

Branches.

While resources are scarce we have, as I have already said, restructured rather than inflated resource levels. It has been a challenge but it has been achieved by stages.

In the past when police administrators thought of security their vision was limited to physical security - locks and alarms. There was very little consideration given to the inner health of the organisation or the need to be introspective and consider the threat from within not merely from without.

The events of the last decade in Australia testify to the dire consequences when law enforcement agencies neglect self scrutiny and regulation.

The AFP philosophy is to meet the realities of our profession head on and treat the preservation of our integrity as the most valuable commodity we have to offer as an organisation.

The AFP internal security intelligence function is pitched to assess-

ing our vulnerabilities, especially by penetration by criminal groups.

Many of the AFP successful operations have been complex and protracted, frequently spanning several Australian and overseas jurisdictions. The security of such operations presents significant difficulties. It is frequently necessary for significant numbers of people within and outside the AFP to know the details.

The AFP is developing policies and procedures to ensure that the security of police operations is treated with as much importance as the primary objective of the operation itself.

Shortly, our detection, intelligence and management training curriculae will include a segment on what might be termed 'security framework' for operations and aligned activities. The 'framework' will, inter alia, include the theory and principles of security, the need to know, and preventative countermeasures against penetration by both inside and outside influences.

The education process in this regard will not be easy. Traditionally, police are taught to disclose openly their knowledge of information, particularly in the form of evidence to the courts, whereas those with a security background are taught to be more circumspect, to compartmentalise information, to tell only those who need to know no more than they have a right to know. We have to take care that the right balance is struck. We have a duty to disclose on the one hand and a responsibility for security on the other.

Meanwhile, the AFP, as with all other agencies, has to cut its cloth according to its purse in conforming with the Government guidelines on security. It will take time to put all the necessary policies and procedures in place and I have no doubt that the AFP's security adviser and his colleagues will be looking for assistance from agency security advisers throughout the Commonwealth system to fulfil their important function. •

INTERNATIONAL POLICE MEDICAL CONFERENCE

THE AFP was well represented at the recent World Police Medical Officers' International Conference in Auckland, New Zealand, by Assistant Secretary Dr Louis Pilotto; Police Medical Officer, Dr Marcus Navin and Chief Police Psychologist Len Backhouse.

Delegates from 17 countries including Australia, New Zealand, United Kingdom, USA, Austria, Canada, Denmark, Hong Kong, Japan, Italy, Sri Lanka, Tanzania, Zambia and Iraq were involved in the five-day conference which is held every two years to enable a sharing of police health experiences around the world.

Discussions included issues related to sexual assault examinations, DNA profiling, personality profiling, police occupational health including lifestyle risk factor assessments and the development of integrated police health services, as well as legalisation of drugs and homicide investigation.

Len Backhouse said he found the move to occupational health at this conference instead of the old style of only forensic medicine very interesting.

Dr Pilotto agreed, "The attitude of police forces has changed to incorporate police health. This was noticeable at this conference compared to the previous one. I was pleased with that; police health has for too long been a neglected issue.

"From my point of view it is important that we integrate psychological support into health services."

Dr Pilotto said there were several items of interest to him at the conference, but one which stood out involved the use of a hidden video camera to record a mother suffocating her child to the point of an epileptic seizure. The mother's first child had suffered epileptic seizures for some time. The specialists were not able to diagnose the cause of the epilepsy and the child subsequently died. When the second child developed the same type of undiagnosed seizures, suspicions were raised and the hidden cameras installed. Fortunately, this second child survived.

"This video reinforced my awareness of the need to be vigilant," Dr Pilotto said. "It was only through hidden cameras that anyone picked this up."

Len Backhouse said the video of the child being suffocated was the

longest 42 seconds he had ever sat through.

The conference also featured discussions on issues such as deaths in police stations, child sexual abuse, euthanasia, anabolic steroids and sexual homicides.

Doctor Pilotto said: "Consent to physical and or blood examinations of offenders or suspects posed a dilemma for doctors. At the conference it was generally agreed doctors should not perform any procedures unless written consent has been obtained."

"I expect the AFP to take a prominent role at future conferences. As it is, we are leaders in police occupational health medicine and we are setting up a number of research projects, forensic included, through which we will present a number of papers at the next conference."

The recognition of the AFP Health Service as a leader has been acknowledged in part by the election of Dr Pilotto as the Assistant Secretary of the International Association of Australasian and Pacific Area Police Medical Officers.

The next Australasian conference will be held in two year's time in Hong Kong.