wales on tackling Adverse Childhood Experiences. He leads on a number of portfolios for the National Police Chiefs' Council, including the recruitment, retention and wellbeing of investigators.

He retains a strong interest in wider issues of health and wellbeing in the service and is chair of Police Sport UK. As a keen sportsman himself, he has competed in running, triathlon and swimming events (and keeps promising the next charity match is definitely his last game of rugby).

Matt was awarded a Queens Police Medal in the New Year Honours List 2018.

Matt, a married father of two, was born in the Midlands and has called South Wales home since 2010.



## Lawrence S. Krasner

PRESENTATION: **Prosecution = Prevention**

Lawrence S. Krasner was officially sworn in on January 2, 2018, as the City of Philadelphia's 26th District Attorney. Before being elected District Attorney, Mr. Krasner served of-counsel at Greenblatt, Pierce, Funt, and Flores, LLC. Larry was

born in 1961 in St. Louis, the son of a World War II veteran and author father and evangelist mother. After attending public schools in St. Louis and the Philadelphia area, Larry earned degrees from the University of Chicago and Stanford Law School with the help of student loans and scholarships.

Mr. Krasner attended public school in the St. Louis and Philadelphia areas. He received his undergraduate degree at the University of Chicago in 1983 and his law degree from Stanford Law School in 1987, where he was selected to the Stanford Law Review. After multiple offers of employment in prosecutors' and public defenders' offices throughout the country, he worked as a public defender in Philadelphia from '87 - '91 and was then promoted to the Federal Public Defender's Office in Philadelphia ('91-'93). In 1993 he started his own private practice, specializing in criminal defense and police misconduct matters. He has remained in private practice ever since. During that time, Mr. Krasner

has tried thousands of bench and jury trials in criminal and civil court in the Philadelphia area as well as other counties and states.

Throughout his 30 year career, Mr. Krasner has also proudly demonstrated a steadfast commitment to social justice, having defended protesters pro bono who were involved with movements including ACT UP, Black Lives Matter, progressive clergy with POWER, Casino-Free Philadelphia, DACA Dreamers, Decarcerate PA, anti-gun clergy with Heeding God's Call, anti-poverty and homelessness advocates with Kensington Welfare Rights Union, Occupy Philly and Reclaim Philadelphia, and Grannies for Peace, among many others.

He has resided in Philadelphia for over 30 years with his wife of 28 years. His wife has been a judge of the Court of Common Pleas for 17 years. They have two adult sons.



## Karyn McCluskey

PRESENTATION: **The truth doesn't set you free**

Karyn worked in the police for 22 years in Sussex, Lancashire, West Mercia, Strathclyde and Police Scotland. In 2016 Karyn took up the post of Chief Executive for Community Justice Scotland.

In 2004 Karyn and John Carnochan set up the Scottish Violence Reduction Unit which addressed violence as a public health problem in Scotland. They developed injury surveillance, gang intervention and gang exit, and focused on preventing knife carrying, injury and passionate advocates of early years support and the role of trauma. She helps support Medics Against Violence charity in Scotland, set up in conjunction with the Violence Reduction Unit.

Karyn trained as a registered nurse, has a B.Sc and M.Sc in Psychology

and is a fellow by distinction of the Faculty of Public Health. She received Honorary Doctorate from University of Glasgow for work on prevention of violence and an Honorary Masters from the Open University. She was presented with the Presidents Medal from the Royal College of Physicians and Surgeons of Glasgow in 2018 for work on violence prevention and the Saltire award. She has worked in a variety of areas within the NHS, East Africa and HM Prisons. She has published work on Armed Robbery teams, Alcohol and Violence Interventions in a clinical setting and Violence Reduction.

She is a board member of Simon Community Scotland tackling homelessness and is on the Board of the Scottish Professional Football League.



## John Middleton

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

Professor John Middleton, PrFPH, FRCPL, President, UK Faculty of Public Health, is an Invited Speaker for LEPH2019 and poses the question 'If public health problems are multidisciplinary- why do we train for them separately?'

Honorary Professor of Public Health at Wolverhampton University. He is President of the United Kingdom Faculty of Public Health, the standard setting body for public health professionals in the UK. He is President

of the Association of Schools of Public Health in the European Region (ASPHER) from June 2019- 2021. He was Director of Public Health for Sandwell in the West Midlands of England for 26 years. He was awarded Fellowship of the Royal College of Physicians (London) in September 2015. He lives in Coventry in the West Midlands. He has interests in environmental health, sustainable development and violence prevention. In another life he is a blues harmonica player with albums on Spotify and Apple music. [www.drharp.co.uk](http://www.drharp.co.uk)



## Andy Rhodes QPM

PRESENTATION: **UK policing approach to wellbeing: rhetoric to reality**

Andy is the Chief Constable of Lancashire Constabulary. He is also the National Police Chiefs' Council (NPCC) lead for Wellbeing, Engagement & Organisational Development and the College of Policing Professional Community

Chair for Organisational Development & International. In July 2018, Andy also took over the role of Chair of CPOSA – the Chief Police Officers' Staff Association.

Joining the police service in 1991, Andy has spent most of his service in operations ranging from public order to firearms to Counter Terrorism. Until recently he was a Counter Terrorism Strategic Firearms Commander, a role he views as the most enjoyable and challenging of his career.

In 2012 he established the NPCC Well Being Working Group and in May 2017 set up Oscar Kilo funded by Public Health and over 50 Blue Light services. Andy is currently leading on one aspect of the programme, developing a National Mental Health & Wellbeing service which aims to

embed prevention into every area of how we manage our people.

Andy speaks passionately about the importance of culture, leadership and resilience in terms of providing the world class support our people need to stay healthy in mind and body so that they can thrive (not just survive) in the challenging world of policing.

Seven years on and every force is now inspected on their approach to well-being provision. Oscar Kilo has the only Blue Light specific self-assessment and a huge amount of research ongoing into areas such as the neuroscience of trauma, peer groups and critical incident debriefs.

In 2018 Andy led on the National Police & Health Consensus advocating a radically new way of working across complex systems in support of prevention and vulnerability. He is translating this locally to declare Lancashire a trauma-informed County.



## Iain H B Smith

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

Iain specialises in Criminal Law, undertaking summary and solemn work in Livingston Sheriff and Justice of the Peace Courts as well as other courts across Scotland. He has been involved in a number of high profile High Court Trials. He

also acts as a legal representative for a number of well known sports stars. He fights hard to protect people's rights and passionately defends his clients. His career as a solicitor started in 1993 and 5 years later he formed Keegan Smith with Jim Keegan QC.

Iain is actively involved in the creating a fairer criminal justice system and is the leading trauma informed lawyer in Scotland. He is a core

group member of West Lothian Adverse Childhood Experiences Hub and a Trustee of the charity Aid & Abet, who try to assist people get out of the cycle of offending. Iain is also boldly asking all judges in Scotland to treat those appearing before the court with respect & dignity.

Other interests/experience:

- Lead Criminal Defence Lawyer on Trauma Informed Justice
- Former Legal Clinic Advisor at CAB
- Children's Referrals
- Mentor with ICAN
- Married father of three



## Jane Townsley

PRESENTATION: **Gender responsive policing is essential for building confidence across all communities**

Executive Director, International Association of Women Police

Jane has 30 years' experience in the policing environment and is highly skilled in a wide spectrum of operational as well as strategic

and planning roles. A police officer for 27 years Jane retired at the rank of Chief Inspector and now runs her own company offering advice on human rights, diversity & gender capacity building and mainstreaming, the establishment of proactive networks within an international police and law enforcement setting and writing and delivering bespoke training in a variety of subjects, both aimed specifically at women or regarding gender based crimes.

Jane was the President of the International Association of Women Police (IAWP) between 2009 and 2015. Through this role, Jane led an association with members in 70 countries and advised on women's policing issues, gender responsive policing, gender-based crimes, networking, and, has been a keynote speaker at a range of international law enforcement conferences.

Jane is an experienced gender specialist in the field of policing and security, advising on gender capacity building and the implementation

of gender responsive policing. After a successful career in policing, she established her own company, Force International, and moved to work successfully in a variety of global settings delivering training and mentoring.

Since establishing her own company Jane has delivered advice and training across a range of gender issues to security institutions including leadership training for female police officers and effective responses to gender-based violence to both male and female officers. She is in the early stages of developing a Gender Agenda with the Kosovo Police to ensure they provide a gender responsive service to all members of their communities. Jane has worked with a number of international agencies such as UNWomen, UNODC, UNDP, INL, ICITAP, OSCE, DCAF, and NGOs. in various countries across Europe, The Balkans, Africa, Asia and the Middle East.

Jane has a Master of Science degree in Security, Conflict & International Development during which she carried out research into the impact of Gender Responsive Policing on women officers, police organisations and local communities.



## Raynard Washington

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

Raynard Washington, PhD, MPH, is the Chief Epidemiologist at the Philadelphia Department of Public Health. In this role, Dr. Washington is responsible for collecting, analyzing, and interpreting data

that provides actionable information on the health status of Philadelphia residents. He coordinates and provides guidance across the department

and works internally and externally to enhance existing and establish new health surveillance systems. He also leads public health strategic initiatives and plays a key leadership role in the development, implementation and evaluation of the Philadelphia Roadmap to Safer Communities, the city's comprehensive, public health-driven strategy to reduce violence. Dr. Washington earned his undergraduate and graduate degrees at the University of Pittsburgh.



## Huw Williams

PRESENTATION: **Why understanding brain injury can enhance Trauma Informed Policing**

Huw Williams is an Associate Professor of Clinical Neuropsychology and Co-Director of the Centre for Clinical Neuropsychology Research (CCNR) at Exeter University.

He gained his PhD and his Doctorate in Clinical Psychology from the University of Wales, Bangor. He was on the founding staff team of the Oliver Zangwill Centre (OZC) for Neuropsychological Rehabilitation in Ely and Visiting Scientist at the Cognition and Brain Sciences Unit in Cambridge. In 2006 he was a Visiting Scholar at the Rehabilitation Studies Unit, University of Sydney, Australia. He has honorary positions with the OZC and the Royal Devon and Exeter Hospital's Emergency Department. He has published papers and books and held grants in a range of areas of Clinical Neuropsychology – particularly on neuro-rehabilitation and recently regarding crime.

Current projects include: tracking effects of Mild TBI and Acute Stress Disorder on Post-Concussion Syndrome, Computerised Neurocognitive testing of MTBI patients to predict outcomes (in Sports), DTI/VBM neuroimaging of elite concussed rugby players and processing of emotions after brain injury.

In the area of crime he:

- produced an overview for practitioners and policy makers and practitioners on TBI & Crime, Repairing shattered lives (French version also available);
- led on a report for the British Psychological Society (BPS) working group on Neuro-Disability in children and young people in custody;
- with Nathan Hughes a report on Neuro-disability and TBI in young offenders in children in custody for the Office of the Children's Commissioner (England);
- established, with Child Brain Injury Trust (CBIT) and General Lord Ramsbotham, the Criminal Justice and Acquired Brain Injury Group (CJAABIG) and produced an infographic to illustrate the links between TBI and crime;
- wrote, with Dr Prathiba Chitasabesan, a report on the use of linkworkers for young offenders to manage TBI in custody,
- supported the Centre for mental health in producing a report on the economic costs of crime due to TBI. He also recently edited a special issue on TBI and Crime for the Journal of head Trauma Rehabilitation.
- In March 2015 he was guest editor of the Journal of Head Trauma Rehabilitation on TBI & Crime in young people
- In November 2017 contributed to Lancet Neurology – Traumatic Brain Injury: Integrated approaches to improve prevention, clinical care, and research  
<http://www.thelancet.com/commissions/traumatic-brain-injury>

# GENERAL INFORMATION FOR DELEGATES

## INFORMATION POINT

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Please contact the CJS Registration/Information Desk or the **Event Manager – Atlanta Lloyd 07710 560390**.

## REFRESHMENTS AND LUNCH

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Served in Cromdale Hall. Please see program for timings.

## SECURITY

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For security reasons please wear your badge at all times.

Due to the nature of the conference and the level and type of attendees at the event, delegates must be aware and alert with regards to discussion in public areas.

Delegates are reminded that their personal property is their own responsibility and neither the venue nor the organisers can accept responsibility for any loss of items.

## INTERNET ACCESS

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Free internet access within the conference centre, delegate password will be available onsite.

## FIRST AID

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Any attendees requiring First Aid should visit the conference reception or contact the CJS Team.

## DISABLED ACCESS

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There are three spaces in the front of the Sidlaw and Fintry Auditoria, which are available for wheelchair users. There are also six wheelchair spaces in the Pentland Auditorium. The EICC can make reasonable adjustments to facilities where required, such as providing a wheelchair ramp, which can be utilised to take wheelchair users on to the stage in the Lomond Suite, breakout rooms, Cromdale Hall, and Strathblane Hall. Please notify CJS if you require any additional assistance.

## FIRE REGULATIONS / INSTRUCTIONS

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All EICC Staff members will assist with the evacuation of the EICC by the nearest exit and direct delegates to the Assembly Point.

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Please visit the concierge desk they can order a taxi from **Central Taxis – 0131 2292468** (all taxi charges must be settled by the individuals)

## EVALUATION

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Your feedback is important as it helps us make any necessary improvements for the next conference. An email will be sent to delegates on the morning of 24th October 2019 with a link to an online feedback survey. We would ask that you take a few minutes of your time to complete this.

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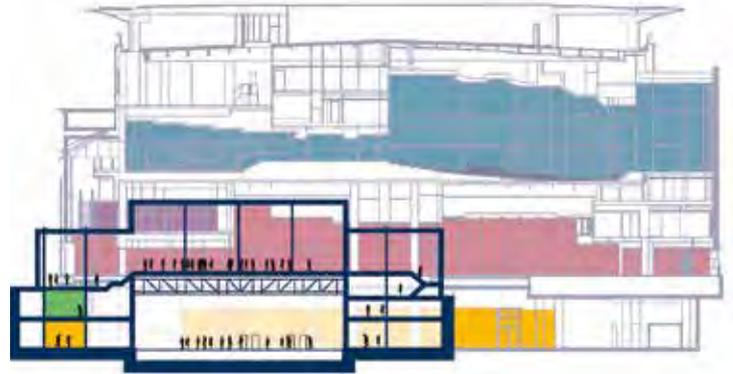
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We are delighted to announce that this conference is Continuing Professional Development (CPD) accredited 22 points. If you would like to receive these, please email **[info@ajsukmanagement.co.uk](mailto:info@ajsukmanagement.co.uk)** who will arrange for a certificate to be sent to you. For further information on CPD, please visit **[www.cpduk.co.uk](http://www.cpduk.co.uk)**

# EICC ORIENTATION GUIDE

Edinburgh International Conference Centre

## Level 3

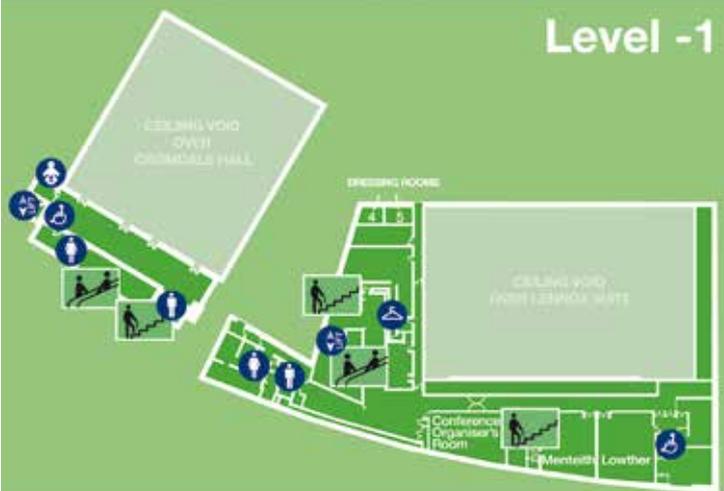


- Level 3: Pentland Suite
- Level 1: Galloway Suite & Café
- Level 0: Strathblane & Atrium Entrances  
Strathblane Hall, Lomond Suite & Atrium
- Level -1: Menteith & Lowther Rooms
- Level -2: Cromdale Hall & Lennox Suite  
Moffat & Lammernuir Floors

## Level 1



## Level -1



## Level 0



## Level -2



# CONFERENCE PROGRAM

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**DAY 2: TUESDAY 22 OCTOBER**      PAGES 26 - 31

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**DAY 3: WEDNESDAY 23 OCTOBER**      PAGES 32 - 36

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This program is correct at the time of printing and any late changes or additions will be posted on notice boards at the conference venue. The LEPH2019 conference organisers retain the right to make changes to this program if circumstances require this to be done.

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# DAY 1: MONDAY 21 OCTOBER

8.30-9.55

## PLENARY SESSION P1

### Dimensions of the Law Enforcement and Public Health Relationship

ROOM: Pentland Auditorium

CO-CHAIR: **Malcolm Graham**, Deputy Chief Constable, Police Scotland

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

SPEAKERS:

- **Iain Livingstone**, Chief Constable, Police Scotland  
*Welcoming comments*
- **Jane Townsley**, Executive Director, International Association of Women Police, England  
*Gender responsive policing is essential for building confidence across all communities*
- **Matt Jukes**, Chief Constable, South Wales Police  
*Early Action Together: ACE – informed partnership in Wales*
- **Larry Krasner**, City of Philadelphia's 26th District Attorney, USA  
*Prosecution = Prevention*

9.55-10.05

## WELCOME FROM YOUR HOSTS

**Professor Andrea Nolan**, Principal and Vice-Chancellor, Edinburgh Napier University

10.05-10.30

## MORNING TEA

10.30-11.55

## MAJOR SESSIONS

M1

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

ROOM: Tinto Room, Lomond Suite

CONVENER & CHAIR: **Inga Heyman**, Edinburgh Napier University, Scotland

PRESENTERS:

**Nadine Dougall**, Edinburgh Napier University, Scotland  
*Setting the scene, vision and purpose of the Scottish Centre for Law Enforcement and Public Health*

**Chris White**, Mental Health Foundation, Scotland  
*Citizen participation in LEPH research, policy development and education*

**Jennifer Murray & Ini Enang**, Edinburgh Napier University, Scotland  
*Co-creation and the five key LEPH research areas in Scotland*

**Andrew Wooff & Inga Heyman**, Edinburgh Napier University, Scotland  
*Collaborative LEPH research and education: the joys and challenges of working across sectors*

**Liz Aston**, Scottish Institute for Policing Research and Edinburgh Napier University  
*Partnerships and where we go from here*

M2

### Public Health approaches in policing

ROOM: Moorfoot Room, Lomond Suite

CONVENER & CHAIR: **Stan Gilmour**, Thames Valley Police, England

PRESENTERS:

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

**Jason Kew**, Detective Inspector, Thames Valley Police, England  
*Public Health approaches in policing: Drug Diversion*

**Paul Gresty**, Partnership Manager, Brighter Futures for Children, England  
*Public Health approaches in policing: The Reading Model of Collaborative Leadership*

**Éamonn O'Moore**, National Lead Health & Justice Team and Director UK Collaborating Centre, WHO Health in Prisons Programme (Europe), Public Health England  
*Public health approaches in policing: no justice without health*

MAJOR SESSIONS CONTINUE

M3

**Police mental health and well-being**

Note: This double session finishes at 1.00

ROOM: Pentland Auditorium

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

PANELLISTS:

**Katy Kamkar**, Centre for Addiction and Mental Health, Canada  
*Police mental health and well-being: psychological health and safety strategies addressing moral injury, compassion fatigue and burnout to promote individual and organizational resiliency*

**Grant Edwards**, Australian Federal Police  
*Police mental health and well-being*

**Ian Hesketh**, College of Policing, England  
*The Thin Blue Line is OK: delivering a national wellbeing service in policing*

**Dale McFee**, Edmonton Police Service, Canada  
*Police mental health and wellbeing from an intake and off ramp perspective*

**Paul Pedersen**, Greater Sudbury Police Service, Canada  
*Leadership opportunities: helping our people help others*

**Katrina Sanders**, Australian Federal Police  
*A holistic approach to health protection in law enforcement agencies*

**Jeff Thompson**, Columbia University Medical Center, USA  
*The Law Enforcement Psychological Autopsy: understanding suicide in policing*

M4

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

ROOM: Kilsyth Room, Lomond Suite

CONVENER & CHAIR: **Gillian Routledge**, Head of Tasking and Coordination, Durham Constabulary, England

PRESENTERS:

**Gillian Routledge**, Head of Tasking and Coordination - Durham Constabulary, England  
*Can Durham Police's Checkpoint deferred prosecution program reducing reoffending and improve life chances through early intervention?*

**John Cooper**, Durham Constabulary, England  
*One size doesn't fit all: similar people? different needs?*

**Kevin Weir**, Durham Constabulary, England  
*Diverting people who use drugs away from the criminal justice system*

**Jo McGregor-Taylor**, Checkpoint Supervisor - Durham Constabulary, England  
*Diverting people with mental health issues away from the criminal justice system*

**Tracy Cloughton**, Checkpoint Supervisor - Durham Constabulary, England  
*Diverting people with alcohol issues away from the criminal justice system*

**Andy Crowe**, Durham Constabulary, England  
*Diverting domestic abuse perpetrators away from the criminal justice system*

10.30-5.30

POSTERS

ROOM: Cromdale Hall

**Ngozichukwuka Agu**, University of South Florida, USA  
*Understanding characteristics and perceptions of individuals attending the Batterer Intervention Programs*

**Robert Andersson**, Linnaeus University, Sweden  
*Evaluating qualitative police work by quantitative methods, possibilities and risk*

**Garima Arora**, University of Dundee, Scotland  
*Is oral health an important factor for mental health among people in custody in Scottish prisons?*

**Gil Artyom**, First Moscow State Medical University, Russia  
*Gaps in the legal regulation of nonbeverage alcohols consumed for drinking in Russia*

**Katherine Comer**, Health Education England  
*Modern slavery and public health*

**Mikael Emseng**, Umea University, Sweden  
*Conflict management training among Swedish police officers*

**He Gao**, Imperial College London, England  
*Use of TETRA personal radios and sickness absence in the Airwave Health Monitoring Study of the British police forces*

**Mehdi Ghazinour**, Umea University, Sweden  
*Conflict management training among Swedish police officers*

**Mery Gonzales Delgado**, Fundacion Universitaria del Area Andina, Columbia  
*Comparative analysis of public policies on the voluntary termination of pregnancy in Latin American countries in the period 2008 to 2018*

**Roberta Guio de Azevedo**, Federal University of Rio de Janeiro, Brazil  
*Silicosis in the extraction of ornamental granite in Esperito Santo, Brazil: to prevent you need to know*

**Shi Haitao**, University of Edinburgh, Scotland  
*Community-based drug rehabilitation under the 'People's War on Drugs' in China*

**Claudia Heinzlmann**, German Prevention Congress  
*Applied prevention research: crime and violence prevention in Germany*

**Alexandra Hernandez**, Touro University, USA  
*Developing a 'Health Equity and Criminal Justice (HECJ)' concentration for a Master of Public Health (MPH) program: assessment of community partner and potential employer interest*

**Ivana Jeles**, Police College Croatia  
*A new three-part approach to stress reduction in the Croatian Police Force*

**Cecilia Jonsson**, Linnaeus University, Sweden  
*Police cooperation with civil society: from a closed authority to an open social actor?*

**Chanika Kaeorat**, MMC Tools (Thailand) Co. Ltd.  
*Legal problems regarding the disclosure of severe confidentiality of psychiatric patients by psychiatrists under Thai law*

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

**Paul Keppel**, GGZ inGeest, The Netherlands  
*Mobile Care Unit (The Netherlands): an integrated approach*

**Oluchukwu Obiora**, University of the Witwatersrand, South Africa  
*Experiences of girls who underwent female genital mutilation/cutting*

**Tracey Price**, University of Stirling, Scotland  
*Diversion: criminal justice to drug treatment*

**Islanda Rivera Arias**, Fundacion Universitaria del Area Andina, Columbia  
*Analysis of public policies of healthy work environments in some Latin American countries in the period from 2000 to 2019*

**Debbie Sigerson**, NHS Health Scotland  
*Smoke-free prisons: co-producing a service specification supporting people in our care*

## POSTERS CONTINUE

**Coral Sirdifield**, University of Lincoln, England  
*Healthcare for offenders on probation: availability and the relationship between health and criminal justice agencies*

**Vaughan Statham & Andrew Clark**, NHS National Services Scotland  
*National Strategic Networks for Police and Prison Care: a renewed approach*

**Melissa Willoughby**, University of Melbourne, Australia  
*Increased risk of violence related death among people exposed to the criminal justice system*

## 12.05-1.00 CONVENED SESSIONS

CV1	CV2	CV3	CV4
<b>Fighting domestic violence in Europe - best practices and major challenges</b>	<b>Drug courts - evidence, lessons learned and recommendations</b>	<b>The approach to violence reduction in Scotland and its wider application</b>	<b>Public health approaches to the prevention of child sexual abuse</b>
ROOM: Tinto Room, Lomond Suite	ROOM: Moorfoot Room, Lomond Suite	ROOM: Kilsyth Room, Lomond Suite	ROOM: Harris Room, Galloway Suite
CONVENER: <b>Joachim Kersten</b> , Coordinator of the IMPRODOVA project, German Police University	CONVENER: <b>John Collins</b> , Executive Director, London School of Economics Drug Policy Unit, England	CONVENER & FACILITATOR: <b>Niven Rennie</b> , Violence Reduction Unit (VRU), Glasgow, Scotland	CONVENER & CHAIR: <b>Stuart Allardyce</b> , Director of Stop It Now! Scotland, Lucy Faithfull Foundation, England
CHAIR: <b>Pat Griffen</b> , Holy Family University, USA	CHAIR: <b>Denise Tomasini-Joshi</b> , Open Societies Foundation, USA	CHAIR:	CHAIR:
<p>PRESENTERS:</p> <p><b>Joachim Kersten</b>, Coordinator of the IMPRODOVA project, German Police University <i>Leadership as a key resource for frontline responses to domestic abuse</i></p> <p><b>Michele Burman</b>, Head of School, University of Glasgow, Scotland <i>Frontline responses to domestic abuse in Scotland: assessing, managing and mitigating risk</i></p> <p><b>Stefanie Giljohann</b>, Research assistant, Police Berlin, Germany <i>Networks against domestic abuse in Berlin: from intervention to prevention</i></p>	<p>PANELLISTS:</p> <p><b>John Collins</b>, London School of Economics Drug Policy Unit, England <i>International experiences of drug courts: a comparative perspective</i></p> <p><b>Ana Pecova</b>, EQUIS Justice for Women, Mexico <i>Drug courts in Mexico: a feminist perspective</i></p> <p><b>Jasmine Tyler</b>, Human Rights Watch, USA <i>Drug courts in the United States: lessons learned</i></p>	<p>PANELLISTS:</p> <p><b>Will Linden</b>, VRU Scotland</p> <p><b>Lib Peck</b>, VRU London</p> <p><b>TBA</b>, VRU West Midlands</p> <p><b>Daryl Lyons</b>, Community Initiative to Reduce Violence, Northamptonshire</p> <p>The panel will address how the learning from Scotland can be transferred across very different areas of the country? What are the challenges and how can we overcome them? There is no 'one size fits all' approach to violence prevention. However, what is key is the need to understand the underlying problems and how best to apply the evidenced based 'solutions'.</p>	<p>PRESENTERS:</p> <p><b>Stuart Allardyce</b>, Director of Stop It Now! Scotland, Lucy Faithfull Foundation, England <i>Public health approaches to preventing child sexual abuse</i></p> <p><b>Donald Findlater</b>, Director Stop it Now Helpline, Lucy Faithfull Foundation, England <i>The work of the Stop it Now! UK &amp; Ireland Helpline</i></p> <p><b>Fiona Jackson</b>, Detective Inspector Online Child Abuse Investigations Team (OCAIT), England <i>Preventing child sexual exploitation online</i></p>

## 1.00-2.00 LUNCH

## 1.15-1.45 LUNCHTIME SESSIONS

L1	L2	L3
<b>David Harvie</b> , Crown Agent, Scotland <i>Public health: should prosecutors mind their own business?</i>	<b>Commandante António Leitão da Silva</b> , Chief of Polícia Municipal do Porto, Portugal <i>The police role in drug use scenarios: stigma and expectations of police actions</i>	<b>Auke van Dijk</b> , Police of the Netherlands <i>The disadvantage of a head start: why low and middle income countries might take the lead in developing LEPH</i>
ROOM: Tinto Room, Lomond Suite	ROOM: Moorfoot Room	ROOM: Kilsyth Room, Lomond Suite
CHAIR: <b>Richard Bent</b> , Simon Fraser University, Canada	CHAIR: <b>Nick Crofts</b> , Centre for Law Enforcement and Public Health, Australia	CHAIR: <b>Melissa Jardine</b> , Centre for Law Enforcement and Public Health, Australia

2.00-3.30 CONCURRENT SESSIONS		
C1	C2	C3
<p><b>Collaboration &amp; technology: building enhanced capacity for community safety and well-being</b></p>	<p><b>Harm reduction</b></p>	<p><b>Mental Health pathways and partnerships</b></p>
<p>ROOM: Ochil Room, Galloway Suite</p>	<p>ROOM: Harris Room, Galloway Suite</p>	<p>ROOM: Tinto Room, Lomond Suite</p>
<p>CONVENER &amp; FACILITATOR: <b>Chad Nilson</b>, Collaboration Specialist, Living Skies Centre for Social Inquiry, Canada</p>	<p>CHAIR: <b>Palani Narayanan</b>, Global Fund for AIDS, Tuberculosis and Malaria</p>	<p>CHAIR: <b>Nadine Dougall</b>, Edinburgh Napier University</p>
<p>(*This session will be a facilitated discussion)</p> <p>PANELLISTS:</p> <p><b>Dale McFee</b>, Chief of Edmonton Police Service, Canada</p> <p><b>Cal Corley</b>, CEO, Community Safety Knowledge Alliance, Canada</p> <p><b>Mathew Swarney</b>, Director of Government Affairs, Motorola Solutions, Canada</p> <p><b>Chad Nilson</b>, Collaboration Specialist, Living Skies Centre for Social Inquiry, Canada</p> <p><b>Nishan Duraiappah</b>, Deputy Chief, Halton Regional Police Service, Canada</p>	<p>PRESENTERS:</p> <p><b>Benjamin Scher</b>, University of Waterloo, Canada <i>Police practices in relation to supervised injecting site users in Vancouver: an ethnographic study</i></p> <p><b>Saket Priyadarshi</b>, National Health Service, Scotland <i>A drug consumption room in Scotland?</i></p> <p><b>Maria Fotopolou</b>, University of Stirling, Scotland <i>What is the role of law enforcement in a public health approach to the drug problem? A synthesis of international data and implications for Scotland</i></p> <p><b>Jerusha Vithiyandandan</b>, University of Dundee, Scotland <i>Assessing risk of drug death in people known to Substance Misuse Service: a retrospective cohort study</i></p> <p><b>Jessica Davidson</b>, NHS Lothian, Scotland <i>Faculty of Arrest Referral: anticipatory care and preventing deaths in custody</i></p> <p><b>Leah Pope</b>, Vera Institute of Justice, USA <i>Emerging police responses to the US overdose crisis</i></p>	<p>PRESENTERS:</p> <p><b>Arun Sondhi</b>, Therapeutic Solutions (Addictions) Ltd, England <b>&amp; Emma Williams</b>, Canterbury Christ Church University, England <i>Police and health operational staff perspectives on managing detainees held under Section 136 of the Mental Health Act: a qualitative study in London</i></p> <p><b>Alice Park</b>, University of York, England <i>Policing mental health: a realist evaluation of mental health triage</i></p> <p><b>Ron Hoffman</b>, Nipissing University, Canada <i>Police use of a mental health screener to promote a collaborative approach to effectively respond to the needs of persons with serious mental health disorders</i></p> <p><b>Francesca Menichelli</b>, University of Surrey, England <i>Innovations in institutional responses to vulnerability: a case study from an English local authority</i></p> <p><b>Lynda Breen</b>, Garda Siochana Analysis Service, Ireland <i>To assist the Local Authority in Limerick to reduce suicide and suicide attempts in public places</i></p>
C4	C5	
<p><b>Risk assessment and risk management of intimate partner violence</b></p>	<p><b>Developing best practices related to data, education and screening: working across sectors to improve outcomes associated with Fetal Alcohol Spectrum Disorder</b></p>	
<p>ROOM: Moorfoot Room, Lomond Suite</p>	<p>ROOM: Kilsyth Room, Lomond Suite</p>	
<p>CONVENER: <b>Susanne Strand</b>, Orebro University, Sweden CHAIR: <b>Jennifer Wood</b>, Temple University, USA</p>	<p>CONVENER &amp; CHAIR: <b>Jocelynn Cook</b>, Society of Obstetricians and Gynaecologists, Canada</p>	
<p>PRESENTERS:</p> <p><b>Susanne Strand</b>, Orebro University, Sweden <i>Risk assessment and risk management of intimate partner violence and stalking in urban, rural and remote areas</i></p> <p><b>Joakim Petersson</b>, Orebro University, Sweden <i>Proposing a typology of intimate partner violent men: implications for risk assessment and management</i></p> <p><b>Joakim Petersson</b>, Orebro University, Sweden <i>Legal risk management strategies: the use of arrest and restraining orders as protective interventions in cases of intimate partner violence</i></p> <p><b>Susanne Strand</b>, Orebro University, Sweden <i>Structured risk management within and between police and social service reduces intimate partner violence</i></p> <p><b>Alexander Workman</b>, Western Sydney University, Australia <i>Victims from the margins: racial and ethnic minorities access to criminal justice</i></p>	<p>PRESENTERS:</p> <p><b>Kathy Unsworth</b>, Canada FASD Research Network, Canada <i>FASD, law and mental health: the Canadian experience</i></p> <p><b>Hayley Passmore</b>, University of Western Australia <i>Fetal Alcohol Spectrum Disorder in the Australian youth justice system: prevalence, implications and workforce development</i></p> <p><b>Christopher Steer</b>, Scottish Government <i>Provision and support for Fetal Alcohol Spectrum Disorder in Scotland: progress report and implications for the criminal justice community</i></p> <p><b>Patricia Jackson</b>, University of Edinburgh, Scotland <i>New opportunities in Scotland to diagnose those affected by FASD</i></p> <p><b>Jennifer Shields &amp; Sarah Brown</b>, Fetal Alcohol Advisory and Support team <i>Lessons learned from Scotland's first Fetal Alcohol Assessment and Support Team</i></p>	

2.00-3.30 MARKETPLACE OF IDEAS - PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS Marketplace of Ideas sessions will be longer, in smaller groups and should be highly interactive.		
Marketplace of Ideas: 1 (2 x 45 minute presentations)	Marketplace of Ideas: 2 (2 x 45 minute presentations)	Marketplace of Ideas: 3 (2 x 45 minute presentations)
ROOM: Carrick Room 1, Galloway Suite	ROOM: Carrick Room 2, Galloway Suite	ROOM: Carrick Room 2, Galloway Suite
<p><b>1.1. Jeff Thompson</b>, Columbia University Medical Center, U.S. <i>Law enforcement psychological autopsy: hands-on workshop</i></p> <p>The purpose of creating the Law Enforcement Psychological Autopsy (LE-PA) was to adapt and modify current PA templates being used and suggested by researchers and groups including AAS in order to be practical for implementing in law enforcement.</p> <p>This workshop will raise awareness of what the psychological autopsy is and how it can be trained to law enforcement agencies so their personnel tasked with investigating suicides (including that of their own officers) can have a better understanding of suicide, the risk factors and warning signs, how to conduct interviews in order to build rapport and trust, and how to present the findings.</p> <p>In this session there will be group discussions, interactive example "test" questions, review of the LE-PA template, active listening exercises, and opportunities to review data.</p>	<p><b>2.1. John Harrison</b>, College of Policing, England &amp; <b>James Nye</b>, Devon and Cornwall Police, England <i>A health promoting police force: an evolutionary development for wellbeing at work</i></p> <p>The concept of a health-promoting police force arises as a consequence of a strategic approach to health and wellbeing. Investment in wellbeing requires culture change to embed it as business as usual. Successful policing of communities is contingent on promoting and maintaining high levels of health and wellbeing in our police officers and police staff. A health-promoting police force will be concerned with the health of our communities and our ability to influence this. There are clear links between some health issues and levels of crime.</p> <p>A policing – health collaboration would explore how police wellbeing resources and initiatives might be used to also benefit local communities. This session will comprise two short presentations followed by a facilitated discussion of set questions.</p>	<p><b>3.1. Helen Christmas and Linda Hindle</b>, Public Health England, <b>Mike Cunningham</b>, College of Policing, England <i>Public health approaches to policing: practical tools for police forces and partners</i></p> <p>The question of "what exactly is a public health approach to policing?" is one that has often been raised, especially during the development and implementation of the Police and Health consensus for England. The phrase "a public health approach to" is used in different ways. In the UK at the moment there is a particular focus on public health approach to serious violence, but there has been a lack of clarity about meaning. We have developed a discussion paper, published with the College of Policing and Public Health England. It explores what a public health approach looks like for policing under five headings: population, prevention, causes of the causes, data and evidence base, partnership. Phase two of the project is to develop a set of principles and some practical materials to support the implementation of public health approaches in police forces. It is this part of the project that the Marketplace of Ideas session will focus on, seeking the input and agreement of the audience to finalise the resource.</p>
<p><b>1.2. Ron Bruno, Tom Von Hemert, Don Kamin &amp; Carol Speed</b> - all CIT International, USA &amp; <b>Amy Watson</b>, CIT International and University of Illinois at Chicago <i>Building mental health crisis response systems: emerging best practices from the United States</i></p> <p>In many communities in the USA, police are the primary service to respond to individuals experiencing mental health crises. This can have significant negative consequences for all involved, and increase the over representation of individuals with mental illness in the criminal justice system.</p> <p>While many associate CIT with law enforcement training, the CIT model is much more and provides a useful framework for building mental health crisis response systems that minimize the involvement of law enforcement. The model develops partnerships across LE, mental health services, advocates and service users/family members. The panel format of this session will ensure the session is dynamic and engaging, we will take a team approach to presenting and involving audience members in discussion. Several segments of the session will ask the audience to walk through scenarios related to their own local crisis response resources and consider best practice strategies for building more comprehensive and responsive crisis response systems that minimize the role of police and the criminal justice system.</p>	<p><b>2.2. Abby McLeod &amp; Katrina Sanders</b>, Australian Federal Police <i>Connecting the dots: promoting a joined up approach to "diversity and inclusion" and "organisational health and wellbeing"</i></p> <p>In this session we aim to stimulate discussion about the relationship between organisational health and inclusion, and the ways in which policing organisations can connect these currently separate bodies of work to maximise benefits for all. In doing so, we will share reflections on our own experiences working to promote organisational health and inclusion in the Australian Federal Police (AFP) and offer our views on practical ways of bringing these areas of work closer together, including a consideration of risks and benefits. We will then invite participants to share their own experiences and ideas, through a semi-structured series of questions aimed to generate sharing and critical analysis.</p>	<p><b>3.2. Lynne McNiven</b>, NHS Ayrshire and Arran, Scotland; <b>Kathleen Winter</b>, Crosshouse Hospital, Scotland; <b>Joanne Logan</b>, Police Scotland; <b>Jemma Davidson and Alice Dillon</b>, Community Justice Ayrshire, Scotland; <b>Colin Convery</b>, Police Scotland <i>Working together to achieve more</i></p> <p>The ACE's framework provides a well researched explanatory model for the link between exposures to trauma and adversity in childhood, associated inter-generational transmission of adversity and long term negative health and social outcomes. Our work is multifaceted involving collaboration between colleagues from Police Scotland, Public Health, The Violence Reduction Unit and Community Justice who have worked closely to develop and deliver targeted pieces of joint work across Ayrshire. The initial feedback from 3rd sector, police officers, addiction workers and other individuals have highlighted subtle changes in practice which have enhanced experiences. There has been recognition at grass roots level of the 'Start Where You Are and Do What You Can' ethos. Multidisciplinary and Agency Teams will discuss the journey undertaken to date highlighting challenges, sharing good practice, lessons learned from their perspective, Interactive session will engage with the audience.</p>

3.30-4.00 AFTERNOON TEA		
4.00-5.30 CONCURRENT SESSIONS		
<b>C6</b>	<b>C7</b>	<b>C8</b>
<b>Collaborative leadership</b>	<b>Police well-being I</b>	<b>Diversion</b>
ROOM: Ochil Room, Galloway Suite	ROOM: Harris Room, Galloway Suite	ROOM: Tinto Room, Lomond Suite
CHAIR: <b>Auke van Dijk</b> , Police of The Netherlands	CHAIR: <b>Ian de Terte</b> , Massey University, New Zealand	CHAIR: <b>Liz Aston</b> , Scottish Institute for Policing Research & Edinburgh Napier University, Scotland
<p>PRESENTERS:</p> <p><b>Craig McGrath</b>, Queensland Police Service, Australia <i>Product contamination: complexities of managing an enmeshed public health alert and a criminal investigation</i></p> <p><b>Rachel Staniforth</b>, Health Education England <i>Fortifying our relationships</i></p> <p><b>Roz Warden</b>, Barnwood Trust, England &amp; <b>Amy Dyde</b>, Gloucestershire Constabulary, England <i>An initiative to build community capacity and resilience: collaborative evaluation findings</i></p> <p><b>Rebecca Stenberg</b>, Linköping University, Sweden <i>In search of Dante: initiative and collaboration in emergency situations</i></p> <p><b>Guy Lamb</b>, University of Cape Town, South Africa <i>The complexities of pursuing a 'whole of society' policing approach in a violent and unequal African city</i></p>	<p>PRESENTERS:</p> <p><b>Annika Smit</b>, Police Academy, Netherlands <i>Sensitivity or resistance: on the resilience paradox in policing</i></p> <p><b>Grainne Perkins</b>, Seattle University, USA <i>The spectre of trauma in the South African Police Service</i></p> <p><b>Terry Bunn</b>, University of Kentucky, USA Australia <i>Officer use of force injuries while apprehending individuals under the influence</i></p> <p><b>Katie Hail-Jares</b>, Griffith Criminology Institute, Australia <i>Pace of neighbourhood change and residents' willingness to call police in response to street-based sex work</i></p>	<p>PRESENTERS:</p> <p><b>Matthew Bacon</b>, University of Sheffield, England <i>Police-led diversion programs for drug and drug-related offenders in England and Wales</i></p> <p><b>Jack Rowlands</b>, Metropolitan Police Service, England <i>DIVERT: a police custody diversion programme for young adults</i></p> <p><b>Arun Sondhi</b>, Therapeutic Solutions (Addictions) Ltd, England <i>Assessing engagement with the Drug Intervention Programme (DIP) in London</i></p> <p><b>Evan Anderson</b>, University of Pennsylvania, USA <i>Police perspectives on police assisted diversions in Philadelphia</i></p> <p><b>Evangelica Juarez</b>, Temple University, USA <i>Issues in the distribution of behavioural health resources: considerations for police diversion efforts</i></p>
<b>C9</b>	<b>C10</b>	
<b>Impact of incarceration</b>	<b>Female genital mutilation</b>	
ROOM: Moorfoot Room, Lomond Suite	ROOM: Kilsyth Room, Lomond Suite	
CHAIR: <b>Greg Denham</b> , Law Enforcement and HIV Network (LEAHN), Australia	CHAIR: <b>Melissa Jardine</b> , Centre for Law Enforcement and Public Health, Australia	
<p>PRESENTERS:</p> <p><b>Melissa Willoughby</b>, University of Melbourne, Australia <i>Violence-related deaths among adults released from prison: a data linkage study</i></p> <p><b>Stuart Kinner</b>, University of Melbourne, Australia <i>The Mortality After Release from Incarceration Consortium (MARIC) study: a multi-national, individual participant data meta-analysis</i></p> <p><b>Jesse Young</b>, University of Melbourne, Australia <i>Overdose deaths among justice-involved young people: a whole-population retrospective cohort study</i></p> <p><b>Nemesia Kelly</b>, Touro University California, USA <i>Replacing the state: the role of post-conviction attorneys in the post-incarceration lives of California's exonerees</i></p> <p><b>Mudia Uzzi</b>, Johns Hopkins Bloomberg School of Public Health, USA <i>Temporal relationship of criminal justice involvement and transactional sex among black men who have sex with men in Baltimore, Maryland: depressive symptoms as a mediator</i></p> <p><b>Margaret Erickson</b>, Centre for Gender and Sexual Health Equality, Canada <i>"They look at you like you're contaminated": how HIV-related stigma and power dynamics shape HIV care access for incarcerated women living with HIV in a Canadian setting</i></p>	<p>PRESENTERS:</p> <p><b>Sara Johndotter &amp; Lotta Wendel</b>, Malmö University, Sweden <i>Societal measures to check for suspected female genital mutilation in Sweden: an analysis of proportionality in the authorities' handling of suspected cases</i></p> <p><b>Saffron Karlsen &amp; Christina Pantazis</b>, University of Bristol, England <i>Towards more collaborative approaches to female genital mutilation safeguarding: accommodating the perspectives of Somali families</i></p> <p><b>Oluchukwu Obiora</b>, University of Witwatersrand, South Africa <i>Female genital mutilation in Africa: scoping the landscape of evidence</i></p> <p><b>Glenda Bonde</b>, National FGM Centre, England <i>Harmful practices: leaving no one behind using a whole systems approach</i></p>	

**4.00-5.30 MARKETPLACE OF IDEAS - PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS (2 x 45 minute presentations)**  
 Marketplace of Ideas sessions will be longer, in smaller groups and should be highly interactive.

Marketplace of Ideas: 4	Marketplace of Ideas: 5	Marketplace of Ideas: 6
ROOM: Carrick Room 1, Galloway Suite	ROOM: Carrick Room 2, Galloway Suite	ROOM: Carrick Room 3, Galloway Suite
<p><b>4.1. Stan Gilmour &amp; Lewis Prescott-Mayling</b>, Thames Valley Police, England, <b>Eamonn O'Moore</b>, Public Health England  <i>Data analytics for law enforcement and public health in the Reading Model</i></p>	<p><b>5.1. Dave Caesar, Carol Goodman, Susan Fraser</b> - all Project Lift, Scotland, <b>Steph Phillips</b>, NHS 24, Scotland &amp; <b>Christine Goodall</b>, University of Glasgow, Scotland  <i>Project Lift: collaboration - learning from practice</i></p>	<p><b>6.1. Norrie Petrie</b>, Police Scotland  <i>Substance misuse and the impact of stigma</i></p>
<p>Individuals are affected by heterogeneous harm events (e.g. crimes, neglect, mental health, adverse childhood experiences) and the police, social care and health are tasked with reducing the likelihood of these events occurring and their harmful impact if they do. Often the identification of individuals or groups most likely to come to harm is done in isolation by each agency. This discussion will unpack the potential when multiagency data is brought together to forecast individuals and groups most likely to come to harm following adverse experiences being recorded by any agency. Currently most decisions on when and where to target public sector resources are 'clinical decisions'. Public sector agencies need to utilise 'data analytics' to identify threat, harm, opportunity and risk which is more accurate than using clinical decisions alone. However, as not everything that needs to be considered is quantifiable, best practice blends clinical experience with quantitative evidence. It is simply likely to be more accurate, particularly when dealing with large numbers of cases as it is not possible for all information to be assessed by clinical based decisions.</p>	<p>This session will illustrate the issues or needs that this collaborative partnership is addressing. Project Lift is a new approach to recruit, retain, develop and manage talent within Health and Social Care in Scotland to ensure the best, most able leaders reach boardrooms. By identifying, supporting, enhancing and growing its talent at every level, we will enable delivery of best outcomes for patients and high quality safe, effective care in our communities. Project Lift focuses on embedding a leadership approach underpinned by principles of collective, collaborative and compassionate leadership. The intended impact is for senior leaders in the Scottish Prison Service to use the learning and experiences of others, as well as their own, to inform their ongoing work to enable cultural and transformational change. The collaboration also offers rich experience and learning for the Criminal Justice Team.</p> <p>We will offer insights and learning from our stories of collaboration from a number of sources: from our live collaborative experiments within leadership, more broadly from Project Lift leadership communities and from our own experiences of collaboration as a Project Lift team.</p>	<p>Stigma is recognised as a key factor impacting on People Who Use Drugs (PWUD). It can cause reluctance in individuals to engage with services that could support them in tackling substance use and also any correlated issue(s) that may have been a factor that has resulted in substance use/addiction. The research will be delivered by way of a workshop. Attendees from a cross sector will be invited to provide feedback/ stimulate discussion on the following key areas:</p> <p>How stigmatisation impacts are seen from different organisational perspectives who come into contact with PWUD.</p> <p>How the contact between organisations and PWUD can positively/negatively impact on the stigmatisation of an individual.</p> <p>How we can use the learnings to inform organisations about how they can positively influence individual/ multi-organisational and community culture in relation to the stigmatisation of PWUD</p> <p>What success looks like and how do we measure it.</p>
<p><b>4.2. Lesslie Young</b>, Epilepsy Scotland  <i>Are you going to kill me? The potential fatal consequences of misinterpreted behaviour</i></p>	<p><b>5.2. Jac Charlier</b>, TASC's Center for Health and Justice, USA &amp; <b>Mike Trace</b>, The Forward Trust, England  <i>Deciding when to "deflect": a visual model of police decision-making factors</i></p>	<p><b>6.2. Carolyn Thom</b>, The Forensic Practice Vancouver, Canada &amp; <b>Scott Jones</b>, Edmonton Police Service, Canada  <i>Canine assisted child forensic interviewing in child abuse cases</i></p>
<p>Epilepsy is the world's most common neurological condition and seizures present in a huge variety of ways involving impaired consciousness and cognition, and sometimes automatism or inappropriate behaviours. The post-seizure period may be associated with communication difficulties, confusion and impaired cognition, amnesia, emotional instability and post-ictal psychosis. It poses particular challenges to law enforcement through individuals displaying seizure-related behaviour which can be misinterpreted – sometimes with fatal consequences. This session discusses epilepsy and how it can manifest in a law enforcement situation, including automatism behaviour. It describes the effects of the condition beyond seizures and how this may impact the work of police and prosecutors. It also details questions those in law enforcement can ask themselves in identifying whether apparently criminal behaviour is in fact related to seizure activity. This is a practical session, brought to life with thought-provoking case studies and footage.</p>	<p>There is a groundswell of government and police-led innovations designed to link people affected by mental health and substance use issues to treatment and community services. As developments unfold, it is important to share ideas and practices across jurisdictions and collaborate in producing shared conceptual frameworks and models of systems-wide change. Researchers and practitioners across the law enforcement and public health sectors must develop a shared understanding of first responder decision-making and the specific factors that influence officers' decisions to divert or "deflect" people away from criminal justice interventions. This session will offer a provisional visual model for considering officer decision-making, incorporating what is known about deflection decision-making and the contextual factors that influence decisions to deflect in different sites. The initiative seeks to develop a robust model of systems-wide change that can guide research and collaborative work to shift strategies aimed at addressing mental health and substance use conditions away from law enforcement/criminal justice responses to community-based treatment. Presenters will workshop the model with attendees and map out how the decision-making processes play out in different contexts.</p>	<p>This session will include an oral presentation with photographic and video demonstrations that will describe the impact of a Canine Assistance Intervention (CAI) program in a Canadian Child Advocacy Centre, in the context of criminal investigations of child maltreatment. The Centre is a collaborative community approach utilizing a multidisciplinary team including police, child protection workers, medical personnel, therapists, prosecutors and victim advocates. In 2015 service dogs were allowed to join child witnesses in court whilst testifying re child abuse matters.</p>

**5.30 NETWORKING SESSION OVER DRINKS AND NIBBLES**

Hosted by **Police Scotland** and **The Scottish Institute for Policing Research**  
**DCC Malcolm Graham**, Partnership, Prevention and Community Wellbeing Scottish Institute for Policing Research Police Scotland  
*Welcome remarks and overview of LEPH in Police Scotland*  
**Liz Aston**, Scottish Institute for Policing Research  
*Knowledge Exchange in LEPH*





# DAY 2: TUESDAY 22 OCTOBER

8.30-10.00

## PLENARY SESSION P2

### Dimensions of the Law Enforcement and Public Health Relationship

ROOM: Pentland Auditorium

CO-CHAIR: **Gary Ritchie**, Assistant Chief Constable, Police Scotland  
**Gerald McLaughlin**, Chief Executive, NHS Health Scotland

SPEAKERS:

- **Mark Collins**, Chief Constable Dyfed-Powys Police; National Police Chiefs' Council Lead for Mental Health and Policing, Wales  
*Mental health: next steps in policing*
- **Andy Rhodes QPM**, Chief Constable of Lancashire Constabulary, England  
*UK policing approach to wellbeing: rhetoric to reality*
- **John Middleton**, President, Association of Schools of Public Health in the European Region  
*Public health problems are multidisciplinary: why do we train for them apart?*
- **Gary Ritchie**, Assistant Chief Constable, Police Scotland  
*Police Scotland's approach to the law enforcement and public health collaboration*

8.30-3.00

**POSTERS** - See Monday at 10.30 for a list of poster presentations

10.00-10.45

## LEPH ORATION

ROOM: Pentland Auditorium

**Professor Sir Harry Burns**, Professor of Global Public Health University of Strathclyde, Scotland  
*Wellbeing: what is it and how does society create it?*

10.45-11.15

## MORNING TEA

11.15-12.45

## MAJOR SESSIONS

M5

### Leave your ego at the door

ROOM: Tinto Room, Lomond Suite

CONVENER: **Linda Hindle**, Public Health England  
CHAIR: **Liz Aston**, Scottish Institute for Policing Research and Edinburgh Napier University

PRESENTERS:

**Linda Hindle**, Public Health England  
*Leave your ego at the door*

**Duncan Selbie**, Chief Executive, Public Health England  
*Why collaborative leadership at national and place level is essential to improve outcomes for individuals, communities and populations*

**Andy Rhodes QPM**, Chief Constable Lancashire Constabulary, England  
*Compassionate leadership, the national police and health consensus: what has worked and what more needs to happen*

**Karyn McCluskey**, Chief Executive, Community Justice Scotland  
*Driving systems leadership to reduce health inequalities and maintaining a focus on the people at the receiving end of services*

M6

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

ROOM: Pentland Auditorium

CONVENER & CHAIR: **Amy Watson**, University of Illinois at Chicago, USA

PRESENTERS:

**Amy Watson**, University of Illinois at Chicago & Michael Compton, Columbia University College of Physicians and Surgeons, USA  
*Review of research on models of LE/MH response to individuals with mental illnesses and intellectual and developmental disabilities*

**Stuart Thomas**, RMIT University, Australia  
*Policing complexity: police involvement with people with intellectual disability*

**Melissa Morabito**, University of Massachusetts Lowell & **Jenna Savage**, Office of Research and Development, Boston Police Department, USA  
*Dedicated: evaluating Boston's response to people with mental illnesses*

**Daniel Pearson Hirdes**, McMaster University, Canada  
*Mental health call trends in Canada: a review of police response to mental health calls in 18 communities*

**Ron Hoffman**, Nipissing University, Canada  
*The use of a brief mental health screener to enhance police response to mental health crisis and reduce impact on police and health resources*

## MAJOR SESSIONS CONTINUE

M7

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

ROOM: Moorfoot Room, Lomond Suite

CONVENER: **Dusty Kennedy**, Public Health Wales  
CHAIR: **Nadine Dougall**, Edinburgh Napier University, Scotland

## PRESENTERS:

**Emma Barton**, Early Action Together Programme Public Health Wales  
*Effectiveness of the ACE TIME training (part of the EAT programme) on the police workforce in increasing awareness of ACE related trauma and impact across the life course; in enabling individuals to competently and confidently respond to vulnerability using ACE informed approach and supporting a whole systems approach between police & partners in preventing and mitigating ACEs***Emma Barton**, Early Action Together Programme, Public Health Wales  
*Understanding the police landscape across Wales in responding to vulnerability***Helen Douglas**, North Wales Police, National Early Action Together Programme, Public Health Wales, and **Vicky Jones**, North Wales Local Partnership, Early Action Together Programme, Public Health Wales  
*The Reality - 'Early Action Together': operationalising the recommendations from research*

M8

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

ROOM: Kilsyth Room, Lomond Suite

CONVENER & CHAIR: **Norman E. Taylor**, Journal of Community Safety and Well-Being, Canada

## PRESENTERS:

**Norman E Taylor**, Journal of Community Safety and Well-Being, Canada  
*Human Security: the fundamental promise of any democratic society***Brent Kalinowski & Lisa Taylor**, Global Network for Community Safety, Canada  
*A decade of Canada-wide mobilizing for collaborative CSWB***Matthew Torigian**, Munk Centre for Global Affairs and Public Policy, Canada  
*Ontario's path to a legislated mandate for collaborative CSWB planning***Current case studies in locally-led and collaborative CSWB planning and action****Case Study #1: Halton Region CSWB Plan****Susan Biggs**, Halton Regional Police Service, Canada**Alex Sarchuk**, Social and Community Services, Halton Region, Canada**Case Study #2: British Columbia's accelerating uptake of collaborative CSWB models****Shannon Tucker**, Office of Crime Reduction and Gang Outreach, BC Ministry of Public Safety and Solicitor General, Canada**All Presenters:** Interactive panel and Town Hall sub-session:  
*Lessons learned and lessons yet to learn*

12.45-2.00 LUNCH

1.00-1.40 LUNCHTIME SESSIONS

L4

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

ROOM: Tinto Room, Lomond Suite

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

L5

**Iain Smith**, Keegan Smith Defence Lawyers, Scotland  
*Cutting crime with compassion: a curious defence lawyer's story*

ROOM: Moorfoot Room, Lomond Suite

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

L6

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

An introduction to the Journal of Psychiatric and Mental Health Nursing

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

ROOM: Kilsyth Room, Lomond Suite

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

2.00-3.30 CONCURRENT SESSIONS		
<b>C11</b>	<b>C12</b>	<b>C13</b>
<b>Health and health needs of people involved with criminal justice</b>	<b>Harm Reduction in different countries I</b>	<b>Sex work</b>
ROOM: Ochil Room, Galloway Suite	ROOM: Harris Room, Galloway Suite	ROOM: Tinto Room, Lomond Suite
CHAIR: <b>Éamonn O'Moore</b> , Public Health England	CHAIR: <b>Auke van Dijk</b> , Police of The Netherlands	CHAIR: <b>Jane Bailey</b> , West Midlands Police, England
<p>PRESENTERS:</p> <p><b>Joan Papp</b>, MetroHealth, USA <i>Expanding access to medication assisted treatment in Cuyahoga County Corrections Center (CCCC)</i></p> <p><b>Nasrul Ismail</b>, University of West England <i>Rolling back the prison estate: the pervasive impact of macroeconomic austerity on prison health in England, from the perspective of national policymakers</i></p> <p><b>Amanda Butler</b>, Simon Fraser University, Canada <i>Co-occurring disorders in the provincial correctional system in British Columbia</i></p> <p><b>Stuart Kinner</b>, University of Melbourne, Australia <i>Health and health service outcomes associated with re-incarceration after release from prison: a prospective data linkage study</i></p> <p><b>Debbie Sigerson</b>, NHS Health, Scotland <i>Smoke free prisons: co-production of a service specification supporting people in our care and improving health outcomes</i></p> <p><b>Fiona Campbell</b>, University of Dundee, Scotland <i>A new vision for social care of disabled people in prison</i></p>	<p>PRESENTERS:</p> <p><b>Lanying Huang</b>, National Taipei University, Taiwan <i>Protection or punishment? Developing a multi-agency model for adolescent substance users in Taiwan</i></p> <p><b>Bajram Nuhui</b>, Kosovo Police <i>Activities of the Kosovo Police in framework of the National Drug Strategy on prevention and combating drugs</i></p> <p><b>Asmin Fransiska</b>, Atma Jaya Catholic University, Indonesia <i>Indonesian drug policy reform: from urbanism to rural needs in people who use drugs and health policy</i></p> <p><b>Kateryna Denysova</b>, UNDP Ukraine <i>Strengthening the HIV/AIDS response in Ukraine through capacity building of the law enforcement representatives: UNDP Ukraine experience</i></p> <p><b>Jane Buxton</b>, University of British Columbia, Canada <i>Exploring reasons people use drugs alone: more than stigma or concerns about police</i></p>	<p>PRESENTERS:</p> <p><b>Susan Sherman</b>, Johns Hopkins University, USA <i>Police as 'clients' of sex workers in Baltimore, MD, USA: health risks and abuses of power</i></p> <p><b>Lucy Platt</b>, London School of Hygiene and Tropical Medicine, England <i>The health impacts of sex work criminalisation: a review of the evidence</i></p> <p><b>Donna Evans</b>, RMIT University, Australia <i>The policing of sex work in South Africa: introducing the Positive Policing Partnership</i></p> <p><b>Jocelyn Elmes</b>, London School of Hygiene and Tropical Medicine, England <i>High levels of police contact and violence among a diverse sample of sex workers in East London: baseline results from an epidemiological cohort study (East London project, component B)</i></p> <p><b>Pippa Grenfell</b>, London School of Hygiene and Tropical Medicine, England <i>Safety, health and social (in)justice: a participatory qualitative study exploring sex workers' experience of enforcement, violence and access to healthcare, support and justice in East London (East London Project, component A)</i></p>
<b>C14</b>	<b>C15</b>	
<b>Trauma and Adverse Childhood Experiences I</b>	<b>The role of prosecutors in achieving public health goals</b>	
ROOM: Moorfoot Room, Lomond Suite	ROOM: Kilsyth Room, Lomond Suite	
CHAIR: <b>Nadine Dougall</b> , Edinburgh Napier University	CONVENER & CHAIR: <b>Lucy Lang</b> , John Jay College, USA	
<p>PRESENTERS:</p> <p><b>Sharon Lambert</b>, University College Cork, Ireland <i>Trauma-informed policing in Ireland</i></p> <p><b>Claire Warrington</b>, University of Brighton, England <i>Policing the aftermath of ACEs: public health approaches to reduce high frequency repeat detention under Section 136 of the Mental Health Act</i></p> <p><b>Sarah Anderson</b>, University of West Scotland <i>Rethinking trauma and adverse childhood experiences</i></p> <p><b>Joseph Schafer</b>, St. Louis University, USA <i>Exposure to violence and public health: lessons and implications from the St. Louis, Missouri Police-Prosecutor Partnership Initiative</i></p>	<p>PANELLISTS:</p> <p><b>David Harvie</b>, Crown Agent, Scotland</p> <p><b>Larry Krasner</b>, City of Philadelphia's 26th District Attorney, USA</p> <p><b>Iain Smith</b>, Keegan Smith Defence Lawyers, Scotland</p>	

2.00-3.30

**MARKETPLACE OF IDEAS - PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS**

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

<b>Marketplace of Ideas: 7</b> (2 x 45 minute presentations)	<b>Marketplace of Ideas: 8</b> (2 x 45 minute presentations)	<b>Marketplace of Ideas: 9</b> (2 x 45 minute presentations)
ROOM: Carrick Room 1, Galloway Suite	ROOM: Carrick Room 2, Galloway Suite	ROOM: Carrick Room 3, Galloway Suite
<p><b>7.1. Elaine Tomlinson</b>, Police Scotland <i>Mental health, police and other first responders</i></p> <p><b>John Mitchell</b>, Mental Health Directorate, Scottish Government <i>Distress Brief Intervention (DBI): working beyond frontline boundaries to build connected, compassionate support for people presenting in distress.</i></p> <p>&amp; joined by <b>designated members of the DBI programme from Emergency Services and 3rd party sector agency.</b></p>	<p><b>8.1. Jan Fox</b>, Edmonton Police Service, &amp; <b>Dale McFee</b>, Edmonton City Chief of Police, Canada <i>Collaborations, systems change and community safety: the 24/7 Crisis Diversion Initiative</i></p>	<p><b>9.1. Madeleine Smith</b>, REACH Edmonton Council for Safe Communities, Canada &amp; <b>Dan Jones</b>, Edmonton Police Service, Canada <i>Collaborating to provide trauma informed training to frontline workers and law enforcement members</i></p>
<p>Distress Brief Intervention (DBI) supports adults with emotional pain. It provides services with the ability to provide a caring and compassionate response for those in distress. The need to improve the response for people in distress was strongly advocated by people with lived experience, frontline services and research. In response the Scottish Government established the DBI programme in November 2016. This is a national and regional distress collaboration between Health and Social Care, Primary Care, Police Scotland, Scottish Ambulance Service, NHS Emergency Departments and 3rd sector agencies.</p> <p>Community Triage is for persons who come into contact with the police in the community and are suffering from mental health crisis. Community Triage is available in 9 out of 13 local policing divisions in Scotland. Police Officers can request the assistance of Mental Health professionals to provide advice.</p> <p>The panel will share their experience in relation to the initiatives and outline the intentions, learning and future direction of their work. Panellists will then be open to questions from the audience.</p>	<p>24/7 Crisis Diversion is a first-rate example of collaborative leadership. Edmonton police officers spend a disproportionate amount of time responding to 'social disorder' calls each year. This represents thousands of events, many of which do not require police intervention and could be better addressed with community supports. 24/7 Crisis Diversion Teams respond to calls directly from emergency services, as well as public dispatch via the '211' line, for citizens experiencing non-emergency crises. Teams address the crisis at hand and follow a 'warm handoff' protocol to connect the person with supports they need 24 hours per day, 365 days a year. The 24/7 Crisis Diversion team responded to 14,412 events in 2018 alone and is seen as an essential service to the City of Edmonton. Robust social media campaigns have reached hundreds of thousands of citizens, providing a non-emergency resource to call when they see a vulnerable person needing help. In this session we will show videos from multiple perspectives of the collaborative, offer an interactive simulation of our real-time information system and engage in frank discussion of the challenges and barriers to the success of the initiative. We will also personalize the work by showcasing client journey maps of vulnerable Edmontonians who have engaged with our services.</p>	<p>REACH Edmonton Council for Safe Communities is a backbone organization that works to mobilize and coordinate organizations, community groups and Edmontonians to find innovative solutions to community safety and prevention. For the last 5 years REACH has supported the Trauma Informed Edmonton Committee (TIE) - a network of leading social service agencies and the Edmonton Police Services. The committee acknowledges that personal and intergenerational trauma is one of the most salient contributing factors resulting in people's involvement in the justice and correctional system. The over-arching goal is to ensure services engaging with vulnerable populations are trauma-informed. This initiative is based on a collaborative and innovative approach to delivering trauma informed training, research and networking in Edmonton. TIE's approach has resulted in front line workers and support staff creating better service outcomes for clients, which in turn contributes to harm reduction and safer communities. A short Power Point presentation will highlight a recent environmental scan of clients, perspectives on staff knowledge, and trauma informed capacity and a video of the most recent training that speaks to this effective approach to training via interviews with training participants, facilitators, and Indigenous Elders.</p>
<p><b>7.2. Neil Wilson</b>, Police Scotland &amp; <b>Jess Davidson</b>, NHS Lothian, Scotland <i>Operation Threshold: assertive outreach</i></p>	<p><b>8.2. Carlyn Muir</b>, Monash University Accident Research Centre, Australia <i>Bringing policing for road safety out of the shadows</i></p>	<p><b>9.2. Helen Douglas</b>, North Wales Police &amp; <b>Vicky Jones</b>, North Wales Police and Early Action Together Program <i>Improving community and individual resilience through social navigation: an early help pathway to address vulnerability</i></p>
<p>Operation Threshold was conceived and initiated in Edinburgh to identify, engage and support drug users at the greatest risk of harm whilst robustly targeting those seeking to exploit vulnerable users through enforcement activity. The proposed discussion group will explore the assertive outreach strand of the approach that involved a police led intelligence cell retrospectively reviewing incidents and information systems to identify those who had suffered instances of public space non-fatal overdose. Once identified, the individual's circumstances were triaged by a single point of contact within NHS Lothian who evaluated their health needs, reviewed recent contact with support and treatment services and generated an anticipatory care plan. Subsequently, the engagement team, comprised of police officers and peer mentors with lived experience of addiction, traced the individual and provided the necessary support or signposting/onward referral as appropriate. The session will include presentations from police and health representatives supported by case studies to probe the effectiveness of the approach, and will incorporate time for discussion and an overview of planned future work to further enhance interagency information sharing.</p>	<p>Road trauma continues to be a global public health problem with between 20 and 50 million people disabled and 1.35 million people killed annually - 90% of the deaths occurring in low and middle-income countries (LMICs). While a decrease in deaths has occurred in many high-income countries, this is not the case in LMICs, where deaths are projected to increase by 80% over the next 20 years to become the second leading cause in the global burden of disease ranking. While road safety is an intersectoral issue police have a unique opportunity to achieve road-user behaviour change (and resulting public health benefits) through intensive and strategic enforcement. Police are a lead agency for road safety across government in many LMICs. However currently, prioritisation, institutional support and capacity for road policing in many LMICs is low. In 2017, Monash University (MUARC), WHO and Victoria Police hosted a Workshop on Safe Systems and Police Enforcement for Road Safety, which was attended by Chiefs of Police in selected Pacific Island countries. The focus of this session is to present a case example of the development and implementation of a police capacity building program suitable for LMICs and to bring together operational police, researchers and related agencies to share experiences, challenges and future opportunities for traffic policing in LMICs.</p>	<p>Whilst Police demand for public welfare and safety is increasing, efforts to address vulnerability often result in 'no further action' (NFA), with many individuals unable to receive intervention to address their needs. To address the lack of early intervention and preventative activity the Early Action Together Program was developed, a collaboration between Public Health Wales and the four Wales Police Forces and Police and Crime Commissioners, in partnership with Criminal Justice, Youth Justice and third sector organisations. The programme aims to facilitate the start of a transformation of policing and criminal justice in Wales to take a multi-agency, public health ACE and trauma informed approach to vulnerability. Each force are required to develop localised early help referral pathways to address vulnerability at the earliest opportunity and where possible, before statutory intervention is required. North Wales Police are testing Social Navigation models within a policing context, a multi-agency approach which draws on local partners to find a community resolution to address presenting needs or vulnerabilities that do not meet statutory thresholds.</p> <p>The session will present this model and early findings from evaluation and research video clips and animations, a case study and attendees will have the opportunity to ask questions, feedback on outcomes and share good practice.</p>

3.30-4.00 AFTERNOON TEA		
4.00-5.30 CONCURRENT SESSIONS		
<b>C16</b>	<b>C17</b>	<b>C18</b>
<b>Effective police responses to mental health related calls</b>	<b>LEPH education and training</b>	<b>Police well-being II - mental health</b>
ROOM: Ochil Room, Galloway Suite	ROOM: Harris Room, Galloway Suite	ROOM: Tinto Room, Lomond Suite
CHAIR: <b>Stuart Thomas</b> , RMIT University, Australia	CHAIR: <b>Andrew Wooff</b> , Edinburgh Napier University	CHAIR: <b>Ian de Terte</b> , Massey University, New Zealand
<p>PRESENTERS:</p> <p><b>Jennifer Wood</b>, Temple University, USA <i>What "counts" as good police work during mental health related encounters</i></p> <p><b>Ian Cummins</b>, University of Salford, England <i>Policing and mental illness: exploring the problems of definition</i></p> <p><b>Jill Stavert</b>, Edinburgh Napier University, Scotland <i>Supporting equal and non-discriminatory enjoyment of rights by persons with mental disabilities in crisis situations: the role of advance planning</i></p> <p><b>Jeremy Tumoana</b>, University of Otago, New Zealand <i>Citizen stories of police encounters while experiencing mental distress in Aotearoa</i></p> <p><b>Jonas Hansson</b>, Umea University, Sweden <i>The use of conducted energy weapons by the Swedish police in relation to vulnerable populations</i></p> <p><b>Jolene Geh</b>, Melbourne Health, Australia <i>When two worlds collide: Enhanced Critical Response Program</i></p>	<p>PRESENTERS:</p> <p><b>Matthew Green</b>, Touro University California, USA <i>Thinking about justice: student and alumni feedback on the development of a new MPH concentration in health equity and criminal justice</i></p> <p><b>Daliah Heller</b>, City University of New York, USA <i>Building a criminal justice pedagogy in public health: workforce development for change</i></p> <p><b>Larissa Engelmann</b>, Edinburgh Napier University, Scotland <i>Policing in Scotland: the role of higher education in supporting police officer development and partnership work</i></p> <p><b>Noorhan Abbas</b>, University of Cumbria, England <i>Technology training: an effective tool to enhance inter-organisational information sharing</i></p> <p><b>Yasmeen Krameddine</b>, University of Alberta, Canada <i>Evidence-informed strategies for de-escalation and non-escalation between law enforcement and those in distress: current research for safe interactions</i></p>	<p>PRESENTERS:</p> <p><b>Lynda Crowley-Cyr</b>, University of Southern Queensland, Australia <i>Australian law enforcement and mental health: the dire need for action</i></p> <p><b>Adam Vaughan</b>, Texas State University, USA <i>Relationship between mental health training and mental health knowledge, stigma and resilience in a sample of Canadian public safety personnel</i></p> <p><b>Serina Fuller</b>, London South Bank University, England <i>'We are not mental health experts': distinctiveness in negotiating and protecting the police identity</i></p> <p><b>Ronald Camp II</b>, University of Regina, Canada <i>Leadership and psychological safety: evidence from a study with the Calgary Police Service</i></p>
<b>C19</b>	<b>C20</b>	
<b>Trauma and Adverse Childhood Experiences II</b>	<b>Neurocognitive disorders and law enforcement</b>	
ROOM: Moorfoot Room, Lomond Suite	ROOM: Kilsyth Room, Lomond Suite	
CHAIR: <b>James Clover</b> , Edmonton Police Service, Canada	CONVENER & CHAIR: <b>Richard Bent</b> , Simon Fraser University, Canada	
<p>PRESENTERS:</p> <p><b>Daniel Jones</b>, Edmonton Police Service, Canada <i>Women, incarceration, victimisation, offending and trauma: the overlap and the impact</i></p> <p><b>Rebecca Phythian</b>, University of Central Lancashire, England <i>Safer communities in Lancashire</i></p> <p><b>Kate Thomson</b>, Glasgow Caledonian University, Scotland <i>Understanding and responding to child sexual exploitation in Scotland</i></p> <p><b>Alan Mulholland</b>, Police Scotland <i>Police Scotland: corporate parenting - joining the dots on our parenting journey</i></p> <p><b>Suzanne O'Rourke</b>, University of Edinburgh, Scotland <i>Edinburgh VOW Project: a successful collaboration between police officers and mentors with lived experience</i></p>	<p>PRESENTERS:</p> <p><b>Ron Hoffman</b>, Nipissing University, Canada <i>Enhancing police officer identification of persons with intellectual disabilities</i></p> <p><b>Katie Gambier-Ross</b>, University of Edinburgh, Scotland <i>Staying safe 'Going Out': the experience of being missing for people with dementia</i></p> <p><b>Danielle Wallace</b>, Arizona State University, USA <i>Individuals with Spectrum Disorders: concerns from law enforcement officers and parents</i></p> <p><b>Thijs Fassaert</b>, Public Health Service Amsterdam, Netherlands <i>Screening for brain injury in a population of frequent violent offenders</i></p> <p><b>Tony Bowman</b>, Sold Network, ARC Scotland <i>Neurocognitive disorders: 'Hidden in plain sight' (e.g. epilepsy, fetal alcohol spectrum disorder, acquired/traumatic brain injury)</i></p>	

4.00-5.30

**MARKETPLACE OF IDEAS - PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS**

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

**Marketplace of Ideas: 10**  
(2 x 45 minute presentations)**Marketplace of Ideas: 11**  
(2 x 45 minute presentations)**Marketplace of Ideas: 12**  
(2 x 45 minute presentations)

ROOM: Carrick Room 1, Galloway Suite

ROOM: Carrick Room 2, Galloway Suite

ROOM: Carrick Room 3, Galloway Suite

**10.1. Janet Whitley**, Workforce Scotland & **Dot McLaughlin**, Scottish Government  
*Collective leadership for Scotland***11.1. Claire Coleman & Emma Croft**, Police Scotland  
*Supporting police: understanding CAM and its foundations in the THRIVE Model***9.1. Ian Thomson & Clare Craig**, Police Scotland  
*Your wellbeing matters: Police Scotland's approach to wellbeing and resilience*

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

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

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

Working within the emergency services involves exposure to stress including violent and traumatic events which can generate an increased risk of developing mental health problems including depression, anxiety disorder and post-traumatic stress disorder. Police Scotland have created the 'Your Wellbeing Matters' programme, to ensure that our officers and staff feel informed, valued and supported - physically, psychologically, socially and financially. The program offers EAP services available 24 hrs a day and TRiM, a trauma focussed peer support system. Furthermore a national network of more than 200 Wellbeing Champions has been established, all receiving NHS accredited Scottish Mental Health First Aid Training. The programme is embedding a culture where the promotion of wellbeing is integrated into all aspects of the organisation. This is creating a safe, positive and healthy working environment for all officers and staff whilst ensuring that managers are equipped with effective and practical information, policies and guidance to support the wellbeing of their teams. This session will include input from a serving Police Superintendent, who with 25 years police experience has lived with the challenge of suffering poor mental health throughout a large part of his service.

**10.2. Martin Gallagher**, Police Scotland, **Iain Keith**, NHS Scotland, **Colin Atkinson**, University of West Scotland  
*Policing Paisley in partnership***11.2. Rachel Staniforth**, Leeds Teaching Hospitals NHS Trust, England & **Una Jennings**, South Yorkshire Police, England  
*Fortifying our relationships***12.2. Caitlin Britten, Rose McNabb, Julie Reiger & Ashlee Lierich**, Maryborough Educational Centre, Australia  
*A story of hope: a whole community's response to disadvantage*

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

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

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



# DAY 3: WEDNESDAY 23 OCTOBER

8.30-10.00

## PLENARY SESSION P3

### Dimensions of the Law Enforcement and Public Health Relationship

ROOM: Pentland Auditorium

CO-CHAIRS: **Gillian Imery**, HM Chief Inspector of Constabulary in Scotland  
**Cath Denholm**, Director of Strategy, NHS Health Scotland

SPEAKERS:

- **Karyn McCluskey**, Chief Executive, Community Justice Scotland  
*The truth doesn't set you free*
- **Raynard Washington**, Chief Epidemiologist at the Philadelphia Department of Public Health, USA  
*Roadmap to a safer Philadelphia: a public health approach to stop everyday "mass shootings"*
- **Huw Williams**, Centre for Clinical Neuropsychology Research (CCNR), Exeter University, England  
*Why understanding brain injury can enhance Trauma Informed Policing*

10.00-10.30

## MORNING TEA

10.30-11.55

## MAJOR SESSIONS

M9

### Autism and policing: supporting autistic individuals in police custody

ROOM: Tinto Room, Lomond Suite

CONVENER & CHAIR: **Chloe Holloway**, University of Nottingham, England

PRESENTERS:

- Chloe Holloway**, University of Nottingham, England  
*Exploring the experiences of autistic individuals arrested and detained in police custody*
- Nicholas Clarke and Nell Munro**, University of Nottingham, England  
*Going to Pot: Nick's Journey through the criminal justice system*
- Katie Maras**, University of Bath, England  
*Eliciting best evidence from autistic interviewees*
- Danielle Ropar**, University of Nottingham, England  
*Improving the support of autistic individuals in police custody through autism training*
- Duncan Collins**, Nottinghamshire Police, England  
*Improving the custody environment: a case study*

M10

### Police mental health and wellbeing

ROOM: Moorfoot Room, Lomond Suite

CONVENER & CHAIR: **Yasmeen Krameddine**, University of Alberta, Canada

PRESENTERS:

- Ian de Terte**, Massey University, New Zealand  
*The conundrum of working in a therapeutic manner with police officers*
- Teun-Pieter de Snoo**, Police Academy, The Netherlands  
*Resilience: a fluffy concept in a hard world*
- Saralla Chettiar**, Massey University, New Zealand  
*Developing a treatment manual based on a 3-part model of psychological resilience (3-PR) for high-risk occupations and general populations*
- Yasmeen Krameddine**, University of Alberta, Canada  
*The primary prevention of post-traumatic stress injuries in a Canadian police organization: the effectiveness of an evidence-informed online training program*

M11

### 5 Nations' Health & Justice Collaboration

ROOM: Pentland Auditorium

CONVENER & CHAIR: **Éamonn O'Moore**, Public Health England

PRESENTERS:

- Kate Davies & Chris Kelly**, NHS England  
*NHS England/NHS Improvement in delivering the long-term plan in the health and justice landscape in collaboration*
- Stephanie Perrett**, Public Health Wales  
*What makes Wales unique?*
- Orlando Heijmer-Mason**, Scottish Government  
*Health and justice collaboration in Scotland*
- Ruth Gray**, South Eastern Health and Social Care Trust, Northern Ireland  
*Using quality improvement to enhance information flow across criminal justice organisations and designing new pathways for people in custody*
- Enda Kelly & Sarah Hume**, Irish Prison Service, Republic of Ireland  
*SADA (Self-harm Assessment and Data Analysis)*

M12

### Collaboration and collaborative leadership

ROOM: Kilsyth Room, Lomond Suite

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

PRESENTERS:

- Peter Roderick**, Health Education England  
*Collaboration for prevention: taking a whole population approach to vulnerability and anti-social behaviour in a local police force*
- Patrick Widell**, Swedish Police Authority  
*Engaging the police in violence prevention: lessons learned from 20 years of prevention work in the Stockholm nightlife setting*
- Isabelle Bartkowiak-Theron**, University of Tasmania, Australia  
*Working with police and community stakeholders towards community safety and wellbeing: collaborative processes in Tasmania, Australia*
- Julia Crilly**, Griffith University, Queensland, Australia  
*Strengthening interagency collaborations between health and police in emergencies to optimise health, security and economic expenditure*

12.05-1.00

## CONVENED SESSIONS

CV5

**Breaking boundaries: bringing public health practice to public safety**

ROOM: Tinto Room, Lomond Suite

CONVENER: **Kris Nyrop**, Public Defender Association, USA  
 CHAIR: **Norm Taylor**, Global Network for Community Safety, Canada

## PRESENTERS:

**Brendan Cox**, LEAD National Support Bureau, USA  
*Using public health approaches to address public safety: a police perspective*

**Najja Morris**, Public Defender Association, USA  
*Using public health approaches to address public safety: a case manager perspective*

**Kris Nyrop**, Public Defender Association, USA  
*Shifting the paradigm of policing behavioural health conditions: law enforcement assisted diversion*

CV6

**Police oversight, human rights and accountability in Africa: collaborating for better policing of vulnerable groups**

ROOM: Moorfoot Room, Lomond Suite

CONVENER & FACILITATOR: **Berry Nibogora**, African Men for Sexual Health and Rights (AMSHeR), South Africa

## PANELLISTS:

**Berry D. Nibogora**, African Men for Sexual Health and Rights (AMSHeR), South Africa

**Frans Viljoen**, Centre for Human Rights, University of Pretoria (CHR/UP), South Africa

**Sean Tait**, African Police Civilian Oversight Forum (APCOF), South Africa

CV7

**Trauma Informed Organisations: what, why and how**

ROOM: Kilsyth Room, Lomond Suite

CONVENER & CHAIR: **Caroline Bruce**, Principal Educator for Trauma, NHS Education Scotland

## PRESENTERS:

**Caroline Bruce**, NHS Education Scotland  
*Leading trauma-informed approaches to law enforcement: what and why?*

**Jennie Young**, NHS Education Scotland and University of Stirling  
*Leading trauma-informed approaches to law enforcement: how?*

CV8

**Road Safety**

ROOM: Ochil Room, Galloway Suite

CONVENER & CHAIR: **Helen Wells**, Keele University, England

## PRESENTERS:

**Helen Wells**, Keele University, England  
*'Message Not Delivered': mobile phones, knowledge exchange and accessible academia*

**James Nunn**, Loughborough University, England  
*Comparing the drivers involved in fatal and serious injury collisions*

**Leanne Savigar**, Keele University, England  
*Fairly policing an 'unfair law' - educating drivers of the issues surrounding mobile phone use while driving*

**Lyndel Bates**, Griffith University, Australia  
*Young drivers, road policing, deterrence theory and punishment avoidance*

1.00-2.00

## LUNCH

1.15-1.45

## LUNCHTIME SESSIONS

L7

**Callum Hutchison**

*Start where you are and do what you can!*  
 Callum was born and raised in a very challenging environment in Glasgow's East End. His early life was one of significant trauma, which resulted in low aspiration, exclusion, fear, addiction and crime. Both as a perpetrator and victim, Callum was no stranger to violence and prison was a regular destination for him. He then encountered life changing interventions from people and organisations he thought would be the last to help him and this has resulted in Callum turning his life around. Callum is now an experienced and inspirational mentor and public speaker. He knows first-hand how we can all make a difference

ROOM: Kilsyth Room, Lomond Suite

CHAIR: **Will Linden**, Violence Reduction Unit, Scotland

L8

**Greg Anderson**, Justice Institute of British Columbia, Canada

*The impact of police officer stress on health and performance: a Canadian perspective*

ROOM: Ochil Room, Galloway Suite

CHAIR: **Grant Edwards**, Australian Federal Police

L9

**Meet the Editor - an introduction to the Journal of Community Safety and Wellbeing**

ROOM: Harris Room, Galloway Suite

CHAIR: **Norm Taylor**, Editor, Saskatchewan, Canada

2.00-3.30 CONCURRENT SESSIONS		
<b>C21</b>	<b>C22</b>	<b>C23</b>
<b>Hate crime and terrorism</b>	<b>Incarceration</b>	<b>Mental health in institutions and institutional responses</b>
ROOM: Ochil Room, Galloway Suite	ROOM: Harris Room, Galloway Suite	ROOM: Tinto Room, Lomond Suite
CHAIR: <b>Joachim Kersten</b> , German Police University, Muenster	CHAIR: <b>Sunita Sturup-Toft</b> , Public Health England & UK Collaborating Centre for the WHO Health in Prisons Programme	CHAIR: <b>Dani Kesic</b> , RMIT University, Australia
<p>PRESENTERS:</p> <p><b>Anton Weenink</b>, National Police of the Netherlands <i>Adversity, criminality and mental health in foreign fighters from the Netherlands</i></p> <p><b>Rania Hamad &amp; Philippa Boyd</b>, City of Edinburgh Council, Scotland <i>Hate crime: a collaborative approach to using restorative justice to repair the harms</i></p> <p><b>Isabel Kreifels</b>, University of Cape Town, South Africa <i>ISIL's recruitment of foreign fighters: public health insights for the future policing of violent extremism</i></p>	<p>PRESENTERS:</p> <p><b>Lisa Scholin</b>, University of Edinburgh, Scotland (presented by Stuart Kinner) <i>Defining research priorities for prison health in Scotland: a Delphi study</i></p> <p><b>Peter Lindstrom</b>, Police Region Stockholm, Sweden <i>Older offenders in Sweden: consequences for the criminal justice system</i></p> <p><b>Jane Donaldson</b>, Police Scotland <i>Working in partnership to support desistance in young offenders</i></p> <p><b>Ashley Brown</b>, University of Stirling, Scotland <i>Providing evidence to support health improvement in criminal justice settings: a case study of the Tobacco in Prisons study</i></p> <p><b>Stuart Kinner</b>, University of Melbourne, Australia <i>Harnessing global data on prison and youth detention health to tackle health inequalities</i></p>	<p>PRESENTERS:</p> <p><b>Gayle Cummings</b>, University of Touro California, USA <i>Peer support and engagement in advocacy opportunities: key elements for the mental and emotional health of exonerees</i></p> <p><b>Sarah Armstrong</b>, University of Glasgow, Scotland <i>What can criminologists contribute to understanding health in prison?</i></p> <p><b>Asanga Fernando</b>, Macmillan Cancer Psychological Support Team, England <i>Educating staff on cancer and mental health co-morbidity in prisons</i></p> <p><b>Menno Segeren</b>, Public Health Service Amsterdam, Netherlands <i>Determinants of post-detention recidivism: a recurrent events analysis</i></p> <p><b>Catriona Connell</b>, University of Warwick, England <i>Reducing reoffending and improving health: increasing occupational participation for people with criminal justice involvement and a personality disorder</i></p>
<b>C24</b>	<b>C25</b>	
<b>Harm Reduction in different countries II</b>	<b>Police well-being III</b>	
ROOM: Moorfoot Room, Lomond Suite	ROOM: Kilsyth Room, Lomond Suite	
CHAIR: <b>Liz Aston</b> , Scottish Institute for Policing Research & Edinburgh Napier University	CHAIR: <b>Isabelle Bartkowiak-Theron</b> , Tasmanian Institute of Law Enforcement Studies, University of Tasmania, Australia	
<p>PRESENTERS:</p> <p><b>Tobias Kammergaard</b>, Aarhus University, Denmark <i>Harm reduction policing: policing an open drug scene after decriminalisation</i></p> <p><b>Hai Thanh Luong</b>, RMIT University, Australia <i>Harm reduction for drug control: a review of one decade changes in Vietnam</i></p> <p><b>Jodilee Erasmus</b>, Medical Research Council, South Africa <i>Investigating a community's perceptions of how the South African Police Service responds to and engages with illegal substance use and users: a case study in Delft</i></p> <p><b>Esben Houborg</b>, Aarhus University, Denmark <i>Harm reduction policing in Copenhagen</i></p> <p><b>Jane Buxton</b>, University of British Columbia, Canada <i>The silent increase of methamphetamine use and its harms</i></p>	<p>PRESENTERS:</p> <p><b>Shane Doyle</b>, Central Queensland University, Australia <i>Stress and leadership development: what impact does eustress, distress and catastrophic stress have on the development of senior police leaders</i></p> <p><b>Evangelia Demou</b>, University of Glasgow, Scotland <i>The Airwave Health Monitoring Study (AHMS): an occupational cohort study of the British police forces</i></p> <p><b>Evangelia Demou</b>, University of Glasgow, Scotland <i>Policing and work-life balance: attainable or elusive?</i></p> <p><b>Ann Bell</b>, Police Scotland <i>Positive action in recruitment</i></p>	

2.00-3.30

**MARKETPLACE OF IDEAS - PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS**

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

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

ROOM: Carrick Room 1, Galloway Suite

**13. Amber Christensen Fullmer**, University of Alaska, USA  
*Intimate partner violence (IPV) in Alaska: a focus on perpetrators of IPV using a culturally-competent response*

Alaska is one of the most culturally diverse states in the United States of America. It is home to many tribes of indigenous peoples as well as a significant immigrant population representing virtually every culture on earth and has the highest rate of intimate partner violence and sex assault. The rate is significantly higher in Alaska's indigenous populations. The social, justice and correctional systems are failing to address the causative factors of intimate partner violence in the scope of perpetrator motivations. Little work is being conducted in a proactive, preventive arena - further entrenching harmful norms and values in our unique populations. This roundtable discussion will focus on perpetrator traits, behaviours and causative factors in the context of culturally diverse populations with emphasis on indigenous populations. The session will explore perpetrator identification, education, intervention and treatment modalities using an evidence-based, multi-disciplinary, culturally competent approach. Exploration of successful models in reducing recidivism will be explored. Intergenerational trauma and harm-reduction models with an emphasis on cultural norms and values will be explored. First responders and those in public health have the ability to respond to this public health crisis in a different, more meaningful way.

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

ROOM: Carrick Room 2, Galloway Suite

**14. Lesley Graham**, NHS National Services Scotland, **Amanda O'Byrne**, Police Scotland & **Barry Muirhead**, NHS Lothian, Scotland  
*A public health approach to police custody healthcare*

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

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

ROOM: Carrick Room 3, Galloway Suite

**15.1. Carolyn Bruce**, University of Glasgow, Scotland  
*Taking a trauma informed lens to law enforcement*

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

**15.2. Paul Pedersen**, Sudbury Police Service, Ontario, Canada  
*Looking ahead to build the spirit of our women: Learning to Live Free from Violence Project*

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

This Marketplace session will explore the mutual benefits of multi-agency collaboration for staffing solutions and discuss the lessons learned and results achieved from a grass-roots local approach to national and multi-generations issues.



# LEAHN

Law Enforcement and HIV Network

The Law Enforcement And HIV Network (LEAHN) is a global network of police and health professionals with a focus on HIV prevention.

LEAHN provides support for supportive police; and helps professionals understand the role of law enforcement in public health and the importance of collaborative response to reducing the incidence of HIV.

LEAHN works with civil society networks, government and non-government organisations and in particular has strong relationships with police agencies in order that these groups can collaborate effectively to reduce the impact of HIV in their communities.

This is best exemplified by LEAHN's network of senior police officers in various parts of the world who are key contacts for LEAHN, these police are known as 'Country Focal Points'.

LEAHN grew out of concerns that in many parts of the world the effective delivery of HIV prevention services that help stop the spread of HIV in the community rely on police support.

By becoming a member of LEAHN and Signing the Statement of Support for Harm Reduction you can actively help in stopping the spread of HIV and make your community safer.

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- 1 Join LEAHN Now!
- 2 Sign the Statement of Support for Harm Reduction Now!

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“Harm reduction & HIV prevention cannot, and will not, work without active support and leadership from police”



“The strength of LEAHN is that it takes a ‘police talking to police about HIV prevention’ approach”

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